

InterQual® 2019 Physician Admission Guide

This document identifies key clinical differentiators between the Observation and Acute levels of care for clinical conditions in the Acute Adult Criteria. It is intended to serve as a guide to admitting providers to support documentation and decision making when assigning a level of care.

Conditions	Observation (6hrs ≥ and ≤ 48hrs)	Acute (> 48hrs)
Abdominal pain (non traumatic)	Susp/known infection OR MS changes OR GCS 9-14 OR Hx of abd surg OR vomiting after ≥ 2 antiemetic doses AND imaging AND NPO AND IVF	n/a
Acute Coronary Syndrome (ACS)	Chest pain free/controlled with medication AND SBP ≥ 90 AND troponin negative AND ECG normal/unchanged/LBBB/nondiagnostic	NSTEMI AND troponin positive OR unstable angina AND ischemic/paced ECG
Anaphylaxis/allergic reaction	Airway patent AND hemodynamically stable after epinephrine admin AND ≥ 2 epinephrine doses needed/Hx of biphasic reaction AND antihistamine/corticosteroid	Impending intubation OR mechanical ventilation OR NIPPV OR nebulizer/inhaler q 1-2 hr/continuous
Anemia, unknown etiology	Hct 18-25%/Hb 6.0-8.3 g/dL AND age < 65 OR asymptomatic OR non vit K oral anticoagulant	Hct < 18%/Hb < 6.0 g/dL OR Hct < 25%/Hb < 8.3 g/dL AND age ≥ 65 yrs OR Hct < 30%/Hb < 10.0 g/dL AND dyspnea OR orthostatic HTN OR presyncope OR syncope
Arrhythmia	Afib OR Aflutter AND onset < 48h AND resolved after ibutilide OR sustained after Rx and intervention/anti arrhythmic planned	Abnormal ECG AND syncope OR Afib or Aflutter sustained after Rx OR ICD and repetitive shocks OR supraventricular/wide complex/ventricular tachycardia OR bradycardia/junctional rhythm/AV block requiring intervention OR suspected drug toxicity requiring continuous cardiac monitoring (excludes Holter)
Asthma	Wheezing AND dyspnea OR HR > 100 OR O2 sat < 96% OR PEF/FEV 26-69% OR pulsus paradoxus > 10 mmHg OR use of accessory muscles AND failed OP Rx/failed ED Rx of ≥ 3 short-acting beta-agonist and ipratropium OR ≥ 2 short-acting beta-agonist and ipratropium if pregnant	Impending intubation OR wheezing unresolved after ED Rx AND DM with BS 300 OR pneumonia OR Hx of severe exacerbation/intubation/critical care admission OR pneumonia OR difficulty perceiving severity of asthma OR mental illness OR substance use disorder
Cellulitis	Animal/human bite of face/hand OR DM and BS > 300 mg/dL OR failed OP anti-infective OR peri-orbital OR purpura OR petechiae OR > 10% BSA OR > 50% limb or torso OR systemic symptom/finding	Immunocompromised OR located over a prosthesis/implanted device OR orbital
COPD	Dyspnea AND ≥ 3 doses short-acting beta-agonist AND O2sat 90-91% OR arterial Po2 56-60 mmHg OR Pco2 41-44 mmHg OR work of breathing	Impending intubation OR O2 ≥ 40% OR NIPPV OR mechanical ventilation OR dyspnea AND ≥ 3 doses short-acting beta-agonist AND O2sat ≤ 89% OR arterial Po2 ≤ 55 mmHg and pH > 7.45 OR Pco2 > 45 mmHg and pH < 7.35 OR use of accessory respiratory muscles or paradoxical chest wall movements or working of breathing or risk factor for respiratory failure (e.g., cor pulmonale, cancer, pneumonia, DM, home O2, Class III or IV HF).
Deep vein thrombosis (DVT)	DVT by US AND medication teaching	DVT by US AND bilateral OR creatinine clearance < 30 mL/min OR ptt < 75,000/cu.mm OR susp HIT OR HIT by Hx OR risk for fall OR pregnant OR coagulopathy OR previous VTE OR active cancer OR liver disease OR recent stroke/surgery/trauma OR BMI ≥ 35kg/m2 OR immobilization OR home unsafe OR patient/caregiver unable to manage care.
Dehydration or gastroenteritis	Orthostatic hypotension OR Na > 150 mEq/L OR urine SG > 1.030 OR Cr 1.5-3 mg/dL OR BUN 25-45 mg/dL OR IV fluids OR vomiting after ≥ 2 antiemetic doses OR HR > 100 OR MS changes OR GCS 9-14	Failed Observation Rx AND vomiting OR diarrhea OR inadequate oral intake OR Na > 150 mEq/L AND advancing diet as tolerated OR antiemetic ≥ 3x/24h OR serotonin antagonist ≥ 2x/24h OR IV fluids
Diabetic ketoacidosis (DKA)	n/a	pH ≤ 7.35 AND BS > 250 mg/dL AND ketones positive AND serum HCO3 or CO2 ≤ 18 mEq/L

