Clinical Emergency Guideline
Covid-19 Impact for RRT / Code Response

o **Minimize** number of **staff entering room**

_____Determine if Patient Covid-19 +/ PUI

_____Wash/sanitize hands, Don appropriate PPE

Suspected/Confirmed Covid-19 Patients

_____Full N95/goggles or shield/gown **or** PAPR and gown PPE for all providers in room

_____Place surgical mask on patient if possible

_____Minimize opening/closing of door

_____In room to out of room communication via dedicated cisco phone/writing

_____Clean all equipment upon exit

• **Code cart stays outside** of room for all events:

_____Take defibrillator / Defibrillator Pads / Electrodes into room

RRT Management

Inside room (3-4 responders only)	Outside room:
Primary RN	Staff RN recorder
Hospitalist	Charge RN for PPE control
RRT RN (brings RRT meds, leaves outside room on code cart)	Respiratory therapist
	Pharmacist if available
Primary MD if available	RN for medication preparation
	Runner

Non-Code Intubation

Inside room (4-6 responders only)	Outside room:
Anesthesia	Charge RN –obtain red biohazard tray and wet wash cloth
Respiratory Therapist	Runner
Primary RN-report	Critical Care RN –bring glydescope and go bag; will don PPE and enter room if needed

Code Management

Inside room (4-6 responders only)	Outside room:
Primary RN –Start CPR, inform team	Charge RN –PPE
Code Resident –Team Leader	Pharmacy if available or Med prep RN
Respiratory Therapist	Nurse Recorder
Code RN (Bring Glydescope and Go bag)	Respiratory Therapist
Second Compressor RN or Resident	Runner
	Anesthesia –enter if needs intubation

Cart Exchange: **Notify Pharmacy and Central Sterile** if used for Covid-19 patient