DETERIORATING PATIENT: Escalation of care

CALL A MET (DIAL 777) ANYTIME FOR URGENT MEDICAL TREATMENT

ORANGE ZONE

OBSERVATION(S) IN THE ORANGE ZONE:

- Assess patient and initiate appropriate clinical care
- Increase frequency of observations
- Notify the AUM then choose one of the following:

1. NURSING REVIEW (Bedside nurse + AUM)
   - Document rationale and plan in event/comments section of observation chart

2. NON-URGENT MEDICAL REVIEW
   - Stable patient, but breaching parameters
   - Page bed-card doctor with ward, bed, patient name, clinical reason
   - AUM can contact consultant responsible for a management plan
   - No stipulated time frame

OR

REMEmBER AT ANY TIME YOU CAN REQUEST A RAPID REVIEW OR MET CALL

PURPLE ZONE

OBSERVATION(S) IN THE PURPLE ZONE:

YOU MUST ACT: EITHER CALL FOR A RAPID REVIEW OR A MET CALL

- Assess patient and initiate appropriate clinical care.
- If observations transiently breach purple zone, in an otherwise well or stable child (e.g. sleeping) discuss with AUM and repeat observations within 15 minutes if TWO SEQUENTIAL OBSERVATIONS in the purple zone escalate to RAPID REVIEW OR MET CALL

RAPID REVIEW

Child STABLE enough to wait for a medical review by the bed-card team
Rapid Review response within 30 minutes

**ESCALATE TO A MET CALL IF DETERIORATION IN CLINICAL STATE OR REVIEW UNABLE TO BE PROVIDED**

NOTIFY AUM AND CALL BED-CARD DOCTOR ASCOM
1. State ‘RAPID REVIEW’ for patient, room, ward and bed-card team
2. Optimise clinical care
3. Document request on observation chart

MET CALL

A MET call is mandatory for child with:

- Cardiac or respiratory arrest
- Airway threat
- Apnoea or cyanosis
- Severe respiratory distress
- Sudden decrease in conscious state
- Prolonged convulsion
- OR for significant clinical concern

**HIT EMERGENCY BUZZER – DIAL 777**
1. State ‘MET CALL’ for building, floor, ward, room and bed-card team
2. Optimise clinical care

CODE BLUE: ADULT CRITICAL MEDICAL EMERGENCY RESPONSE FOR MAIN STREET AND CAR PARK AND ALL PAEDIATRIC CRITICAL EMERGENCIES IN CAR PARKS AND CLINICAL AREAS IN FRONT ENTRY BUILDING (48 FLEMINGTON ROAD)
**Rapid Review Roles**

- **Doctor:**
  - Direct the team
  - Initiate or continue appropriate clinical care
  - Document assessment and management plan, share with nursing team and family
  - A resident (i.e. surgical) completing a review must discuss the review with their registrar
  - MUST inform bed-card consultant

- **Bedside Nurse:**
  - Ensure ongoing assessment, appropriate monitoring and clinical care as planned

- **AUM/Nurse in Charge:**
  - Ensure appropriate nursing allocation

**MET Call Roles**

- **Ensure there is a clear team leader**
  - PICU Outreach Registrar/ED Doctor:
    - Take team leader role unless otherwise agreed
    - Make post-resuscitation plan with bed-card team
    - Document PICU management advice or plan
    - Inform PICU consultant
  - Paediatric Registrar:
    - Deliver appropriate clinical care
    - MUST inform bed-card consultant
  - PICU Nurse/ED Nurse:
    - Assist, advise and support ward staff
    - Communicate with PICU AUM
    - Coordinate completion of MET Call record

- **Bedside Nurse:**
  - Ensure ongoing assessment, appropriate monitoring and clinical care as planned

- **AUM/Nursing Coordinator:**
  - Assign an experienced staff member to communicate with the child’s parents
  - Coordinate bed and nursing resources

**PICU Roles**

- **Consultation**
  - Any unit may request a PICU outreach consultation on their patient
  - Bed-card consultant must have approved the request
  - Call PICU Outreach team on ASCOM 52327

- **Follow-Up**
  - Following MET calls, post PICU discharge and PICU consultations

**Modifying Emergency Response Criteria**

- **Emergency Calling Criteria Can Only Be Modified:**
  - In a stable patient, where there is a clear underlying clinical reason
  - By no more than 20%, unless approved by bed-card consultant
  - By a doctor of registrar level or above
  - For a defined period of time (not more than 24 hours)
  - For transfers from Critical Care Areas (ED, Theatre, PICU, Medical Imaging) for up to 2 hours only

- **Any Modification of the Purple Zone Emergency Response Criteria:**
  - Must inform bed-card consultant
  - Must inform PICU outreach of modification on ASCOM 52327

  - Changes to emergency response criteria must be clearly documented and handed over
  - Modify thresholds on the observation chart
  - Justify in the events/comments section of the observation chart
  - Detail information about assessment in medical notes

**Code Blue:**

- Adult Critical Medical Emergency Response for Main Street and Car Park
- All Paediatric Critical Emergencies in Car Parks and Clinical Areas in Front Entry Building (48 Flemington Road)