

THE SAI GROUP: CARE PATHWAY - GENERAL DEBILITY

Referral from in-patient facility

- Use Medication Monitoring within 48 hours post evaluation if any of the following criteria met-
- Confused/ forgetful & lives alone
 - Confused/ forgetful & family members unable/ unwilling to help with medication administration
 - History of medication mismanagement/ non-compliance

Continue medication monitoring until risks present. Use other telehealth features and care pathways if applicable.

Initial evaluation within 48 hours of referral or home return whichever is earlier

- **Nursing re-visit** no later than 48 hours post evaluation
- Frequency of nursing and home health aide based on clinical/ functional needs stated on initial evaluation/ physician orders
- Refer to OT / PT/ SLP if applicable (if no admission orders)

Nursing care (includes but not limited to):

- Review of drugs
- Watch for drug interactions/ side-effects
- Patient education
- Medication administration/ management as needed
- Administration of annual influenza vaccination
- Administration of PPSV (if no history or last dose more than 5 years ago before the age of 65; if previously vaccinated after age 65– none needed) *
- Telehealth/ medication monitoring
- Check mental status, BP/ postural BP, HR, respiratory rate, oxygen saturation, weight, blood glucose level (if diabetic) with **each visit**
- Supervision of aide as needed

OT/ PT / SLP Care per need of patient

All staff to check for s/s with each visit

Did staff observe/ does patient complain of any of the following signs & symptoms:

- Acute mental status change?
- Not eating or drinking?
- Acute decline in ADL abilities?
- New cough, abnormal lung sounds?
- Nausea, vomiting, diarrhea, abdominal distention or tenderness?
- New or worsened incontinence, pain with urination, blood in urine?
- New skin condition, e.g., rash, redness suggesting cellulitis, signs of infection around existing pressure ulcer/ wound?
- New extremity edema?
- Unrelieved or new shortness of breath at rest?
- Unrelieved or new chest, neck, shoulder, jaw or arm pain?

No

Yes

No

Nurse to reconcile medications, discuss treatment plan with physician, request lab tests as appropriate and notify physician if any criteria

Nurse to forward lab results to physician as soon as available and re-assess

- Critical lab values?

Yes

No

Notify Physician Immediately/ May need transfer to hospital

Discontinue services when goals achieved/ potential maximized/ no further skilled needs with physician approval, or as directed by physician

Yes

If complaining of chest, neck, jaw or arm pain -

- Call 911
- If responsive, give Aspirin (encourage chewing).
- If unresponsive, apply CPR
- Notify physician

With other s/s:

- Notify physician/ consider hospital discharge as appropriate

NURSING ASSESS (any present):

- Temp > 102°F (> 38.9°C)?
- Apical HR > 130 or < 50 bpm?
- Resp. rate > 30 or < 10/min?
- BP < 90 (or > 20 mm drop systolic), or >210 systolic?
- Oxygen saturation < 90%?
- Finger stick glucose < 70 or >400?
- Not eating or drinking?