Hemodialysis: Code Blue Staff Responsibilities (SPH-6D)

Site Applicability

SPH-in Center Hemodialysis Unit (6D)

Practice Level

Specialized: Renal team members (e.g. RNs, LPNs, renal technicians, ward aides, allied health, unit clerks, patient care aides)

Need to Know

- 1. Staff need to be familiar with the Code Blue buttons location in the unit and how to activate in the event of a code blue.
- 2. Health care staff MUST NOT perform mouth-to-mouth ventilation
- Identify patient's Covid -19 status (e.g. red, yellow, or green zones) appropriately to allow the code team to accurately conduct accurate risk assessment during a code blue event including the appropriate PPE use before starting CPR (see Appendix A and #B-00-07-10085).
- 4. If there are only two responders, the first responder should be returning the blood to rule out hypotension; while the second responder will be responsible for performing the duties of the subsequent responders as deemed appropriate.
- 5. To transfer the patient out of a dialysis chair for CPR: place the chair in Trendelenburg position. <u>First and second responder</u>: gently lower the patient to the floor using the sheet under the patient while ensuring safety of the dialysis lines and access. This is best accomplished by sliding the patient out of the top of the chair while the <u>third responder</u> pulls the chair out from under the patient in the direction of the patient's feet. Do not disconnect the bloodlines from the patient's access. <u>Third responder</u>: continue to return the patient's blood (if not already done) then clear the area of unnecessary equipment to ensure adequate space to perform CPR.
- 6. The physician or team leader will notify the patient's family of the code blue event and document conversation in the patient's chart
- 7. The HoverMatt is located in the hallway outside of 6CD Conference room. Other HoverMatt locations can be found on the PHC Nursing Manuals <u>Equipment page</u>.

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Equipment and Supplies

- 1. Cardiac Arrest board
- 2. Bag-valve-mask (if needed)
- 3. PPE Supplies or PPE cart
- 4. CPR stool if required

Practice Guideline

First Responder

Before a cardiac arrest call is initiated:

- Shout for help from other staff members and/or press the nurse call button (do NOT leave the patient), **quickly** place the patient in supine position, begin returning the patient's blood back at maximum 250 mL/min and assess the patient's condition (i.e. level of consciousness, breathing) **to promptly rule out a hypotensive event**. (Rationale: supine position and returning of the patient's blood will help determine if cause is severe hypotension vs. cardiac/respiratory arrest).
- If you have determined that the patient is having a life threatening event requiring immediate intervention by the code blue team AND the patient is a full code, cover patient's face with simple oxygen mask and turn O2 on to 10L/min, then initiate Hands-only chest compression (see B-00-07-10060)
- If necessary, transfer patient out of the dialysis chair with assistance

When code blue team arrives:

- Provide report to team about patient code and COVID-19 status including signs and symptoms, <u>a</u>llergies, <u>m</u>edications, <u>p</u>ast medical history including diagnosis, <u>l</u>ab results including blood glucose, <u>e</u>vents leading up to the code blue (e.g. vital signs, procedures, equipment] (mnemonic = SAMPLE)
- If successful assist code team in transporting the patient to ICU to complete documentation
- If unsuccessful meet with the charge nurse, social worker, and pastoral care worker for further instructions
- If unsuccessful perform care of the deceased in a designated area as determined by the clinical nurse leader
- Ensure all used emergency equipment and other supplies have been returned to its appropriate location and/or restocked
- Safely dispose of sharps and used bag-valve-mask
- Obtain replacement bag-valve-mask
- Contact pharmacy for replacement of emergency medications

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Second Responder

- Bring emergency equipment (e.g. bag-valve-mask, cardiac arrest board) and Covid-19 personal protective equipment (PPE) cart to the location
- Set up donning/doffing area
- If necessary, assist with transferring patient out of the dialysis chair.
- Place cardiac arrest board under patient, if necessary
- · Assist in opening airway, monitoring and supporting good quality CPR

When code blue team arrives:

- Obtain medical and nursing notes and bring to bedside, if appropriate.
- If family or other visitors present, assist them to another area (e.g. patient waiting area)
- Notify most responsible physician that a code blue is in progress
- Assist team in arrest as required (e.g. getting supplies)

After code blue event:

- If unsuccessful meet with the charge nurse, social worker, and pastoral care worker for further instructions
- If unsuccessful perform care of the deceased in a designated area
- Ensure all used emergency equipment and other supplies have been returned to its appropriate location and restocked
- Safely dispose of sharps and used bag-valve-mask
- Obtain replacement bag-valve-mask
- Contact pharmacy for replacement of emergency medications

Third Responder

- If necessary, assist with transferring patient out of the dialysis chair.
- Continue to return the patient's blood if not already done
- Disconnect blood lines; ensure dialysis access remains intact
- Control crowd and clear area of unnecessary equipment
- Pull curtains around the patient's station
- Assist team in arrest as required (e.g. getting supplies)
- Prime a 1 litre bag of 0.9% normal saline
- Document event
- Obtain a stretcher and/or HoverMatt, if needed

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Other Responders

- Clear area of unnecessary equipment
- Pull curtains around the other patients' stations
- If family or other visitors present, assist them to another area (e.g. patient waiting area)
- Notify responsible physician that a code blue is in progress
- Assist team in arrest as required (e.g. getting supplies)
- Assume responsibility for the other patients in the room, provide reassurance, monitor dialysis, and answer HD machine alarms and telephones

