



**NEPHROLOGY PROGRAM
DEPARTMENT POLICIES AND PROCEDURES**

**Hemodialysis - Section 03 - Patient Assessment & Management - Neph 3-11
Addendum to Facility Wide Arrest Procedure
No.: 00734 (TOH Standardized Policy Number)**

ISSUED BY:

Hemodialysis Clinical Practice Committee

DATE OF APPROVAL:

N/A

APPROVED BY:

Program Clinical Director & Division Head

LAST REVIEW/REVISION DATE:

2018/01

CATEGORY:

Patient Assessment and Management

IMPLEMENTATION DATE:

2004/01

PURPOSE:

- To define the roles of the Hemodialysis staff in the event of a Cardiac Arrest

BACKGROUND STATEMENTS:

- In the event of a cardiac arrest in TOH Satellite Hemodialysis Units the standards as outlined in this policy are followed up to the Cardiac Arrest Teams arrival. At that point the Host Hospital's Cardiac Arrest policies will be followed
- Within the 3 TOH campuses all cardiac arrest codes are initiated through locating. Civic 15555, General 75555, Riverside 85555 (call 911 to request ambulance)
- The Nephrologist on call will be contacted
- The patient's family is to be notified and instructed where to go
- All patients admitted at TOH at high risk of cardiac or respiratory arrest will have an end of life plan of treatment form at the front of their in-patient chart as per [policy #00292 CPR - End of Life Care and Plan of Treatment](#)
- The resuscitation status of out-patients is documented in NephroCare
- The following guidelines are particular to the hemodialysis patient experiencing cardiac arrest

ALERTS:

Infection Prevention and Control:

1. Hand Hygiene: As per [Policy # 00014 - Hand Hygiene Policy and Procedure](#)

Personal Protective Equipment: As per [Policy # 00023 - Infection Prevention and Control Policies and Procedures - Routine Practices](#)

PROCEDURE:

1. The responsibilities listed below are guidelines and are not necessarily completed in the order listed. Many will have been done in the moments leading up to the arrest. Others will take on different priorities secondary to the patient's co-morbidities.

When a respiratory or cardiac arrest occurs in the dialysis unit:

A. **Nurse that discovers the patient will:** (Note: tasks may be delegated to other team members as appropriate)

- Determine unresponsiveness and complete initial assessment
- Call for assistance – without leaving patient
- Note time of occurrence, alert second nurse of situation and instruct to call the following:
 - Appropriate campus specific telephone extension # indicating “Code Blue, Dialysis Unit/location
 - Notify physician: the physician on call for that day is the one to be called
 - Riverside campus also call 911 for an ambulance
- For patients admitted at TOH verify if they have documented end of life care and plan of treatment orders. This will be documented in red on the front of the interdisciplinary Kardex. Plan of Care order sheet should be on the front of the chart. Refer to policy [#00292 CPR - End of Life Care and Plan of Treatment](#)
 - For patients admitted at satellites, refer to the in-patient chart for resuscitation status
 - For outpatients check the R-191 for resuscitation status
- Lower patient's chair/bed to lowest position
- Ensure BCLS compressions are initiated as applicable for the patient's end of life care and plan of treatment (code) status

B. Second Nurse will:

- Bring the arrest cart and emergency drug box to the patient
- Attach patient to cardiac monitor/AED if available in the unit and follow the AED algorithm ([COR-AED-01 Automated External Defibrillator \(AED\) use in Cardiac Arrest](#))
- Place backboard under the patient
- Direct staff in room to apply PPE
- Insert oral airway to establish and maintain open airway
- Ventilate with ambu bag
- Once arrest team/ambulance arrives ensure that accurate and thorough documentation of interventions and patient's response are recorded on the

Cardiopulmonary Arrest Record (CDP 06) located on top of the medication tray in the top drawer of the crash cart.

C. Third and subsequent Nurse:

- Obtain stat blood samples as ordered
 - Obtain stat blood glucose using glucose meter and following [Medical Directive Neph 2-11](#) to administer IV D50W as indicated
 - Discontinue dialysis, by first assessing if the patient's blood can be rinsed back or not:
 - a) If there is a pre-existing conductivity/temperature/water alarm, or a suspected hemodialysis complication such as air in circuit then discontinue dialysis without rinsing back the patient's blood.
 - b) If there are no pre-existing machine alarms, or suspected hemodialysis complications then the patient's blood may be rinsed back.
 - Flush the access lumens/needles with 0.9% NaCl
 - Connect an IV of 0.9% NaCl to the access and infuse to KVO using infusion pump. The IV can be used to administer medications or fluids as needed.
 - Document events on the Cardiopulmonary Arrest Record (CDP 06)
2. Available dialysis nurses will assist the arrest team. The remaining staff will assume responsibility, both physical and emotional, for other patient(s).

DOCUMENTATION:

1. Document on Cardiopulmonary Arrest Record (CDP 06)
2. Satellites to document on host hospital arrest record
3. Document in NephroCare Progress Notes
4. SLS report

RELATED POLICIES / LEGISLATION:

1. Administrative Policies and Procedures - [Patient and Community Relations – Policy #00292 CPR – End of Life Care and Plan of Treatment \(2012\)](#)
2. Infection Prevention and Control Manual - Basic Tenets of Infection Control - [Policy # 00014 - Hand Hygiene Policy and Procedure](#)
3. Infection Prevention and Control Manual - [Policy # 00023 - Infection Prevention and Control Policies and Procedures - Routine Practices](#)
4. [TOH Corporate Medical Directive COR-AED-01 Automated External Defibrillator \(AED\) use in Cardiac Arrest \(2016\)](#)
5. Nephrology Medical Directive – [Neph 2-11 Intravenous D50W for Hypoglycemia](#)

REFERENCES:

1. TOH Emergency Preparedness: Code Blue Protocol, (Jan 2015) found on myHospital at Employee Services/Emergency Preparedness/Code Blue Resources

COMMENTS / SIGNIFICANT REVISIONS:

Several changes to this policy, please review