



TEXAS
Health and Human
Services

Form V, Appropriate Use Criteria

Hospital Medical staff should have established criteria to ensure that persons being referred to or admitted to the Hospital can have their psychiatric and medical condition treatment needs met. Each prospective patient's case should be reviewed by Hospital medical staff to assess the ability of the Hospital to provide the level of care each patient needs at any given time. Medical staff should apply *appropriate use criteria* as needed on a case-by-case basis, ensuring that persons receiving mental health treatment have the right to appropriate treatment in the least restrictive appropriate setting available. If a forensic patient requires specialized care that is not available at the Hospital or if they have a physical or medical condition that is unstable and could reasonably require inpatient medical treatment for the condition, the Hospital may determine that the patient cannot be admitted or will be admitted and immediately transferred.

Appropriate Use Criteria: Criteria that serves to assess the ability of a hospital to provide the level of care each patient needs at any given time and includes psychiatric and acute and chronic medical conditions criteria, as defined below.

Psychiatric Criteria: Patients under consideration for referral to the Hospital must meet the admission criteria in Texas Code of Criminal Procedure Chapter 46B.

Acute and Chronic Medical Condition Criteria: The presence of any of the medical emergency indicators, acute medical conditions, or chronic medical conditions listed below may represent conditions that the Hospital may or may not have the capability to treat. If the Hospital is unable to provide the appropriate level of care necessary for a person's psychiatric and acute or chronic medical condition, in accordance with EMTALA and state law, the Hospital will provide evaluation and treatment within its capability to stabilize the person and will arrange for the person to be transferred to an acute care or other appropriate hospital that has the capability to treat the condition. These criteria are to be applied on a case by case basis and are not meant to be used solely as exclusion criteria. These criteria are also subject to change based on patient and community need as well as bed availability.

Medical emergency indicators include, but are not limited to:

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- Overdose;
 - Acute intoxication with drugs or alcohol;
 - Chest pain;
 - Unconscious or fluctuating consciousness;
 - Stab wound, bleeding or serious injury;
 - Uncontrolled seizure activity; or
 - Complications from diabetes.

Acute medical conditions include, but are not limited to:

- Delirium, including substance induced syndromes;
- Recent assault or fight, sexual assault, or trauma that has not received medical evaluation, including fractures, lacerations, burns, head trauma, and bleeding;
- Blood pressure greater than 160/110;
- Pulse greater than 120 or less than 50, or any symptomatic bradycardia, in the prior 24 hours;
- Temperature above 101° F;
- White blood count (WBC) greater than 15,000;
- Hemoglobin (HGB) less than 10;
- Hematocrit (HCT) less than 30;
- Any abnormal electrolytes;
- Creatinine phosphokinase (CPK) greater than 1500; or, CPK greater than 1000 with elevated temperature and muscular rigidity;
- Serum glucose below 70 or over 400 during the prior 48 hours;
- Oxygen saturation below 90%;
- Chest pain;
- Shortness of breath;
- Unstable arrhythmia;
- Pulmonary edema;
- Acute congestive heart failure;
- Acute respiratory distress syndrome;
- Acute asthma;
- Acute cardiovascular accident;
- Acute central nervous system (CNS) trauma;
- Gastrointestinal (GI) bleeding during the prior 48 hours;
- Acute abdomen syndrome within the prior 48 hours;
- Requires indwelling tubing such as a nasogastric tube;
- Post-operative instability, demonstrated as any instability in vital signs or laboratory values in the prior 48 hours; or
- Open wounds or wounds requiring complex care or sterile equipment to manage.

Chronic medical conditions, include, but are not limited to patients who:

- Require specialized cancer care, including radiation or chemotherapy;
- Required medical care from a skilled nursing or assisted living facility prior to admission;
- Require care for pressure ulcers;
- Require blood or blood product transfusions;
- Require continuous oxygen, oximetry or support equipment such as CPCP's, Bi-PAPs, O2 concentrators;
- Are being treated for active tuberculosis (TB);
- Require isolation for the purpose of infection control;
- Require on-going intravenous (IV) therapy;
- Have a subclavian line, arterial line, or require hyperalimentation or total parenteral nutrition (TPN);
- Require suctioning;
- Require peritoneal or hemodialysis treatments;
- Require tracheotomy care and have a chronic condition that causes non-ambulation to an extent to preclude the engagement in treatment programming;
- Are considered a high-risk pregnancy;
- Have a multiparous pregnancy;
- Are pregnant and at 38-weeks of gestation or later.