

Protected CODE BLUE

(All Units except ED/ICU)

For Suspected or Confirmed COVID-19

INSIDE Room



MD-Airway



RRT



RN1



First Responder/
charter



RN2

IF no window into room, will also be the inside PPE supervisor (must leave to doff and don new PPE +N95)

Chart outside room if "baby monitor" available



Back up MD-Airway (In PPE)



Back up RRT (In PPE)



Back up RN3 (In PPE)



Monitor / Supervisor (No PPE required)

OUTSIDE Room

Protected Code Blue Box

Required PPE

(Use donning/doffing checklist):

1. Level 2 gown
2. Fit-tested N95 Respirator
3. Face Shield (with bib if available)
4. Extended Cuff nitrile gloves (Intubator and RRT to wear double gloves)

+/- Bouffant (last on / first off)

EARLY DETECTION! Contact ACCESS team and MRP for early signs of respiratory deterioration!

Activate Protected Code Blue by calling Locating at "5555". Apply Tavish mask to patient, turn up O₂ to 8-10L/min.

First Responder: Apply Tavish mask. Begin chest compressions. DO NOT provide manual ventilations. DO NOT suction unless you are wearing Droplet/Contact PPE **with N95**

DO NOT rush inside. Ensure PPE with N95 is donned. Bring Protected Code Blue box to outside of room.

Designate a Monitor/Supervisor role to monitor PPE use upon entry/exit to room.

AVOID manual ventilation. USE a viral filter and 2-person bagging technique if indicated.

Limit aerosol-generating procedures. If intubation is required, connect in-line suctioning and viral filter and maintain a closed system.

Video laryngoscopy preferred or LMA. Maximize space between airway and provider. PAUSE compressions for intubation. If able to oxygenate but not intubate, consider use of laryngeal mask airway.

