

Acuity Measurement & Assessment of Patients (A-MAP)

GREEN (Self-sufficient):

- 1-3 liters nasal cannula or room air
- patients undergoing diuresis
- alternate level of care
- pending discharge
- minimal assist or ambulatory self-care
- pain control more than 6 hours
- peripheral IV
- oral and subcutaneous medications
- electrolyte repletion
- patients pending 1-2 diagnostic procedures
- basic IV antibiotic administration (1-2 antibiotics)
- hallway patients
- rule out myocardial infarction (two confirmed negative troponin tests)

YELLOW (Baseline resources):

- patients requiring oxygen therapy via nasal cannula at a rate greater than or equal to 4 liters.
- One of the following: nephrostomy, urinary catheter, urostomy, ileostomy, abscess drain, suprapubic catheter, percutaneous endoscopic gastrostomy or jejunostomy tube (PEG/PEJ)
- Patient pending multiple diagnostic procedures (for example, CT, ultrasound, PET, MRI)
- challenging patient behaviors **or** challenging family behaviors
- pain control Q4-Q6 hours
- pain well controlled on patient controlled analgesia (PCA)
- one blood product per shift
- PICC line
- diabetic or heart failure and 1 other acuity measurement
- easily addressed complete care and minimal assist patients
- IV medications Q4-Q6 hours
- heparin infusion
- stable alcohol withdrawal patient
- patients on 1:1 requiring infrequent interventions
- pressure ulcers (Q2 hour repositioning) and standard wound care.

RED (More than baseline resources):

- unstable patient (hypertension, hypotension, trach, venti-mask, nonrebreather mask)
- more than one of the following: nephrostomy, urinary catheter, urostomy, ileostomy, abscess drain, suprapubic catheter, PEG/PEJ **or** complex complete care patients
- challenging patient **and** family behaviors
- actively dying patient
- pain control Q2 or Q3 hours
- uncontrolled pain on PCA
- more than one blood product per shift
- **actively** going through withdrawal
- patients on 1:1 requiring frequent interventions
- complex or frequent IV medications (for example, every 2 or 3 hours, intravenous immunoglobulin therapy)
- dual diagnosis (substance abuse and mental disorder)
- patients actively receiving chemotherapy
- complex wound care
- confused patients at great risk for falls.