# PROTECTED CODE BLUE

(FOR PRE-ARREST AND ARREST PATIENTS)

#### **KEY PRINCIPLES**

Rapid Team huddle before entering room

Roles, responsibilities, equipment, medications, PPE.

Minimize number of people in room



FOR AIRWAY (PRE-ARREST)

→ I MD / I RN / I RT

FOR CARDIAC ARREST (CPR)

→ I MD / 2 RN / I RT

Don Appropriate PPE **before** entering NO EXCEPTIONS



\*\*\*IF AVAILIBLE, NEGATIVE PRESSURE ROOM OR ROOM WITH HEPA FILTER AND CLOSED DOORS\*\*\*

### **AIRWAY & INTUBATION** (see intubation checklist on Code Cart)

Bagging – ONLY for severe desaturation in non-cardiac arrest with ALL team members in appropriate PPE. (If bagging use 2 person technique for optimal seal and smallest possible tidal volumes.)

Assess airway – if expected difficult, page Anesthesia STAT. Wait for anesthesia if patient safety is not compromised.

Intubation: optimize first pass success:

Rapid sequence intubation

Video-laryngoscopy by most experienced operator

If first attempt failure: page Anesthesia STAT and consider LMA.

#### **CPR**

Prior to initiating CPR, don PPE and place procedure mask over patient's face.

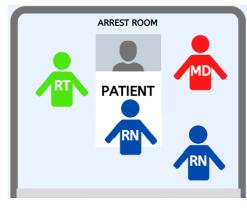
2 RNs or delegate perform CPR in 2 minute rotations.

**NO** Bag-valve mask ventilation prior to intubation during CPR.

Control Airway: As soon as equipment is ready, pause CPR and intubate patient.

Resume CPR once patient is intubated and BVM with filter is attached.

## Team Members & Personal Protective Equipment





SAFETY OFFICER & RUNNER (Droplet Contact PPE) BACK-UP MD & RT OUTSIDE OF ROOM



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