



MyNursePal Inc

Module 2 US Healthcare Settings

Understanding Acute Care Operations

Sylvia Abbeyquaye Ph.D. MPA RN



Module Description

This module provides an overview of **acute care settings** in the U.S. healthcare system, detailing workflows, roles, and patient transitions for effective care delivery.

Learning Objectives

01

Define Acute Care

Define acute care and describe the purpose, characteristics, and goals of this setting.

02

Identify Key Roles

Identify the key clinical and non-clinical roles that work in acute care and understand their responsibilities.

03

Explain Acute Care Nomenclature

Explain hospital nomenclature conventions and why naming standards differ across facilities.

What Is Acute Care?

Acute care is short-term, high-intensity medical treatment provided in hospitals for sudden illnesses, injuries, surgeries, or urgent conditions.

The people receiving care in this setting are always called patients.

The goal is to stabilize, diagnose, treat, and then discharge the patient to the next appropriate level of care, such as home, rehab, long-term care, or home health.



Characteristics of Acute Care

Exploring the essential aspects of acute care

Immediate Needs

Patients require prompt evaluation and treatment interventions.

Complex Conditions

Care often involves multifaceted health issues and diagnoses.

Team-Based Approach

Collaboration among diverse healthcare professionals is essential.

Time-Sensitive Decisions

Quick, informed choices are critical for patient outcomes.

Who Works in Acute Care? (1/2)

- **Physicians:** Provide assessments, administer medications, coordinate care, monitor changes, and respond to urgent needs.
- **Registered Nurses (RNs):** Provide assessments, administer medications, coordinate care, monitor changes, and respond to urgent needs.
- **Licensed Practical/Vocational Nurses (LPNs/LVNs):** Deliver routine bedside care and clinical support under an RN's supervision.

Who Works in Acute Care? (2/3)

- **Patient Care Assistants / Patient Care Technicians (PCAs)/PCTs:**
Hospitals often use PCAs/PCTs instead of CNAs because these roles include CNA skills plus additional hospital-specific duties, such as:
 - Taking vital signs
 - Collecting specimens
 - Checking blood glucose levels
 - Assisting with EKG monitoring (in some hospitals)
- Note: Some hospitals hire CNAs directly, but most use the hospital title PCA or PCT, reflecting a broader scope of tasks required in acute care.
- vitals, v

Who Works in Acute Care? (3/3)

Technicians (Lab Techs, EKG Techs, Radiology Techs): Perform diagnostic tests, imaging studies, and other technical procedures.

Respiratory Therapists: Manage oxygen therapy, ventilators, breathing treatments, and airway support.

Therapists (Physical, Occupational, Speech): Support recovery, mobility, swallowing, and communication during the hospital stay.

Case Managers & Social Workers: Plan safe discharge, coordinate follow-up services, and help patients transition to the next level of care.

What Happens After Acute Care?



Once stabilized, patients are discharged to the setting that best matches their ongoing needs:

- Home
- Home Health (skilled nursing at home)
- Rehabilitation Facility
- Skilled Nursing / Long-Term Care
- HCBS or community supports

Acute care is typically the first step in the patient's recovery journey following a sudden illness, surgery, or medical event.

Hospital Sub-Settings (1/2)

- Hospitals (Inpatient Units): Med/Surg, telemetry, specialty units.
- Emergency Departments (EDs): urgent, high-acuity entry point.
- Intensive Care Units (ICUs): critical care monitoring.
- PCUs: intermediate care, telemetry.

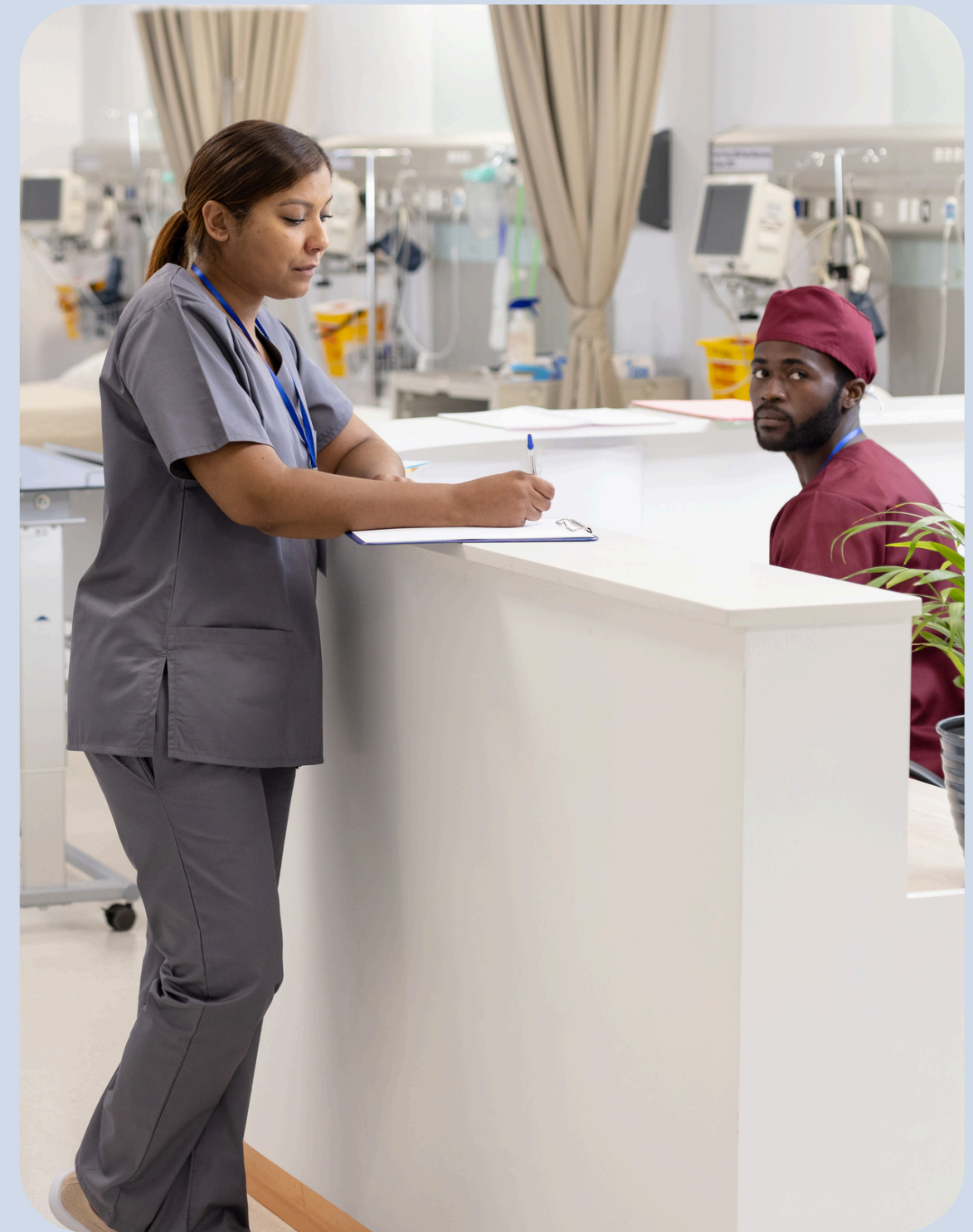
Hospital Sub-Settings (2/2)

