

Patient Details		Day 0-1		Day 2		Day 3		Day 4		Day 5		Day 6	
MRN	Activity / Purpose	Responsible Party	Activity / Purpose	Responsible Party	Activity / Purpose	Responsible Party	Activity / Purpose	Responsible Party	Activity / Purpose	Responsible Party	Activity / Purpose	Responsible Party	Activity / Purpose
<p>Case Plan: Uncontrolled Diabetes (Med/Surg/Holy Jones)</p> <p>Age: 67</p> <p>Female</p> <p>Primary Condition: Uncontrolled Diabetes (Hyperglycemic Crisis Risk)</p> <p>Core Patient Profile</p> <ul style="list-style-type: none"> • Older adult (typically late 60s-80s) with long-standing Type 2 Diabetes • Presents with poor glycemic control (often very high glucose, possible ketosis, dehydration, electrolyte abnormalities) • Not necessarily in ICU-level DKA/HHS, but clinically unstable enough to require inpatient Med/Surg care • Demonstrates knowledge gaps, safety risks, and inconsistent self-management behaviors 	<p>DAY 1 – Initial Assessment, Diagnostics, Safety</p> <p># Activity / Purpose</p> <p>A0 Continuous sitting for safety (falls, impulsivity, line & Sitter)</p> <p>1 Initial assessment (questions): history, precipitant, I, Emma</p> <p>2 Initial assessment (observation): alertness, impulsivity, Virtual Nurse</p> <p>3 Initial assessment (hands-on): head-to-toe, neuro, I, Unit RN</p> <p>4 Assessment confirmation (recalcium Emma + Virtual Nurse)</p> <p>5 Assessment aggregation & risk flags for rounding Otto</p> <p>6 Transition + Laboratory (specimen collection for BM Unit RN)</p> <p>7 Labs processed & result Laboratory</p> <p>8 Transition + Laboratory (results available to unit) Unit RN</p> <p>9 Transition + Radiology (CXR if infection suspected) Unit RN</p> <p>10 Imaging performed Radiology</p> <p>11 Transition + Radiology (results returned) Unit RN</p> <p>12 Rounding prep: assessments + labs + insulin status Otto</p> <p>13 RN bedside rounding (confirm findings, explain plan Unit RN)</p> <p>14 Interdisciplinary rounding (insulin strategy, risks, ed Unit RN)</p> <p>15 Education: why hospitalization is required, immediate Unit RN</p> <p>16 Education personalization (language, literacy, insulin Eddie)</p> <p>17 Education reinforcement & Q&A Emma</p> <p>18 Teach-back: Day 1 understanding Emma</p> <p>19 Teach-back synthesis & gaps summary Otto</p>	<p>DAY 2 – Daily Reassessment, Insulin Transition, Nutrition</p> <p># Activity / Purpose</p> <p>A0 Continuous sitting for safety Sitter</p> <p>20 Daily reassessment (questions): symptoms, insulin understanding Emma</p> <p>21 Daily reassessment (observation): meals, insulin timing, safety Virtual Nurse</p> <p>22 Daily reassessment (hands-on): focused exam, hydration, IVs Unit RN</p> <p>23 Reassessment confirmation vs baseline Unit RN</p> <p>24 Reassessment aggregation & trends Otto</p> <p>25 Transition + Pharmacy (IV+SQ insulin transition review) Unit RN</p> <p>26 Insulin regimen verification & overlap safety check Clinical Pharmacist</p> <p>27 Transition + Pharmacy (verified insulin plan) Unit RN</p> <p>28 Rounding prep: reassessment + insulin transition readiness Otto</p> <p>29 RN bedside rounding (review progress, answer questions) Unit RN</p> <p>30 Interdisciplinary rounding (improve insulin transition timing) Unit RN</p> <p>31 Transition + Nutrition/Dietary (carb-consistent diet coordinator Unit RN)</p> <p>32 Nutrition consult & meal pattern assessment Dietitian</p> <p>33 Transition + Nutrition/Dietary (diet plan confirmed) Unit RN</p> <p>34 Education: insulin regimen, timing, meal coordination Unit RN</p> <p>35 Education personalization (insulin skills) Eddie</p> <p>36 Skills education & demonstration Emma</p> <p>37 Teach-back: insulin administration technique Emma</p> <p>38 RN validation of insulin skill competency Unit RN</p> <p>39 Education & competency synthesis Otto</p>	<p>DAY 3 – Mid-Stay Assessment, Barriers, Discharge Direction</p> <p># Activity / Purpose</p> <p>A0 Continuous sitting for safety Sitter</p> <p>40 Mid-stay assessment (questions): confidence, barriers, Emma</p> <p>41 Mid-stay assessment (observation): independent behavior Virtual Nurse</p> <p>42 Mid-stay assessment (hands-on): injection, meter use Unit RN</p> <p>43 Mid-stay assessment confirmation Unit RN</p> <p>44 Mid-stay synthesis & discharge risk flags Otto</p> <p>45 Predictive LOS & discharge risk review Seer</p> <p>46 Rounding prep: readiness & risk summary Otto</p> <p>47 RN bedside rounding (discuss trajectory with patient) Unit RN</p> <p>48 Interdisciplinary rounding (confirm discharge target) Unit RN</p> <p>49 Transition + Case Management (barriers, access, transport) Unit RN</p> <p>50 Social / access/transition (meds, supplies, follow-up) Case Manager</p> <p>51 Transition + Case Management (barriers resolved / flag Unit RN)</p> <p>52 Education: hypoglycemia, sick-day rules, emergency ac Unit RN</p> <p>53 Safety education personalization Eddie</p> <p>54 Reinforcement & Q&A Emma</p> <p>55 Teach-back: emergency scenarios Emma</p> <p>56 RN review & close education gaps Unit RN</p>	<p>DAY 4 – Discharge Assessment, Transition, Closure</p> <p># Activity / Purpose</p> <p>A0 Continuous sitting for safety Sitter</p> <p>57 Discharge assessment (questions): confidence, concerns Emma</p> <p>58 Discharge assessment (observation): routines, safety Virtual Nurse</p> <p>59 Discharge assessment (hands-on): final physical & skill check Unit RN</p> <p>60 Discharge assessment confirmation Unit RN</p> <p>61 Discharge readiness synthesis Otto</p> <p>62 Prescriptive discharge risk mitigation Seer</p> <p>63 Rounding prep: final readiness summary Otto</p> <p>64 RN bedside rounding (final confirmation) Unit RN</p> <p>65 Interdisciplinary discharge rounding Unit RN</p> <p>66 Transition + Pharmacy (final med reconciliation & supplies) Unit RN</p> <p>67 Medication reconciliation & supply confirmation Clinical Pharmacist</p> <p>68 Transition + Pharmacy (meds ready) Unit RN</p> <p>69 Transition + Case Management (follow-up confirmation) Unit RN</p> <p>70 Schedule PCP/endocrinology follow-up Case Manager</p> <p>71 Transition + Case Management (appointments confirmed) Unit RN</p> <p>72 Final RN discharge education (full plan) Unit RN</p> <p>73 Emma available for final questions Emma</p> <p>74 Final teach-back (full stay) Emma</p> <p>75 Documentation closure & transition-of-care packet Otto</p>									
	<p>S. Thompson</p> <p>Age: 60</p> <p>Male</p> <p>Febrile Neutropenia Inpatient Care Plan</p> <p>Day-Aligned Assessments, Education, Rounding, Transitions Patient Profile</p> <p>Adult oncology patient with Febrile Neutropenia (ANC < 500, fever >38°C), immunocompromised, high sepsis risk, sitter required, LOS ~7-10 days.</p>	<p>DAY 1 – Admission, Sepsis Bundle, Baseline Education</p> <p># Activity / Purpose</p> <p>1 Admission orders: initiate neutropenic precautions Hospitalist</p> <p>2 Initial assessment – question-based (symptoms, chills) Emma</p> <p>3 Initial assessment – observational (appearance, vitals) Virtual Nurse</p> <p>4 Initial assessment – hands-on (head-to-toe, vitals, I) Unit RN</p> <p>5 Confirm & reconcile assessment findings Unit RN</p> <p>6 Blood cultures +2, CBC w/diff, CMP, lactate Unit RN</p> <p>7 Start IV antibiotics within PN time window Unit RN</p> <p>8 IV fluids per sepsis bundle protocol Unit RN</p> <p>9 Central line care & CLABSI bundle Unit RN</p> <p>10 Aggregate labs, vitals, assessments → RN summary Otto</p> <p>11 Continuous sitter monitoring (start) Sitter</p> <p>12 RN bedside rounding (safety, fever, antibiotics) Unit RN</p> <p>13 Interdisciplinary rounding (Oncology / ID / Pharmacist) Unit RN</p> <p>14 Education #1: Febrile neutropenia & fever risk (deliv Unit RN)</p> <p>15 Personalize Education #1 Eddie</p> <p>16 Reinforce Education #1 + Q&A Emma</p> <p>17 Observe engagement/anxiety Virtual Nurse</p> <p>18 Teach-back #1: fever escalation logic Emma</p> <p>19 Validate teach-back #1 Unit RN</p> <p>20 Summarize comprehension gaps Otto</p> <p>21 Predict early deterioration / ICU risk Seer</p>	<p>DAY 2 – Daily Reassessment, Antibiotic Stewardship, Education Loop #2</p> <p># Activity / Purpose</p> <p>22 Daily reassessment – question-based (symptoms, chills, pain) Emma</p> <p>23 Daily reassessment – observational (self-care, safety) Virtual Nurse</p> <p>24 Daily reassessment – hands-on (focused exam, line reassess) Unit RN</p> <p>25 CBC/ANC trend review Unit RN</p> <p>26 Antibiotic efficacy & adverse-effect review Pharmacy</p> <p>27 Trend fever curve & ANC Unit RN</p> <p>28 RN bedside rounding Unit RN</p> <p>29 Interdisciplinary rounding (continue vs de-escalate antibiotics) Unit