

# Cardiac Arrest Priorities

## Create 2 Zones

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### 1. Create 2 Zones "Internal" and "External"

#### a. Internal Zone

- i. Inside the patient room with active cardiac arrest
- ii. PPE= Airborne with Contact= N95/PAPR, Eye protection, Gown, Gloves
- iii. No provider enters the Internal Zone unless they have on Airborne with Contact PPE

#### b. External Zone

- i. Immediately outside the patient room
- ii. PPE= Droplet with Contact= Surgical Mask, Goggles, Gown, Gloves
- iii. PPE for Covid Room= Airborne with Contact= N95/PAPR, Eye protection, Gown, Gloves

## Minimize Personnel

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### 2. Minimize Personnel - Minimize Personnel to 5 people or less (Team Leader can allow more in the room as clinically necessary)

#### a. Role of the Team Leader (Senior most Physician/APP) = Code is run by the Team Leader

#### b. Role of the Charge Nurse= Minimize the personnel in the room to only those needed to provide direct patient care

#### c. Roles in the ACLS protocol include by zone

- i. Internal Zone (job titles include Physician/APP, RN, RT, NA) - Team Leader; Chest Compressions x 2-3, Airway x2; documentation (maybe asked to go to external zone by team leader)  
\*the most highly skilled person should perform intubation to decrease aerosolization risk
- ii. External Zone (job titles include Pharmacy, RN, NA) - Medication, Crash Cart Supplies, Runner
  1. Consider a second provider in Airborne with contact PPE outside the patient room in anticipated difficulty with securing the airway or need for complex airway maneuver.

## Crash Cart

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### 3. Crash Cart

#### a. Stays in External Zone

#### b. Defibrillator transfer to Internal Zone

#### c. Hand supplies, including intubation supplies, and medication to the Internal Zone, as needed

## ACLS

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### 4. ACLS

#### a. Standard ACLS algorithms apply at the direction of the team leader

## Debrief

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### 5. Debrief

- a. Review successes and failures, report issues to nurse manager and medical director
- b. Review any concern of a provider exposure

## Cleaning

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### 6. Cleaning

- a. Defibrillator= hospital approved wipe cleaners
- b. Monitors/cords/cables= hospital approved wipe cleaners
- c. Intubation equipment= Cover laryngoscope blade with outer glove immediately after confirming placement of after confirming placement of endotracheal tube (ETT). At end of code, place in appropriate bag to send for reprocessing.