- Operating Rooms (ORs)
- PACUs
- Labor & Delivery
- NICUs
- Ambulatory Surgical Centers
- Urgent Care Clinics
- Outpatient Clinics
- Imaging & Diagnostics
- Behavioral Health Units
- Acute Rehab Units

Sub-settings	Description
Hospitals (Inpatient Units)	Patients stay overnight or longer for major illnesses, surgeries, monitoring, and recovery. These include Med/Surg floors, telemetry units, specialty units (Oncology, Cardiac), and surgical recovery units.
Emergency Departments (EDs)	The first stop for urgent or life-threatening conditions. Patients may receive immediate treatment, be stabilized, and then either discharged or admitted to an inpatient unit. Fast-paced, high-acuity environment.
Intensive Care Units (ICUs)	Highly specialized units providing continuous monitoring and life-support for critically ill or unstable patients. Examples include Medical ICU, Surgical ICU, Neuro ICU, and Cardiac ICU.
Step-Down / Progressive Care Units (PCUs)	Intermediate units for patients who are too sick for regular med/surg floors but not critical enough for ICU. Often called Progressive Care or Telemetry units.
Operating Rooms (ORs)	Surgical suites where procedures requiring anesthesia take place. Teams include surgeons, anesthesiologists, RNs, surgical techs, and OR support staff.
Post-Anesthesia Care Units (PACUs)	Recovery area where patients are monitored closely after surgery until they wake from anesthesia and are stable enough for transfer.
Labor & Delivery (L&D)	Units specializing in childbirth, prenatal complications, and postpartum care for mothers and newborns. Includes triage, delivery rooms, and postpartum units.
Neonatal Intensive Care Units (NICUs)	Specialized units for premature or medically fragile newborns needing continuous monitoring and support.
Surgical Centers (Ambulatory Surgery Centers)	Facilities for planned or same-day surgeries that do not require an overnight hospital stay. Patients go home the same day.
Urgent Care Clinics	Walk-in clinics for non-life-threatening issues such as minor injuries, infections, or simple procedures. Patients are treated and discharged home.
Outpatient Clinics / Specialty Clinics	Areas where patients receive scheduled, non-urgent care, such as cardiology visits, wound care, oncology treatment, or follow-up appointments.
Imaging & Diagnostic Departments	Hospital areas for MRI, CT scan, X-ray, ultrasound, and labs. Patients may be outpatient or inpatient.
Behavioral Health / Psychiatric Units	Units specializing in mental health crises, medication stabilization, and psychiatric inpatient care.
Rehabilitation Units (Acute Rehab)	Intensive rehab units for patients recovering from major illness or injury (stroke, surgery, trauma). Provide daily PT/OT/SLP services.

Hospital Nomenclature

- No national standard for naming floors or units.
- Naming varies by building layout, campus, specialty, tradition, and EHR system.
- Common formats: 6 North, 3A, North Tower 5, Neuro ICU, Campus South 3.



Nomenclature Examples

- UMass Memorial: South 5 Med/Surg.
- Mass General: Ellison 8, White 9.
- Johns Hopkins: Zayed 7W, Nelson 5.
- Cleveland Clinic: Glickman 3 Urology.
- Community hospitals: 2 South – Medical Floor.

Why Nomenclature Consistency Matters

- Used across scheduling, security, environmental services.
- EHRs store departments using these identifiers.
- Critical for safe communication and workflow alignment.

Developer Considerations

- Allow custom hospital-specific naming.
- Support tagging/mapping (e.g., 6N = 6 North Med/Surg).
- Use flexible hierarchy: Campus → Building → Floor → Wing → Unit → Room → Bed.
- Supports diverse hospital formats and workflows.





Coming Up

Module 3

A DEEPER DELVE INTO
Long-term Care Settings