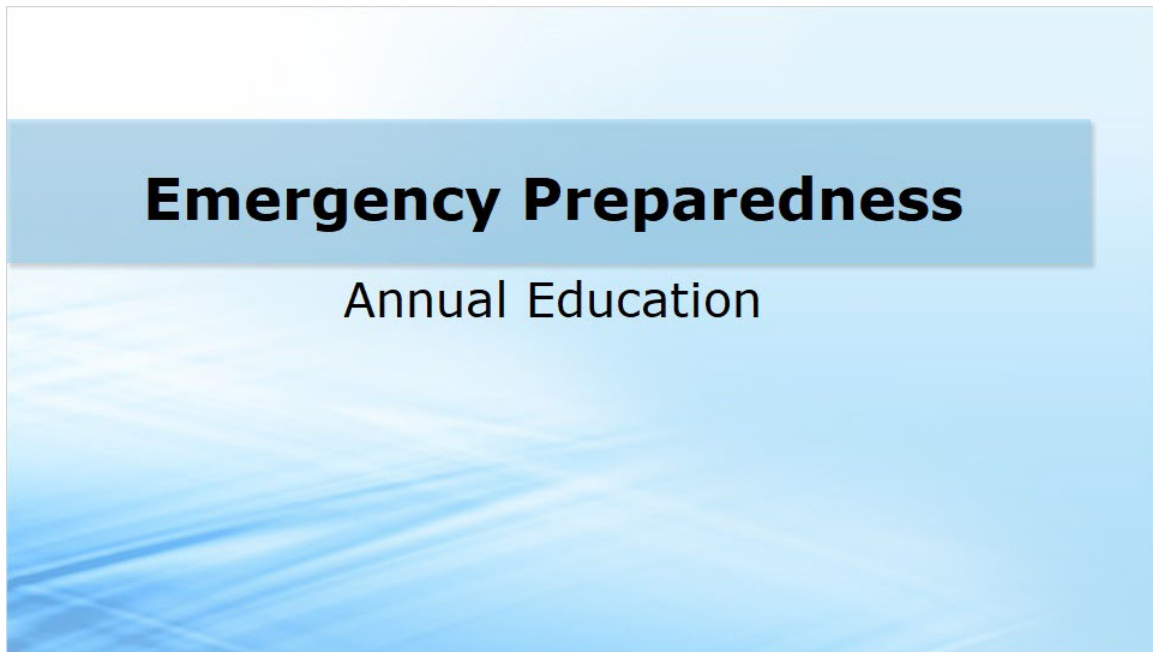


Emergency Management FY22

1. Introduction

1.1 Emergency Management



Notes:

Welcome to the Emergency Management Learning Module.

Emergency Management, Safety and Security are critical areas of operation within Lehigh Valley Health Network. LVHN provides resources to staff, patients, and visitors to provide and maintain a safe healthcare environment. Each person at LVHN has a role in Emergency Preparedness, Safety and Security on a daily basis.

The information covered in this training module will help you understand what your role is and prepare you to use the available resources to take quick action in an emergency situation.

1.2 Course Information

About this Course

Course Information	
Course Title:	Emergency Management
Regulations/Standards:	OSHA requirements for Emergency Preparedness and Emergency Response
Approximate Time to Complete:	20 Minutes
Intended Audience:	All LVHN Employed Staff
Technical Specifications:	Internet Explorer 11 Contains limited audio in external video link. PLEASE REVIEW NOTES TAB FOR MORE COURSE INFORMATION
Date Revised:	May 2022

Contact Information

Please forward any content questions or concerns to the Subject Matter Expert:

Please call the I/S Support Center at 610-402-8303 with any technical issues

Notes:

This training fulfills the OSHA training requirements for Emergency Response. The course should take approximately 20 minutes to complete. If you have any questions about this course, please contact the appropriate number listed on this screen.

