Sample Criteria General Inpatient Level of Care

GIP is intended to be a short term intervention (similar to an acute hospital stay). Care provided usually cannot be feasibly provided in the home setting. This level of care requires frequent evaluation by a physician or nurse.

The following criteria help support appropriateness for admission:

- Imminent Death intractable symptoms of the dying process including terminal restlessness and severe hyperthermia
- Agitation caregiver unable to control patient; patient awake over 24 hours; initial medication ineffective; patient safety may be considered
- Ascites uncontrolled symptoms at home with abdominal discomfort including inability to sit upright, moderate to severe dependent edema and acute ongoing titration of directics
- Bleeding large amount of intractable bleeding from any source; patient care interrupted due to bleeding
- Cardiac Failure acute angina with pain and dyspnea present; pulmonary edema despite optimal medication; dissecting aneurysm
- Family/Caregiver Teaching The patient's caregiver needs to be taught complex

 medications, treatments, etc, when transitioning between hospital and home, nursing
 home, or assisted living facility; this may include new modality such as suctioning, drain
 care, colostomy care.
- Insomnia due to symptom burden, anxiety, depression or suffering; lower pain threshold; patient awake for more than 24 hours
- Intestinal Obstruction nausea; vomiting and intractable abdominal pain; no bowel movements in more than three days; watery, frequent stools
- Nausea, Vomiting, and Diarrhea intractable with current optimized antiemetic or antidiarrhea regimen
- Pain Not well controlled or intractable pain despite aggressive medication management. May require complex medication protocols and multiple routes of administration.
- Uncontrollable Respiratory Secretions Persistent productive cough with evidence of symptoms such as insomnia, musculoskeletal pain, rib fracture or exhaustion and syncope
- Seizure new onset uncontrolled seizure activity; ineffective pharmacological interventions; Status Epilepticus
- Decubitus Ulcer or Wound Care stage III or IV wounds associated with pain; excessive drainage; malodorous; disfiguring or requiring manual debridement
- Medication Management involving complicated delivery of medications requiring the oversight of an RN and frequent dosage adjustments; may include palliative sedation.