

CORE MEASURES

ADMISSION TIME-OUT

Does/Could this patient have:

- An AMI, Angina, Chest Pain, or R/O MI?

		Yes	NO
If so, is there an order for:	ASA	<input type="checkbox"/>	<input type="checkbox"/>
	Beta Blocker	<input type="checkbox"/>	<input type="checkbox"/>
	Statin	<input type="checkbox"/>	<input type="checkbox"/>

Remember to provide smoking cessation advice when appropriate

For all "no" answers contact primary MD If a specific reason is not documented

- CHF, Dyspnea, Elevated BNP, Pulmonary Edema, Biventricular device placed

		Yes	NO
If so, is there an order for:	EF Measure (Echo)	<input type="checkbox"/>	<input type="checkbox"/>
	ACE/ARB for EF <40%	<input type="checkbox"/>	<input type="checkbox"/>
	Beta Blocker for <40%	<input type="checkbox"/>	<input type="checkbox"/>

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For all "no" answers contact primary MD If a specific reason is not documented

- Pneumonia (Working diagnosis on admission)

		Yes	NO
If so, is there an order for:	Antibiotics w/in 4 hours	<input type="checkbox"/>	<input type="checkbox"/>
	Blood Cultures Pre-ABX	<input type="checkbox"/>	<input type="checkbox"/>
	Oxygen Assessment (i.e. pulse ox/ABGA)	<input type="checkbox"/>	<input type="checkbox"/>

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For all "no" answers contact primary MD If specific reason is not documented

TRANSFER TIME-OUT

REVIEW ABOVE WHEN PATIENT IS TRANSFERRED UNIT TO UNIT