## UConn Health Covid-19 Medical Emergency / Cardiac Arrest Guidelines

It is imperative that a cardiac arrest is prevented; evaluation by the ICU service is required when a Covid-19 patient has acute respiratory distress and rapid escalation of oxygen requirements.

#### Code team

#### Primary Response

- ICU medical officer/MOD holding RRT/Code blue pager (could be fellow/resident/APP) – Code leader
- ICU RN (PAPR required) IV access and chest compression assistance
- Floor nurse (PAPR required) chest compressions
- 2 Respiratory therapists (PAPR required) 1 RT to get ventilator ASAP to bring to the room and one RT to start Ambu-bag (with vial filter)
- Anesthesiology (PAPR required)
- Additional staff may enter the room with full PPE and stand 6 feet from patient.
- PAPR is strongly recommended during any procedure that involves aerosolization.

## Secondary Response

- Hospitalist team outside the room
- Pharmacy outside the room
  - Pharmacy code kits will be prepared and available specifically for Covid-19 patients. May hand medications to MD or RN in PPE prior to room entry (~2 rounds of ACLS).
- If code occurs, staff must bring PPE (including PAPR) to that room.
- RN giving meds from outside (should have PPE)
- Nursing supervisor monitor for PPE safety of staff, ensure appropriate staffing presence, crowd control, and facilitate transfer to ICU.

# Checklist

- Floor team/RN identifies arrest call "Medical Emergency / Cardiac Arrest"
- Code cart pulled to outside the room and defibrillator brought into the room and attached to patient (this must be decontaminated using current protocol after use)
- Bag-valve mask ventilation (with viral filter)
- Code team arrives and dons PPE
- Code leader = ACLS trained provider
- High consideration for placement of LMA as temporary airway, otherwise proceed to Covid-19 Intubation Checklist
- ROSC or death declared

## Post-Medical Emergency / Cardiac Arrest

- ROSC or death declared
- If ROSC, transfer to the ICU Covid-19 bio-contained unit.
- If death, proceed to handling of COVID+ death patients
- Appropriate equipment decontamination and preparation for subsequent use
- Doff PPE and perform hand hygiene
- Full debrief
- Nursing supervisor to return PAPRs to the appropriate units