

Recommended Auto Texts for use with Critical Care (critical care statement must include minutes of critical care time, the critical condition and the critical care treatment(s)):

Attending Only:

I have personally spent _____ minutes of critical care time, exclusive of time spent on any procedures, in evaluation and management of this critically ill patient's condition of _____. I provided the following critical care treatment _____.

Attending with Resident Involvement:

I personally saw and examined the patient with the Resident on the above date and agree with the Resident's above note and plan. I personally spent _____ minutes of critical care time, exclusive of time spent on any procedures, in evaluation and management of this critically ill patient's condition of _____. I provided the following critical care treatment _____.

Attending with Non-Physician Provider (NPP) Involvement – *the physician's note must stand alone to support critical care services in terms of critical care time spent solely by the physician, critical condition of the patient and critical care treatment provided by the physician:*

I have personally spent _____ minutes of critical care time, exclusive of time spent on any procedures, in evaluation and management of this critically ill patient's condition of _____. I provided the following critical care treatment _____.

The following table provides a sample list* of conditions which qualify as a *Critical Condition if receiving the related Critical Care Treatment:**

*other conditions may qualify as "critical conditions" then listed below.

Condition	Critical Care Treatment	Non - Critical Care Treatment
Acute kidney failure	Fluid resuscitation (bolus)	Routine hemodialysis for patient with CKD
Acute lung injury	High-risk medication monitoring Mechanical ventilation (CPAP, BiPap, ETT) CPR	Post-op ventilation that is being weaned
Acute respiratory distress	High-risk medication monitoring Mechanical ventilation (CPAP, BiPap, ETT) CPR	Post-op ventilation that is being weaned
Acute respiratory failure	High-risk medication monitoring Mechanical ventilation (CPAP, BiPap, ETT) CPR	Post-op ventilation that is being weaned
AFIB	High-risk medication to regulate heart rate Cardioversion Fluid resuscitation (bolus)	Routine Coumadin PRN medication

AMS	High-risk medication Mechanical ventilation (CPAP, BiPap, ETT)	Routine neuro checks Post-op management with no complications Oral prescriptions
Aphasia	High-risk medication	Routine neuro checks Post-op management with no complications Oral prescriptions
Asthma exacerbation (severe)	High-risk medication monitoring Mechanical ventilation (CPAP, BiPap, ETT)	Routine vital sign checks for critically ill patient Oral prescriptions/inhalers
CABG ICU management	N/A If complication arises, see list.	Routine vital sign checks for critically ill patient Post-op management with no complications Oral prescriptions
Cardiac arrest	High-risk medication monitoring Pressors Mechanical ventilation (CPAP, BiPap, ETT) CPR	Routine monitoring after a patient has crashed (i.e. day before) and is now stable Oral prescriptions
Cardiogenic shock without mention of trauma	High-risk medication monitoring Pressors Mechanical ventilation (CPAP, BiPap, ETT)	Routine vital sign checks for critically ill patient Oral prescriptions
Circulatory failure	High-risk medication monitoring	Routine vital sign checks for critically ill patient
COPD exacerbation (severe)	High-risk medication monitoring Mechanical ventilation (CPAP, BiPap, ETT)	Routine vital sign checks for critically ill patient Oral prescriptions/inhalers
CVA/stroke	tPA started by billing physician High-risk medication	tPA monitoring that was started by ER physician Post-op management with no complications Oral prescriptions
Delirium	High-risk medication	Routine neuro checks Post-op management with no complications Oral prescriptions
Gunshot wound to the chest	High-risk medication monitoring Mechanical ventilation (CPAP, BiPap, ETT)	Routine vital sign checks for critically ill patient Post-op management with no complications Oral prescriptions

Gunshot wound to the head	High-risk medication ICP (intracerebral pressure) monitoring Mechanical ventilation (CPAP, BiPap, ETT)	Routine neuro checks Post-op management with no complications Oral prescriptions
Heart failure (acute)	High-risk medication monitoring	Management of chronic heart failure that is stable PRN medication Oral prescriptions
Heart transplant post-op management	N/A If complication arises, see above list.	Routine vital sign checks for critically ill patient Post-op management with no complications Oral prescriptions
Heart valve surgery ICU management	N/A If complication arises, see above list.	Routine vital sign checks for critically ill patient Post-op management with no complications Oral prescriptions
Hepatic encephalopathy in chronic liver disease (i.e. liver failure)	High-risk medication Fluid resuscitation (Bolus)	Routine neuro checks Post-op management with no complications Oral prescriptions
Hydrocephalus	ICP (intracranial pressure) and CCP (cerebral perfusion pressure) targeted therapy	Routine neuro checks Post-op management with no complications Oral prescriptions
Hypertensive encephalopathy (i.e. malignant HTN)	High-risk medication Fluid resuscitation (Bolus)	Routine neuro checks Post-op management with no complications Oral prescriptions
Hypovolemic or Septic Shock	High-risk medication Blood/plasma transfusion	Routine neuro checks Post-op management with no complications Oral prescriptions
Loss of consciousness	High-risk medication Mechanical ventilation (CPAP, BiPap, ETT)	Routine neuro checks Post-op management with no complications Oral prescriptions
Malaria	High-risk medication	Routine neuro checks Post-op management with no complications Oral prescriptions
Metabolic encephalopathy (i.e. diabetic ketoacidosis)	High-risk medication Administration of IV electrolytes	Routine neuro checks Post-op management with no complications Oral prescriptions

