

## COVID-19 CODE PROCESS

Updated 03.18.2020

When a “CODE BLUE” is called in a negative isolation area please refer to the following. We would like all staff to respond to codes as we cannot have staff confused on which codes they should or should not respond to. However, some staff members will be cleared to leave before entering isolated areas. This guide outlines a plan from the outer perimeter of unit to the inside of the room. We want to limit as much exposure as possible.

# NO ONE IS TO ENTER THE ROOM WITHOUT PPE REGARDLESS OF THE CONDITION OF THE PATIENT

ALL STAFF PROVIDERS IN THE UNIT DURING THE CODE (OUTSIDE THE ROOM) SHOULD BE WEARING DROPLET MASKS (YELLOW MASKS)

### 1. Staff to report to **OUTSIDE of pod/unit**

- **EKG staff** – will be called off and RT will perform 12 lead EKG if needed
- **LAB staff** – will be called off and RN to draw labs in the room
- **Radiology staff** – wait outside pod area and code team will direct if staff is needed or not.

Please ask staff members to respond **OUTSIDE** of closed pod. DO NOT ENTER the pod unless directed by a code staff member. A nurse will direct you on when and/or if you are needed in the pod or room to perform test.

### 2. Staff to report **INSIDE RN STATION** but NOT IN THE ROOM

- **1 RN** – this RN will serve as a “runner” for the code. This RN will deliver any supplies or equipment needed in the room. NOTE: Supplies and equipment are to only go **IN** the room. The code team can address the removal of items and disinfection after the code. **NO ITEMS SHOULD BE PASSED FROM PATIENTS ROOM TO OUTSIDE OF ROOM.**
- **1 RT** – this RT will also serve as a runner for the respiratory equipment/supplies
- **1 Pharmacy staff** – will act as runners for needed medications/gtts

### 3. Staff to report **INSIDE OF ROOM**

- **3 RNS** – 1 RN to administer medications, 1 RN to be scribe/leader of code until MD arrives (this RN will also run crash cart/defib), 1 RN for compressions/med administration/other needed tasks
- **1 RT** – will assist in bagging patient and assist with intubation
- **1 MD** – run code, intubate patient

\*\*\*\* The critical care team is working on obtaining a lucas device for compressions with less exposure.

Lucas device PRESENT: No need for any other staff members. Follow above guidelines

Lucas device ABSENT: Need for 1 extra RT to help assist in chest compressions