

Department: Emergency Preparedness	Section:	Subject: Code Blue & Pink - All Departments
Policy: 9986	Original Date: November 15, 2016	Supersedes: N/A
Last Reviewed: January 3, 2020	Next Review Date: October 17, 2023	Approver:

PURPOSE

To provide immediate response by ERH employees and physicians to any persons over the age of 17 that is experiencing a cardiopulmonary arrest or medical emergency. Resuscitation efforts will correspond with evidence based practice guidelines including AHA guidelines for Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS).

NOTE:

- **The Code Blue/Pink policy is for patients, visitors or staff who are experiencing a cardiopulmonary arrest or medical emergency within the hospital or Long Term Care.**
- **For all other areas i.e. Seniors Apartments, Queensway Place and Family Health Team external emergency services (EMS) are to be contacted by dialing 9-911. Remain with the person and initiate CPR if required until relieved by EMS personnel.**

DEFINITIONS

Code Blue/Pink: Is a term used to alert the Code Blue/Pink Team (CBT) to an area where a person has had a cardiopulmonary arrest or is experiencing a medical emergency.
For the purpose of this policy Code Pink and Code Blue will be used interchangeably.

Cardiopulmonary arrest: Person is unresponsive, not breathing, gasping or agonal breathing, no palpable pulse present.

Medical emergency: a critical medical situation in which the person's life may be compromised and he/she is unable to safely or independently get help (e.g. seizures, fainting, unconsciousness, difficulty breathing, acute chest pain)

CODE BLUE/PINK TEAM (CBT)

The following staff members **must** respond to announced location upon hearing "Code Blue" overhead.

- ED physician
- Physician Assistant (if on site)
- 1 ED RN
- 1 Acute Care RN (Charge RN-day shift, NR RN-night shift)
- 1 LTC RPN - (North wing)- Respond to Acute Care for further direction

ACTIVATION

In all cases where it is suspected that a patient has sustained a cardiopulmonary arrest or medical emergency, a "Code Blue" will be initiated through the emergency activation system:

- Depressing the "Code Blue" or "Staff Assist" button to activate local departmental response

- By dialing 911 from any ERH phone and providing Incident Command (IC) specific instructions as to where the Code Blue is located i.e. the department and specific location.
- Repeat the location x3

POLICY

1. Any responder (ERH staff member, medical learner, student, and volunteer) may initiate a Code Blue when they come across any person that is experiencing a cardiopulmonary arrest or medical emergency.
2. If alone upon discovery of the individual with no means of communication, the responder will inform the person:
 - that they are going to get additional help (dial 911, or call out for help and have that person call 911)
 - will return to them as soon as possible
 - will provide help as best they can (consistent with their level of knowledge, skill and ability) and will stay with them until help arrives.
 - If bystander is BCLS trained CPR is to be started.
3. Upon receipt of a 911 call, Incident Command will generate an overhead page identifying the code, department/location and room number.
Examples:
 - **Code Blue/Pink, Acute Care room 202**
 - **Code Blue/Pink, LTC, North Wing, room 543**
 - **Code Blue/Pink, Laboratory, collection room**
5. When a Code Blue/Pink is announced, the Code Blue/Pink team will attend the location and provide BLS and/or ACLS response.
 - ED RN responding will bring the following from the ED:
 - a) AED
 - b) Resuscitation bag consisting of BVM with a bacterial/viral filter and oral airway
 - c) Bag containing PPE (mask, eye/face protection, gown and gloves)
6. If the Code Blue occurs in a public area within ERH, staff in the immediate vicinity are expected to respond to the individual in crisis.
7. All personnel not essential to the Code Blue response must remain outside of the room, in case attendance is necessary to act as a runner for additional supplies, to assist with CPR relief, provide support for family.
8. Individuals that experience a cardiopulmonary arrest or medical emergency outside of the Emergency Department or Acute Care and who are not in-patients/residents should be

transported to the ED as quickly as possible where additional resources are available to manage the individual's health crisis

9. If Code Blue occurs outside the building on ERH property (parking lots, walkways etc.) a rapid risk assessment should be performed to acquire a medical and transportation resources as quickly as possible.
 - Call for assistance from persons nearby to call 911
 - If alone, find a telephone to call 911
 - Call 9-911 (Incident Command) to request assistance from Code Blue Team
 - Return to and stay with the person in crisis, quickly assess for any obvious signs of injury from collapse
 - Begin BLS which includes CPR compressions until EMS arrives

Factors should be considered when undertaking a response on ERH property:

- The situation is appropriate for staff to assist
- To assist would not jeopardize the safety of the staff nor the person who requires assistance i.e put the staff member in danger or harm

This takes into account risks to the responder such as *distance from the building, weather conditions, environmental hazards, responder knowledge, skill and ability* in order to provide the best response for the situation encountered.

****Code Blue drills will be conducted monthly****