RN</p> <p>30 Education #2: Infection prevention & masking (delivery) Unit RN</p> <p>31 Personalize Education #2 Eddie</p> <p>32 Reinforce Education #2 + Q&A Emma</p> <p>33 Observe PPE & hygiene adherence Virtual Nurse</p> <p>34 Teach-back #2: infection-prevention behaviors Emma</p> <p>35 Confirm readiness & escalate gaps Unit RN</p> <p>36 Complete adherence signals Otto</p> <p>37 Predict LOS extension risk Seer</p>	<p>DAY 3 – Mid-Stay Assessment, Diagnostics, Education Loop #3</p> <p># Activity / Purpose</p> <p>38 Mid-stay assessment – question-based (energy, concern) Emma</p> <p>39 Mid-stay assessment – observational (self-care, safety) Virtual Nurse</p> <p>40 Mid-stay assessment – hands-on (full reassessment, lin Unit RN)</p> <p>41 ANC recovery review / G-CSF consideration Hospitalist</p> <p>42 Complete mid-stay status & discharge signals Otto</p> <p>43 RN bedside rounding (trajectory discussion) Unit RN</p> <p>44 Interdisciplinary rounding (diagnostic decisions) Unit RN</p> <p>45 Transition: Transport to imaging / biopsy Unit RN</p> <p>46 Imaging / bone marrow biopsy Radiology / Oncology</p> <p>47 Transition: Return to unit & reassessment Unit RN</p> <p>48 Education #3: Neutropenic diet & line safety (delivery) Unit RN</p> <p>49 Personalize Education #3 Eddie</p> <p>50 Reinforce Education #3 + Q&A Emma</p> <p>51 Observe meals & line-care behaviors Virtual Nurse</p> <p>52 Teach-back #3: safe foods & line care Unit RN</p> <p>53 Validate teach-back #3 Unit RN</p> <p>54 Education synthesis for rounding Otto</p> <p>55 Predict discharge readiness timing Seer</p>	<p>DAY 4 – Discharge Preparation, Education Loop #4</p> <p># Activity / Purpose</p> <p>56 Day 4 assessment – question-based (home readiness, supp Emma</p> <p>57 Day 4 assessment – observational (independence, safety) Virtual Nurse</p> <p>58 Day 4 assessment – hands-on (final physical confirmation) Unit RN</p> <p>59 CBC/ANC confirmation Hospitalist</p> <p>60 Flag discharge blockers Otto</p> <p>61 RN bedside rounding (discharge readiness) Unit RN</p> <p>62 Interdisciplinary rounding (target discharge date) Unit RN</p> <p>63 Education #4: Fever thresholds & when to call (delivery) Unit RN</p> <p>64 Personalize Education #4 (discharge packet) Eddie</p> <p>65 Reinforce Education #4 + Q&A Emma</p> <p>66 Observe caregiver engagement Unit RN</p> <p>67 Teach-back #4: escalation & home plan Emma</p> <p>68 Confirm discharge readiness Unit RN</p> <p>69 Complete discharge education packet Otto</p> <p>70 Predict readmission risk Seer</p>	<p>DAY 5 – Discharge & Transition of Care</p> <p># Activity / Purpose</p> <p>71 Discharge assessment – question-based Emma</p> <p>72 Discharge assessment – observational Virtual Nurse</p> <p>73 Discharge assessment – hands-on Unit RN</p> <p>74 Final synthesis & documentation closure Otto</p> <p>75 Schedule oncology follow-up Case Manager</p> <p>76 Transition: Pharmacy bedside delivery Case Manager</p> <p>77 Final RN discharge education Unit RN</p> <p>78 Final full-stay teach-back Emma</p> <p>79 Provider discharge order Hospitalist</p> <p>80 Discharge from unit Unit RN</p>							
		<p>DAY 6 – Final Confirmation & Transition</p> <p># Activity / Purpose</p> <p>81 Final confirmation (question-based): symptom check, confidence Emma</p> <p>82 Final confirmation (observational): readiness behaviors, safe m Virtual Nurse</p> <p>83 Final confirmation (hands-on): final physical assessment Unit RN</p> <p>84 Discharge readiness synthesis Eddie</p> <p>85 Final education review Unit RN</p> <p>86 Optimize format (print/audio/portals) Eddie</p> <p>87 Education delivery Emma</p> <p>88 Emma available for questions Emma</p> <p>89 Final teach-back (full stay) Emma</p> <p>90 Discharge readiness report Otto</p> <p>91 RN sign-off Unit RN</p> <p>92 Post-discharge action prescription Seer</p> <p>93 Medication reconciliation RN / Pharmacy</p> <p>94 Follow-up scheduling Case Manager</p> <p>95 Virtual RN discharge review call Virtual RN</p> <p>96 Final MD sign-off Attending</p> <p>97 Transition-of-care handoff RN / CM</p> <p>98 Documentation closure & data push Otto</p>											
