

PC.32.3.3 Names of the responders to the code.

PC.32.3.4 Medications and treatments used (e.g., electrical shocks, central lines, intubation) and times of administration.

PC.32.3.5 The outcome of the code.

PC.32.4 Clinical staff are trained on how to use the alarm system or call the code.

PC.32.5 CPR team members have the proper training on cardio-pulmonary life support.

PC.32.6 CPR team is led by:

PC.32.6.1 A physician or an anesthesiologist who is certified in ACLS for adult codes.

PC.32.6.2 A physician who is certified in PALS for pediatric codes.

PC.32.6.3 A physician who is certified in NRP for neonatal codes.

PC.32.7 All codes are reported to the cardiopulmonary resuscitation committee.

PC.33 The hospital has an effective process for responding to patients with deteriorating conditions.

PC.33.1 The hospital establishes a rapid response team(s) of qualified staff to provide rapid response for deteriorating patients outside the intensive care unit.

PC.33.1.1 Team is composed of qualified staff educated on the rapid response process.

PC.33.1.2 Team provides coverage 24 hours a day, 7 days a week.

PC.33.2 There are written criteria communicated to the staff to define how and when to call for a rapid response team before the patient "coded".

PC.33.3 Activities of the rapid response teams are documented.

PC.33.4 There is a regular evaluation of the activities and outcomes of the rapid response teams.

PC.34 Policy and procedure guides the care of vulnerable dependent patients.

PC.34.1 The hospital has policies to define and guide the care of vulnerable dependent patients (e.g., immune-compromised, comatose, elderly and frail, disabled, terminally ill, neonates, infants, and children).

PC.34.2 Policies define at least the following information:

PC.34.2.1 Relevant clinical care management plans.

PC.34.2.2 Infection control guidelines.

PC.34.2.3 Security and safety guidelines.

PC.34.2.4 Ethical guidelines.

PC.34.3 Staff members are aware of and implement all relevant policies and associated care plans.

PC.34.4 Patient's medical record reflects the use of these policies and plans.

PC.35 The hospital has a policy for patients permitted to leave the organization during the planned course of treatment.

PC.35.1 The policy defines categories of patients permitted to leave the hospital during hospitalization.

PC.35.2 The policy defines the maximum duration to go for out on pass.

PC.35.3 The policy defines the assessment requirements before leaving the hospital and upon return.

PC.35.4 The policy defines how medications will be dispensed in amounts enough to cover the out on pass period.