Booking & Program Clerk IV*

When two unit coordinators are present:

- One clerk must stay at the nursing station where the incident is occurring and follow instructions below
- One clerk must remain at the front desk to direct the code blue team, keep wandering visitors in waiting area, and answer telephone calls
- One clerk at the code blue opens patient's PowerChart to the patient's active visit
- Checks to ensure there are code blue labels

When only one clerk present, this clerk must immediately:

- Keeps main door open
- Directs code blue team to location
- Remains at the front desk to answer phone calls

If the patient's relatives or friends approach you:

- Ask the charge nurse (or designate) to talk to them
- Do NOT try to explain the situation
- Do NOT call the patient's relatives
- Do NOT call pastoral care or social worker. A member of the pastoral care team and/or social worker will respond to a code blue. If not, the CNL will contact them.

Renal Technicians/Ward Aide

• Two technicians are required to be present in the code blue area

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^{*}Note: If there is no Booking & Program Clerk IV on duty another team member will assume this responsibility within their scope of practice.



- The primary technician assigned to the room (if available) must stay in the area where the incident is occurring.
- The second technician helps direct the code blue team to the location of the incident by placing an orange cone outside the door of the room where the incident is occurring and stand by to give directions as needed
- Clear the area of obstacles and visitors
- Provide isolation gowns and PPE if needed
- Draw the curtains around the other patients' stations which have a view of the code area
- Assist nurses as necessary to:
 - Obtain supplies (e.g. saline IV bags) as needed
 - o Remove dialysis machine from the area of the code blue if instructed
 - o Answer other patients' machine alarms
 - o Provide reassurance to other patients
 - Assist with transferring patient out of the dialysis chair, if required
 - Transport specimens to the lab, if required
- Renal technicians certified in basic CPR will perform CPR if necessary.

If the patient's relatives or friends approach you:

- Ask the charge nurse (or designate) to talk to them
- Do NOT try to explain the situation
- Do NOT call the patient's relatives

Documentation

• First Responder or most responsible nurse (MRN) document in the nursing narrative notes the sequence of events from the time patient was discovered unresponsive, started the CPR until the arrival of the code blue team and verbal handover was done.

Related Documents and Policies

- 1. <u>B-00-12-10022</u> Falls: Assisting Patient Post Fall in Acute/Sub Acute Care: Appendix B and C-Instructions for Use and Locations: HoverJack & HoverMatt
- 2. <u>B-00-13-10080</u> Cardiac Arrest (Code Blue) Team Responsibilities and Response to Cardiac Arrest Calls (SPH –only)
- 3. <u>B-00-07-10085</u> Cardiac Arrest (Code Blue) Patients with covid-19 like illness or confirmed Case of covid-19
- 4. B-00-07-10060 Cardiac Arrest (Code Blue) Initiating and Responding
- 5. <u>B-00-14-13003</u> Personal Protective Equipment: Sequence for donning and Doffing

References:

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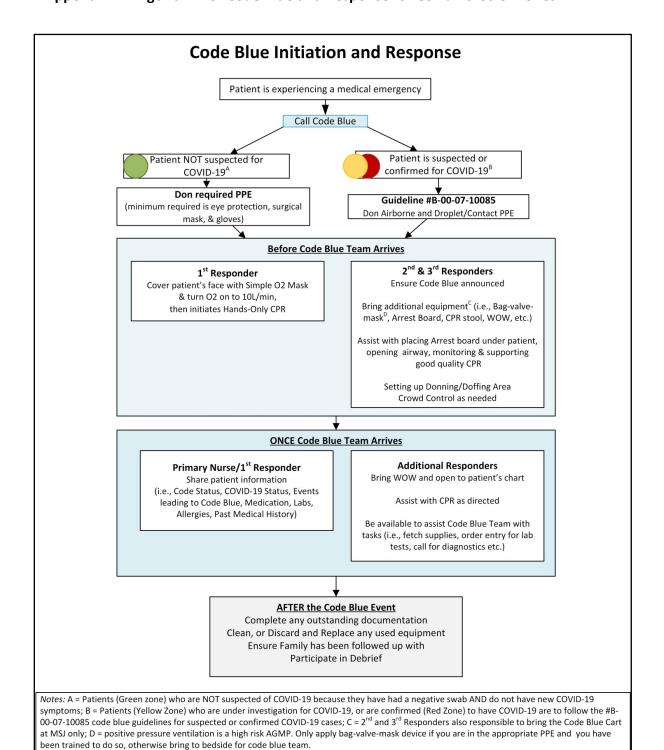
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- 2. Counts, C. [Editor] and Robbins, K [Chapter Editor], (2015). Core curriculum for Nephrology Nursing, 6th Edition. *Cardiac Arrest: Complications of hemodialysis: Prevention and Management*, Section E of Chapter 2 Hemodialysis, p. 141.
- 3. Heart and Stroke Foundation of Canada. Modification to public hands-only CPR during the COVID-19 pandemic. Secondary Modification to public hands-only CPR during the COVID-19 pandemic (April 6, 2020) Retrieved on January 10, 2022 from https://www.heartandstroke.ca/articles/modification-to-hands-only-cpr-during-the-covid-19-pandemic
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Appendices

1. Appendix A – Algorithm for Code Blue Initiation and Response for Covid-19 Color Zones

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Appendix A: Algorithm for Code Blue and Response for Covid-19 Color Zones



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