**BWH ED to BWFH Inpatient Medicine Service Exclusion and Consult Guidelines**

**General Patient Exclusions:**

* **Pregnancy** - Gestational age 20 weeks or greater (Active OB issues should be admitted to BWH OB)
* **Oncology** – Urgent malignancy workup (Active Oncology treatment should be admitted to BWH Oncology)
* **Cardiology –** Patient requiring cath lab, EP consultation, followed by Advanced HF team, s/p LVAD or heart transplant, PE’s requiring Code PE, or who require critical care cardiology should be admitted to BWH Cardiology. Further guidance needed on cardiology patients (input from BWFH Cardiology consult service, as well as BWH HF Equity group)
* **Continuity of care** – Hospital discharge within 72 hours for same clinical issue (Recent BWH admit)
* Patients in whom **ICU** is being considered or may decompensate – e.g. patients who have been on pressors, BIPAP, but stabilized. (On occasion may be helpful to review FICU census or review with FICU attending)
* **Consultant Request** – Communication with outpatient consultants recommended, but unless hard requirement for BWH patients may be admitted to BWFH. Availability for outpatient providers to perform virtual visits may help mitigate this concern.

# Non-Surgical Consult Service Availability at BWFH

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| **Service** | **BWFH****Availability** | **Special Considerations** |
| Allergy | Nonecurrently | Future virtual access under consideration |
| Cardiology/VascularMedicine | CardiologyConsult | Exclude pt requiring cath lab, EP, advanced HF, LVAD/txplant, critical carecards, PE’s requiring Code PE |
| Dermatology | Yes |  |
| Endocrine | Yes |  |
| Gastroenterology | Yes | ERCP and Advanced Endoscopy available via LOA |
| Hematology | Yes | Sickle cell disease, requirement for plasmapheresis, plasma exchange or red cell exchange, hemophilia patients with bleeding or in need of invasive procedures, new heme malignancy, or need for bone marrow biopsy should be excluded from BWFH. If unclear should review with on-call Hemeprior to admission if possible. |
| Infectious Disease | Yes |  |
| Neurology | Yes | Exclude acute stroke, need for continuous EEG |
| OB/Gyn | Yes | Note limited surgical support and no patients with pregnancy related issuesor >19weeks 6 days of pregnancy |
| Oncology | Limited | Remote consultation available, but generally appropriate for BWH |
| Pulmonary | Yes |  |
| Renal and InterventionalRenal | Yes | Interventional Nephrology available at BWFH and preferred for HD accessissues |
| Rheumatology | Yes |  |

**Surgical Consultant & Procedural Availability at BWFH: For patients admitted to GMS but consultant needs**

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| --- | --- | --- |
| Service | BWFH Availability | Special Considerations |
| Dentistry | No |  |
| Colorectal Surgery | Yes (limited) | Review with consulting service prior to transfer |
| ENT |  | Attending home call at night |
| General Surgery | Yes |  |
| Gynecology | Limited | Review with consulting service prior to transfer |
| Interventional Radiology | Yes | Not available on the weekend– if urgent need, excludefrom BWFH. No PCN tube placement. |
| Ophthalmology | Yes | Limited Availability – need 24 hour notice |
| Orthopedics | Yes | Ortho Spine – review with consulting MD firstOvernight providers are on home call |
| Otolaryngology | Yes |  |
| Plastic Surgery | Not consistently | BHAC\* to check w consulting MD first |
| Radiology | CT/US available 24/7MRI –6a-11p 7 days/week | BWFH unable to conduct MRI studies if patient has a PPM in place |
| Spine | Yes – Orthopedics | BHAC to check w consulting MD first |
| Thoracic surgery | Yes | Providers on home call overnight |
| Trauma Surgery | No |  |
| Urology | Yes | Providers on home call overnight |
| Vascular & CT Surgery | Rarely (consider transfer only if vascular on board prior totransfer) | BHAC to check w consulting MD first |

\*BHAC = Brigham Health Access Center