

Clinical Emergencies

January 2021 Monthly Education



Title: Clinical Emergencies	Policy Number: OP.005.0
Date Issued: 04/01/2016	Date Revised: 04/01/2016, 01/01/2018
Source: SerenaGroup™ Inc.	Revisions:
SerenaGroup	Medical Director SerenaGroup, Inc. Thomas E. Serena MD FACS

POLICY:

In the event of a clinical emergency, the appropriate emergency activation response and/or resuscitative procedures shall be followed.

PURPOSE:

To provide guidance for management of a clinical emergency in the Wound Center and hyperbaric center. A Clinical Emergency is defined as a condition or injury that is acute and poses an immediate risk to a patient's life.

PROCEDURE:

- For all clinical emergencies, the hospital policy and procedure shall be followed. For most centers, this will require staff to activate the hospital's emergency response system.
- Initiate cardiopulmonary resuscitation as indicated until hospital code team or emergency responders arrive. Appropriate wound center staff will maintain CPR certification if required by hospital policy.
- Once the hospital code team or emergency responders arrive, they will assume responsibility and be responsible for management of the patient.
- The clinical emergency shall be documented in the medical record in accordance with hospital policy.
- Occurrences that meet the hospital's definition for reporting shall be reported in accordance with hospital policy.





Code Blue or 9-1-1?

- Many free standing clinics will rely on calling 911 in the event of an emergency
- Most Hospital based centers will utilize a Code Blue (or similar) response team

It is imperative that you are familiar with which system your clinic utilizes





EMERGENCY EQUIPMENT

Code Cart

- Will only be available if your department utilizes a code team
- Staff must be trained and qualified to administer medications



Automatic External Defibulator (AED)

- Commonly found in public buildings
- Built in safety measures allow the device to be used by individuals with minimal or no training





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CERTIFICATION

Many departments will staff to be certified in Basic or Advanced life saving techniques. Often times the Physician is required to have ALS certification while nursing staff are required to have BLS certification. *check with your Hospital policy*

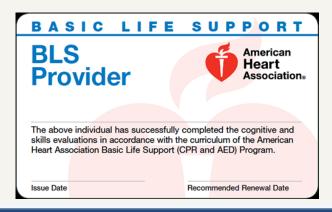
Both BLS and ALS certifications are designed for pre-hospital life support

Differences:

BLS: non-invasive life saving techniques

ALS: non-invasive and invasive life saving techniques, including but not limited to: injections,

medications and airway equipment





FALLS

- One out of five falls causes a serious injury such as broken bones or a head injury
- Each year, 3 million older people are treated in emergency departments for fall injuries.
- Conditions that can cause falls:
 - Lower body weakness
 - Vitamin D deficiency
 - Difficulties with walking and balance
 - Use of medicines, such as tranquilizers, sedatives, or antidepressants.
 - Vision problems
 - Foot pain or poor footwear
 - Home hazards or dangers such as broken or uneven steps and throw rugs or clutter that can be tripped over



FALL PREVENTION

Preventing falls in the clinic:

- Identify high risk patients
 - Be cautious of identifiers that may violate their privacy
- Assist high risk patients to the exam room
 - Encourage the use of wheelchairs, walkers or other assistive devices
- Assist with transfers
- Do not leave unattended high risk patients







HYPOGLYCEMIA

- <u>Definition</u>: A condition in which your blood sugar (glucose) level is lower than normal. Glucose is your body's main energy source.
- Signs and Symptoms to be aware of:
 - Feeling shaky
 - Being nervous or anxious
 - Sweating, chills and clamminess
 - Irritability or impatience
 - Confusion
 - Fast heartbeat
 - Feeling lightheaded or dizzy
 - Hunger
 - Nausea

- Color draining from the skin (pallor)
- Feeling sleepy
- Feeling weak or having no energy
- Blurred/impaired vision
- Tingling or numbness in the lips, tongue or cheeks
- Headaches
- Coordination problems, clumsiness
- Nightmares or crying out during sleep
- Seizures

HYPOGLYCEMIA SYMPTOMS













HYPOGLYCEMIA - TREATMENT/PREVENTION

Acceptable interventions before calling for emergency assistance:

- Diabetic nourishments
 - Juice, cookies, crackers etc.
- Emergency glycemia kit (use of items in the kit requires Physician orders)
 - Glucose tabs

Prevention is key!