Conditions	Observation (6hrs ≥ and ≤ 48hrs)	Acute (> 48hrs)
GI bleeding	Hct ≥ 30%/Hb ≥ 10 g/dL AND plt ≥ 60,000/cu.mm	Hemodynamic instability OR Hct < 30%/Hb < 10 g/dL AND plt < 60,000/cu.mm OR plt > 1,000,000/cu.mm OR PT/PTT ≥ 1.5 ULN OR INR > 2 OR HR 100 - 120 OR MS changes OR GCS 9-14 OR orthostatic HTN OR presyncope OR syncope OR non vit K anticoagulant
Heart failure (HF)	Failed OP mgt OR volume overload OR dyspnea after ≥ 1 diuretic dose and O2 sat 89-91% OR MS changes OR GCS 9-14 OR HR 100-120 OR BUN > 1.5x ULN OR Cr > 1.5x ULN OR normal LV function	Impending intubation OR NIPPV OR mechanical ventilation OR ECMO/ECLS OR VAD OR vasoactive/inotrope OR arrhythmia OR dyspnea after ≥ 1 diuretic dose and O2sat < 89% OR dyspnea and stable angina OR CKD OR COPD OR DM OR pneumonia OR mental illness OR substance use disorder OR Na < 130 mEq/L
Hypertension (HTN)	SBP > 180 mmHg/DBP > 120 mmHg AND no evidence of end-organ damage AND history of HF/stroke/TIA/stable angina AND asymptomatic	SBP > 180 mmHg/DBP > 120 mmHg AND acute kidney injury OR HF OR aortic aneurysm OR aortic dissection OR hypertensive encephalopathy OR symptomatic
Hypertensive disorders of pregnancy	Gestation ≥ 20 weeks AND SBP 140 - 159 mmHg/DBP 90 - 109 mmHg AND FHR monitoring AND US assessment	SBP ≥ 160 mmHg/DBP ≥ 110 mmHg and anti HTN Rx OR HELLP OR preeclampsia
Migraine	Failed OP treatment OR incapacitating/intractable OR focal neurological finding AND analgesic/anti-migraine agent ≥ 2x/24h OR dihydroergotamine (DHE) and antiemetic	n/a
Nephrolithiasis (kidney stones)	Renal calculus w/o obstruction by imaging AND analgesic ≥ 2 doses AND IVF	Obstruction by imaging AND nephrostomy planned OR urinary catheterization necessary and Cr > 1.8 mg/Dl
Hypoglycemia	BS < 70 mg/L AND 50% glucose bolus x2 AND monitoring 4x/24h OR caregiver unavailable and ≤ 12h since hypoglycemia corrected	BS < 70 mg/L AND obtundation OR coma OR seizure OR stupor OR GCS ≤ 8
Pneumonia	Confirmed by imaging AND O2 sat 89-91% AND one CURB-65 criterion (confusion or BUN > 19.6 mg/dL or RR ≥ 30/min or age ≥ 65) OR failed outpatient Rx	Impending intubation OR NIPPV OR mechanical ventilation OR ECMO/ECLS OR O2 ≥ 40% OR pneumonia by imaging AND O2 sat < 89% OR arterial Po2 < 56 mmHg OR Pco2 ≥ 45 mmHg and pH ≥ 7.31 OR empyema OR ≥ 2 lobes OR O2 sat 89-91% and Class III/IV COPD/HF/mental illness/substance use disorder OR two CURB-65 criteria (confusion or BUN > 19.6 mg/dL or RR ≥ 30/min or age ≥ 65) OR lung abscess OR susp/known sepsis OR necrotizing OR pregnant and T > 99.4°F
Pulmonary embolism (PE)	PE by imaging AND age ≤ 80 AND HR < 110 AND no cancer AND no chronic lung disease AND no HF AND not pregnant AND O2 sat ≥ 90% AND SBP > 100	Impending intubation OR thrombolysis planned OR O2 ≥ 40% AND O2 sat < 89% OR NIPPV OR mechanical ventilation OR PE by imaging AND abnormal biomarkers OR pregnant OR HIT OR age > 80 OR chronic lung disease OR HR > 110 OR HF/malignancy requiring Rx
Pyelonephritis/UTI	T > normal AND pain AND u/a positive AND failed OP anti-infective OR vomiting/severe pain after Rx	T > normal AND pain AND u/a positive OR MS changes OR GCS 9-14 OR immunocompromised OR age ≥ 75 OR ≥ 24 wks gestation OR urinary stent OR urinary tract obstruction
Stroke	Prior stroke with neurological deficit exacerbation	Acute ischemic OR hemorrhagic stroke
Syncope	During exertion OR palpitations prior OR aortic stenosis OR EF < 35% OR CAD OR MI w/in last 6 mos OR new systolic murmur	Long QT syndrome
TIA	Neurological deficit resolved/resolving AND carotid stenosis OR prior stroke OR suspected embolic source	Neurological deficit resolved/resolving AND aneurysm OR cardiac tumor OR cardiac mass OR crescendo TIA OR endocardial vegetation