1.3 Objectives

Objectives

Upon completion of this course, you should be able to:

- Discuss the Emergency Management Program (EMP) for Lehigh Valley Health Network (LVHN)
- Describe what LVHN's response is in an emergency situation
- Define the Emergency Codes used at LVHN
- List the appropriate actions that you should take in both internal and external emergency events

Notes:

Upon completion of this course, you should be able to:

- Discuss the Emergency Management Program (EMP) for Lehigh Valley Health Network.
- Describe what LVHN's response is in an emergency situation.
- Define the Emergency Codes used at LVHN.
- List the appropriate actions that you should take in both internal and external emergency events.

1.4 What is an Emergency?



What is an Emergency?

An emergency is a sudden and unexpected event that requires immediate response.

Notes:

What is an emergency? An emergency is a sudden and unexpected event that requires immediate response. At LVHN emergency situations may include events such as fires, weather related emergencies, acts of violence or missing children. It is vital that you understand what your role is in an emergency situation and what actions you should take.

Lehigh Valley Health Network Emergency Management, Safety and Security Departments all maintain plans and policies to prevent and respond to specific emergency situations.

1.5 Regulatory Agencies



The graphic is titled "Regulatory Agencies" and is set against a light blue background with a subtle wave pattern. On the left side, there are three blue rounded rectangular buttons stacked vertically. The top button contains the text "TJC" in bold, followed by "The Joint Commission". The middle button contains "HFAP/AAHHS" in bold, followed by "Healthcare Facilities Accreditation Program". The bottom button contains "CMS" in bold, followed by "Centers for Medicare & Medicaid Services". To the right of these buttons, the text "For Hospital Emergency Management" is displayed in a bold, black font. Below this, a smaller line of text reads "Click on each button to learn more about each agency."

Notes:

There are several regulatory agencies that outline Emergency Management rules and regulations to be followed by hospitals. These include The Joint Commission (TJC) and the Centers for Medicare and Medicaid Services (CMS).

The Joint Commission EM Standards provide detail on health system specifics.

“An emergency in the hospital or its community could suddenly and significantly affect the need for the hospital's services or its ability to provide those services. Therefore, a hospital needs to have an emergency management plan that comprehensively describes its approach to emergencies in the hospital or in its community.”

Key Components:

- Hazard vulnerability analysis which includes describing mitigation, preparedness, response and recovery strategies
- Development of an emergency management plan
- Notification of staff and external authorities
- Define the hospital's command structure

Key Concepts:

- Adopted the broader context of comprehensive emergency management
Included a hazards vulnerability assessment

- Required use of an Incident Command System (ICS) that is consistent with the ICS in use by the local community
- The hospital conducts drills regularly to test emergency management
- The hospital tests the response phase of its emergency management
- Participation in at least one community wide practice drill a year relevant to the priority emergencies identified in its Hazard Vulnerability Assessment (HVA)
- Communication, coordination and effectiveness

The Healthcare Facilities Accreditation Program:

Defines four core elements essential for emergency preparedness programs:

1. Risk Assessments and emergency planning (Hazard Vulnerability Analysis)
2. Policies and procedures
3. Communication plan
4. Training and testing

Centers for Medicare and Medicaid Services (CMS):

- Emergency Management regulations for hospitals are now required for all 17 CMS- provider types, such as:
 - Dialysis
 - Home health
 - Transplant center
 - Long-term care
- Includes position-specific training for all colleagues

TJC (Slide Layer)

Regulatory Agencies

TJC The Joint Commission	<ul style="list-style-type: none">• Requires that hospitals and healthcare organizations prepare for disaster• Components include: Hazard Vulnerability Analysis, comprehensive all-hazards emergency management program, emergency operations plan, emergency communications plan, continuity of operations plan, external authority notification process, and an established hospital incident command structure.• Multiple exercises and drills required annually to test systems and plans
HFAP/AAHHS Healthcare Facilities Accreditation Program	
CMS Centers for Medicare & Medicaid Services	

CMS (Slide Layer)

