# **MSH Emergency Department**

## **MSH ED Code Team Process**

**Last Reviewed: 1/23/2024** 

Description of Process: The goal of this document is to standardize the ED Code Team response.

### **ED Code Team members:**

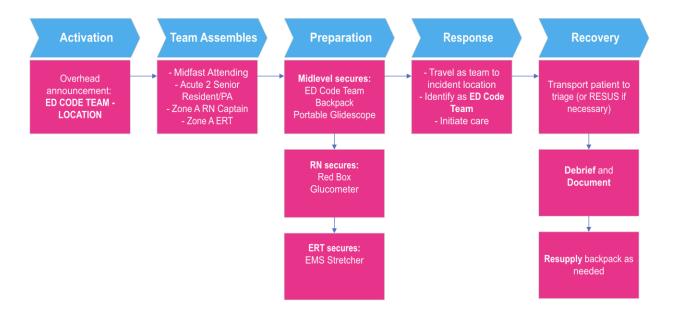
ATTENDING: Mid Fast attending (7-3, 3-11, 11-7 shift) OR Pediatrics attending AND

MIDLEVEL: Acute 2 senior resident OR most senior PA on Acute 2 (Tues PM/Wed AM ONLY) AND

NURSE: PITT RN Captain AND

**ER TECH:** PITT ERT 1

### **Process Overview:**



## **Detailed Process:**

\*At the beginning of shift, **Senior resident/PA** to check all supplies ready and team huddle complete

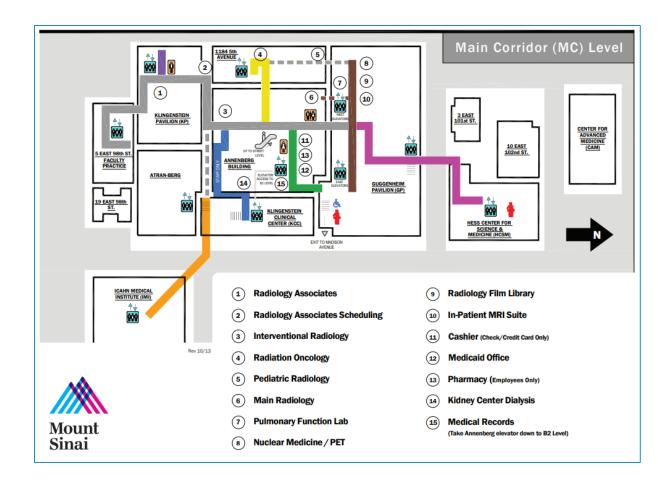
- 1. Operator receives call for "ED CODE TEAM LOCATION"
  - a. Operator announces on hospital paging system: "ED CODE TEAM LOCATION"
  - b. Operator calls ED and relays message to BA
  - c. BA announces locally overhead: "ED CODE TEAM LOCATION1"
  - d. Telcomm emails ED Leadership team details of code location

- 2. Senior Resident/PA secures ED CODE TEAM BACKPACK<sup>2</sup>, BVM, and portable glidescope
- 3. RN secures RED BOX of medications and GLUCOMETER
- 4. ERT secures EMS STRETCHER located in Zone B alcove
- 5. **ED Code Team** proceeds to security desk outside Acute 2 immediately and proceeds as a team to incident location
- 6. On arrival, establish arrival of ED Code Team and assume care using ED CODE TEAM BACKPACK and on-site CODE CART and AED, as needed
- 7. ERT arrives with EMS stretcher
  - a. If needed, use backboard from CODE CART to help transport patient
- 8. Patient disposition
  - a. If patient is an ED patient or visitor, patient will return to ED
  - For all other patients, please refer to Decompensation/Code Guidelines for
     Observation and Admitted Patients which can be found in Epic Documents and escalate to ANM/Physician AOC if any issues
- 9. ED Code Team huddles for debrief led by Senior resident/PA
  - a. Notify **ED Physician Admin on Call** in real time of any issues
- 10. Midlevel provider fills out progress note using smart phrase .EDCODETEAM<sup>3</sup>
  - a. If patient is not registered, no documentation needed
  - b. Attending cosigns with critical care time as appropriate
- 11. Midlevel provider returns ED CODE TEAM BACKPACK to closet in RESUS
  - a. If items used, midlevel disposes of items in used pack, places used pack in used pack shelf for restocking, and replaces with new pack from backup supply in closet to restock backpack
  - b. **ED Operations team** rounds daily to assure enough backup packets available and not expired
  - **c. ED Operations team** checks backpack bimonthly to assure no packets in backpack have expiring items
- 12. **ED Leadership team** receives monthly report of ED Code Team activations for monthly review

