



INODAYA Hospitals - Kakinada

Documentation code:

INH/COP .Doc.No:19

Policy on Bed Management

Prepared Date: 11/11/2025

Reference: COP.g.d.NABH Standards – 6th Edition

Issue date: 11/11/2025

Issue no:1

Review NO:00

Review Date: 10/11/2026

1. Objective:

To standardize the process for bed allotment across the hospital, such that the needs of the patients are addressed effectively during non-availability of ICU/HDU/Ward beds

2. Definitions:

Triage: Triage is the process of determining the priority of patient's treatments based on the severity of their condition

3. Abbreviations:

- ICU - Intensive Care Unit
- HDU – High Dependency Unit
- IP- Wards – Inpatient Wards
- CMO – Casualty Medical Officer

4. Scope:

The scope of the policy covers the process of bed allotment across all ICUs, HDUs & Wards

5. Responsibility:

Consultants, ICU In-charge, Front office staff & Operations - Executives

6. Distribution:-

All ICUs, HDUs, Wards, Casualty & Admissions counter

7. Policy:

- ICU beds shall be used only for patients who require Intensive care. Admission to ICU shall be guided by admission criteria as given in document 'ICU admission and discharge criteria' – Reference: INH/COP.9b
- Patient shall be discharged from ICU to downgraded facility as soon as discharge criteria are fulfilled
- In case of bed shortage in ICU, patients requiring Intensive care shall be managed in Casualty. Every effort shall be made to arrange a bed for the patient by discharging the patient from ICU who meets the discharge criteria
- In-case of non-availability of beds in ICU/HDU/Wards – temporary holding 4th floor areas are utilized in coordination with the respective consultants & patient attendees

Prepared by: Dr.Gowtham Krishna Medical Director	Verified by: Mrs. Lakshmi Lavanya Chief Executive officer	Approved by: Dr.G.Rammohan Managing Director
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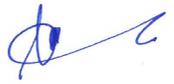
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- v. Patients in temporary holding areas are given priority in allocation of beds as and when available
- vi. Patients kept in temporary holding areas are provided with necessary supports and monitored regularly
- vii. Patients provided with care in the temporary holding areas will be provided with an ICU/HDU bed in 3 hours from the time of transfer – in into the holding area
- viii. However, in case no ICU bed is available, and a patient requiring ICU care has reported at the Casualty of the Hospital, the CMO shall advice the patient attenders with regards to the other hospitals that can serve their needs
- ix. The responsibility matrix as defined in the SOP is utilized for addressing the issue of non-availability of ICU/HDU/Ward beds

Prepared by:	Verified by: <i>G. Lakshmi Lavanya</i>	Approved by: 
Dr.Gowtham Krishna	Mrs. Lakshmi Lavanya	Dr.G.Rammohan
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