Regulatory Agencies

TJC The Joint Commission	<ul style="list-style-type: none">• Emergency Management regulations for hospitals are now required for all 17 CMS-provider types, such as:<ul style="list-style-type: none">➢ Dialysis➢ Home health➢ Transplant center➢ Long-term care• Includes position-specific training for all colleagues
HFAP/AAHHS Healthcare Facilities Accreditation Program	
CMS Centers for Medicare & Medicaid Services	

HFAP (Slide Layer)

Regulatory Agencies

TJC The Joint Commission	The Accreditation Association for Hospitals/Health Systems, Inc (AAHHS) manages accreditation, certification, and education programs under the HFAP name.
HFAP/AAHHS Healthcare Facilities Accreditation Program	HFAP defines four core elements essential for emergency preparedness programs: <ol style="list-style-type: none">1. Risk Assessments and emergency planning (Hazard Vulnerability Analysis)2. Policies and procedures3. Communication plan4. Training and testing
CMS Centers for Medicare & Medicaid Services	

1.6 Hazards at LVHN

Hazards at LVHN

 <p>Natural</p> <ul style="list-style-type: none">• Epidemic/Pandemic• Winter Storms• Severe Thunderstorms and Flooding	 <p>Technological</p> <ul style="list-style-type: none">• Cyber Security Incidents• Communication failures• Internal Flooding• Power outages	 <p>Man-made</p> <ul style="list-style-type: none">• Workplace Violence• Mass casualty incidents• Child/Infant Abduction
---	---	--

Notes:

Hazard Vulnerability Assessments identify the hazards that can cause emergencies and disasters.

The result describes the natural, technological and man-made hazards that have the potential to impact staff, patients, visitors and operations of Lehigh Valley Health Network as well as the surrounding community.

Knowing the potential hazards assists in developing processes and actions for each step in the Emergency Management Cycle. This will help to minimize the effects of disasters and emergencies.

This table shows the top hazards in each category for LVHN.

The top natural hazards are:

- Epidemic/Pandemic
- Winter Storms
- Severe Thunderstorms and Flooding

The top man-made hazards are:

- Workplace Violence
- Mass casualty incidents
- Child/Infant Abduction

The top technological hazards are:

- Cyber Security Incidents
- Communication failures
- Internal Flooding
- Power outages

1.7 Emergency Management Cycle



Notes:

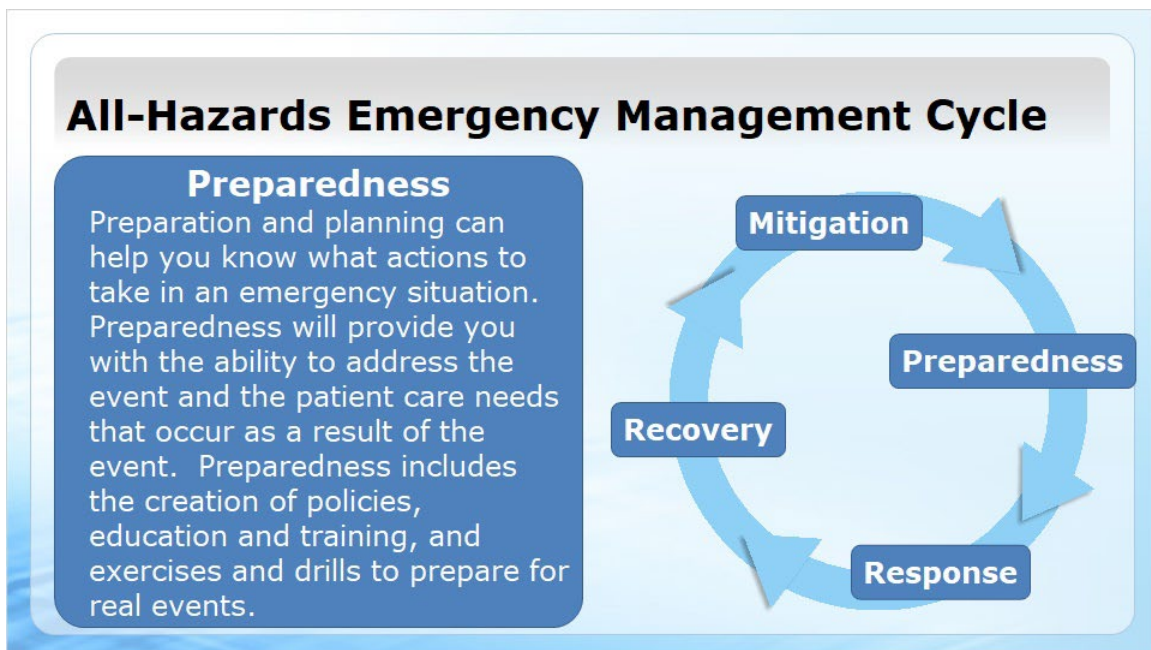
Click on each component of the All-Hazards Emergency Management Cycle to learn more:

