

POLICY MANUAL

Subject: Patient Emergency Evaluation Criteria

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POLICY

Licensed nurses and/or physicians are responsible for evaluation of any medical emergency occurring at the residential site. If the physician is not on site at the time of the emergency, the pertinent information is forwarded to the physician via telephone and appropriate orders are both obtained and implemented.

PROCEDURE

1. Nursing and physician staff members are notified of medical emergencies occurring on the River Road complex by "Code Blue" announcement or by telephone in less acute situations.
2. The licensed nursing staff on duty, and physician if on site, will proceed to the location of the identified patient if the patient has not presented to the nursing station.
3. Criteria for physician evaluation and/or transfer to acute or urgent care medical facility include, but not limited to, the following:
 - a. Cardiovascular events such as sustained extremes in heart rate, arrhythmias, sustained extremes in blood pressure, acute chest pain, and cardiopulmonary arrest (See related policy on Cardiopulmonary Resuscitation)
 - b. Hallucinations accompanied by change in vital signs, possibly signaling impending DT's
 - c. Status epilepticus
 - d. Acute pain
 - e. Obvious fractures
 - f. Conditions requiring IV therapy, skilled respiratory therapy, or any type of advance life support equipment.
4. After the nurse and/or physician have ascertained the nature of the emergency, the patient is moved to the nursing station area if possible. The physician is notified if not already involved.

5. The physician gives appropriate medical orders which may include a range of interventions, form monitoring in the nursing area on a 24 hour basis by licensed nursing staff to immediate transfer to the emergency room of a tertiary care hospital.
6. If a transfer is needed, nursing staff will:
 - a. Call for an ambulance service or transport in company vehicle as appropriate
 - b. Notify the receiving facility of the details of the emergency and the care given to this point
 - c. Notify the patient's designated emergency contact person³
7. Supportive care is given as directed by the physician until such time as transfer is complete.
8. All of the above is documented on the Transfer Form, a copy of which is sent with the patient to the receiving facility along with copies of other pertinent patient records.