Title: SM Pediatric Hospital Medicine and Neurology Communication committee (updated 4/2022)

Committee overview

Goals:

1. Provide communication between PHM and Neurology division to ensure safe pediatric direct admissions for video EEG.
2. To provide means of continuous evaluation and monitoring of hospital stay for video EEG at SMH.

Aims:

1. Establish constant and beneficial communication between both divisions
2. Design products aimed at improving communication, easing current bottleneck, and adding to resident education
3. Review products with nurses, physicians, technicians and admission department
4. Review SMH EEG admission goals and process with residents
5. Evaluate products (including workflow, teaching pearls) modify and continue to analyze them

Objectives and goals of SMH VEEG admissions

1. To admit all scheduled video eeg admissions to SMH under PHM service to open up beds for higher level of care at RR

2. Obtain video eeg in a safe hospital environment

3. Explain to parents that further details and any specific next steps after eeg will be reviewed in outpatient setting

4. PHM team is primary and responsible for all eeg patients

5. Neurology team is consultants

6. This is different in comparison to RR where neurology is primary

7. Although these patients are coming directly from home and considered stable, they are still at risk for status or requiring higher level of care

Workflow of direct EEG admission to SMH

Before Admission(scheduled vs urgent)

Patient contacts neurologist about a concern in clinic or via telephone→ Neurologist is interested in a routine scheduled or urgent admission → Neurology fellow or attending forwards patient to Neurology administrator to start scheduling→ Administrator adds patients to Telemetry calendar --> Administrator obtains insurance authorization & Screening completed by Neurology attendings --> Neurology NP places Covid order & Administration contacts Bed control Nurses→ Administrator contacts families about COVID orders and they are authorized to be admitted to SM vs RR --> Attending, nurses and residents receive weekly email with list of upcoming scheduled admissions and urgent admits --> Hospital *Admissions office can contact family on arrival time, and inform PHM attending or charge nurse* → Primary neurologist who requested admission (update notes with current medications including telephone notes, explains eeg admission, Inform parents to bring medications, Inform families of EEG expectations, follows up on COVID testing, Inform family only EEG can be completed, no other clinical studies are guaranteed)

SMH Admission

Patient and family arrives to admissions office --> charge nurse is informed and patient arrives to the floor --> nurses informs eeg tech of arrival to place eeg leads, nurse informs residents of patients arrival --> based on admission email details the residents and eeg tech will know if hyperventilation and photic stimulation are required--> residents look at last neurology note and telephone note for patients history and most recent medication doses --> med rec is completed within one hour of admission--> patient is staffed with PHM attending on call

Next Day of admission

Next morning, neurologist reading eeg informs eeg tech and neurology attending to remove leads --> neurologist/NP speaks to family, informs family of eeg results, neurologist/NP contacts PHM residents to tell them of the plan including any medication changes, and if patient is okay for discharge. Contact Neurology team after 9:30 am for any questions including about the discharge plan

Discharge planning

Neurology NP/attending updates residents of plan and when patient is safe for discharge-->Neurologist places medications, residents' updates AVS and places discharge instructions regarding follow up --> Residents update nurse of plan --> Discharge order is placed --> AVS is printed and patient is discharged

Details of Communication (updated on 4/2022)

Below is a clarification on contact information for the pediatric neurology department at SMH and at RR:

- For transfers from outside hospitals/urgent care/ER or UCLA ER admissions, please contact neurology regarding admission location (RR, SMH, or discharge home)
- For RR, neurology contact information is on pager system for RR
- For SMH, neurology schedule and Neuro NP contact information is available in resident room
- Patients who require presurgical evaluation by neurosurgery or patients who are initiating a ketogenic diet will be admitted to RR.
- Patients with difficult airway will be admitted to RR (exception: Mature tracheostomy tube is considered a stable airway. Stable mechanical ventilation settings are okay at SM)
- Urgent EEG admissions will be emailed to PHM attending and nursing team
- Those with new seizure diagnoses or infantile spasms will be a case-by-case discussion with neurology.
- Infantile spasm patients can be admitted to SM and have in the past.
- Patients in status epilepticus who require a PICU nearby but not PICU may be admitted to RR.
- Patients who are already on a stable ketogenic diet may go to SM.
- Please make sure a neurology consult and EEG order are in for each patient.

