Rapid Response/ Code Blue Team Curriculum

The management of a deteriorating patient often requires a multidisciplinary approach. To that end, University Hospital has a team of nurses skilled in rapid response and code algorithms who are paired with Department of Medicine house staff to provide such care.

Rapid Response/ Code Blue Team:
- Adult SWAT Nurse
- Respiratory Therapist
- Anesthesiologist (Code Blue Team only)
- SICU Resident (Code Blue Team only)
- MICU Resident
- Administrative Supervisor
- UPD (Code Blue Team only)
- Pharmacist (Code Blue Team only)
- PGY-3 Department of Medicine House Officer- Team Leader
- Possible additional GME/UME Learners

I. Educational Purpose

1. Collaborate with SWAT RN to run list of “high alert patients” & patients with elevated EWS Scores at shift change, 7 days a week at 0800 & 2000.
2. Round with the SWAT RN on any patients of high concern and determine a Plan of Care for each.
3. Collaborate with SWAT RN, Medical Teams & Nursing Staff regarding patient concerns as needed during shift.
4. Provide a timely response and consistent approach to managing care for patients during all RRT activations, Code activations and Patient Falls, including:
   a. Performing as Team Leader during all Code Blue/RRT/Fall events
   b. Notifying Attending Physician of Record
   c. Determining a post-event Plan of Care for the patient, including additional services and/or higher level of care
   d. Writing post-event orders
   e. Conducting post-event “huddles”/debriefing with Team Members and unit staff
   f. Documentation (EPIC, Resuscitation Record, etc).
   g. Notifying patient’s next of kin

II. Learning Venue

A. Rotation Description – Learners on this service will work exclusively at Upstate University’s DT campus under direct supervision of Rapid Response/Code nursing staff who have a skill set that is specific to the patient requiring urgent attention and/or BLS/ACLS.

Day Shift: Senior Resident
Monday-Friday:
- 7AM-8AM: AM Conference
- 8AM-8PM: Rapid Response/Code Team
Saturday-Sunday:
- 8AM-8PM: Rapid Response/Code Team
Night Shift: Senior Resident
Monday-Sunday:
- 8PM-8AM: Rapid Response/Code Team
Expectations of Senior House Officer – senior resident assigned to this 1-2 week rotation will carry a dedicated Rapid Response/Code Team pager and vocera (that will be passed between the day and night services) and respond urgently to all pages requiring a bedside assessment for all non-ICU adult patients being cared for at University’s downtown campus. The senior resident will work with his/her nurse team members to manage Rapid Response calls, code calls, and calls for procedures that can be performed at the bedside (the latter will require a supervisor credentialed in said procedures at the bedside). The senior resident, in coordination with the other Rapid Response/Code team members, is responsible for communicating with patient’s primary service as well as health care proxy. At conclusion of each response, team will undergo a debriefing and identify areas of improvement. In addition, senior house staff will participate in interactive didactic experiences which will include multidisciplinary classroom sessions as well as mock/simulated scenarios.

B. Teaching Methods
1. AM Conference – The day-rotating senior resident is expected to attend Department’s AM Conference Monday-Friday for didactics on internal medicine and its subspecialties. The night-rotating resident is exempt from this conference.
2. Multidisciplinary Didactics – members of the Rapid Response/Code team will participate in classroom-based education on a daily basis covering topics relevant to the management of a deteriorating/coding patient.
3. Simulated Exercises – every Monday
4. Bedside Education – members of the Rapid Response/Code team will debrief after each bedside encounter to discuss quality and safety measures to improve future performance.
5. Review Team Leader Role & Responsibilities (Dr. Amit Dhamoon & Dr. Stephen Knohl)
6. Review RRT/Code Blue Team response and Documentation (Resuscitation Committee Chair)
7. Review the Code Cart & Zoll Defibrillator (SWAT RN)
8. Review Intraosseous Device
9. Review I-STAT (SWAT RN)
10. Participation in Scenarios/Mock Codes (SWAT RNs, Clinical Educators)
11. Vocera Training (Derek Hawkins)
12. Recommended Reading:
   AHA ACLS Guidelines 2015
   AHA Get With The Guidelines- Resuscitation Program
   Upstate’s Policies/Procedures: (CM E 15) Emergency Medical Response Teams, (CM R14) Adult/Pediatric Rapid Response Teams, (CM F 07) Fall and Injury Prevention Program

C. Mix of Diseases and Patient Characteristics
This rotation has the potential to expose the MAR/MAI to all different patient and disease types.
Procedures: There may be opportunities to perform the following procedures:
   ACLS
   Intubation
   Thoracocentesis
   Paracentesis
   Percardiocentesis
   Central Line Placement
   Arterial Line Placement
Peripheral/Interosseous Line Placement  
Lumbar Puncture  
Nasogastric Tube  
Arterial Puncture  
Venipuncture

III. Method of Evaluation

Evaluations are based on the six core competencies. Each member of the team is expected to complete an electronic evaluation at the end of the rotation (to be delivered via MedHub).

IV. Rotation Specific Competency Objectives

A. Patient care – see general document; specific objectives to this rotation are the management of patients requiring urgent attention, BLS/ACLS, or certain procedures (as per above)

B. Medical knowledge – see general document; specific objectives to this rotation are the attainment of information and skills relevant to the decompensating/coding patient as well as the indications/contraindications of certain procedures (as per above)

C. Professionalism – see general document

D. Interpersonal and Communication skills – see general document; specific objectives to this rotation are interactions with nursing staff supervising as supervisor and educator in the management of decompensating/coding patients, communication with providers spanning all departments involved in the care of the adult patient, and contact with health-care proxies about situations that may be more sensitive (given the nature of the service).

E. Practice Based Learning – see general document

F. Systems Based Practice – see general document; specific objectives to this rotation are the unique opportunity to work in a cross specialty environment involving multiple departments and nursing staff with the goal of improving quality and safety as it relates to time-sensitive patient care. In addition, the resident will need to learn how to maneuver within the complex system of managing a patient that involves a multitude of services and under, often times, sensitive circumstances.

Reviewed & Revised by: Stephen J. Knohl, MD/Ellen Anderson  
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