



## Policies

Title: <b>Rapid Response Team</b>		Policy #: <b>PH1049</b>	Page <b>1 of 3</b>
Department: <b>PCS-HouseWide</b>			
Sub Dept:			
Owner: <b>SHamilton</b>		Issued: <b>4/1/2006</b>	
Next Review: <b>12/19/2011</b>		Published: <b>12/19/2008</b>	

### PURPOSE:

To provide emergency response to persons outside of the Intensive Care Unit or Emergency Department that is demonstrating signs or symptoms of clinical deterioration. The Rapid Response Team functions as the hospital's Stroke Team. The RRT may be accessed by staff, visitors, or family.

### INDICATIONS:

Any staff member who is concerned about and or observes a change in a hospital the patient's condition, or one or any of the following:

HR <40

HR > 130

FAST Assessment (S & S

SBP < 90 mmHg

Acute Mental status change

Of stroke)

RR < 8

RR > 24

F: Facial droop

SpO2 < 90%

FiO2 50% or greater

A: Arm drift

Acute Significant bleeding

Seizures

S: Speech

Failure to respond to tx

Medication Error

T: Time to call for help

*If any of the above symptoms are noted the NIH stroke scale must be completed immediately and the physician requested to initiate the stroke protocol and the order set is to be*

Title: <b>PH1049</b>	Policy No: <b>PH1049</b>	PAGE <b>2 of 3</b>
-------------------------	-----------------------------	-----------------------

*completed.*

**CONTRAINDICATIONS:** None

**WHO MAY DO:**

**Staff Members:** call 2222 to initiate RRT

**Family members or visitors:** Call 4444 to initiate RRT (There is a notice titled *Family Initiated Rapid Response Team* in each patient room and in patient care areas).

**PROCEDURE:**

1. The Rapid Response Team consist of a Respiratory Therapist and an ICU nurse.
2. All Respiratory Therapists and one ICU nurse will respond to the room paged via the pager system for the Rapid Response Team STAT. The House supervisor will also respond.
3. Respiratory Therapists will determine who will stay and be involved in the patient assessment.
4. If any indication of a stroke the nurse must fill out the NIH Stoke Scale.
5. The Respiratory Therapist answering the call will fill out Rapid Response Team Assessment Form. One copy will be left on the chart and one copy returned to the Director of Respiratory Services.
6. Team members will assess, stabilize if able, assist with communication, educate, and recommend based on their assessment, moving the patient to a higher level of care. The team will also support and assist with transport as needed.
7. Contact the attending physician for orders. The House supervisor will contact the Emergency Room Physician if attending is unavailable. Discuss findings and take telephone orders if any diagnostic test or procedures are needed. Determine with Physician placement of patient either in the unit or move to higher level of care.
8. Team members will take the opportunity to debrief and educate involved staff.

Title: <b>PH1049</b>	Policy No: <b>PH1049</b>	PAGE <b>3 of 3</b>
-------------------------	-----------------------------	-----------------------

System Generated Footer

**ATTACHMENTS:** NONE

**STANDARDS:** NONE

**REFERENCES:** None

**AUTHOR:** Shay Hamilton

**APPROVED:** NONE

**EFFECTIVE DATE:** 4/1/2006

**REVIEWED:** 4/1/2006, 9/11/2008, 11/19/2008, 12/5/2008, 12/19/2008

**REVISED:** 9/11/2008 , 11/19/2008 , 12/4/2008 , 12/19/2008

**VERSION:** 5