

## Observation Medicine



## **Observation Medicine**

## Principles and Protocols

Second Edition

Edied by

Sharon E. Mace

Cleveland Clinic Lerner College of Medicine, Ohio







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### **Advance Praise**

Observation Medicine: Principles and Protocols, second edition, edited by Dr. Sharon E. Mace, is a relevant and timely textbook to emergency medicine. The book is written in an easy-to-read format with many outstanding ideas and unique content as it relates to the development of both adult and pediatric observation medicine. The second edition has expanded from 96 to 122 Chapters including clinical, social issues, administrative, business, new developments, disasters/covid, financial, coding/reimbursement, policies, and protocols. This is an indispensable resource!

#### Isabel Barata, MS, MD, MBA

Professor of Pediatrics and Emergency Medicine, Donald and Barbara Zucker School of Medicine at Hofstra/Northwell; Pediatric Emergency Medicine Service Line Quality Director, Emergency Medicine and Pediatrics Service Line; Director of Pediatric Emergency Medicine, North Shore University Hospital

As a longstanding residency director, it is difficult to provide the training needed to keep up with the advancements in emergency care. Observation medicine is providing to be an extremely valuable addition to emergency care, and emergency medicine residents need to be exposed and trained in this facet of emergency care. Dr. Mace's textbook, Observation Medicine, provides a valuable training resource useful to all emergency medicine residencies. This textbook provides the background needed not only work within an emergency department that has an observation unit, but potentially to develop one. This is a great resource for training in observation medicine.

#### Michael Beeson, MD, MBA, FACEP

Professor of Medicine, Northeast Ohio Medical University, Program Director, Emergency Medicine Residency, Summa Health Akron Emergency Department; Vice Chair, Education, Department of Emergency Medicine The textbook *Observation Medicine: Principles and Protocols*, edited by Sharon E. Mace, is a must have in your emergency medicine library. Dr. Mace, an experienced emergency physician, practicing observation medicine for adults and children at the Cleveland Clinic Hospital System for decades and now Director Emeritus of Observation Medicine at the Cleveland Clinic, has assembled a team of contributors representing the best and brightest of emergency medicine. In the 122 Chapters of this book, the reader will learn everything you need in implementing an observation unit for your emergency department and your hospital.

The breath of this book is exhaustive. The Chapters are organized into multiple sections. They include not only clinical, but also financial from coding and reimbursement to case management, denials and appeals, and even financial viability. Practical tools in this textbook, such as protocols, order sets, and administrative policies, can be adopted or modified to allow anyone to easily start or expand an observation unit in any setting; whether urban, suburban, rural or even critical access hospitals or freestanding emergency departments (EDs) and in any location, even internationally.

The second edition has additional Chapters that expands the use of observation for various patient populations: hospice, psychiatric, geriatric, substance abuse, skilled nursing home placement, and even those with social issues and/or illnesses/injuries arising from the social determinants of health. There are new innovative sections, for example, telemedicine, ultrasound, and the use of observation in pandemics. New business, financial, and administrative Chapters deal with regulations, utilization review, correct status, and the "C-suite."

Economics and the desire to provide optimal care to emergency department patients – who need just a little bit more time to stabilize their care, arrive at a definitive answer, or prepare patients for a safe discharge home without a hospital admission – helped to drive the specialty of emergency medicine and observation medicine.



#### **Advance Praise**

As written in the forward by Nicholas Jouriles, MD, FACEP from Greg Henry, MD, FACEP in the first edition (both Past Presidents of the American College of Emergency Physicians), "Remember the goals: cost effective care, time efficient care, the best patient outcomes, and more compassionate human centered care." Observation medicine can achieve these goals.

This book can help establish an observation unit through its guidance of administration and protocols; exploring the types of clinical problems that would best be served by these units. They also bring in the experts of reimbursement to help you get paid for the services you provide. If you already have an observation unit, this book is essential to operating that unit correctly and at a higher level. If it is your responsibility, as an emergency department leader and/or you are responsible for medical or nursing education, the protocols, order sets and educational modules will make your life easier.

Do yourself a favor and purchase a book for yourself and your department. You will be glad you made the investment.

