

Objective

This document was created to define the University of Iowa Stead Family Children's Hospital (UI SFCH) admission criteria for patients ≥ 18 years old while UIHC is experiencing high ICU occupancy due to the COVID-19 pandemic. While there is urgent need to optimize patient flow both into/out of available ICUs, it is also critical that we optimize patient placement to ensure the delivery of the right care, in the right place at the right time. Special care should be taken in considering the appropriate service and location for these patients as each patient has individual symptoms and treatment needs.

Important Considerations

1. The UI SFCH is a vital resource for pediatric trauma, ICU, and subspecialty care in the state of Iowa.
2. The overall pediatric inpatient census of the UI SFCH is typically higher during the "respiratory season" and particularly in the months of January – June.
3. There are differences in the care of adult and pediatric patients, including physician training, clinical protocols and treatment pathways, medication practices, emergency response teams, equipment and supplies necessary to provide care, and protocols / policies to ensure the safety, security and protection of minors.

Recommendations

The following recommendations are intended to provide clear operational guidelines for which patients should be triaged for PICU or acute care med-surg admissions in the UI SFCH, and which patients should be prioritized as transfers from adult ICUs (MICU, SNICU or CVICU) to the PICU in order to increase adult ICU bed capacity.

The processes outlined below should stop and normal UI SFCH admission processes resume once HICS has declared that UIHC no longer operating in a COVID-19 Surge Capacity.

- I. Once HICS (Hospital Incident Command System) has declared that UIHC that a critical need for additional ICU and/or adult med-surge bed capacity exists, then the following should occur:
 - i. Daily huddle including physician & nursing leadership representatives from CWS, ISS, PICU, MICU / SNICU / CVICU, OR to discuss existing bed capacity and planned surgical / procedural admissions. This huddle would help to identify and prioritize those post-surgical patients who are appropriate for PICU admission as well as transfer to PICU for continued ICU care if there remain adult ICU bed needs while also ensuring there is bed capacity to care for pediatric patients.
 - ii. Changes to admissions to the UI SFCH

Pediatric Intensive Care Unit (PICU / PCICU)

- Step 1*
- I. All patients ≤ 21 years old patients requiring ICU admission will be admitted to the PICU unless the patient meets the exclusion criteria listed below
 - a. Pediatric medical and surgical services will provide consultations for these patients as requested by the PICU team.
 - b. Once the patient no longer requires ICU care, then the patient will transfer out of the PICU to a med-surg floor in the UI SFCH and be cared for by the appropriate pediatric medical or surgical service for the patient's clinical condition.
 - c. Adult medical and surgical services will not be asked to admit or consult on these patients unless there is a clinical need that is only provided by an adult service line.

II. All patients ≤ 25 years old with congenital heart disease who require ICU admission will be admitted to the PCICU (Pediatric Cardiac Intensive Care Unit) unless the patient meets the exclusion criteria listed below

*Step 2 ** To be implemented when additional adult ICU bed capacity needs are identified by the daily huddle described above.*

I. Patients age 22 – 25 years old without congenital heart disease who require ICU admission may be admitted to the PICU but this will require a faculty-to-faculty discussion between the MICU / SNICU / CVICU attending physician and the PICU attending physician regarding the appropriateness of each patient to be cared for in the SFCH.

Inpatient Med-Surg Floors (Levels 9, 10 and 11)

- I. All patients ≤ 21 years old requiring hospitalization will be admitted to the UI SFCH unless they meet the exclusion criteria listed below
- a. Pediatric medical and surgical services will admit and serve as primary care teams as well as consultant services for these patients.
 - b. Adult medical and surgical services will not admit or consult on these patients unless there is a clinical need that is only provided by an adult service line.

Exclusion Criteria (i.e., these ≥ 18 -year-old patients should not be admitted to the UI SFCH)

- Patient currently has one of the following active conditions:

- is COVID-19 positive or is a person under investigation (PUI) for COVID-19
- is having a myocardial infarction
- is having a stroke. Patients ≥ 18 years old are to be admitted to adult units according to Stroke Center Guidelines¹
- has reason for admission related to burn and/or wound injuries that are cared for in the UIHC Burn Unit
- is an adult epilepsy patient being admitted to the 2BT Epilepsy Monitoring Unit
- is a pregnant patient requiring ICU admission
- is morbidly obese / undergoing bariatric treatment
- has reason for admission related to a suicide attempt or other “med-psych” diagnosis that requires presence of a bedside sitter
- is a prisoner
- has presence of a psychiatric comorbidity (ex: schizophrenia) which may compromise the safety and security of the other pediatric inpatients
- has a history of social and/or safety issues such as involvement with gangs, violence, drugs/alcohol which may compromise the safety and security of the other pediatric inpatients

Special Patient Populations

These are already part of the *UI SFCH Admission Guidelines for patient’s 18 – 21 years old* but added here for completeness.

- I. **Pregnant patients** ≤ 21 years old may be admitted to the UI SFCH depending on the reason for admission and the admitting service. Typically, these patients are admitted to either the Obstetrics Service, Family Medicine Service or to a surgical service with an Obstetrics or Family Medicine consult.
- II. **Post-partum patients** ≤ 21 yo may be admitted to the UI SFCH depending on the reason for admission and the admitting service. Typically, these patients are admitted to either the Obstetrics Service, Family Medicine Service or to a surgical service with an Obstetrics or Family Medicine consult if indicated. The pediatric provider teams do not routinely care for patients in the post-partum period.²

REFERENCES / RESOURCES

Stroke¹

Rindels, Erin, MSN, RN, CNRN, SCRN, Stroke Coordinator, University of Iowa Hospitals and Clinics.
University of Iowa Stead Family Children's Hospital Clinical Practice Guideline - Pediatric Acute Ischemic Stroke (2018).

Post-Partum²

For the purposes of this document, the post-partum period will be defined as the 12 week timeframe immediately following childbirth.

University of Iowa Stead Family Children's Hospital Admission Guidelines for patients 18 – 21 years old. Last updated Sept 2018.

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