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Ventilator Management Long-Term Acute Care Hospital (LTACH) Guideline

MCG Health General Recovery

Care 27th Edition

GRG: GRG-049 (LTACH GRG)

Print View

Note: An appropriate Optimal Recovery Guideline (ORG) should be identified and used whenever possible. This General Recovery Guideline (GRG) is intended to aid only in situations in which no ORG appears applicable.

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Care Planning - LTACH Admission and Alternatives

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Clinical Indications for Admission to LTACH

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- Admission to LTACH may be indicated by ALL of the following(1)(2)(3)(4):
 - Patient is stable for transfer to LTACH, as indicated by
 - Hechanical ventilation status appropriate for LTACH care, as indicated by
 - Multidisciplinary assessment, ideally including palliative care, is documented and supports expectation that patient will benefit from and improve (eg, be liberated from mechanical ventilation) with LTACH care available at chosen facility (eg, hospice care not more appropriate or preferred).(15)(18)(19)(20)(21)(22)(23)(24)(25)(26)
 - Clinical assessment indicates expectation that patient will require long-term acute care and be in population subgroup that averages a length of stay greater than 25 days at an LTACH (eg, more rapid recovery or ventilator liberation not expected).
 [E](27)(28)
 - 🛨 LTACH more appropriate than other levels of care (eg, skilled nursing facility, home healthcare), as indicated by

Alternatives to Admission

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