Neonatal apnea	High risk medication monitoring Mechanical ventilation (CPAP, BiPap, ETT)	Routine vital sign checks for critically ill patient IV drugs with additives (not high-risk IV drug)
Post-of Shunt Insertion	N/A If complication arises, see above list.	Routine neuro checks Post-op management with no complications Oral prescriptions
Post-op anemia	Blood transfusion	Routine hemoglobin checks Oral prescriptions
Post-op Brain mass or lesion removal	N/A If complication arises, see above list.	Routine neuro checks Post-op management with no complications Oral prescriptions
Post-op Craniectomy	N/A If complication arises, see above list.	Routine neuro checks Post-op management with no complications Oral prescriptions
Pulmonary embolism	High-risk medication	Routine vital sign checks for critically ill patient Oral prescriptions
Pulmonary fibrosis	High risk medication monitoring Mechanical ventilation (CPAP, BiPap, ETT)	Routine vital sign checks for critically ill patient Oral prescriptions
Pulmonary HTN	Pressors High-risk medication Fluid bolus	Routine vital sign checks for critically ill patient Oral prescriptions
Respiratory arrest	High-risk medication monitoring Mechanical ventilation (CPAP, BiPap, ETT) CPR	Being weaned from mechanical ventilation Breathing treatment
Ruptured brain aneurysm	High-risk medication ICP (intracerebral pressure) monitoring Mechanical ventilation (CPAP, BiPap, ETT) Blood transfusion	Routine neuro checks Post-op management with no complications Oral prescriptions
Sarcoidosis	High-risk medication monitoring Mechanical ventilation (CPAP, BiPap, ETT)	Routine vital sign checks for critically ill patient Oral prescriptions
Seizures	High-risk medication Mechanical ventilation (CPAP, BiPap, ETT) + High-risk medication Fluid resuscitation (Bolus)	Routine neuro checks Continuous EEG monitoring Diagnostic imaging Post-op management with no complications Oral prescriptions

Septic encephalopathy (sequel to severe sepsis w/ neuro damage)	High-risk medication Fluid resuscitation (Bolus)	Routine neuro checks Post-op management with no complications Oral prescriptions
Severe carotid, basilar, vertebral artery stenosis	High-risk medication	Routine neuro checks Post-op management with no complications Oral prescriptions
Severe confusion	High-risk medication	Routine neuro checks Post-op management with no complications Oral prescriptions
Severe lethargy	High-risk medication Fluid resuscitation (Bolus)	Routine neuro checks Post-op management with no complications Oral prescriptions
Stupor (incomplete arousal to painful stimuli, little or no response to verbal commands)	High-risk medication Fluid resuscitation (Bolus)	Routine neuro checks Post-op management with no complications Oral prescriptions
Subarachnoid hemorrhage	High-risk medication ICP (intracerebral pressure) monitoring Mechanical ventilation (CPAP, BiPap, ETT) Blood transfusion	Routine neuro checks Post-op management with no complications Oral prescriptions
Subdural hematoma	High-risk medication ICP (intracerebral pressure) monitoring Mechanical ventilation (CPAP, BiPap, ETT) Blood transfusion	Routine neuro checks Post-op management with no complications Oral prescriptions
Sudden loss of vision	High-risk medication	Routine neuro checks Post-op management with no complications Oral prescriptions
Tachycardia	High-risk medication to regulate heart rate Cardioversion Defibrillation	Routine vital sign checks for critically ill patient Continuous EKG monitoring PRN medication
Traumatic brain injury	High-risk medication ICP (intracerebral pressure) monitoring	Routine neuro checks Post-op management with no complications Oral prescriptions

Unresponsiveness	High-risk medication Fluid resuscitation (Bolus)	Routine neuro checks Post-op management with no complications Oral prescriptions
VFIB	High-risk medication to regulate heart rate Cardioversion Defibrillation	Routine vital sign checks for critically ill patient Continuous EKG monitoring PRN medication
Weakness	High-risk medication Fluid resuscitation (Bolus)	Routine neuro checks Post-op management with no complications Oral prescriptions NG tube

Sample List of Critical Care High Risk Drugs:
Tissue plasminogen activator (tPA)
Amiodarone
Anti-arrhythmics
Caffeine
Diltiazem
Dexamethasone IV
Epinephrine, Atropine, Sodium Bicarbonate
Fluid administration to prevent shock
Heparin drip
IV glucose
IV hydration (i.e. for stuporous patient)
Levetiracetam
Furosemide
Midazolam 0.2 mg/kg load then 0.05-2 mg/kg/hr
Naloxone
Nimodipine orally
NTG drip
Phenobarbital 20 mg/kg – 50 mg/min
Phenytoin IV
Pressors
Propofol 3-5 mg/kg load then 1-15 mg/kg/hr
Theophylline
Thrombolytics

Sample List of Procedures Bundled in Critical Care High (included in critical care time and cannot be billed separately):
Interpretation of cardiac output measurements
Chest x rays (professional components)
Blood gases
ECGs
Blood pressures
Hematologic data
Gastric intubation
Pulse oximetry
Temporary transcutaneous pacing
Ventilator management
Vascular access procedures, i.e., intravenous vascular introduction and injection; venipuncture; collection of venous blood by venipuncture; collection of blood from completely implantable; venous access device