		<p>H. Jackson</p> <p>Age: 78</p> <p>Male</p> <p>COMPREHENSIVE MULTI-DAY CARE PLAN</p> <p>Mild-Moderate Ischemic Stroke Med/Surg Persona B (78 y/o)</p> <p>Assessment: Final + RN-Led + Agent-Augmented</p> <p>Target LOS: 5-6 days</p>	<p>DAY 0-1 – Admission, Baseline, Safety</p> <p># Activity / Purpose</p> <p>1 ED stroke evaluation (CT/CTA, labs, NIHSS) ED RN / ED MD</p> <p>2 Admission decision (ICU vs Med-Surg) Neurology</p> <p>3 ED + Med-Surg RN handoff ED RN + Unit RN</p> <p>4 Baseline assessment (symptoms, home function, c Emma</p> <p>5 Observational assessment (alertness, speech, mov Virtual RN)</p> <p>6 Hands-on admission assessment (head-to-toe + ne Unit RN)</p> <p>7 Assessment reconciliation and confirmation Unit RN</p> <p>8 Assessment aggregation & discrepancy flagging Otto</p> <p>9 Safety setup (bed alarm, fall & aspiration precaution) Unit RN</p> <p>10 Telemetry initiation and vitals protocol Unit RN</p> <p>11 Swallow symptom questions Emma</p> <p>12 Mealtime / voice observation Virtual RN</p> <p>13 Bedside swallow screen Unit RN</p> <p>14 Swallow confirmation & SLP referral (if needed) Unit RN</p> <p>15 Swallow data aggregation Otto</p> <p>16 Baseline labs (CBC, CMP, A1c, lipids) Unit RN</p> <p>17 PT / OT consults ordered Neurology</p> <p>18 MRI brain (if indicated) Radiology</p> <p>19 Echocardiogram Cardiology</p> <p>20 Education: Stroke basics & unit safety Unit RN</p> <p>21 Personalize education (language, literacy, anxiety, r Eddie</p> <p>22 Education delivery Emma</p> <p>23 Emma available for questions Emma</p> <p>24 Teach-back: Day 0-1 content Emma</p> <p>25 Teach-back + assessment synthesis Otto</p> <p>26 RN review of education & assessments Unit RN</p> <p>27 Early risk prediction (aspiration, confusion, LOS) Seer</p> <p>28 Pre-round synthesis Otto</p> <p>29 RN bedside rounding Unit RN</p> <p>30 Interdisciplinary rounding Unit RN</p> <p>31 Plan updates & documentation Otto</p>	<p>DAY 2 – Mobilize, Reassess, Expand Education</p> <p># Activity / Purpose</p> <p>32 Symptom reassessment (new deficits, dizziness, pain) Emma</p> <p>33 Observational reassessment (fatigue, engagement, movement) Virtual RN</p> <p>34 Focused hands-on neuro reassessment Unit RN</p> <p>35 Reassessment confirmation Unit RN</p> <p>36 Trend synthesis Otto</p> <p>37 PT mobility session Physical Therapy</p> <p>38 Patient-reported mobility confidence / fear Emma</p> <p>39 Observational mobility review Virtual RN</p> <p>40 Hands-on mobility safety check Unit RN</p> <p>41 Mobility synthesis & discharge impact Otto</p> <p>42 Education: Stroke risk factors Unit RN</p> <p>43 Personalize risk-factor education Eddie</p> <p>44 Education delivery Emma</p> <p>45 Emma available for questions Emma</p> <p>46 Teach-back: Day 2 content Emma</p> <p>47 Assessment + teach-back synthesis Otto</p> <p>48 RN review Unit RN</p> <p>49 Discharge trajectory prediction Seer</p> <p>50 Case management introduction Case Manager</p> <p>51 Pre-round synthesis Otto</p> <p>52 RN confirmation round Unit RN</p> <p>53 Interdisciplinary rounding RN-led</p> <p>54 Plan updates Otto</p>	<p>DAY 3 – Decision Point, Ownership</p> <p># Activity / Purpose</p> <p>55 Symptom & comprehension reassessment Emma</p> <p>56 Observational reassessment Virtual RN</p> <p>57 Hands-on reassessment Unit RN</p> <p>58 Confirmation & trend review Unit RN</p> <p>59 Data aggregation Otto</p> <p>60 PT ambulation scoring (AM-PAC) PT</p> <p>61 OT home-safety simulation OT</p> <p>62 Disposition data synthesis Otto</p> <p>63 Education: Medications & FAST Unit RN</p> <p>64 Personalize medication education Eddie</p> <p>65 Education delivery Emma</p> <p>66 Emma available for questions Emma</p> <p>67 Teach-back: meds & FAST Emma</p> <p>68 Correlate teach-back with vitals & function Otto</p> <p>69 RN review Unit RN</p> <p>70 Next-day focus prescription Seer</p> <p>71 Family disposition meeting Case Manager</p> <p>72 RN summary handoff to family Unit RN</p> <p>73 Rehab referral (if indicated) Case Manager</p> <p>74 Pre-round synthesis Otto</p> <p>75 Interdisciplinary rounding RN-led</p>	<p>DAY 4 – Caregiver Training, Final Reassessments</p> <p># Activity / Purpose</p> <p>76 Daily symptom reassessment Emma</p> <p>77 Observational reassessment Virtual RN</p> <p>78 Hands-on reassessment Unit RN</p> <p>79 Confirmation & trend review Unit RN</p> <p>80 Caregiver transfer training PT / OT</p> <p>81 Caregiver competency assessment Unit RN</p> <p>82 DME determination OT</p> <p>83 DME