#### Andrew I. Bern, MD, FACEP

Past Member, Board of Directors of American College of Emergency Physicians (ACEP), Past Chairman of the ACEP Board of Directors

As a staff member and charge nurse who worked in the Cleveland Clinics Observation Unit for over 10 years, I experienced firsthand the utility of having clear protocols and guidelines. These protocols not only expedited patient care but reduced the stress for both staff and patients. By knowing exactly what was going to be done the team could clearly outline the care plan with the patient so that everyone was kept up to date. This resulted in an efficient and calm experience for all involved.

## Paul Budny RN, MSN, APRN, FNP-C, NRCME, CCRA, CCRP

Staff Nurse/Charge Nurse, Nurse Practitioner, Clinical Research Nurse

This second edition contains new sections that describe innovative uses for the observation unit. It is essential reading for providers who want to overcome failures of imagination. The observation unit can address capacity challenges from the ongoing boarding frustrations to sudden unexpected crises

like mass casualty events, pandemic surges, or national disasters. Consolidation of patients with similar special needs allows for organized allocation of resources

Emergency medicine is one of the specialties most often called to address social determinants of health. We are first responders for non-accidental trauma, substance use disorders, and housing insecurity. Thus, this text also offers guidelines for how emergency department providers – including our case management and social work colleagues – can use the observation unit to interrupt the self-perpetuating cycle of poverty and disease.

#### C. Clare Charbonnet, MD

Disaster Medicine and Emergency Management Fellow, UMass Chan Medical School, University of Massachusetts Medical Center

This textbook is a primer on observation medicine for the health care provider; whether physician, nurse practitioner, physician assistant or nurse; whoever is taking care of patients in an observation unit. As a practicing emergency physician this textbook is very useful for the health care provider working in the observation unit. It is "Observation course 101 and 201," both basic and advanced observation medicine. It has all the components needed for starting or sustaining and expanding an observation unit. Everything from clinical protocols to administrative policies and even the financial/business aspects, regulatory issues, and billing/coding is included in the textbook. It has practical examples for all these topics and even includes using observation for social issues and during a pandemic/disaster. It is all in one place so you do not have to go searching for the information you need. It is often difficult or impossible to find information on topics related to the business, finance, administration, and billing of observation medicine. But now you have that information, easily accessible and in one place. This textbook is essential reading for any health care provider or administrator taking care of patients in an emergency department or observa-

#### Angela Cornelius MD MA FACEP FAEMS

Associate Professor Emergency Medicine, TCU/ UNTHSC School of Medicine and LSU-Shreveport EM Residency, Associate System Medical Director,



**Advance Praise** 

Office of the Medical Director Metropolitan Area EMS Authority

Dr. Mace's uses her extensive knowledge and experience to create a comprehensive textbook on observation medicine which is an absolute must have for all physicians and administrators who have or desire an observation unit. Jammed with even more information than the first edition, it is full of critical information, tips and valuable resources that will guarantee the success of your program!

#### Ann M Dietrich, MD, FAAP, FACEP

Professor of Pediatrics and Emergency Medicine, University of South Carolina School of Medicine, Division Chief Pediatric Emergency Medicine, Department of Emergency Medicine, Prisma

As an administrator, clinician and educator, I find that this textbook is a useful compendium of everything that is relevant to observation. The clinical sections with the protocols, order sets, and administrative policies are a pragmatic guide on how to establish and/or expand an observation unit at your institution. The textbook details how observation can be successfully applied to any hospital system, or any size institution from a tertiary care center, community hospital, rural, critical access hospital, or freestanding emergency department (ED) and delineates the value observation medicine can provide to hospital systems, healthcare, and society; and, most importantly, to patients and their families.

As the director of operations, I find that not just the clinical, but also the administrative, financial, and business sections of Dr. Mace's textbook are invaluable; especially since there is no other resource, whether a website and/or textbook, where all this information can be found in one source. The second edition also addresses the social determinants of health and social medicine encompassing such topics as substance abuse.

