All Adult Neurosurgery Admissions 24/7

**START**

- **Neurosurgical Hospitalist Team**
- **Critical Care?**
  - NO: **Discharge**
  - YES: **NSICU Team**

- **Trauma?**
  - NO: **To Floor**
  - YES: **Trauma Team**

**NSICU**

- **Critical Care?**
  - NO: **To Floor**
  - YES: **NSICU**

**Trauma Team**

- **24+ hrs, Isolated TBI?**
  - YES: **Neurosurgical Hospitalist Team**
  - NO: **Remain on Trauma Team**

**Remain on Trauma Team**

- **Discharge**

**NSICU**

- **Discharge**

**END**

*All appropriate patients will be consulted on by Neurosurgery Consult Team*
*TBI = Traumatic Brain Injury*

Version 8: 12/18/19
**Neurotrauma Admission Plan**
**Critical Care**

- **Unit**
  - Needs Critical Care
  - **Major Resuscitation +/- Neuro-monitoring**
    - YES: TSICU Unit
    - NO: Neuro-monitoring
      - NO: NSICU Unit
      - YES: Go to Floor Algorithm

*Note:* Please continue to have collegial attending to attending discussions based on what is the best care for individual patients. These algorithms are a guide.

*Escalation:* For issues that cannot be resolved after attending to attending discussions, please call Dr. Agostini or Dr. Rankin (listed on Amion or PALS).

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- **Service**
  - Needs Critical Care
  - Trauma Critical Care Service
    - Polytrauma
      - 24 Hrs
        - NO (most trauma issues resolved): To Floor
        - YES: Trauma Critical Care Service
  - Transfer to Neuro Critical Care Service
  - Go to Floor Algorithm

*Version 2: 12/18/19*