coordination Case Manager</p> <p>84 Education: Discharge preparation Emma</p> <p>85 Personalize for home & caregiver Eddie</p> <p>86 Education delivery Emma</p> <p>87 Emma available for questions Emma</p> <p>88 Teach-back: home safety Otto</p> <p>89 Caregiver readiness synthesis Emma</p> <p>90 RN review Unit RN</p> <p>91 Readmission & fall-risk prediction Seer</p>	<p>DAY 5 – Final Confirmation & Transition</p> <p># Activity / Purpose</p> <p>92 Final symptom check Emma</p> <p>93 Observational reassessment Virtual RN</p> <p>94 Final hands-on assessment Unit RN</p> <p>95 Discharge readiness synthesis Eddie</p> <p>96 Final education review Unit RN</p> <p>97 Optimize format (print/audio/portals) Eddie</p> <p>98 Education delivery Emma</p> <p>99 Emma available for questions Emma</p> <p>100 Final teach-back (full stay) Emma</p> <p>101 Discharge readiness report Otto</p> <p>102 RN sign-off Unit RN</p> <p>103 Post-discharge action prescription Seer</p> <p>104 Medication reconciliation RN / Pharmacy</p> <p>105 Follow-up scheduling Case Manager</p> <p>106 Virtual RN discharge review call Virtual RN</p> <p>107 Final MD sign-off Attending</p> <p>108 Transition-of-care handoff RN / CM</p> <p>109 Documentation closure & data push Otto</p>						
			<p>DAY 6 (If needed: Final Confirmation + Transition of Care)</p> <p># Activity / Purpose</p> <p>98 Telemetry monitoring (continuous for duration of Day 6) LPN</p> <p>99 Final confirmation (question-based): symptom check, confidence Emma (Education Agent)</p> <p>100 Final confirmation (observational): readiness behaviors, safe m Virtual Nurse</p> <p>101 Final physical assessment: lungs/edema/vitals; confirm stability Unit RN</p> <p>102 Follow-up scheduling (Cardiology/PCP) + services confirmation Case Coordinator / Case Manager</p> <p>103 Final provider sign-off / discharge order Hospitalist (MD/APP)</p> <p>104 HANOFF: Transition-of-care to Home Health / outpatient follow Case Coordinator / Case Manager</p> <p>105 Otto documentation closure + data push (care plan, teach-back) OTTO</p>										
			<p>DAY 7 – Transition & Closure</p> <p># Activity / Purpose</p> <p>74 Final reassessment (Q&A) Emma</p> <p>75 Final observation Virtual Nurse</p> <p>76 Final hands-on assessment RN</p> <p>77 Pharmacy reconciliation Pharmacist</p> <p>78 Follow-up scheduling (vascular, rehab) Case Manager</p> <p>79 Transition to rehab/home health Case Manager</p> <p>80 Otto: documentation closure Otto</p>										
			<p>I. Smith</p> <p>Age: 78</p> <p>Female</p> <p>Primary diagnosis: Acute decompensated congestive heart failure (CHF exacerbation) requiring IV diuresis on a non-ICU Med/Surg/telemetry unit</p> <p>• Common driver of the 5-6 day LOS: slow diuresis + renal/electrolyte monitoring + oxygen weaning + med titration + discharge readiness/education</p> <p>Clinical snapshot</p> <ul style="list-style-type: none"> • Presents with worsening shortness of breath, orthopnea (can't lie flat), 2-3-leg edema, fatigue, weight gain. • Needs continuous telemetry, strict I&O, daily weights, frequent reassessments. • Often has borderline kidney function (e.g., CKD stage 3) that requires careful diuresis and serial BMP/Mg checks. • Electrolyte instability risk (K/Mg swings) + repletion and med adjustments. • Mild hypoxia on admission (e.g., 2 L NC) with gradual weaning over several days. • Comorbidities that make this "realistic" and stretch LOS • Hypertension and Type 2 diabetes (common CHF pair) • Atrial fibrillation or frequent ectopy history (makes telemetry meaningful) • Chronic kidney disease (slows diuresis / complicates dosing) • Possible mild cognitive load issues (stress, poor sleep, hearing) 	<p>Day 1 (ED + Admit, Baseline, Diuresis Start)</p> <p># Activity / Purpose</p> <p>1 Telemetry monitoring (continuous for duration of Day 1) LPN</p> <p>2 HANOFF: ED Admission + Med/Surg RN (EHistory, Registered Nurse (RN))</p> <p>3 Assessment (question-based): dyspnea/orthopnea, Emma (Education Agent)</p> <p>4 Assessment (observational): work of breathing, spe Virtual Nurse</p> <p>5 Assessment (hands-on): head-to-toe, lung sounds, + Unit RN</p> <p>6 Assessment confirmation: reconcile Emma/Virtual i Unit RN</p> <p>7 Otto aggregates assessment inputs + flags discrepa OTTO</p> <p>8 Telemetry initiation + rhythm monitoring