

PUI, Positive COVID and Post COVID
Medical Emergency Response Plan- Full Code
Staff safety is the PRIORITY.

Cardiac Arrest Reminders

- Emphasize to providers that Advanced Directives should be determined at admission.
- All staff entering the room during a Cardiac Arrest MUST be in complete PPE (N95, Gown, Gloves, Goggles or face shield) before entering the room.
- Check if the environment is safe! CPR is an Aerosol-generating procedures (AGP) and the entire team must don a N95 respirator.
- Keep every effort to keep the door closed once CPR and AGP's have begun.
- COVID Medical Response team is different than the 6 Person high performance medical response team.
- During a Medical Response, please do not cancel the patient's call light as that will be used to assist with in room communication.

Roles:

- LEAD PHYSICIAN
- Position 1: TEAM LEADER (Supervisor or CNS)
- Position 2: IV ACCESS/MEDICATION NURSE
- Positions 3&4: COMPRESSOR AND AIRWAY POSITIONS
- Position 5: RECORDER
- Position 6: DEFIBRILLATOR

Process:

- First responder (RN or Provider) stays with the patient and calls 55555 from patient room, call for AED, MP5, crash cart, and delegate 911 phone call.
- Overhead announcement – normal process for notification via Vocera.
- If staff member is the first responder, and not wearing a N95 mask the staff will need to doff their soiled gown, gloves, goggles or face shield, procedure mask performs hand hygiene and re don appropriate PPE (Gown, N95, goggles or face shield and gloves) including an N95 mask (only if fitted).
- If first responder has gown, gloves, goggles or face shield with N95 respirator they can begin CPR.
 - CPR is an aerosolizing procedure, it cannot be started until all staff in the room are wearing N95 masks.
- All essential staff don appropriate PPE including N95 mask, AED arrives (CNS supervises to ensure correct order)
- Enter room and close the door. Door should be kept closed as much as possible.

Staff inside room: CORE GROUP for COVID-19 Medical Emergency Response

- **Lead Physician (ACLS certified):**
 - Recorder will call the provider who is inside the room and both staff members will place the Vocera phone on speaker to allow the recorder to document the medical emergency outside of the room.
 - If 2nd responder, will bring in AED and apply quick combo pads on patient
 - Manage AED
 - If appropriate, Airway management with I gel
- **Patients Nurse (1st Responder) (Position 3: Compressor):**
 - Prior to starting CPR assure proper PPE is donned.
 - Place a towel over the patients face prior to starting compressions
 - Direct someone to retrieve crash cart, calls 55555 from patient room, call for AED, MP5, crash cart, and delegate 911 phone call.
 - Alternate every 2 minutes and as needed with 3rd nurse (Position 4)
 - After completion of code, place Airborne sign on door. Door must remain closed for 70 minutes. Also, place the Aerosolized sign on door.
- **2nd Nurse/responder (Position 2: IV access/Medication Nurse)**
 - If 2nd responder, bring in AED and apply quick combo pads.
 - Must grab bundled medications package from crash cart.
- **3rd Nurse (Position 4: Compressor/Airway Position):**
 - Grab ambu bag and begin ventilations
 - Alternate every 2 minutes and as needed for compressions.

Staff outside of room CORE GROUP for COVID-19 Medical Emergency Response

- *Staff outside the room will have PPE readily available; however, we do not want you to put PPE on unless you are needed in the room.
 - Crash cart stays outside of room. Limit the amount the door is opening and closing.
 - 4th Nurse Position: (Recorder)
 - Use the Rauland system to call into the patient's room from the desk console.
 - CNS or Nursing Supervisor:
 - Delegate a person to shut the doors of patients within close proximity
 - Supervising staff donning and doffing PPE and that all members are entering with appropriate PPE.
 - Position themselves near the recorder
 - Call 911 or delegate to a nurse. OR take over 911 call and communicates that patient is COVID+ to EMS on phone and upon arrival.
 - Cannot use VOCERA to activate 911. Must use landline.
 - Back up MD
 - Back up 5th Nurse AED/Defib
 - Back up 6th Nurse Airway/Compression

- Respiratory Therapist
- Spiritual care

Cardiac Arrest Complete and Paramedics Transferring Patient:

- Security secures a pathway/crowd control to minimize interaction with others
- Door is open and patient transported out, towel maintained on patient face.
- Team Removes gown and gloves in the room by doorway, keep N95/goggles on, hand hygiene, exit room, close door.
- Perform hand hygiene, don new gloves, remove goggles and N95. (N95 must be discarded after aerosolizing procedure, goggles should be cleaned)
- Pt's RN changes door sign changed to "to Acute Respiratory Illness Precautions" and left undisturbed for 70 minutes
- All equipment in room, including AED gets disinfected as normal process.
- Room cleaned and supplies packed per protocol.
- Contact spiritual care as appropriate.
- If necessary, provide EMS with proper PPE including N95 masks.
- If any medications enter the room they will need to be discarded per protocol. Follow disposal outlined per Care of the COVID Patient document.