

Capacity Coordination Center

- **PICC lines:**
 - *First:* Reach out to appropriate team - PICC team (p26571) or IR (weekdays: p24281; nights/wknds: p38553) *If necessary, escalate to:* Capacity MD (p23556)
- **Provider handoffs:**
 - *First:* Reach out to attending of service if delays in handoff to Responding Clinician
 - *If necessary, escalate to:* Capacity MD (p23556)
- **Nurse handoffs:**
 - *First:* Reach out to the floor Resource RN
 - *If necessary, escalate to:* Nursing Supervisor (weekdays: p28112; nights/wknds: p25205 for general care, p25213 for ICU)
- **Disposition:**
 - *First:* Reach out to floor-based CM, who will escalate to CM Nurse Manager
 - *If necessary, escalate to:* CCC Case Manager (p22635)

Capacity Coordination Center (continued)

- **IR studies and interventions:**
 - *First:* Reach out to IR (weekdays: p24281; nights/wknds: p38553)
 - *If necessary, escalate to:* Capacity MD (p23556)
- **Diagnostic Radiology:**
 - *First:* Reach out to Emergency Radiology at 617-726-3050 (be prepared to: confirm Epic order is in, MRN/Name/DOB, type of exam)
 - CT – p20016
 - MRI – p29657
 - US – p32358
 - PET/Nuclear Medicine – p34160
 - Nuclear Cardiology – 617-724-3600
 - *If necessary, escalate to:* Radiology Administrator On Call (p22241)
 - *Further escalation to:* Capacity MD (p23556)

Interventional Radiology

- Limiting factor is Anesthesia personnel (130 cases/day)
 - Added a 3rd CRNA in May
- Expanded capacity to do more outpatient procedures in Waltham
- Reduced the outpatient schedule to better accommodate inpatients
- Any RN can beep the scheduling pager (#24281) to find out the most up-to-date status on their patient (keep NPO, feed patient, case postponed, etc.)
 - Caveat, don't repeatedly call; the charge nurse will call back with any status change
- For patients who are waiting for the IR procedure (e.g. G-tube placement), but are otherwise ready for discharge; have the prescriber flag the order as "Pending Discharge" so IR will know and can prioritize the case.