**Unique Plan Description: Rapid Response**

**Plan Selection Display: Rapid Response**

**PlanType: Medical**

**Version: Testing**

**Available at:     *EVERGREEN HEALTH***

**Rapid Response**

**Admit/Transfer/Discharge**

        Rapid Response Called

        MD to RN Communication

    *Provider to decide where to transfer patient.*

**Vitals/Assessments**

        Vital Signs

    *Heart Rate | Respiratory Rate | Blood Pressure, every 5-15 minutes or more often if not within normal limits.*

        Monitor

    *Cardiac Monitor, Begin EKG monitoring; continue until rapid response concludes.*

**Nursing**

        Notify MD - Other

    *IF: Rapid Response called, THEN: Contact Attending Provider or their coverage.*

        Pulse Oximetry

    *Place patient on continuous pulse oximeter.  Initiate Oxygen Administration Policy and titrate O2 to maintain SpO2 greater than 92%.*

**Respiratory Therapy**

        ABG RT Draw

   *Stat, ONCE, For SpO2 less than 90%, indicated for suspected CO2 retention*

**IV Fluids**

IV bolus with 250 mL Normal Saline (NS) for SBP less than 90 (NOTE)\*

        sodium chloride 0.9% (bolus)

    *250 mL, Solution, Intravenous, Q5MIN, PRN Hypotension, For 1, doses, for SBP less than 90, infuse over 5 minutes.*

*Comments: For Symptomatic hypotension*

**Medications**

        RT Nebulizer Tx

    *Q15MIN, PRN for Shortness of Breath/Wheezing, for wheezing or hypoxia, SpO2 less than 90% Respiratory Therapist may administer via small volume nebulizer.*

        albuterol-ipratropium

    *3 mL, Solution, Nebulizer, Q15MIN, PRN Shortness of Breath/Wheezing, for wheezing or hypoxia, or SpO2 less than 90% Respiratory Therapist may administer via small volume nebulizer:*

        naloxone

    *0.4 mg, Injection, IV-Push, Q5MIN, PRN Other, For 3, doses, over sedation, unresponsiveness*

        nitroglycerin

    *0.4 mg, Tablet, Sublingual, Q5MIN, PRN, Chest Pain, may repeat x 3 every 5 minutes. HOLD for SBP less than 90 mmHg.*

***Hypoglycemic***

        glucagon

    *1 mg, Injection, IM, Q15MIN, PRN, Blood Glucose, glucose less than 50 mg/dL and pt has no IV access OR blood glucose 51 to 69 mg/dL pt not able to swallow and no IV access. Refer to Hypoglycemia Protocol.*

*Comments: Place patient on his/her side after administration (Glucagon may induce nausea and/or vomiting).*

        glucose 15 g oral gel

    *15 g, Gel, Oral, Q15MIN, PRN, Blood Glucose, glucose 51 to 69 mg/dL and patient is alert, able to swallow and not NPO. Refer to Hypoglycemia Protocol*

        dextrose 50% syringe

    *25 g, Injection, IV-Push, Q15MIN, PRN, Blood Glucose, glucose less than 50 mg/dL (25 g = 50 mL) and patient NOT on insulin infusion. Refer to Hypoglycemia Protocol*

        dextrose 50% syringe

    *12.5 g, Injection, IV-Push, Q15MIN, PRN, Blood Glucose, glucose 51 to 69 mg/dL (12.5 g = 25 mL) and patient NOT on insulin infusion. Patient not alert or unable to swallow. Refer to Hypoglycemia Protocol*.

                  *Comments: If no IV access, see glucagon 1 mg order.*

        dextrose 50% syringe

*25 g, Injection, IV-Push, Q15MIN, PRN, Blood Glucose, glucose less than 50 mg/dL (25 g = 50 mL) and patient ON insulin infusion and patient NOT conscious/stuporous, THEN: turn off infusion prior to administering dose. Refer to Hypoglycemia Protocol.*

        dextrose 50% syringe

*12.5 g, Injection, IV-Push, Q15MIN, PRN, Blood Glucose, glucose 51 to 69 mg/dL (12.5 g = 25 mL). and patient ON insulin infusion and patient IS conscious, THEN: turn off infusion prior to administering dose. Refer to Hypoglycemia Protocol.*

**Labs**

        POC Glucose RN

    *6XD, blood glucose (bedside glucometer) for delirium, seizure, signs of stroke or suspected hypoglycemia.*

        POC Lactate RN

For acute stroke workup order POC Creat RN, must have Creatinine to perform CT Angio.

        POC Creat RN

For acute stroke workup order Protime with INR, must have INR for patients on anticoagulation.

        Protime with INR

                    *Blood, Nurse collect, Stat collect*

        PTT (Partial Thromboplastin Time)

                    *Blood, Nurse collect, Stat collect*

**DI/Diagnostic Tests**

        EKG RT Stat

    *Stat, Portable, Stat 12- lead EKG for Chest Pain*