Contact information for all admissions including scheduled EEG, urgent EEG, patients requiring neurology consult:

At SMH:

- Weekday 8 am- 4 pm: Contact Kristina the neuro NP
- Weekday after 4 pm: Contact RR neuro attending
- Weekend 8am - 4 pm: Contact SMH attending based on the attached pdf schedule
- Weekend after 4 pm: contact RE neuro attending
- Neurology fellow/residents are not at SM.

At RR:

- For all days and times: Use on call paging system to contact neurology resident/fellow on call to contact RR attending.
- Neurology residents/fellows at night to inform SM and RR attendings of overnight consults

All transfers:

- For all transfers contact neurology resident/fellow on call or neuro attending to discuss admission, for all days and times. If patient is coming from an outside facility, discuss admission location (RR or SM)

List of Responsibilities and Expectation

Faculty	Responsibilities/ Expectation
	Review emails and care connect list (Peds Emu) on upcoming admissions
	On admission, inform parents of admission expectations: Goal of admission (safe location for EEG), They will not be rounding with primary neurologist or team, expected EEG reading time, zoom rounds and discharge process
	Teach residents neurology pearls (can use document), review status epilepticus guidelines, and encourage order set use
Pediatric Residents	Complete med rec within an hour, inform pharmacy if parents brought specialty medications
	Review emails on upcoming admissions
	For scheduled EEG or urgent EEG admissions, contact neuro NP after 9:30 am for neurology consult recommendations, ideally not before unless there is an acute concern
	For neurology consults for all other patients, contact neurology NP/attending based on time of the day (see communication section) for consult recs
	Keep communication with charge nurse of all upcoming admissions during the day and night
	Complete discharge med rec. Neurologists will send meds to the pharmacy. Ensure correct list in AVS prior to discharge order
	Update nurse of patients plan on admission and discharge
	Staff patient with hospitalist attending
	If there are any questions about the admission (eeg medications, eeg details, discharge plan) check notes first, then ask the hospitalist attending. Neuro fellows are not involved in SMH care at this time.
Neurologist resident/NP/attending placing admit requests	Update chart with current medications - this may include clinic notes or telephone notes. This way the team can confirm medications quickly and patients may receive their meds on time.
	Place COVID orders, place eeg requests
	Explains eeg admission, Inform families to try and arrive sooner during day hours, Remind parents to bring medications and only ONE parent may stay with child (not sibling or grandparent)
	Inform family only EEG can be completed, no other clinical studies are guaranteed
	Provide parents with admission pamphlet (includes location detail, duration of stay, and reminder to bring medications) inform them to contact neurology administration with any questions not SMH hospital floor or nursing
	Review chart to see if patient needs sedation and anesthesia with EEG admission prior to submitting admission requests
Neurology Consult Attending/NP	Be in contact with residents
	Sends neurology medications (new or refills) to pharmacy
	Inform family of plan, eeg results
	Update PHM residents of plan
	Update EEG techs that leads can be removed

EEG Tech	Place and Remove EEG leads once contacted by neurologist
	Update nurses of EEG lead placement
Admin	Send emails with all scheduled and urgent admissions at all times. This is to avoid patients arriving on the floor when the admitting team is unaware and risks patient safety.
	Update nurses and doctors via email of cancelled admissions
	Answer calls and questions from parents about the admission
	Contact families to provide them brochure on admission, remind them to bring home medications
Nurses	Update residents of arrival
	Contact EEG tech of admission arrival
	Relay concerns of family to residents or attendings
	Verify COVID test has been completed/review results
	Send patient own med to pharmacy/Inform pharmacist
	On admit - Contact EEG monitor room at RR and update with seizure history
	On discharge – contact EEG monitor room at RR
	Call q shift to ensure patient is being monitored at RR
	Contact child life based on patient's needs on admission