

Section 15-

SECTION: Treat and Refer

GUIDELINE TITLE:

REVISED: 03/2020

OVERVIEW:

Treat and refer allows lower acuity patients who do may not need services at Emergency Departments to be transported to other healthcare settings such as urgent cares, primary care offices, as well as referral to providers who offer treatment in place (telemedicine and in home services).

Qualifying Vital Signs

Heart rate: less than 120 BPM

Resp rate: 8 to 16/min

Systolic BP: between 90 and 180 mmHg

Pulse ox: 94% or higher on room air

Abnormal lab results from facility

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none">• Nursing home or other skilled nursing facility• Foley catheters• Hemoglobin>5• Abnormal potassium with normal EKG• Abnormal calcium with normal EKG• Abnormal white blood cell count without fever• Abnormal urine without fever	<ul style="list-style-type: none">• Fever• Dehydration	<ul style="list-style-type: none">• Normal EKG if electrolyte abnormality

Ankle Injury

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> • Simple mechanism of injury such as ground level fall • GCS 15 • No anticoagulation • Has primary care physician or ability to self transport • Mechanical fall (slip or trip) • Minor MVA (low speed) 	<ul style="list-style-type: none"> • Deformity • Diminished pulses • Numbness • Fever • Abnormal vitals • Syncope 	<ul style="list-style-type: none"> • No deformity • No crepitus • Neurovascular intact • No other injuries

Asymptomatic Hypertension

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> • Diastolic blood pressure less than 120 mm HG • Neurologically intact • GCS 15 • Has primary care or specialist physician • Has ability to self transport 	<ul style="list-style-type: none"> • Fever • Headache • Neck pain • Sudden onset of headache worse at onset • Visual changes • Numbness or weakness • Edema • Urinary changes 	<ul style="list-style-type: none"> • Normal mental status and capacity • Normal neuro exam • Negative stroke scale • No edema

Chest Pain

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> • No hx CAD, DM, HTN, hyperlipidemia, obesity • No concern for cardiac chest pain • Heart score 0 • 	<ul style="list-style-type: none"> • Risk factors • Heart score 1 or greater • Fever • Shortness of breath • Abnormal vitals 	<ul style="list-style-type: none"> • Breath sounds equal and clear • No abdominal tenderness, rebound, or guarding • Equal pulses

Chronic Abdominal Pain

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> • Pain 3 or more weeks • No signs dehydration 	<ul style="list-style-type: none"> • Fever • Hx cancer • Hx anticoagulation • No fever • No bloody stool or vomitus 	<ul style="list-style-type: none"> • Normal mental status and capacity

Chronic Pain

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> • Pain 3 or more weeks • Includes but not limited to neck and back pain • No vomiting blood • Neurologically intact • 	<ul style="list-style-type: none"> • Fever, chills • Hx cancer • Hx anticoagulation • Intoxication 	<ul style="list-style-type: none"> • Normal mental status and capacity • Normal neuro exam

Dental Pain

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> • No fever • No voice changes • No tongue swelling • Ability to fully open mouth • Has ability to self transport 	<ul style="list-style-type: none"> • Voice changes • Fever • Intoxication 	<ul style="list-style-type: none"> • Normal voice • Able to swallow

Headache



Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> • Gradual onset • Neurologically intact • Afebrile • No fever 	<ul style="list-style-type: none"> • Fever • Sudden onset (worse at onset) • Numbness, weakness • Visual changes • Dizziness • Vomiting • Hx anticoagulation • Risk for CO poisoning 	<ul style="list-style-type: none"> • Normal mental status and capacity

Hospice Care

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> • Hospice patients • End of life with valid DNR with services in place 	<ul style="list-style-type: none"> • None 	

Hypoglycemia

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> • Type 1DM • Type 2 DM on insulin only 	<ul style="list-style-type: none"> • Fever • Oral agents • Inability to tolerate PO • Shortness of breath • Intoxication 	<ul style="list-style-type: none"> • Normal mental status and capacity

Indwelling Catheters



Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> Nursing home or other skilled nursing facility Home care patient Foley catheters PICC lines Feeding tubes No fever or signs dehydration 	<ul style="list-style-type: none"> Fever Dehydration 	<ul style="list-style-type: none"> Afebrile

Knee Injury

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> Simple mechanism of injury such as ground level fall GCS 15 No anticoagulation Has primary care physician or ability to self transport Mechanical fall (slip or trip) Minor MVA (low speed) 	<ul style="list-style-type: none"> Deformity Diminished pulses Numbness Fever Abnormal vitals Syncope 	<ul style="list-style-type: none"> No deformity No crepitus Neurovascular intact No other injuries

Medication refill

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> Chronic medications (on for > 2 weeks) 	<ul style="list-style-type: none"> Fever Vomiting or diarrhea Dehydration Chest pain Shortness of breath 	<ul style="list-style-type: none"> Normal mental status and capacity

Minor Burn Care

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> 5% BSA or less No hx diabetes No joint involvement No hand or face involvement 	<ul style="list-style-type: none"> Greater than 5% BSA Fever Intractable pain Dyspnea 	<ul style="list-style-type: none"> Normal mental status and capacity

Psychiatric illness

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> Age <55 years No hx suicidal ideation No homicidal ideation No auditory hallucination with self harm content 	<ul style="list-style-type: none"> Age 55 or greater Visual hallucinations Fever Intoxication Self harm gesture 	<ul style="list-style-type: none"> Normal mental status and capacity

Seizure



Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> Hx seizure disorder Must be compliant with medications Neurologically intact Has responsible party to be with patient 	<ul style="list-style-type: none"> New onset seizure Fever Hx cancer No responsible party with patient Neuro deficits Injury Hx substance abuse 	<ul style="list-style-type: none"> Normal mental status and capacity Normal neuro exam

Vomiting and Diarrhea

Inclusion	Exclusion	Assessment
<ul style="list-style-type: none"> Has primary care or specialist physician Has ability to self transport 	<ul style="list-style-type: none"> Fever Hx cancer Hx anticoagulation Signs of dehydration Blood in Vomitus or stool 	<ul style="list-style-type: none"> Normal vital signs No rebound or guarding No abdominal distension

	A	B	EN	I	P
1. Perform patient assessment		•	•	•	•
2. Obtain patient history.		•	•	•	•
3. Determine if meets inclusion and exclusion criteria.		•	•	•	•
3. Determine if referring to physician office, urgent care, telemedicine, or treatment in place with in home service.		•	•	•	•
4. If unable to contact referral service, transport patient to urgent care or emergency department		•	•	•	•
6.			•	•	•
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