

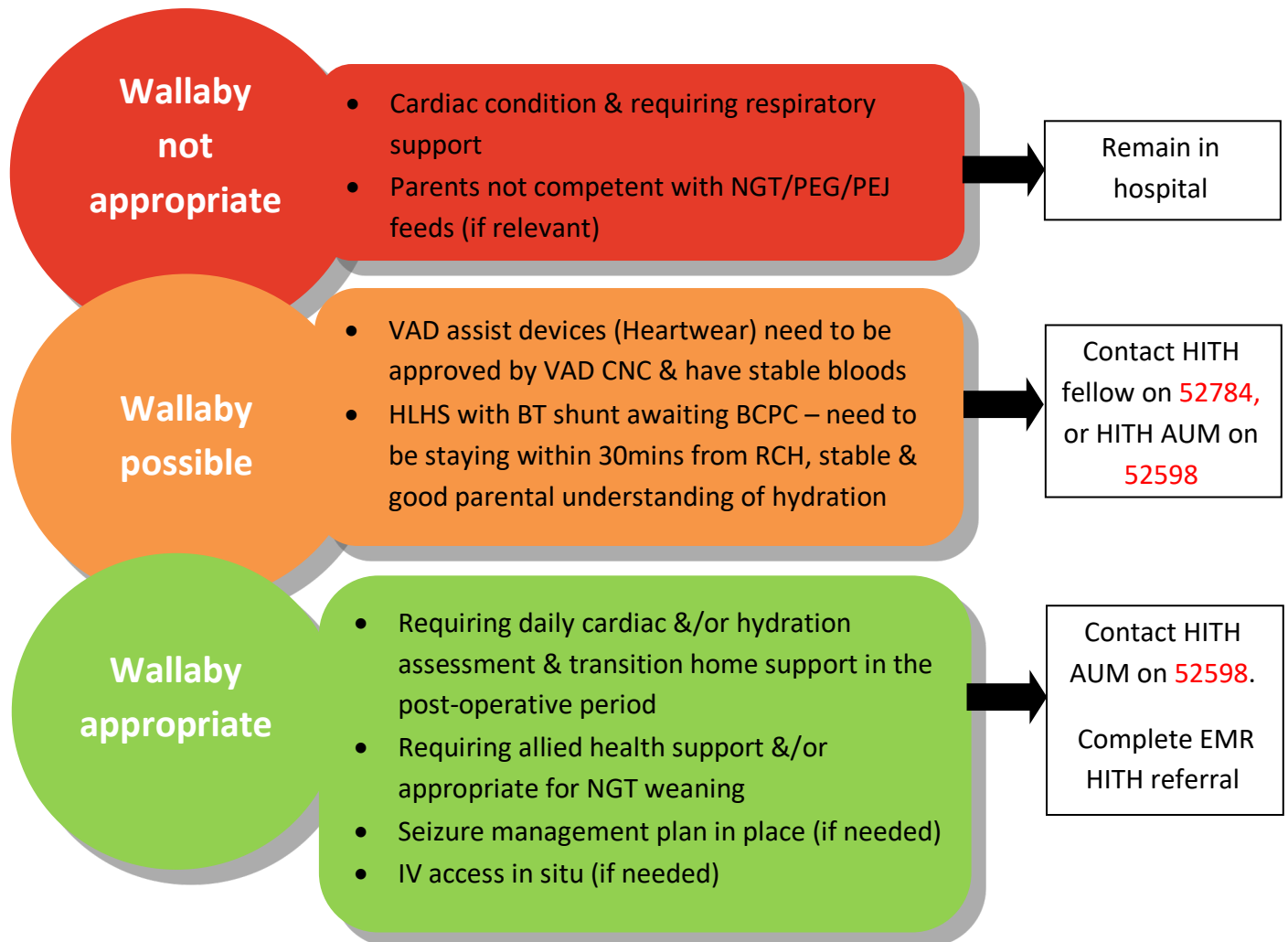


# Cardiac assessment

Children with cardiac conditions requiring ongoing daily cardiac assessment can be managed through Hospital in the Home (HITH). As with any other HITH admission, this requires a safe home environment and consent from caregivers.



## HITH (Wallaby) admission criteria and protocol



### Prior to transfer to Wallaby:

- Referring team to contact HITH AUM to arrange appropriate day for planned admission
- HITH CNC/AUM will contact patient & family after referral accepted
- Referring team to complete HITH order set on EPIC:
  - o Preselected: Adrenaline 1:1000 (1mg/ml) 10mcg/kg IM PRN  
Sodium chloride flush 0.5-2ml IV PRN  
Weak and strong heplocks IV PRN
  - o Referral to HITH via EMR
- Referring team to provide scripts to family for oral medications if required
- Referring team to register family with HEN (if relevant)
- Reportable parameters clearly documented (eg target O2 sats, altered obs)



# HITH protocol – nursing and medical

## Home team medical responsibilities

Prescription for oral medication (if required)

Clearly document, book and communicate plan (including reportable parameters) & follow-up

Overall medical responsibility for patient

## HITH medical team responsibilities

Troubleshoot line concerns

Bi-weekly case conference to review patient progress

## Wallaby care requirements

Daily nursing review including cardiac & hydration assessment

Twice weekly weight unless otherwise specified

Collect pathology as per orders if required

Consider allied health involvement as required

## Red flags for escalation



Clinical deterioration or signs of worsening cardiac failure (increased respiratory effort, increased sweatiness, not tolerating feeds, excessive weight gain) – discuss with home team

## Other potential issues

Concerns re venous access – discuss with HITH medical team

Anaphylaxis – administer IM adrenaline and call ambulance (will need allergy referral)

## Readmission

If clinical deterioration or requiring further intervention

Home team to liaise with bed manager to facilitate ward transfer if stable, or ED AO if unstable

## Discharge plan

Discharge once stable & clinically appropriate

Wallaby ward will arrange line removal if required

Follow up as per home team