setup LPN</p> <p>9 Oxygen setup (NC) + weaning parameters per ards Respiratory Therapist</p> <p>10 Labs: BMP, BMP, Mg, CBC, troponin (as ordered) + Unit RN</p> <p>11 IV diuretics: initiate per orders; start strict I&O + dual Unit RN</p> <p>12 Imaging: Chest X-ray evaluate congestion/effusion Radiology Technologist</p> <p>13 Transition: to Radiology for CXR (prep + transport) Unit RN</p> <p>14 Transition: return from Radiology; reassess monitor Unit RN</p> <p>15 Education (RN-led): CHF maculation/why? Unit RN</p> <p>16 Eddie tailors Day 1 CHF education to language, com Eddie</p> <p>17 Education reinforcement: Emma reviews RN educat Emma (Education Agent)</p> <p>18 Emma available for questions (post Day 1 education Emma (Education Agent))</p> <p>19 Teach-back: Emma confirms understanding of CHF/ Emma (Education Agent)</p> <p>20 Otto summarizes education + assessment signals to OTTO</p> <p>21 Rounding prep: Otto completes assessment/educatio OTTO</p> <p>22 RN bedside rounding: confirm key findings (vitals, I Unit RN)</p> <p>23 Interdisciplinary rounding: align diuresis target, lab i Unit RN</p> <p>24 Seer scans Day 1 trends to predict AKI/electrolyte i SEER</p>	<p>Day 2 (Daily Reassessments + Echo + Diet/Fluid)</p> <p># Activity / Purpose</p> <p>25 Telemetry monitoring (continuous for duration of Day 2) LPN</p> <p>26 Reassessment (question-based): dyspnea trend, dizziness, crf Emma (Education Age)</p> <p>27 Reassessment (observational): work of breathing, fatig, edem Virtual Nurse</p> <p>28 Reassessment (hands-on): lungs/edema/vitals; weight trend; cc Unit RN</p> <p>29 Otto trends I/O/weights/labs; flags renal/electrolyte instability I OTTO</p> <p>30 IV diuretic titration per orders; evaluate response/tolerance Unit RN</p> <p>31 Labs: BMP daily (K+, creatinine) + Mg repletion per protocol Unit RN</p> <p>32 Oxygen weaning trial + breathing coaching per protocol Respiratory Therapist</p> <p>33 Echocardiogram (if not recent); evaluate EF/vitals Cardiac Sonographer</p> <p>34 Transition: to Echo Lab (prep + transport) Unit RN</p> <p>35 Transition: return from Echo Lab; resume monitoring + update p Unit RN</p> <p>36 Education (RN-led): sodium/fluid restriction + why daily weights Unit RN</p> <p>37 Eddie tailors diet/fluid education to culture, literacy, preferred h Eddie</p> <p>38 Emma reinforces sodium/fluid guidance using Eddie-prepare Unit RN</p> <p>39 Emma available for questions (post Day 2 education) Emma (Education Age)</p> <p>40 Teach-back: Emma confirms understanding of sodium/fluid/w Emma (Education Age)</p> <p>41 Rounding prep: Otto completes reassessments + labs + O2/diure OTTO</p> <p>42 RN bedside rounding: confirm progress; address renal/electroly Unit RN</p> <p>43 Interdisciplinary rounding: adjust diuresis/oxygen wean plan; an Unit RN</p> <p>44 Seer predicts diuresis response and AKI risk; prescribes Day 2 SEER</p>	<p>Day 3 (Mobility + Med Titration + Action Plan)</p> <p># Activity / Purpose</p> <p>45 Telemetry monitoring (continuous for duration of Day 3) LPN</p> <p>46 Reassessment (question-based): symptoms, med side Emma (Education Agent)</p> <p>47 Reassessment (observational): ambulation tolerance, (Virtual Nurse</p> <p>48 Reassessment (hands-on): lungs/edema/vitals; confirm Unit RN</p> <p>49 Otto correlates symptoms + vitals + labs + I&O; flags ins OTTO</p> <p>50 Mobility: PT session (safe ambulation plan; endurance + Physical Therapist)</p> <p>51 Post-PT reassessment (question-based): dyspnea/fatigue Emma (Education Agent)</p> <p>52 Post-PT reassessment (observational): gait safety + exe Virtual Nurse</p> <p>53 Post-PT reassessment (hands-on): RN safety check up; Unit RN</p> <p>54 Medication optimization: titrate GDMT as tolerated Cardiologist (MD)</p> <p>55 Education (RN-led): CHF zones (green/yellow/red) + wh Unit RN</p> <p>56 Eddie tailors medication plan using Eddie-prepared co Emma (Education Agent)</p> <p>57 Emma reinforces CHF zones/action plan using Eddie-pr Emma (Education Agent)</p> <p>58 Emma available for questions (post CHF zones educate Emma (Education Agent))</p> <p>59 Teach-back: Emma confirms understanding of CHF zone Emma (Education Agent)</p> <p>60 Rounding prep: Otto completes med changes + PT tolera OTTO</p> <p>61 RN bedside rounding: confirm trajectory (IV+PO, oxygen