This textbook explains how the use of observation can help address problems facing EDs such as ED crowding or boarding of patients, and lack of access to care. For example, one Chapter explains how "psychiatric observation" can provide "impactful treatment and cost-effective care in lieu of boarding," resulting in better patient care. Addressing both the social determinants of care which affect individual health – ranging from

poverty, food insecurity, interpersonal violence to substance abuse – as well as the medical issues, can be done in the observation unit. Simultaneously dealing with social medicine concerns, while treating medical illnesses and/or injuries, in the observation unit, will lead to better patient outcomes.

As an educator and administrator, the section on clinical setting and education is particularly valuable. This textbook should be in the collection of references for any health care administrator or provider, whether nursing, advanced practice providers, physicians; and for medical students, residents, and fellows, since they will be caring for observation medicine patients throughout their practice.

This comprehensive textbook gives the reader a look at the future and how observation medicine can be used to help resolve some of the problems facing EDs, hospitals, and health systems, and even society. More importantly, it describes how to deliver better patient care in a humane, compassionate manner, thereby, resulting in improved patient outcomes.

#### Angela Gardner, MD, FACEP

Professor, University of Texas - Southwestern, Past
President and Member of the Board of Directors of
the American College of Emergency Physicians
(ACEP); Vice Chair, Administrative Affairs, Chief
of Operations, Quality and Patient Safety for the
Department of Emergency Medicine at UT
Southwestern

Observation Medicine is a must have for anyone working in the hospital environment. Dr. Sharon Mace clearly spells out the clinical approach to patients suited for observation and ties in the nonclinical administrative requirements. Physicians are key decision makers determining observation versus inpatient. Observation Medicine unambiguously also illustrates the supporting framework hospital administration needs to have in place for success. With the incredible transition of tradi-Medicare Medicare tional to Managed Organizations and the aging population, Observation Medicine is required reading.

> Tony Joseph, MD, CHCQM-PHYADV Cofounder of the Observation Section of the American College of Emergency Physicians, Current Member of the American College of Physician Advisors Observation Committee

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#### **Advance Praise**

Keep this book in arm's reach if you are operating or standing up an observation unit. Dr. Mace has put together the best amalgamated reference material for observation medicine in existence. Observation medicine is exceedingly difficult to operate in an efficient, compliant, and margin positive manner. This book will protect you from many of the pitfalls that cause observation units to fail while supporting efforts for its success. This is a must read for clinical operations, revenue cycle, utilization and care management, and physician advisors. A re-read for many of us in the business of health care delivery given the multitudes of updates in an ever-changing care environment.

#### B. Justin Krawitt MD

Assistant Professor of Medicine, Dartmouth Geisel School of Medicine; System Medical Director, Utilization & Clinical Documentation, Dartmouth

This is an excellent handbook for everything that is observation. There is no topic relevant to observation medicine that is omitted; whether clinical, administrative, financial, reimbursement, case management, utilization review, or regulations. This encyclopedia with 122 Chapters is the only authoritative source or textbook where "everything observation" is in one place. Bits and pieces of information germane to observation can occasionally be found on the internet or elsewhere but these sources, unfortunately, are usually incomplete, and may not be reliable.

The clinical protocols, administrative policies, and order sets are practical and can be used as is or easily adopted to fit any observation unit. Having worked in various countries throughout the world as a physician assistant, the international section demonstrates the usefulness of this manual, not only for the United States, but in nations on every continent. Advance practice providers, whether nurse practitioners or physician assistants, are providing care and administrative functions in observation units and there is a Chapter solely dedicated to their role in observation medicine.

This textbook explains how observation can be used to deal with complex healthcare and societal issues, while providing best practices and realizing optimal outcomes for patients. How to utilize observation medicine to address complex issues such as the social determinants of health from

homelessness to interpersonal violence, substance abuse, and mental health issues including psychiatric observation is described. This manual outlines how to successfully expand observation medicine to include the geriatric patient, hospice, and skilled nursing placement, and even to patients during a pandemic or disaster. The value of observation can be applied to any type of hospital, whether academic or community, and even the rural or critical access hospital is discussed. This compendium demonstrates how technology from ultrasound to telemedicine can be used to expand and advance observation medicine while providing better patient care and gives a view of the future.