- Mitigation
- Preparedness
- Response
- Recovery

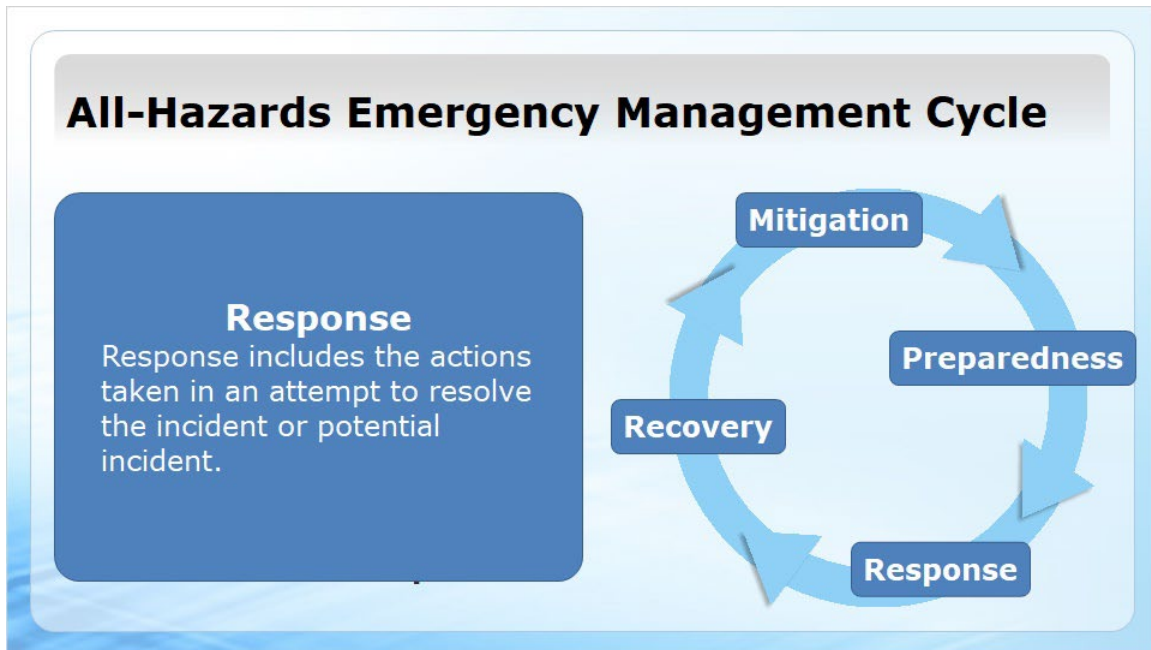
Mitigation (Slide Layer)



Preparedness (Slide Layer)



Response (Slide Layer)



Recovery (Slide Layer)



1.8 Emergency Management Program


The graphic features a light blue background with a white rounded rectangle at the top containing the title "Emergency Management Program at LVHN". Below the title are three dark blue rounded rectangles, each containing white text for a component: "Emergency Operations Plan (EOP)", "Network Emergency Operations Center (NEOC)", and "Hospital Command/ Emergency Coordination Center (HCC/ECC)". At the bottom of the graphic, centered, is the text "Click on each component to learn more." in bold black font.

