Checklist for UNSTABLE CODE STEMI (CCTC)

☐ CCTC CN assigns CODE STEMI RN (identified on assignment sheet)

If the Charge Nurse is the only RN available to assist with patient transport then he/she must hand off the pager to a CCTC RN who will have support from the CCTC Coordinators or the After Hours Coordinator

CODE STEMI RN must be prepared to report to the VH ED within 10 minutes of an Unstable Code STEMI page. In preparation, CODE STEMI RN completes the following checklist at the start of his/her shift:

☐ CODE STEMI RN gives a report on assigned patient to other RNs in the same Bay so that patient handover can be completed quickly if required
☐ Touch base with CCTC Resident who is carrying CODE STEMI pager (#15300) and reviews response plan
☐ Examine CODE STEMI transport pack (stored in Charge Nurse Office) to familiarize self with available supplies (supply checklist below).
☐ Notify CN of changes in assigned patient’s condition that might necessitate reassignment of CODE STEMI RN

If Unstable CODE STEMI is activated:

☐ CCTC Resident and/or Charge Nurse notifies CODE STEMI RN
☐ CODE STEMI RN provides quick handover report on assigned patient
☐ CODE STEMI RN brings CODE STEMI transport pack
☐ RN/RTT/MD picks up defibrillator en route to VH ED and Pacemaker Pads
☐ RRT brings intubation box
☐ CODE STEMI Team (CCTC MD/CCTC RN/and transport RRT) meet in ED and obtain report
☐ Consider need for PPE.
☐ Connect pacemaker pads prior to transport
☐ CODE STEMI Team accompanies patient directly to University Hospital Cardiac Catheterization Lab (UH Main C2 – 100, extension 35828) via Middlesex-London EMS
☐ Stop in UH ED if patient becomes unstable. UH ED is aware unstable STEMI patient en route.
☐ VH CODE STEMI team provides handover to Cardiac Cath Lab and UH ICU Team in Cath Lab (or in ED if stopover is required)
☐ VH CODE STEMI team returns to Victoria Hospital via Checker Cab – Book Checker Cab by calling Voyageur Dispatch 519 455 1390. Voyageur will ask for the patient name/PIN number with whom this travel is associated.
EQUIPMENT CHECKLIST

Check that all listed supplies are available at the start of the shift/prior to leaving CCTC:

- CCTC Transport Intubation box (RRT)
- CCTC Defibrillator
- Morphine
- CCTC CODE STEMI Transport Bag (contents listed below):
  - Copy of the attached document
  - Documentation – Clip board with Clinical Progress Record
  - NTG spray
  - Pressure bag
  - Preloaded epinephrine
  - Preloaded atropine
  - Preloaded lidocaine syringe
  - Amiodarone bolus dose with 30 ml luer-lock syringe and 50 ml bag of D5W
  - Red blunt access needle for drawing up D5W
  - Tape
  - Med stickers
  - Syringe with needle for morphine
  - Pen
  - ECG electrodes
  - PPE including mask with face shield
  - Transcutaneous Pacer Pads  *Store Pacemaker Pads horizontally to prevent gel from draining to one side.

Other supplies that may be required would be based on individual patient need.
Algorithm for the Transport of Code STEMI Patients (revised March 12, 2014)

Unstable patient defined as:
- On NIPPV (BiPAP)
- Intubated
- Requiring defibrillation > 1
- On inotropes/vasopressors
- Being temporarily paced
- >50% oxygen
- Cannot lay flat

STEMI patient identified in VH Emergency Department

CODE STEMI Activated

Is the patient stable?

YES

STEMI patient remains at UH

No

Patient intubated for Airway Protection (if required)

VH Emergency MD contacts CCTC MD

VH Emergency Charge RN pages Unstable Code STEMI Transport Team (pager 15300) by calling Switchboard. The team includes
- CCTC MD carrying code pager
- RRT assigned to ED
- CCTC Charge RN/RN

Arrival in ED within 10 minutes.

Page also notifies Patient Access and UH ICU Charge RN of the patient.

VH ED Charge RN notifies UH ED Charge RN

Unstable Code STEMI Transport Team (CCTC MD, RRT and CCTC RN) transports patient to UH Cath Lab via EMS

Unstable Code STEMI Transport Team transfers care to UH ICU receiving staff and UH Cath

Unstable Code STEMI Transport Team returns to VH via taxi

Updated September 29, 2014