The Institute for Patient Care

Norman Knight Nursing Center for Clinical and Professional Development

UC Education Forum
Responding to a Unit-based Emergency
February 2022

Patient Emergency

Someone yells "Call a Code" or "Code Blue" or you hear/see the unit "Code" alarm from a patient's room

CALL 6-3333

UC Role: CALL 6-3333

Operator will state:
"This is the emergency line, your call is being recorded What info do you give to the operator?"
- Building
- Floor
- Room
- Type of CODE BLUE

CODE BLUE

UC Role:

Traffic Control:
- Direct responders to the CODE location
- Stay by the phone
- Prepare to STAT page as necessary
- Open access to the unit

Know Where to Find Key Equipment

Code Cart & Defibrillator / AED

Post-Code Responsibilities

UPON REQUEST, EXCHANGE THE CODE CART

APPLY BLUE LOCK

TRANSPORT USED CART TO THE CODE CART EXCHANGE ROOM

ACCESS NEW CODE CART

Rapid Response Team

The RN or MD may ask you to call the Rapid Response Team: a team of responders activated for an acute unexpected change in clinical condition

Composed of the patient's primary team and:
- Adult
- Pediatric
- Newborn
- Rapid Response Team

CALL 6-3333

UC Role:

- Offer Help!
- You may offer to assist fellow UCs above & below your unit if you know they are involved in a CODE

For references or more information, contact Sheila Burke RN, MSN

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Reasons for a Rapid Response:

- Acute changes in patient condition
- Need for more resources
- Care team not immediately available

Rapid Response Team

UC Role in Code Stroke:

- At the request of a nurse or provider, call 6–3333
- Tell the operator:
  – A patient is having a stroke
  – The patient's unit and room number
  – A call–back number*
- If the call–back number is to you, let your team know the stroke doctor called back
- If no response in 10 minutes, call 6–3333 again
  – Tell the operator this is for the same patient

Code Stroke

Is it a stroke? Act F.A.S.T.
FACE droops | ARM weakness | SPEECH difficulty | TIME is critical.
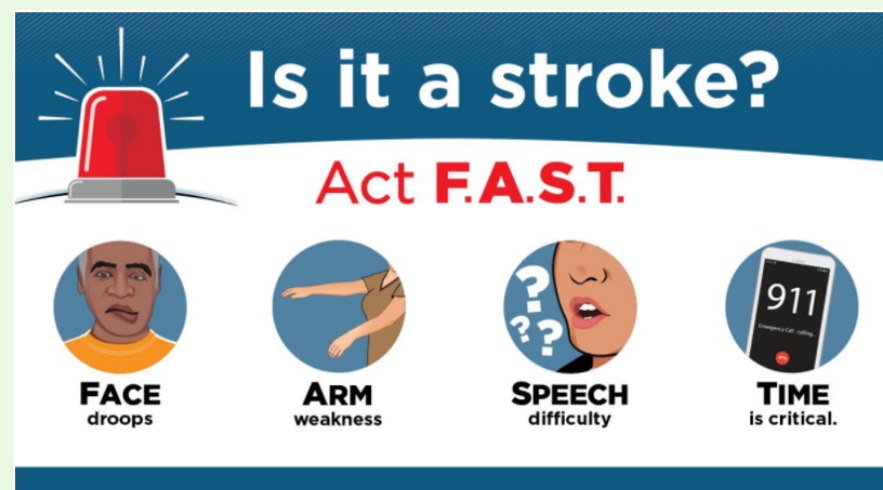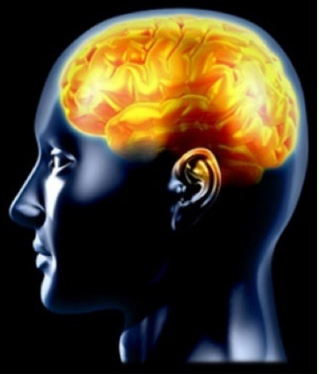
UC Role in Code Stroke

Notify	Notify the patient's responding clinician
Notify	Notify the nursing supervisor
NOTE	NOTE: The Rapid Response Team also gets called if the patient is not stable.

Code Stroke Responsibilities

- Patient may go for an emergency CT scan
- You may be asked to STAT page an IV nurse
- Patient may be transferred to the Neuro ICU depending on CT results

BE PREPARED

Fire Emergency

- Electrical fires are the most common.
- Locate fire pull boxes & extinguisher.
- Know your unit's fire safety plan
- Keep corridors and exits to stairwells clear at all times.
- Do not block extinguishers, pull boxes.

CODE RED

Healthcare Fire Safety
There are four essential steps to take if you discover a fire:
Rescue anyone in immediate danger of the fire. | Alarm Pull the nearest fire alarm and call fire response. | Contain fire by closing all doors in the fire area. | Extinguish small fires. If not, leave the area and close the door.

When in Doubt, Get HELP!

CODES to be aware of:

- CODE BLUE
- RAPID RESPONSE
- STROKE
- STEMI
- CODE Pink (Infant/Child Missing)
- CODE Disaster (Facility Alert)
- CODE Silver (Security Alert –Active Shooter)

Call 6–3333

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