#### Jereme Mellenthin, MPAS, PA-C

Assistant Professor, Physician Assistant Program,
Case Western Reserve University School of
Medicine. Prior lecturer at Lake Erie College and
prior instructor at Physician Associate Program,
University of Hertfordshire, UK. Former Foreign
Service Medical Provider for the US Department of
State at US embassies in Moldova and
Turkmenistan. Returned Peace Corps Volunteer in
Ukraine. 21 years of experience as a physician assis-

tant in many different clinical settings: rural, subur-

ban, urban in the United States, and internationally

From my experience as an registered nurse (RN) in the emergency department and the observation unit for 37 years, this textbook is a very useful reference for anyone working in the observation unit. This textbook is more than a collection of protocols, procedures, and order sets, which alone would make this a must have for any observation unit. This is an authoritative reference work where you can find an answer to all your questions on observation medicine: ranging from nursing, to case management, utilization review, regulations, and guidelines and even to the business and administrative aspects of observation medicine.

This is a valuable trustworthy source document for anyone involved in clinical, administrative, business or regulatory aspects of observation medicine. There is nowhere else where such factual, important, trusted information can be easily found and relied upon. This second edition is expanded from the first edition and has 122 Chapters and 72 authors covering every aspect of observation. It also includes the collective wisdom and experience gained from nearly three decades of observation medicine at the Cleveland Clinic, which to my



**Advance Praise** 

knowledge may be the longest or oldest continuously in operation observation unit in the United States and worldwide. It is a credit to Dr. Mace, with her almost 30 years of clinical and administrative experience at the Cleveland Clinic serving as the first and continuing director (and now director emeritus) of the observation unit at the Cleveland Clinic. This textbook will be invaluable to all those involved in an observation unit or observation medicine; whether as a nurse, nurse practitioner, physician assistant, physician, coder, case manager, reimbursement specialist, business operations or financial personnel, and compliance or regulatory officer.

#### Constance Pytel, BSN RN

RN Emergency Department, BSN Ursuline College, Staff RN, Magnet and Shared Governance Council, Cleveland Clinic

Working in the emergency department and observation unit daily as a clinician and associate residency director, this compendium of knowledge about observation medicine is a practical, easy to use, guide to anything and everything about observation medicine. Why reinvent the wheel? The protocols and order sets can be used or modified for any given observation unit or institution, whether a critical access hospital, community hospital, academic teaching, tertiary, or quaternary hospital in any location or setting from rural, suburban, or urban throughout the United States and even internationally. Everything is here is one place, easily referenced and accessed.

I find the sections on education of students, residents, and fellows particularly valuable as a physician involved in medical education. Any program director can use the textbook to provide materials for teaching, especially since observation medicine is part of the core curriculum for emergency medicine and hospital medicine programs and residencies. Many of the graduates of our residency program, have been able to use the information assembled in this textbook to go out and start and work in their own observation units. The section on education and new developments, which includes such topics as ultrasound and telemedicine, is relevant to the changes and advances occurring in medical practice.

As detailed in the specific textbook Chapters, the use of "geriatric" observation for elderly patients presenting to the emergency department, in our experience, which has avoided inpatient admissions while providing needed services, has been very successful. The same can be said for pediatric patients. The use of observation for dealing with those affected by the social determinants of health, ranging from homelessness, poverty, interpersonal violence, and food insecurity, etc. or social medicine such as the initial management of those with alcohol or drug use disorders, hospice patients, and psychiatric disorders represents the cutting edge of medicine and has the potential for positively impacting healthcare and more importantly for achieving better outcomes for our patients. This textbook will prove to be an extremely valuable asset and reference for anyone involved in observation medicine and/or involved in the teaching of residents, fellows, students, nurses and allied health professionals.

#### John Queen, MD, FACEP

Assistant Professor of Medicine Cleveland Clinic Lerner College of Medicine at Case Western Reserve University, Associate Residency Program Director Case Western Reserve University/ MetroHealth Medical Center/Cleveland Clinic Foundation Emergency Medicine Residency, Past President of the Ohio Chapter of the American College of Physicians

Observation Medicine: Principles and Protocols, 2nd edition, is a publication that should be in every practicing provider's collection. The thorough yet succinct review of the common complaints and issues that will be encountered is an invaluable resource. Much like her numerous prior publications, Dr. Mace's decades of experience is highlighted throughout the book as she has created one of the most useful references available. Whether you are just opening an observation unit or have had one for many years, this book should be your go-to reference.

