

DISTRESS & EMERGENCY MEASURES: CODE LAB

Two distinct situations may occur: *Distress* vs. *Code* (no pulse/no breathing = CPR)

KNOW THE DIFFERENCE

Include the following actions in this *approximate* order: (check off those you observed)

1. Observe signs of distress, if present
2. Review where emergency equipment is in your area and what personnel are within earshot
3. Call to someone *by first name* to help you (vs calling for "help"), get steth & BP cuff, pen/paper, &/or stand by
4. Keep talking to the patient, note level of consciousness and responsiveness; get patient comfortable, preferably lying down on hard surface; note dyspnea & need to elevate head
5. Get the chart to the area; ask for the CODE cart to be brought to the area for standby
6. Monitor vital signs at appropriate intervals, especially if change in mental status or chest pain
7. Record all *symptom* information and *time* of occurrences; delegate this job *by first name* to someone soon as possible so you are free to think! Run a telemetry strip if available
8. Notify primary care nurse via nurses station of situation
9. ****When there is no breathing/no pulse, begin CPR: **Shake/shout and call the CODE -**
delegate this *by first name*
 A - establish Airway
 B - give Breaths
 C - give Circulation/compressions
10. **Delegate/call** for the following if not already done:
 the CPR (place CPR board under trunk)
 recording "secretary" person
 have telemetry strip on *continuous* run mode
 family/patients be escorted from areas
 get chart to area
 call nursing station/floor
 suction machine, IV pole
 gloves box for possible numerous personnel to use
 oxygen tank or wall source access; Ambu bag
 phone call to physician's office re: situation, FYI, or verbal orders
 call for eventual transport equipment (cart, IV pole, portable EKG monitor)
 bag up all personal items for transport or family member; a list of these helps
11. Document the sequence of events in the medical record; a separate progress note page may be appropriate for submission/FAX later if current chart needs to be transported with patient immediately

Two recommendations:

**If you "freeze", just *start taking vital signs* while you think!!!! Everyone will want these later.

**If a code is called in your facility, go to it and observe to desensitize yourself; try to stay out of the way, but note everything that happens and who does what.

Consider total time taken to stabilize a patient, area & situation = 5-6 minutes