Unit RN)</p> <p>62 Interdisciplinary rounding: set discharge target; assign t Unit RN</p> <p>63 Seer recommends Day 4 focus to accelerate readiness SEER</p>	<p>Day 4 (Mid-stay Readiness + Nutrition + Discharge Prep)</p> <p># Activity / Purpose</p> <p>64 Telemetry monitoring (continuous for duration of Day 4) LPN</p> <p>65 Reassessment (question-based): readiness concerns, ad Emma (Education Agent)</p> <p>66 Reassessment (observational): self-care behaviors, exer Virtual Nurse</p> <p>67 Reassessment (hands-on): lungs/edema/vitals; confirm Unit RN</p> <p>68 Labs: BMP + Mg electrolyte replacement per protocol Unit RN</p> <p>69 Case management: discharge planning (home vs HH), tra Care Coordinator / Case Manager</p> <p>70 Nutrition consult: low-sodium diet coaching + meal plann Registered Dietitian Nutritionist (RDN)</p> <p>71 Transition: to Nutrition/Dietary consult w/otflow (prep + e Unit RN)</p> <p>72 Transition: return from Nutrition/Dietary; reinforce plan + d Unit RN</p> <p>73 Education (RN-led): meds purpose/side effects + adheren Unit RN</p> <p>74 Eddie tailors medication education to prior adherence/resp Eddie</p> <p>75 Emma reinforces medication plan using Eddie-prepared co Emma (Education Agent)</p> <p>76 Teach-back: Emma confirms understanding of meds + ad Emma (Education Agent)</p> <p>77 Rounding prep: Otto completes discharge barriers + educat OTTO</p> <p>78 RN bedside rounding: close readiness gaps; confirm oxygen Unit RN</p> <p>79 Interdisciplinary rounding: lock discharge target (Day 5 vs Unit RN)</p> <p>81 Seer evaluates readmission risk + prescribes mitigations SEER</p>	<p>Day 5 (Discharge Assessment + Pharmacy + Final Teaching)</p> <p># Activity / Purpose</p> <p>82 Telemetry monitoring (continuous for duration of Day 5) LPN</p> <p>83 Discharge assessment (question-based): readiness concerns, ad Emma (Education Agent)</p> <p>84 Discharge assessment (observational): self-care behaviors, exer Virtual Nurse</p> <p>85 Discharge assessment (hands-on): final lungs/edema Unit RN</p> <p>86 Otto produces discharge-readiness synthesis for RN + OTTO</p> <p>87 Medication reconciliation + discharge med list course Clinical Pharmacist</p> <p>88 Transition: to Pharmacy discharge counseling w/otflow Unit RN</p> <p>89 Transition: return from Pharmacy; finalize home med Unit RN</p> <p>90 Education (RN-led): final CHF action plan, daily weigh Unit RN</p> <p>91 Eddie optimizes final instructions for meds (print/audio) Eddie</p> <p>92 Emma reinforces final discharge instructions using Ed Emma (Education Agent)</p> <p>93 Emma available for questions (final education) Emma (Education Agent)</p> <p>94 Teach-back: Emma validates full-stay understanding (Emma (Education Agent))</p> <p>95 Rounding prep: Otto completes discharge checklist + h OTTO</p> <p>96 RN bedside rounding: final gap closure; confirm disch Unit RN</p> <p>97 Seer recommends post-discharge actions (follow-up) SEER</p>	<p>Day 6 (If needed: Final Confirmation + Transition of Care)</p> <p># Activity / Purpose</p> <p>98 Telemetry monitoring (continuous for duration of Day 6) LPN</p> <p>99 Final confirmation (question-based): symptom check, confidence Emma (Education Agent)</p> <p>100 Final confirmation (observational): readiness behaviors, safe m Virtual Nurse</p> <p>101 Final physical assessment: lungs/edema/vitals; confirm stability Unit RN</p> <p>102 Follow-up scheduling (Cardiology/PCP) + services confirmation Case Coordinator / Case Manager</p> <p>103 Final provider sign-off / discharge order Hospitalist (MD/APP)</p> <p>104 HANOFF: Transition-of-care to Home Health / outpatient follow Case Coordinator / Case Manager</p> <p>105 Otto documentation closure + data push (care plan, teach-back) OTTO</p>				