#### Annalise Sorrentino MD, FAAP, FACEP

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This edition of Dr. Mace's text provides a much needed and highly relevant update on the rapidly



#### **Advance Praise**

growing and evolving area of emergency department and hospital observation medicine. It is a necessity for those involved in initiating and maintaining an observation unit and managing critical issues such as staffing, cost, quality, patient satisfaction, best practice pathways and protocols, regulations, and risk management. Dr. Mace is a national and international expert in administration, education, research, and observation medicine and has brought together top authorities to compose this outstanding resource. It needs to be in your armamentarium.

#### Jonathan H. Valente, MD, FACEP

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The tectonic transformation in healthcare continues, with a rise in consumer-based value assessments driving care along with a need to "do things differently but well." For those with new or worsened illness or injury, observation is

a key tool after emergency department care to optimize outcomes and enhance value. This approach is best when driven by data and collective experience, things that can be a challenge to have locally. This Observation Medicine text assembles the knowledge and experiences needed, from organization and oversight through symptom-driven approaches and disease-specific care. Rather than searching through many texts or sites, Dr. Mace and her team created an updated version of an accessible, singular source to aid those wanting to start or improve their observation unit and care. Use these Chapters and the insights as you give care to those in need, supported by the wisdom of many who have forged the path to quality and effective delivery.

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She is Director Emeritus of the Clinical Decision Unit (observation unit) at the Cleveland Clinic, which was established in 1994, where she has been able to mentor nurses, advanced practice providers, medical students, residents, and even international fellows in observation medicine. She served as the founding director for the clinical decision unit at the Cleveland Clinic, which, to our knowledge, is the longest continuously in operation observation unit in the world. She was elected Chair of the Section of Observation Medicine of the American College of Emergency Physicians and served on the Observation Medicine Committee for the Society of Hospital Medicine that authored a White Paper on observation medicine.

She is the currently Director of Research for the Emergency Services Institute and Director of the Community Paramedicine Program for the Cleveland Clinic, Cleveland, Ohio. She has lectured nationally and internationally on every continent (except Antarctica) on emergency medicine, especially observation medicine. Dr. Mace has been the recipient of numerous grants and awards including a National Science Foundation Research Fellowship, Academic Residency Science Day Award, National Chapter Project Award, State Emergency Medical Services Council Award for Leadership and Excellence in Emergency Medical Services, the American Association of Women Emergency Physicians Research and Education Award, Who's Who in America and Who's Who in the World. A nationally and internationally recognized expert, she has been most recently honored as the American College of Emergency Physicians Pamela Benson Trailblazer Award in Emergency Medicine.

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processing over 13,000,000 annual encounters. Following completion of his emergency medicine residency, Dr. Granovsky went on to found Greater Washington Emergency Physicians, serving as the Chief Financial Officer. Dr. Granovsky then attained a coding certification, followed by an ED subspecialty certification and ultimately led the Technical Expert Panel that designed the ED subspecialty coding certification exam. For the last 15 years, Dr. Granovsky has served as Director of the American College of Emergency Physicians (ACEP) Reimbursement course. He is the past Chairman of National ACEP's Reimbursement Committee and Coding and Nomenclature Advisory Committee as well as the reimbursement subject matter expert to multiple task forces including telemedicine reimbursement, MIPS Value Pathways, quality measure development, episodes of care, alternative payment models, ACEP's CEDR QCDR, and Out of Network Fair Payment coalition. Dr. Granovsky serves as editor for both ED Coding Alert and the American Academy of Professional Coders (AAPC) CEDC Certification Exam. A nationally recognized expert, Dr. Granovsky has been honored with numerous awards including ACEP Speaker of the Year as well as the Judith E. Tintinalli Lifetime Award for Outstanding Contribution in Education. He is Section Editor for Section 1, Chapters 1 and 2, Section 6A, Chapters 81 and 82, Section 6B Chapters 83 and 84, Section 6C Chapters 85-88 and Section 6D, Chapters 89 and 90, and the prologue.

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