### <sup>1</sup>Per Hospital Policy GPP-215:

## **ED Code Team or Pediatric Hospital Code Team is the primary responder to:**

- All areas of the first floor lobbies and halls of Guggenheim, Annenberg, Atrium, KCC, Klingenstein Pavilion, and 1184 5th Avenue
- All areas of B1 (MC) level including halls and public areas
- All areas of B2 (SC) Level
- All areas of B3 Level of Atran Building
- Annenberg Floors 9 and above, including the Levy Library
- Annenberg Floors 1-3, 5
- Hess Building (if activated by RESQ team after initial assessment complete)



# <sup>2</sup>ED Code Team Backpack contents: located in cabinet in *Zone B Alcove*

ED CODE TEAM BACKPACK EQUIPMENT CHECKLIST			
AIRWAY	Qty	ACCESS - IO	Qty
Glidescope MAC 3 blade	1	IO gun	1
Glidescope MAC 4 blade	1	IO needle (pink)	2
Direct laryngoscopy MAC 3	1	IO needle (blue)	2
LMA size 4.5	1	IO needle (yellow)	2
ETT size 6.5	1	Saline flushes	5
ETT size 7.0	1	PPE	
ETT size 7.5	1	Gloves - L	5
Stylet (standard)	1	Gloves - M	5
10 cc Syringe	2	Gloves - S	5
Bougie	1	Face mask with eye shield	5
ETCO2 colorimetric detector	1	VITALS	
Lubricating jelly	2	Manual BP cuff	1
ACCESS - IV		Pulse oximeter	1
IV start kit	2	OTHER	
18G angiocath	3	C-collar	1
20G angiocath	3	Ambu bag	1
22G angiocath	3	Tube tamer	1
Saline flushes	5	This checklist for restocking	1

# **ED ADULT CODE BACKPACK**







CONTENTS OF BACKPACK









STORAGE BIN FOR EMPTY PACKETS

### <sup>3</sup>Smart Phrase: .EDCODETEAM

ED CODE TEAM RESPONSE NOTE PATIENT'S NAME: @NAME@

MRN #: @MRN@

DATE: @DATE@ TIME CALLED: \*\*\*

ED Code Team Leader: \*\*\*
Level of Training: \*\*\*
PATIENT LOCATION: \*\*\*

#### **NOTIFICATION:**

ED Code team activated: {yes no:11203::"Yes"}

Primary team notified (if applicable): {yes no:11203::"Yes"}

Cardiac Arrest: {yes no:11203::"Yes"}

Brief Narrative of events: \*\*\*

If CARDIAC ARREST, please fill out the following (if no cardiac arrest, please delete this section):

Pulse present at ED Code Team arrival: {yes no:11203}

Was the arrest witnessed: {yes no:11203}

Was patient monitored at arrest onset?(cardiac or pulse oximetry): {yes no:11203::"Yes"} Were chest compressions initiated?: {yes no:11203} Compression Initiated Time: \*\*\*

#### **CIRCULATION:**

Rhythm at onset: \*\*\*

Shock delivered: {yes no:11203}

External pacemaker utilized: {yes no:11203} Medication delivery access (eg, IV, IO): \*\*\*

#### AIRWAY/VENTILATION:

Breathing at onset: \*\*\*

Airway management required? {yes no:11203}

Intubation/airway method: \*\*\*
Number of attempts?: \*\*\*
ETT confirmation method: \*\*\*
Who performed intubation: \*\*\*

### OUTCOME:

Reason code ended: \*\*\*

Disposition: \*\*\*

Suspected etiology of arrest: \*\*\*
Time resuscitation ended: \*\*\*
Total duration of code: \*\*\*

Family Notified: {yes no:11203::"Yes"}

Provider Name: @ME@