**Inpatient Hospital Medicine Admission Protocol**

All ED Admissions

Teaching (formerly FPN) and Non-teaching (formerly CHG) services

Drafted: 4/29/14

Will become effective: 5/20/14 at 7 AM

1. Teaching service patients (Staff Medicine; formerly FPN)
   1. Unassigned terminal MRN digit 1,2,3,4
   2. PCP is a Myers Park Internal Medicine provider
   3. Any patient at Faculty Medicine Practice: (Bowles, Cheng, Dreyer, Efird, Foster, Furney, Jacobs, Kaur, Saha)
2. Non-teaching service patients (formerly CHG)
   1. Unassigned terminal MRN digit 5,6,7,8,9,0
   2. PCP is a CHS Tree of Life provider
   3. All psychiatric admissions w/o active acute medical problems (except if patient has a Myers Park PCP)
3. Once the teaching service (i.e. Staff Medicine) hits cap, the non-teaching service (i.e. CHG) will admit all unassigned patients regardless of terminal MRN digit as they currently are doing
   1. The teaching service (i.e. Staff Medicine) will continue to remain open for admissions to patients with a Myers Park PCP
4. All other rules or special situations involving assignments between CHG and Staff Medicine are null and void.
   1. For example, now ICHs (excluding SAHs) without a PCP, LCI patients without a PCP, and Myers Park Subspecialty Clinic patients without a PCP will be admitted under the new unassigned protocol
      1. If unassigned, MRN terminal digit 1-4 → teaching service; MRN terminal digit 5-0 → non-teaching service
   2. This includes CMC-Main ED to MICU Level III direct admissions without a PCP
      1. If unassigned, MRN terminal digit 1-4 → teaching service assignment (Staff Med F); MRN terminal digit 5-0 → non-teaching service assignment (Staff Med M)
5. Readmissions within 30 days will “bounce-back” to the original admitting service (teaching or non-teaching) regardless of terminal MRN digit
   1. Note: Both admissions must occur at CMC-Main; Admissions to other CHS facilities do not apply
6. For patients with multiple MRNs, the MRN reported by the ED at the time of the phone call will be used for admitting assignment. The exception to this rule is if the patient is determined to have a Myers Park or Tree of Life PCP upon review of the alternative MRN.
7. Levine Cancer Institute will continue to admit patients for routine chemotherapy as they are currently doing.
8. Hepatology will continue to admit liver patients who have been transplanted or are on the transplant list as they are currently doing.
   1. Other hepatology patients will be assigned to the teaching service or non-teaching service by PCP or according to the unassigned protocol listed above.

See reverse for decision diagram.

Definitions:

* **Tree of Life Primary**: Patient has had a note from CHS IM or FP w/in the last 3 years
* **Myers Park Primary:** Patient has had a note from a Myers Park IM continuity provider (resident or attending who is NOT a sub-specialist) within the last 3 years.
  + Myers Park Hospital F/U Clinic:
    - A patient seen in Myers Park Hospital F/U clinic that is referred to Myers Park Continuity clinic is considered a Myers Park patient
    - A patient seen once in Myers Park Hospital F/U clinic with NO plans for ongoing care at Myers Park Continuity clinic is considered “unassigned” and distributed according to the unassigned protocol.
    - If plans for establishing ongoing F/U at Myers Park Continuity clinic are unclear, the patient should be considered Myers Park
  + Myers Park Pre-Operative Clinic
    - Myers Park Pre-Operative clinic is considered a sub-specialty clinic. A patient seen in Myers Park pre-op clinic without a Myers Park PCP would be considered “unassigned” and distributed according to the unassigned protocol.

Yes

No

No

No

No

Yes

Yes

Yes

Yes

Admit to Teaching Service (0494)

Admit to Non-Teaching Service (8888)

Psychiatric problem, no acute medical problems (non-MP PCP pts)

Myers Park IM primary?

Tree of Life Primary?

Terminal Digit 1-4

(& Not Capped)

Terminal Digit 5-0