The Institute for Patient Care

Norman Knight Nursing Center for Clinical and Professional Development

PCA Education Forum
Responding to a Unit-based Emergency
February 2022

Patient Emergency

- Call for HELP
- Activate
 Emergency/Code
 Button (on wall behind bed)



Know Where to Find Key Equipment





Post-Code Responsibilities





UPON REQUEST, EXCHANGE THE CODE CART

APPLY BLUE LOCK





TRANSPORT USED CART
TO THE CODE CART
EXCHANGE ROOM

ACCESS NEW CODE

Signs of Opioid Overdose may include:

Unresponsive and unconscious
Slow or no breathing
Gurgling or snoring sounds
Blue/grey lips or nails
Nasal Narcan (naloxone) spray
should be adminstered immediately



PCA Role:

Access Equipment:

- Defibrillator/AED
- Code Cart

Other Roles:

- Watch other patients
- Answer call lights
- Assist with ADLs
- Run for Equipment/Supplies



Other Tasks:

- Draw / Send labs
- Pick up Blood Products
- Locate IV Pumps



Rapid Response Team

A team of responders activated for an acute unexpected change in clinical condition

Composed of the patient's primary team and:

Adult

Pediatric

Newborn

Rapid Response Team



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Reasons for a Rapid Response:

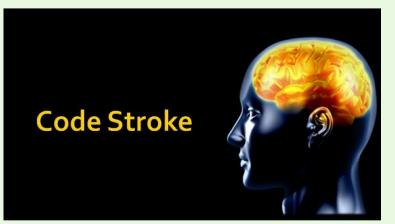
- Chest Pain
- Bleeding
- Low BP
- Low SPO2











If you see any of these symptoms **Call for HELP**



Code Stroke Responsibilities

- Prepare patient for an emergency CT scan
- An IV nurse may arrive to put in a STAT IV
- Patient may be transferred to the Neuro ICU depending on CT results





PCA Role in **Code Stroke**

Per RN direction:

PCA Role:

Vital signs

Phlebotomy

ECG

- stay with the patient and do requested tasks
- VS, blood sugar (low BS can mimic signs of a stroke), phlebotomy, **ECG**



When in Doubt, Get HELP!

Call x 6-3333 for all emergencies

- CODE BLUE
- RAPID RESPONSE
- STROKE
- SURGICAL AIRWAY
- STEMI
- STAT PAGES



Call 6-3333

Fire Emergency

Electrical fires are the most common.

Locate fire pull box & extinguisher. Know your unit's fire safety plan.



