

# 2026 Inpatient Status Determination Criteria per DX

<b>ACS</b>	HEART 7-10 <b>or</b> new ECG ischemia <b>or</b> new EF $\leq$ 40% <b>or</b> troponin $\geq$ ULN <b>or</b> NSTEMI <b>or</b> unstable angina <b>AND</b> anticoag <b>or</b> cath.
<b>AKI</b>	Cr $\geq$ 3x baseline <b>or</b> Cr $\geq$ 1.5x <b>&amp;</b> $\geq$ 4 <b>AND</b> IVF; <b>or</b> Cr $\geq$ 2x / GFR $\downarrow$ $\geq$ 50% <b>AND</b> initial HD <b>or</b> diuretic $\geq$ 2x/24h <b>or</b> immunosuppressant.
<b>Arrhythmia (Atrial)</b>	<b>Persistent</b> HR $\geq$ 110 w/ proarrhythmic risk <b>or</b> pacemaker; AF + acute HF NYHA III/IV; SVT; sinus dysfunction; sotalol/dofetilide start.
<b>Asthma</b>	Impending resp failure <b>or</b> status asthmaticus <b>or</b> PaCO <sub>2</sub> $\geq$ 42 <b>or</b> PEF/FEV <sub>1</sub> $<$ 40% <b>AND</b> Heliox <b>or</b> MV/NIPPV <b>or</b> continuous SABA.
<b>Bowel Obst.</b>	Obstruction confirmed by imaging <b>AND</b> NPO <b>or</b> NGT & IV fluid.
<b>Cellulitis</b>	Immunocompromised <b>or</b> over prosthesis/implant/surgical device <b>or</b> orbital cellulitis by imaging <b>AND</b> anti-infective.
<b>COPD</b>	O <sub>2</sub> $\leq$ 89% <b>or</b> PaO <sub>2</sub> $\leq$ 55 <b>or</b> RR $>$ 24 <b>or</b> $\uparrow$ WOB (can't speak full sentences <b>or</b> accessory muscles) post-ED tx <b>AND</b> bronchodilators + steroid; $\pm$ risk factors.
<b>Diverticulitis</b>	Complicated by CT <b>or</b> comorbid (ESLD, immunocompromised, ESRD) <b>or</b> organ dysfunction (2mod/1high risk findings) <b>or</b> LA $>$ ULN <b>AND</b> IV Abx <b>or</b> abscess drainage $\leq$ 24h.
<b>DVT</b>	Extensive DVT <b>&amp;</b> neurovascular checks $\geq$ 6x/24h; splanchnic VT; heparin drip (APLA, bleeding risk, BMI $\geq$ 40, CrCl $\leq$ 30); HIT; IVC filter placement.
<b>GI Bleeding</b>	Hct $<$ 21% / Hb $<$ 7 <b>or</b> INR $\geq$ 2 <b>or</b> AMS <b>or</b> orthostatic hypotension <b>or</b> syncope <b>AND</b> transfusion <b>or</b> endoscopy/colonoscopy.
<b>Heart Failure</b>	<b>New</b> HF w/ sx + BNP $>$ ULN <b>or</b> +CXR <b>AND</b> diuretic <b>or</b> HD; acute-on-chronic w/ persistent dyspnea <b>or</b> O <sub>2</sub> $<$ 90% <b>&amp;</b> inadequate diuresis <b>or</b> risk factors (Cr $\geq$ 1.5, HR 100-120, SBP $<$ 120, Na $<$ 130, BUN $\geq$ 43, Frailty <b>or</b> Mental illness) <b>AND</b> diuretic $\geq$ 2,escal. <b>or</b> change <b>or</b> HD.
<b>HTN</b>	HTN emergency <b>&amp;</b> Cr $\geq$ 3x <b>or</b> micro hematuria/proteinuria <b>or</b> aortic dissection <b>or</b> acute HF <b>or</b> encephalopathy <b>or</b> papilledema <b>or</b> seizure <b>AND</b> continuous anti-HTN <b>or</b> invasive monitoring.
<b>Pancreatitis</b>	Chronic flare w/ refractory pain <b>or</b> protracted vomiting <b>&amp;</b> IVFs; <b>or</b> high risk w/ risk factors (BUN $>$ 20, Hct $\geq$ 44%, AMS, CBD/pancreatic duct stone) <b>AND</b> goal-directed IVF + PCA/analgesic $\geq$ 4x/24h.
<b>PE</b>	Anticoag + HF requiring IV diuretic <b>or</b> O <sub>2</sub> $\leq$ 91%; heparin drip (APLA, bleeding, BMI $\geq$ 40, CrCl $\leq$ 30); HIT; IVC filter placement.
<b>Pneumonia</b>	O <sub>2</sub> $<$ 89% <b>or</b> PaO <sub>2</sub> $<$ 56 <b>or</b> complicated PNA (i.e. $\geq$ 2 lobes) <b>or</b> PSI $\geq$ 91 <b>or</b> $\geq$ 3 CURB-65 <b>or</b> immunocompromised <b>AND</b> IV abx <b>or</b> PO Abx + IVFs <b>or</b> O <sub>2</sub> .
<b>Pyelo/C.UTI</b>	(+) BCX <b>or</b> pregnancy $\geq$ 24wk <b>or</b> H/o stent <b>or</b> urinary obstruction <b>or</b> organ dysfunction <b>&amp;</b> $\geq$ 2 SIRS <b>AND</b> UCx pending + abx + IVF.
<b>Sepsis</b>	(+) BCX <b>or</b> organ dysfunction (Cr $\geq$ 1.5x, AMS, PLT $<$ 150K, TB $\geq$ 1.2, O <sub>2</sub> $\leq$ 91%) <b>or</b> LA $>$ ULN <b>&amp;</b> $\geq$ 2 SIRS <b>AND</b> anti-infective + IVFs.
<b>Stroke</b>	<b>New persistent</b> neuro deficit (movement, speech, gait, AMS, GCS 9-14, paresis, vision) <b>&amp;</b> CT/MRI <b>AND</b> antiplatelet <b>or</b> anticoagulant.

**Questions?** Central UR Department may be reached at  
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