POLICY: Emergency call codes in the Cape Fear Valley Medical Center (CFVMC) and its adjoining buildings, to include the Cape Fear Valley Rehabilitation Center [CFVRC], the Cancer Center, and the Valley Pavilion, are called through the Switchboard. This policy applies only to those areas listed above and applies to inpatients, outpatients, visitors, and employees. Behavioral Health Center (BHC) and Highsmith-Rainey Specialty Hospital (HRSH) each have their own Emergency Call Code policy and follow the System Color Schemes. Persons who find someone in need of assistance on the grounds of CFVMC or in other geographically separated facilities render all possible aid in accordance with American Heart Association guidelines and dial 911.

PURPOSE: To establish system standard codes and code-calling procedures for all areas of the acute care hospital buildings CFVMC and CFVRC. A Cape Fear Valley Health System (CFVHS) Rapid Response Team (RRT) responds to called codes Blue and Rapid Response.

PROCEDURE: To reach the Switchboard during an emergency on the CFVMC main campus, dial the emergency number (see employee badge attachment) and the operator interrupts other calls to answer the emergency. Caller provides his/her name, a description of the person and situation, and the location of the situation. The Switchboard then announces one of the following appropriate codes across the overhead paging system:

A. Code Blue: Used for cardiac arrest or a medical emergency requiring a RRT, a physician and equipment. The exact location (a specific area or room number) follows this code. The Team Leader running the code directs who provides handoff to the next care provider.

B. Code Blue Pediatric: Used for a pediatric cardiac arrest/medical emergency requiring a physician, Pediatric Rapid Response Team from the Pediatric Emergency Department and/or the Rapid Response Team and equipment. The exact location (a specific area or room number) follows this code. The Team Leader running the code directs who provides handoff to the next care provider.

C. Code Rapid Response: Used for medical emergencies requiring only a Rapid Response Team and equipment to a named location. A specific area or room number follows this code.

D. Code Green: Used when a staff member becomes aware of a bomb threat either written, called-in or by discovery of a suspicious package. This code activates the CFVHS Bomb Threat policy. If it is known, a specific area to designate the exact location of the threat follows this code. Upon hearing this code, employees report to their assigned stations.
E. Code Grey: Used to alert staff of a situation with an adult patient or visitor (a missing, unidentified or suspicious adult). A specific area to designate the exact location follows this code. A description is provided overhead in cases of a missing or wandering patient; a telephonic description to Security Base Operations is used in other cases. Notification of Security ensures adequate internal response and external support, if needed, to manage a situation.

F. Code Amber: Used for a missing infant or child. Upon hearing this code, employees move to observe building exits and to be alert for signs of a possible baby/child abduction (i.e., any adult with a child or infant, an upset child with an adult, large bags, purses, blankets capable of hiding an infant, etc.). Employees do not attempt action toward anyone they suspect of having kidnapped a child or infant, but alert Security using the Security emergency phone number. A brief description of the infant or child follows this code (e.g. “Code Amber white female infant” or “Code Amber 3 year old black male”).

G. Code Triage: Used to activate the Emergency Operations Plan (EOP). Code Triage is in effect when the hospital experiences an emergency, disaster, mass casualty situation or event. The Incident Commander or Administrator on Call activates the Hospital Incident Command System (HCIS) to manage the situation. Upon hearing this code, employees report to their assigned stations and follow instructions in the departmental Code Triage packet.

H. Code Triage-Standby: Used to notify staff that the EOP is in effect, that notifications are occurring and departments are on standby due to potential threats. Departments receive further information during the notification procedures.

I. Code Red: Used for an actual fire or to activate fire drills. A specific area or room number to designate the exact location of the fire or drill follows this code. Staff in the area of the Code Red and adjacent areas (same level, one floor above, one floor below) respond using R-A-C-E fire response procedures outlined in the Administrative Policy, Fire Response Procedures (R – Rescue the patient; A – Alarm; C – Contain the Fire; E – Evacuate).

J. Code Silver: Used to alert staff to a hostile situation or a person with a weapon. The purpose is to alert the Company Police Officer and appropriate authorities of the dangerous situation while keeping a safe distance and preventing others from entering the area. A specific location and individual description follows this code.

K. Code Orange: Hazardous Material. The purpose of this code is to rescue people in immediate danger and secure the substance release, if possible, while alerting authorities of the spill so it can be mitigated as quickly as possible. A specific area or room number
to designate the exact location follows this code. Staff minimizes traffic in the area based on the threat using information available in the Material Safety Data Sheets (MSDS).

L. Code Black: Used to notify staff of any type of utility failure (to include power, water, heating, air conditioning, computer, phone or medical gases). If appropriate a specific area or room number to designate the exact location follows this code.

M. Code Yellow: For use in the ED ONLY. Code Yellow is for Trauma Patient/Trauma Patient Deployment. The accepted state trauma designation immediately follows this code.

N. Code Purple: Informs the staff of Emergency Department (ED) Saturation. Staff performs an immediate assessment of potential discharges, determines time frame needed and mode of transport needed. Reports are given to the Patient Care Manager or a designee (House Supervisor).

O. Code White: Used when staff assistance is needed. A specific area, unit or room number to designate the event follows this code. Staff available in the area and adjacent areas to respond to the Code White.

P. Weather Alert: Weather alerts are announced in plain language and without codes to employees, patients and visitors for their own safety. These announcements are based on National Oceanic and Atmospheric Administration (NOAA) weather advisories and are announced using the same language (e.g. “The National Weather Service has announced a Tornado/Watch/Warning for this area…..”). Staff assists patients and visitors according to the EOP.

**Emergency Procedure-Communication System Failure:**

In the event of a communication systems failure, the following actions are used to convey codes:

A. Emergency phones are used to call codes to the Switchboard.

B. If emergency phones are inoperative and a Code Blue occurs, an employee is selected to go immediately to the Emergency Department to request the Code Team.

C. When other codes need to be called, an employee is dispatched to the Switchboard.