TRANSITION PROTOCOL

The Observation Unit is a protocol driven unit. This unique protocol would allow CDU entry for patients undergoing a specific test (Ultrasound, MRI, etc.) that is expected to take longer than **4 hours** to perform and interpret. Patients transitioned on this protocol should have a clearly anticipated and defined disposition pending the results of the imaging or procedure. Patients with negative/normal testing should be expected to be discharged.

Allowing patients to transition into the CDU during periods of prolonged testing may improve overall ED efficiency and patient satisfaction. As these patients are not under formal Observation status, no Observation orders are required.

**CDU INCLUSION CRITERIA**

- Stable Vital Signs
- Potential to discharge in 23 hours

**CDU EXCLUSION CRITERIA**

- Unstable vital signs
- Depressed LOC not due to alcohol, drugs, or metabolic causes
- Focal neurologic findings
- Glasgow coma score < 13
- Age $\geq 70$
- Non-ambulatory at baseline
- Multiple medical problems – i.e. bleeding disorders, DM, Alzheimers disease, etc.
- Abdominal Pain requiring non-emergency testing (e.g., CT scan) or serial exam

**CDU INTERVENTIONS AS INDICATIONS**

- Serial vital signs and re-evaluations
- Medications (ex. Analgesics, anti-emetics)
- Imaging or procedures (Ultrasound, MRI)
- Patient and family education

**CDU DISPOSITION**

**Home**
- Pain resolved or significantly improved
- No diagnosis requiring hospitalization
- Stable vital signs and labs (if performed) at disposition
- Normal serial exams with no deterioration in clinical course
- Adequate follow-up plan established

**Admit**
- Not improved or worsening condition/pain
- Deterioration in clinical course
- Rule in of exclusionary causes or criteria