

## InterQual® 2021 Pediatric Physician Admission Guide

This document identifies key clinical differentiators between the Observation and Inpatient (Acute, Intermediate, Critical) levels of care for clinical conditions in the Acute Pediatric Criteria. It is intended to serve as a guide to admitting providers to support documentation and decision making when assigning a level of care.

Condition	Observation (6hrs ≥ and ≤ 48hrs)	Acute/Intermediate/Critical
Asthma	Wheezing AND O2 sat < 96% OR PEF or FEV1 26-69% OR HR > 150 (age ≤ 6 yrs)/ > 130 (age > 6 - 12)/ > 120 (age > 12 to < 18) OR increased work of breathing OR pulsus paradoxus > 10 mmHg AND failed OP Rx	Impending intubation OR NIPPV OR mechanical ventilation OR wheezing unresolved after OP mgt AND cyanosis OR MS changes OR O2 sat < 96%/PEF or FEV1 26-69% AND difficulty perceiving air flow obstruction or severity/Hx of critical care admission/intubation/severe exacerbation/systemic corticosteroid use OR O2 sat < 96%/PEF or FEV1 26-39%/tachycardia/increased work of breathing AND medically complex
Bronchiolitis	O2 sat ≥ 90% and < 93% OR difficulty taking PO OR mild retractions OR age ≤ 2 mo and RR 60-70/min OR age > 2 mo and RR 50-60/min OR barrier to discharge	Impending intubation OR NIPPV OR mechanical ventilation OR O2 sat < 90% OR apnea OR cyanosis OR MS changes OR grunting/nasal flaring OR moderate to severe retractions OR age ≤ 2 mo and RR > 70/min or age > 2 mo and RR > 60/min AND respiratory monitoring every 4 hours OR O2 AND inadequate PO intake AND IVF or NG fluid
Constipation	n/a	Failed OP laxative or enemas AND no bowel movement for 7d AND colonic irrigation (excludes enemas) OR polyethylene glycol electrolyte solution
Dehydration or gastroenteritis	Age > 1 to < 18 yrs AND symptomatic OR barrier to discharge AND oral rehydration/antiemetic/serotonin antagonist IVF	Age ≤ 1 yr and symptomatic/listless/lethargic/chloride < 98 mEq/L or >107 mEq/L/bicarb ≤ 17/potassium 2.5-3.2 mEq/L/sodium 146-158 mEq/L AND oral rehydration/antiemetic/serotonin antagonist/potassium repletion/IVF/rehydration via NGT
Diabetic ketoacidosis (DKA)	BS > 200 mg/dL AND ketones positive AND anion gap > 15-18 mEq/L or pH 7.2-7.29 or serum HCO3 or CO2 10-15 mEq/L AND insulin (SC only) AND IVF	BS > 200 mg/dL AND ketones positive AND anion gap >18 mEq/L or pH < 7.2 or serum HCO3 or CO2 <10 mEq/L AND continuous insulin infusion AND IVF
Epilepsy	New onset seizure OR postictal state > 10 mins OR respiratory compromise w/ seizure AND cyanosis/O2 sat < 93% during or after seizure OR known/susp seizure disorder AND ≥ 2 seizures within 24h AND a change from baseline OR change or progression in seizure type OR increase in seizure duration	Status epilepticus OR new onset seizure ≥ 2 w/in 24h and continuous or video EEG monitoring initiated/performed within 24h and anticonvulsants (includes PO) OR pregnant AND seizure/postictal state OR known seizure disorder AND ≥ 2 seizures within 24h and a change from baseline OR change or progression in seizure type OR increase in seizure duration AND continuous or video EEG initiated/performed within 24h or pre-surgical epilepsy evaluation and intracranial electrode monitoring or anticonvulsant discontinued
Failure to thrive	n/a	Suspected abuse/neglect/deprivation OR severe malnutrition AND weight < 70% of predicted weight-for-height or < 60% of predicted weight-for-age OR moderate malnutrition/growth failure AND failed OP therapy AND weight 70-80% of predicted weight-for-height or 60-74% of predicted weight-for-age/failure to gain weight > 4 wks/ growth parameters < 3rd percentile for age/medically complex/transplant candidate/weight loss across 2 major percentiles within ≤ 6 mos

Pneumonia	Pneumonia by imaging AND O2 sat 91-93% OR increased work of breathing (abdominal breathing or dyspnea and decreased vocalization in a preverbal or nonverbal patient/difficulty taking PO/prefers sitting/talks in phrases) OR RR 50–59/min, sustained (age < 3 mos) or 40–49/min, sustained (age 3 to < 18 mos) or 30–39/min, sustained (age 18 mos to < 4 yrs) or 20–29/min, sustained (age 4 to < 18 yrs) AND anti-infective AND O2 OR IVF if inadequate PO intake	Impending intubation OR NIPPV OR mechanical ventilation OR pneumonia by imaging AND hemodynamic instability OR O2 sat < 90% OR age ≤ 6 mos and bacterial pathogen suspected OR empyema OR ≥ 2 lobes OR immunocompromised OR increased work of breathing (accessory muscle use and head bobbing/nasal flaring/retractions) OR dyspnea and hunched over position/talks in words/unable to take PO OR RR ≥ 60/min (age < 3 mos) or RR ≥ 50/min (age 3 to < 18 mos) or RR ≥ 40/min (age 18 mos to < 4 yrs) or RR ≥ 30/min (age 4 to < 18 yrs) OR lung abscess OR pleural effusion OR virulent pathogen OR urine + for legionella OR medically complex OR mental status change
Seizure (febrile)	Prolonged postictal period AND neurologic assessment at least 6x/24h AND seizure precautions	n/a
Sickle cell disease	Failed OP analgesia AND acute pain requiring IVF AND IV analgesics 2-3 doses/24h; Infection AND temperature 100.4-101.2 AND anti-infective	Acute pain requiring IVF AND continuous OR IV analgesics ≥ 4x/24h; Acute chest syndrome and anti-infective; Aplastic crisis requiring IVF OR transfusion and lab monitoring 2x/24h; Splenic sequestration AND IVF or transfusion; Temperature ≥ 101.3 AND anti-infective
Sepsis	Infection suspected AND age 29d to < 3 mos AND previously healthy AND temp elevated AND non-toxic appearing AND WBC > 5000 and < 15,000/cu.mm AND bands ≤ 10% AND u/a negative/< 10 WBC/mm3 AND inadequate oral intake/follow up care unreliable AND culture pending AND anti-infective/IVF	Impending intubation OR NIPPV OR mechanical ventilation OR ECMO/ECLS OR organ dysfunction OR SIRS OR infection suspected AND age 29d to < 3 mos AND temp > 100.4/< 96.8 AND born < 37 wks gestation/received perinatal anti-infective/congenital abnormality/toxic appearing/WBC ≤ 5000 or ≥ 15,000/bands > 10 OR infection suspected AND age ≥ 3 mos AND diagnostic testing negative for source of infection AND 2 of the following (temp elevated/HR elevated for age/MS changes/neutropenia/O2 ≤ 93%/protracted vomiting/WBC elevated or decreased for age) AND age < 12 mos/anorexia/indwelling venous catheter/chronic ventilator/immunocompromised/malignancy requiring active treatment/medically complex