



Inpatient Admit Criteria

- Development of unstable vital signs or concerning exam
- Abnormal TTE, if performed, or recommendation for TEE (Ex. embolic source, wall motion abnormality)
- New or sustained dysrhythmia on telemetry

Inclusion criteria:

- Stable vital signs
- Patient does not meet significant exclusion criteria CDU

Exclusion criteria:

- Unstable vital signs: SBP <90, HR >120 or <50, RR>24, O2 Sat <91%RA
- Significant injury associated with syncope (ICH, fracture, etc.)
- Concern for active ACS or ADHF (elevated BNP, single hsTn ≥ 70 (Female) or ≥ 100 (Male) **OR** with delta hsTn ≥ 15 if initial troponin is >3
- End stage renal disease/dialysis dependent
- History of moderate/severe valvular disease, ventricular arrhythmias
- Abnormal Neurologic exam
- Hgb < 8 or > 2 grams below baseline
- Cardiac device with dysfunction
- Known etiologies to include intoxication/overdose, seizure, trauma, or AMS
- New EKG abnormalities:
 - Any ST changes concerning for ischemia
 - Prolonged QTc
 - Prolonged bradycardia < 60
 - Conduction blocks to include LBBB, any new bifasicular block, any trifasicular block, second/third degree block
- If TTE is needed, cannot enter protocol between Friday from 1600 to Sunday at 1600

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