

Guidelines for Code Blue in COVID-19 Positive or COVID-19 Suspect Residents in a Personal Care Home or Transitional Care Centre

Individuals with COVID-19 are known to have a risk of their condition deteriorating quickly. To mitigate Code Blue events in COVID-19 residents:

- Implement frequent monitoring noting increased temperature and heart rate, and/or decreased blood pressure and oxygen saturation.
 - Involve regular consultation with primary care providers.
 - Have regular dialogue with a resident who has an ACP R, family and the primary care provider to consider a change of ACP status with any change or deterioration of condition.
 - Communicate ACP-status clearly on the resident's care plan and share the information so that it becomes known by all nursing team members.
1. If a resident who has an ACP R is found without a pulse or in respiratory arrest:
 - A nurse is to be called upon immediately and notified of the resident status.
 - The nurse will direct a staff person to call 911 and to retrieve the Automatic External Defibrillator (AED), the Emergency Drug Box and the portable oxygen tank.
 - Minimize the number of staff entering the room to one person where possible.
 - Staff must not enter the room without the required Personal Protective Equipment (PPE). Ensure Enhanced Droplet/Contact Precautions are observed.
 - Up to (1) one nurse should don PPE safely prior to entering resident's room.
 - At least one (1) staff person should stay outside of the room to be the documenter and "runner" to assist with the code.
 2. The nurse will:
 - Apply a procedural mask on the resident covering their mouth and nares. A towel may be used if a procedure mask is not readily available.
 - **Perform chest compressions only.**
 - **NO** manual ventilation rescue breaths are to be administered.
 - If an AED is available, apply pads and shock if indicated.
 - When oxygen is available, provide passive oxygenation by face mask.
 - Continue performing chest compressions and providing passive oxygenation only until EMS arrives and they assume responsibility for care or medical direction is received by a physician or NP to cease CPR and pronounce death.

3. The nurse should remain in the room donned with PPE for the entire duration of the code to assist EMS with resuscitation efforts and provide information transfer.
If EMS secures an airway that results in an aerosolized medical procedure, an N-95 mask must be worn by all present in the room.
4. Following the Code Blue, document in Integrated Progress Notes.
(CLI.4510.PR.002.FORM.01)
5. Notify family of resident status, provide emotional support and informational updates.
6. Conduct a team debriefing following Code Blue irrespective of outcome (“Take 5”).

EQUIPMENT REQUIRED

- PPE
- Emergency Drug Box
- AED
- Oxygen facemask
- Portable oxygen tank

SUPPORTING DOCUMENTS:

[CLI.4510.PL.002.FORM.01](#) Integrated Progress Notes

REFERENCES:

Shared Health Soins communs Manitoba. (May 5, 2020) COVID-19 Adult Emergency Medicine – Guidelines for Code Blue.

Heart & Stroke Foundation of Canada. (2015). BASIC LIFE SUPPORT – Provider Manual, Canada.

Manitoba Workplace Health and Safety Regulation Act (2019).