



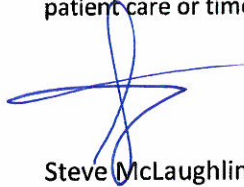
Cardiology Consultation Pathways in the ED

Goal: To clarify pathways for common Cardiology consultations from the Emergency Department.

- 1) Routine admissions – Admission Resident (24/7)
- 2) Routine Inpatient consultations for patients admitted to other services
 - a. Daytime – Consult fellow
 - b. After 5pm – Admission resident
- 3) STEMI – STEMI page-out system
- 4) Consults – daytime - Consult Fellow
- 5) Consults – after 5pm – On-call Fellow
 - a. For questions of an admission versus discharge disposition, call the on-call Cardiology Fellow. If deemed appropriate for admission, then admit to 7 South (or other appropriate service) via the usual pathway. If on-call fellow feels that discharge is the most appropriate disposition then an in person evaluation by the fellow will be the expectation. After the evaluation and prior to patient discharge, the fellow will call to staff these patients with their covering attending. Please use judgment as to the urgency needed between hours of 4am and 7am.
- 6) Echo
 - a. Echo fellow before 5pm
 - b. On-call fellow after 5pm
- 7) EP
 - a. EP midlevel or fellow prior to 5pm
 - b. On-call fellow after 5pm
- 8) ED Observation communications are documented in the Chest Pain Observation guideline for chest pain patients. Requests for consultation on Syncope Obs patients are at the discretion of the admitting ED providers. Routine low-risk syncope obs admissions do not need an after hours phone call but should be placed first thing in the morning.

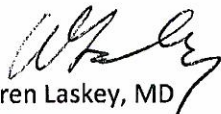
Guidelines:

- 1) Please specify the clinical question
- 2) Specify that the request is for a consult
- 3) Place the order for Cardiology Consult in electronic medical record
- 4) Direct attending-to-attending conversations are encouraged when encountering concerns with the quality of patient care or timeliness of response



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