



NABH ACCREDITED



MGM
NEW BOMBAY HOSPITAL, VASHI
Plot No. 35, Sector 3, Vashi, Navi Mumbai - 400703
Tel.: (022) 5066 6777



JCI ACCREDITED

MR. KIRAN BHAGWAN TAWARE
UHID : MGM240017131 IPD : MGMIP2406720
Age/Sex : 56 Years / M DOA : 05/10/2024
BED : ECU-001 WARD : DEP009
DR : DR. PRASHANT ATHALE

ICU ADMISSION CRITERIA

☐ Medical Case ☒ Surgical Case ☐ Cardiac Case

PRIORITY: (Please \checkmark / X in below parameters)

- ☐ Ventilator Requirement ☐ Vasopressor drug
☐ Patient require continuous monitoring ☐ May need immediate intervention e.g. ET,
☒ Long Standing debilitating illness with acute exacerbation Ventilator
☐ Any acute Condition _____

DIAGNOSIS: (Please \checkmark / X in below parameters)

- | | | |
|--|---|---|
| <input type="checkbox"/> Acute Coronary Syndrome | <input type="checkbox"/> Acute Renal dysfunction | <input type="checkbox"/> Oncological Emergencies |
| <input type="checkbox"/> Cardiogenic Shock | with metabolic derangements | <input type="checkbox"/> Diabetic Keto acidosis |
| <input type="checkbox"/> Cardiac Arrhythmia | <input type="checkbox"/> Drug ingestion and over | <input type="checkbox"/> Neurological Disorder |
| <input type="checkbox"/> Heart Failure | dose/Acute poisoning | <input type="checkbox"/> Septic Shock, MODS |
| <input type="checkbox"/> COPD + Cor Pulmonale | <input type="checkbox"/> Gastro Intestinal Disorder | <input type="checkbox"/> Post operative patient requiring |
| <input type="checkbox"/> Respiratory Disorder | <input type="checkbox"/> Polytrauma | Monitoring/ventilator support |
| | <input type="checkbox"/> Obstetric Emergencies | |

Others _____

PARAMETER MODELS : (Please \checkmark / X in below parameters)

- | | |
|---|--|
| <input checked="" type="checkbox"/> Pulse less than 40 or More than 150 Beats/minute/Arrhythmia | <input checked="" type="checkbox"/> Anuria |
| <input checked="" type="checkbox"/> Systolic arterial pressure less than 90 mmHg | <input checked="" type="checkbox"/> Serum Sodium less than 100 mEq/L or |
| or more than 180 mm Hg | more than 160 mEq/L |
| <input checked="" type="checkbox"/> Diastolic arterial pressure More than 120 mm Hg | <input checked="" type="checkbox"/> Serum Potassium less than 2.0 mEq/L or |
| <input checked="" type="checkbox"/> Respiratory Rate more than 35 breaths / min or | more than 6.0 mEq/L |
| less than 10 breaths/Min | <input checked="" type="checkbox"/> Airway Obstruction |
| <input checked="" type="checkbox"/> SpO ₂ less than 90% or increasing Oxygen Requirement | <input checked="" type="checkbox"/> Serum Glucose more than 500mg/dl or |
| <input checked="" type="checkbox"/> GCS less than 13/15 | recurrent symptomatic hypoglycemia |
| | <input checked="" type="checkbox"/> Serum Calcium more than 12 mg/dl |

Isolation

☐ Neutropenic ☐ Transplant ☐ Communicable Disease

Name of Doctor : Dr. Sangeeta Sign : _____ Emp-ID : D1389

Date : 5/10/2024 Time : 12pm