



### Scenario:

60-year-old male with a PMH of cirrhosis, esophageal varices, hypertension and COPD who presented with hematemesis. He noted he had a black tarry stool x1 and an episode of hematemesis of bright red blood.

**Initial Eval:** P: 94, R: 18, BP: 102/78, O2: 99%. Exam: Pt alert but fatigued. No tenderness on abdominal exam with superficial and deep palpation. Significantly pale with pale conjunctiva. No vomiting, but blood noted around his mouth. **Labs:** Hgb 10 (baseline), K+ 5.7, AST 101, ALT 71, Alk Phos 513. **Chest x-ray:** trace bibasilar atelectasis, no acute cardiopulmonary process.

**ED Course:** He was treated with IV Rocephin, IV Protonix, 1 unit PRBCs, and Zofran. GI consulted with plans for EGD following day.

**Documented Principal Problem:** Hematemesis (possible variceal bleed) and decompensated cirrhosis

### Recommended Workflow

- C** - Consider appropriate care setting
  - Hospitalization
- A** - Ask what the principal diagnosis is?
  - Hematemesis (possible variceal bleed)
- R** - Review INPT guideline first, then OBS
  - INPT criteria: NOT MET -> toggle to OBS
  - OBS criteria: MET
- E** - Enter bed status / level of care order
  - Observation
- D** - Document criteria in medical record

1 **SEARCH**

2 **GUIDELINE**

3 **DOCUMENTATION**

**Gastrointestinal Bleeding (Upper) - OBS,** Active Bleeding, Coagulopathy, Peptic Ulcer, Gastric Outlet Obstruction, Variceal, Symptomatic Anemia, Acute Blood Loss Anemia, Hematemesis ?

off Subsequent review

Observation care is indicated for **1 or more of the following** ([A])([B])(4)(5)(7):

- Vital sign abnormality
- Active bleeding suspected
- Upper GI endoscopy ([A])([B]) indicated prior to discharge to outpatient setting (ie, Glasgow-Blatchford Score greater than 1)
- Suspected variceal bleeding (eg, patient with cirrhosis)
- Coagulopathy (eg, due to liver disease) or medically anticoagulated (ie, concern for short-term development of significant bleeding)
- Symptomatic anemia, as indicated by **1 or more of the following** (8):

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CRITERIA MET

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