STANDARD OPERATING PROCEDURE FOR EMERGENCY CODE BLUE

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<tr>
<td>205.01</td>
<td>19 May 2006</td>
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<td>205.02</td>
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<td>Addition of 2nd Floor Imaging Centre Procedures</td>
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Director Signature: _________________________________  ____/____/____

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1. SCOPE

This SOP describes the procedure to be followed in the event of a code blue in the 3T MRI Facility or 2nd Floor Imaging Centre.

9. PROCEDURES

A. Code blue – cardiac arrest

- The 3T MRI facility and the 2nd Floor Imaging Centre have hospital Code Blue coverage. Code Blue coverage does NOT extend into the hallways, office areas or other laboratories surrounding the Centre. In the event of an emergency in any other area, 88911 should be called. A Code Blue is specifically defined as cardiac arrest. A Code Team is dispatched through the hospital switchboard and directed to the Robarts MRI if they are notified of a Code Blue emergency in the facility.
- The operator at the time of the incident is responsible for following the Emergency Code Blue Procedures set out in this SOP. If the operator is somehow compromised, one of the experimental support personnel must follow the Emergency Code Blue Procedure. This procedure is very explicit and is posted on the wall next to the “Link Release” buttons located in the console area of the 3T on the wall above the “link Release” button and in the ultrasound room on the wall by the door also above the “Link Release” button.
- The signs of a cardiac arrest are all of the following collectively:
  - The person is not reactive
  - The person is not breathing
  - The person does not have a pulse
- If it is noticed that someone within the 3T MRI facility or 2nd Floor Imaging Centre is showing signs of cardiac arrest, the Emergency Code Blue procedure must be followed as set out in Section B below.

B. Emergency code blue procedure

- Dial 55555 –(University Hospital) Inform the Switchboard Operator “We have an adult or pediatric code blue at Robarts Research Institute, 2nd Floor Imaging Centre in the MRI Suite, via 3rd floor hospital access”.
- The Code Team will need to obtain access to the building – press the “Link Release” button on the wall next to the operator console or in the ultrasound room.
  - This will release both link access doors and the 2nd floor Imaging Centre secure door for a 10 minute period. It will also notify Robarts security.
  - Any successive presses of the “link release” button will extend the unlocked period by 10 minutes from the time of the second press.
• If possible, have someone wait by the Robarts link access doors for the Code Team to arrive. You may want to get help (if possible) from other lab members who are nearby, at this time.
• Remove the volunteer/patient from the scanner.
  • Unplug the coil cables
  • Either use the keypad to advance the bed out of the scanner, or
  • Use the cradle release handle at the foot end of the table by rotating it toward you and then pulling the cradle all the way out until it clicks into place.
  • Put both sides up on the table.
  • Undock the table using the pedals at the foot end of the table.
  • Wheel the table out of the scan room and close the door to the scan room.
  • The table can be lowered by use of the pedals located at the foot end.
  • Bring the table with the patient to the crash cart.
• Under no circumstances is the Cardiac Arrest (“Crash”) Cart to enter or go near the magnet room. It has many ferrous components, and devices may cease to work when in a peripheral magnetic field.
• Lock the wheels of the table and apply first responder principles to the volunteer/patient until the code team arrives.
• Utilize the AED when indicated.
  • Do not perform mouth-to-mouth resuscitation; use the bag provided on the cardiac arrest cart by placing the narrow end of the mask over the person’s nose and the wide end over the chin.
  • If needed, lower the table using the pedals located at the foot end to apply first responder principles.
  • When the code team arrives, be sure they do NOT bring the Cardiac Arrest Cart into the magnet room, or any other metal equipment they may be wearing.
• Notify the 3T MRI Facility Manager/Technologist or 3T MRI Facility Director, immediately following the incident. The facility staff must then file an appropriate Robarts incident report of the situation, and the UWO HSREB must be notified of the occurrence of a Serious Adverse Event.

C. Robarts Research Institute Accident/Incident Investigation Report

This form can be accessed from any Robarts computer at http://intranet.robarts.ca/docs/aiirApprovedApril0705.pdf

Paper copies are available at the back of section 8 of the 3T MRI SOP Binder.