				<p>DAY 0 / Day 1 – Post-Op Arrival, Baseline, Pain & Safety</p> <p># Activity / Purpose</p> <p>1 OR/PAU + Med-Surg handoff (procedure, blood loss, drains, pain plan) RN</p> <p>2 Initial Assessment (Q&A): pain, nausea, anxiety, bal Emma</p> <p>3 Initial Observations: alertness, distress, guarding, sat Unit RN</p> <p>4 Hands-on Assessment: neurovascular, wound, vital Unit RN</p> <p>5 Assessment confirmation & baseline documentation Unit RN</p> <p>6 Otto: aggregate assessments + flag risks (pain/infec Unit RN)</p> <p>7 Continuous telemetry / pulse ox (if ordered) Unit RN</p> <p>8 Pain management initiation (PCA/IV opioids) Unit RN</p> <p>9 Wound dressing check & reinforcement Unit RN</p> <p>10 Education: what to expect after amputation (RN-led Unit RN)</p> <p>11 Eddie: personalize education (emotional state, read Eddie</p> <p>12 Education reinforcement Emma</p> <p>13 Emma available for questions Emma</p> <p>14 Teach-back: understanding surgery & immediate go Emma</p> <p>15 Otto: prepare rounding summary Otto</p> <p>16 RN bedside rounding Unit RN</p> <p>17 Interdisciplinary rounding (Day 2 goals) RN</p> <p>18 Seer: predict pain escalation / delirium risk Seer</p>	<p>DAY 2 – Pain Control, Wound Surveillance, Emotional Processing</p> <p># Activity / Purpose</p> <p>19 Reassessment (Q&A): pain quality, phantom sensations, mood Emma</p> <p>20 Observation: swelling, agitation, phantom sensations, mood Virtual Nurse</p> <p>21 Hands-on Reassessment: wound, edema, temp, pain response Unit RN</p> <p>22 Otto: trend pain scores + meds Otto</p> <p>23 Adjust analgesia regimen RN / Provider</p> <p>24 Infection surveillance labs (CBC, BMP) RN</p> <p>25 Education: phantom limb pain explanation RN</p> <p>26 Eddie: tailor pain education Eddie</p> <p>27 Education reinforcement Emma</p> <p>28 Emma available for questions Emma</p> <p>29 Teach-back: pain plan understanding Emma</p> <p>30 Otto: prep for rounding Otto</p> <p>31 RN bedside rounding Unit RN</p> <p>32 Seer: infection risk & pain trajectory Seer</p>	<p>DAY 3 – Mobility Initiation, Wound Stability, Discharge Path Start</p> <p># Activity / Purpose</p> <p>33 Reassessment (Q&A): confidence, fears, goals Emma</p> <p>34 Observation: transfers, balance, endurance Virtual Nurse</p> <p>35 Hands-on Reassessment: wound integrity RN</p> <p>36 PT evaluation (bed mobility, transfers) Physical Therapist</p> <p>37 OT evaluation (ADLs, home needs) Occupational Therapist</p> <p>38 Otto: compile PT/OT findings Otto</p> <p>39 Case management initial discharge assessment Case Manager</p> <p>40 Education: limb protection & positioning Eddie</p> <p>41 Eddie: personalize limb-care education Emma</p> <p>42 Emma available for questions Emma</p> <p>43 Emma available for questions Emma</p> <p>44 Teach-back: positioning & protection Emma</p> <p>45 Rounding prep Otto</p> <p>46 Interdisciplinary rounding RN</p> <p>47 Seer: rehab vs home discharge prediction Seer</p>	<p>DAY 4 – Prosthetic Prep, Caregiver Training, Emotional Adjustment</p> <p># Activity / Purpose</p> <p>48 Reassessment (Q&A): emotional adjustment, coping Emma</p> <p>49 Observation: engagement, caregiver involvement Virtual Nurse</p> <p>50 Hands-on Reassessment: wound, residual limb RN</p> <p>51 Prosthetics consult (if appropriate) Prosthetist</p> <p>52 Caregiver training (transfer, wound care) RN / PT</p> <p>53 Otto: caregiver readiness synthesis Otto</p> <p>54 Education: infection signs & when to call RN</p> <p>55 Eddie: tailor discharge-prep education Eddie</p> <p>56 Education reinforcement Emma</p> <p>57 Emma available for questions Emma</p> <p>58 Teach-back: infection prevention Emma</p> <p>59 Rounding prep Otto</p> <p>60 RN bedside rounding Unit RN</p> <p>61 Seer: readmission & wound risk Seer</p>	<p>DAY 5 – Discharge Readiness & Home Safety</p> <p># Activity / Purpose</p> <p>62 Reassessment (Q&A): confidence managing at home Emma</p> <p>63 Observation: self-care behaviors Virtual Nurse</p> <p>64 Hands-on Reassessment: wound & mobility Unit RN</p> <p>65 Finalize DME needs OT / Case Manager</p> <p>66 Education: discharge plan, meds, follow-ups RN / PT</p> <p>67 Eddie: optimize final materials (print/audio) Eddie</p> <p>68 Education reinforcement Emma</p> <p>69 Emma available for questions Emma</p> <p>70 Teach-back: full discharge plan Emma</p> <p>71 Otto: discharge readiness synthesis Otto</p> <p>72 RN rounding & sign-off Otto</p> <p>73 Seer: post-discharge risk mitigation Seer</p>	<p>DAY 6 / 7 – Transition & Closure</p> <p># Activity / Purpose</p> <p>74 Final reassessment (Q&A) Emma</p> <p>75 Final observation Virtual Nurse</p> <p>76 Final hands-on assessment RN</p> <p>77 Pharmacy reconciliation Pharmacist</p> <p>78 Follow-up scheduling (vascular, rehab) Case Manager</p> <p>79 Transition to rehab/home health Case Manager</p> <p>80 Otto: documentation closure Otto</p>				