### Code Blue

- A term used to alert the Code team and hospital staff of a Medical Emergency. The emergency can take many forms – cardiac arrest, patient/visitor collapse, significant injury to a staff member requiring the immediate need for staff experienced in the management of medical/emergent situations and may occur anywhere in the hospital.

### Initiate CPR

<table>
<thead>
<tr>
<th>C</th>
<th>CHEST COMPRESSIONS</th>
<th>Initiate chest compressions</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>AIRWAY</td>
<td>Open the airway</td>
</tr>
<tr>
<td>B</td>
<td>BREATHING</td>
<td>Deliver two (2) breaths</td>
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- When a patient’s circulation, airway, and breathing are inadequate, the resident or attending physician should be contacted STAT to advise that a Code Blue has been initiated.
Members Of A Code Team

- Doctor On-Call in ER, (typically the team lead.)
- ER nurse designated responsible on evenings, weekends and holidays or the senior nurse on days or the RN on nights.
- Two nursing staff from each unit (Acute Care 1 and 2, Continuing Care), if available. If it is nights at least one person should be designated.
- Upon hearing the page “Code Blue” the members of the code team respond to the location paged, members of the “Code Team” will be determined at the unit report times (Acute Care 1 and 2, Emergency and Continuing Care).

First Responder

- Page Code Blue by pressing #351 on the telephone and state Code Blue and the location in a calm manner three (3) times.
- If unable to leave patient, direct someone to page Code Blue and report back to you.
- Ensure the scene is safe.
- Stay with patient and keep them safe.
- If trained in CPR, follow the CPR guidelines.

Second Responder

- Assist the first responder, if the second responder is a physician or a senior nurse, take the role of team lead by announcing “I will lead this code”. Direct others of what to do following CPR guidelines.
ER Nurse

- If location is not on the main floor, assign someone to hold the brass elevator or the elevator by continuing care.
- **DO NOT** use elevator by ER as it always returns to the basement when idle and if you hold the doors open too long, they respond by opening up very slowly and closing very slowly.
- Grabs ER crash cart.
- Upon arrival at the scene, assess patient to determine if the patient has suffered a cardiac arrest, medical emergency or significant staff injury.
- Assumes role of team leader if a physician is not present and delegates duties to other members of the team.
- For Cardiac Arrest – follow current ACLS course guidelines.
- For Medical Emergency – care dependent on cause. Ensure airway, breathing and circulation are optimized.
- For Trauma – follow current TNCC guidelines.
- Determines need to transport patient/staff to ER.
- Administers any required medications.

Rest of Code Team

- Follows direction from the team lead in place, either the physician or ER nurse, could be any or all of the following.
  - Responsible for airway management and breathing effectiveness.
  - Assists with intubation.
  - Assists breathing with BVM.
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- Inserts OPA.
- Applies oxygen.
- Starts IV lines.
- Performs all the charting.
- Carries out chest compressions.
- Assembles and gathers any necessary equipment i.e. stretcher, backboard, c-collar etc.
- Runner for extra supplies.
- Supports family.
- Carries out other duties as assigned by team leader.

Post Resuscitation/Stabilized Patient/Staff

- Consider if the patient requires transportation to the ER department.
- Consider if the patient requires transportation to another facility → Contact Rapid North and prepare patient for transfer.
- Review charting that has been completed during the event and cosign.
- Ensure that the family has been informed of the current status and follow up care.
- Replace equipment and restock crash cart.
- Hold a quick debriefing with Code Team members and report any errors, organizational issues, problems to the Education Department.
Emergency Response Code
Emergency/Disaster Management

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Medical Emergency → Person Who Finds Patient

Need for Medical Personnel/Advanced Treatment

NO → Treat Symptoms or Direct to ER

Yes → Page Code Blue
Stay With Patient
Begin Assessment

Arrival Code Team

Assess, Treat & Transport

Post Care

Discharge
Admit
Transfer

Reviewed and Approved by Covenant Health Emergency/Disaster Management
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