

HVC Electrophysiology Practice Guideline for Inpatient Use of  
Mobile Cardiac Outpatient Telemetry (MCOT)

4/14/20

Scope: Adult patients in YNHHS in need of telemetry monitoring.

Leadership and Decision Making: HVC System Leadership, collaborating with Inpatient Care Action Team and Technology Action Team.

Clinical Workflow:

The provider can make request for a MCOT (event monitor) by calling the on-site IEM team at (203) 688-3633. The following information will be needed:

1. Location, patient name, medical record number, date of birth and reason for monitoring (arrhythmia or QTC).
2. Requestor's name and call back number.

IEM team advanced practice provider (APP) will place an order for the monitor in Epic.

1. Order will be for inpatient context: 20 York St or 1459 Chapel St.
2. Order will be placed as hospital class.
3. Order will drop to work queue.

IEM team will retrieve order from work queue and initiate implementation workflow.

1. Identify monitor to implement.
2. Initiate and complete patient enrollment on vendor website (Preventice or Medi-Lynx).
3. Pair monitor to patient profile.
4. Print EPIC label x 2 sets.
5. Enter patient information in inventory tracking vendor specific log book.

IEM team will prepare bag of equipment for delivery to the inpatient unit.

1. Place patient sticker on clear plastic bag.
2. Place equipment in clear plastic bag (2 monitors, monitor charging cable, cell phone, cell phone charging cable).
3. Place patient sticker on box. Box should remain in IEM room for tracking and return.
4. Place patient sticker and serial number sticker on log sheet.
5. Place copy of nursing instructions in bag.
6. Place copy of quick start instructions in bag.
7. Place patient information in the patient equipment delivery log.

IEM team will deliver monitor to the inpatient unit.

1. Delivery of equipment happens within an hour of ordering.
2. Hand off of the monitor to the inpatient clinical bedside leader (RN) will occur.
3. Verbal instruction regarding monitor placement will be provided as needed (see Appendices B & C).
4. Once placed on the patient, the monitor will be activated.

IEM team will monitor alerts 24/7 and contact inpatient unit clinical bedside leader with any critical findings (see Appendix A).

1. Alerts will be documented in Epic by IEM team.
2. Relevant rhythm strips will be uploaded to Epic.
3. Electrophysiology on call attending will be contacted per alert grid.

Monitor discontinuation.

1. Monitor should be cleaned per unit policy for telemetry boxes.
2. Monitor should be stored for (daily) pick up by IEM team member.

## HVC Electrophysiology

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