- Encourage patients to have a well balanced meal before their appointment (unless otherwise recommended by the Physician)
- Provide nutritional education
- Encourage patients to check their blood sugar often
- Refer to a dietitian
- Provide Physician orders for nutritional supplements designed for glucose control

https://www.niddk.nih.gov/health-information/diabetes/overview/preventing-problems/low-blood-glucose-hypoglycemia

https://www.diabetes.org/healthy-living/medication-treatments/blood-glucose-testing-andcontrol/hypoglycemia



SEIZURES

- About 1 out of 10 people may have a seizure during his or her lifetime.
 - That means seizures are common, and one day you might need to help someone during or after a seizure.
- These are general steps to help someone who is having any type seizure:
 - Stay with the person until the seizure ends and he or she is fully awake. After it ends, help the person sit in a safe place. Once they are alert and able to communicate, tell them what happened in very simple terms.
 - Comfort the person and speak calmly.
 - Check to see if the person is wearing a medical bracelet or other emergency information.
 - Keep yourself and other people calm.
 - Offer to call a taxi or another person to make sure the person gets home safely.

HEAF

HEART ATTACK

- <u>Definition</u>: A heart attack, also called a myocardial infarction, happens when a part of the heart muscle doesn't get enough blood.
- The major symptoms of a heart attack are:
 - Chest pain or discomfort.
 - Feeling weak, light-headed, or faint
 - Pain or discomfort in the jaw, neck, or back
 - Pain or discomfort in one or both arms or shoulders
 - Shortness of breath
 - *Activate your emergency response plan immediately if you notice symptoms!*





STROKE

- During a stroke, every minute counts! Fast treatment can lessen the brain damage that stroke can cause
- Signs and symptoms of a stroke:
 - Sudden **numbness** or weakness in the face, arm, or leg, especially on one side of the body.
 - Sudden **confusion**, trouble speaking, or difficulty understanding speech.
 - Sudden trouble seeing in one or both eyes.
 - Sudden **trouble walking**, dizziness, loss of balance, or lack of coordination.
 - Sudden severe headache with no known cause





ACT FAST

SPOT A STROKE

LEARN THE WARNING SIGNS AND ACT FAST



























BALANCE

LOSS OF BALANCE, HEADACHE OR DIZZINESS **EYES**

BLURRED VISION

FACE

ONE SIDE OF THE FACE IS DROOPING ARMS

WEAKNESS

SPEECH DIFFICULTY

TIME

TIME TO CALL FOR AMBULANCE IMMEDIATELY



CALL 911 IMMEDIATELY





QUIZ TIME



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QUESTION 1:





1. Every wound center should call 9-1-1 immediately when a medical emergency occurs.

<u>Answer</u>: **FALSE**. It is important to know whether your department relies on 9-1-1 emergency services or a code blue response team for medical emergencies in your department



QUESTION 2:





2. Preventative measures should be taken for patients at a high risk for falls.

<u>Answer</u>: TRUE. Appropriately assessing a patient and identifying their level of risk for falls will ensure a safe environment while they receive care.



QUESTION 3:





3. Patient education and early intervention may prevent hypoglycemic events in the wound center.

<u>Answer</u>: **TRUE**. Appropriate medication control, patient education, nutritional supplements and dietary referrals can prevent hypoglycemic emergencies

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QUESTION 4:





4. Timely response in any clinical emergency is key for positive patient outcomes.

<u>Answer</u>: **TRUE**. Early detection and intervention is the best way to improve outcomes for those experiencing a medical emergency



Thank you for taking the time to complete SerenaGroup Education for January 2021. SerenaGroup continues to focus on providing education to all clinical staff. If you have ideas, questions, comments around education – please reach out to the Education Committee Members.

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