Notes:

Click on each component of the Emergency Management Program at LVHN to learn more:

- Emergency Operations Plan
- Network Emergency Operations Center
- Emergency Coordination Center

EOP General (Slide Layer)



Emergency Operations Plan (EOP)


Network EOP

- Covers all LVHN campuses
- Available on Policy Tech

Plan goals:

- Protect staff, patients, and visitors
- Receive, evaluate and treat victims of the event
- Adhere to regulatory requirements and risk management issues
- Outline planning assumptions for consistency among all staff
- Coordinate activities with community agencies and other healthcare organizations

NEOC (Slide Layer)



Network Emergency Operations Center (NEOC)

- Located in Allentown, this center is activated during emergency incidents that impact more than one campus.
- Pre-selected leaders from across the network would respond to the center to provide strategic oversight for incidents with a significant impact to network operations.

ECC (Slide Layer)

Hospital Command Center/Emergency Coordination Center (HCC/ECC)

Also called the Emergency Operations Center (EOC) at LVH-Pocono

- Located in a pre-designated location at each campus, this site is the command and control location for any incident impacting a single campus.
- Pre-designated leaders from the site, and select network leaders will staff the HCC/ECC to provide incident management for the duration of the emergency.

1.9 Hospital Incident Command System (ICS)

Hospital Incident Command System (ICS)

Elements of ICS:

- Definition of "Who is in charge" – the Incident Commander
- Common terminology
- Integrated communications
- Modular organization of "who is in charge"
- Unified management structure
- Integrated plans



National Incident Management System
Incident Command System

Notes:

The National Incident Management System outlines the national model that will facilitate each

phase of the Emergency Management cycle with an emphasis on Recovery.

The Incident Command System, or ICS, was adopted in March 2004 and was federally mandated in 2005 as a presidential directive. ICS must be used for federal support of recovery. It defines the need for mitigation, preparedness, response and recovery.

Incident command is a system designed to give leadership and structure when responding to a critical or potentially critical incident.

The elements of ICS include:

- Definition of “Who is in charge” – the Incident Commander
- Common Terminology
- Integrated Communications
- Modular Organization of “Who is in charge”
- Unified Management Structure
- Integrated Plans

1.10 Activating the Incident Command System

Activating the Incident Command System

- **The emergency operations plan can be activated by the campus emergency management coordinator, campus president, senior staff member/administrator on-call, network emergency management team member, or their designee**
 - **Once activated, notification to impacted campus colleagues will be made via the emergency communications cascade**
- **Deactivation of the emergency operations plan will be coordinated through campus leadership and the Incident Commander/Unified Command team.**
- **Utilize your campus process for reporting emergencies or incidents that may require EOP activation.**

Notes:

Activating the Incident Command System

- **The emergency operations plan can be activated by the campus emergency management**

coordinator, campus president, senior staff member/administrator on-call, network emergency management team member, or their designee


- Once activated, notification to impacted campus colleagues will be made via the emergency communications cascade
-
- Deactivation of the emergency operations plan will be coordinated through campus leadership and the Incident Commander/Unified Command team.
-
- Utilize your campus process for reporting emergencies or incidents that may require EOP activation.

1.11 Required Incident Command System Training

Required Incident Command System Training

ICS Training through FEMA is required for:

- **Campus and network incident management team members**
- **First Receivers (emergency department staff)**
- **Key campus and network leadership**
 - **as identified by the campus emergency management coordinator and the campus emergency management council/committee.**



Notes:

ICS Training through FEMA is required for:


- **Campus and network incident management team members**
- **First Receivers (emergency department staff)**
- **Key campus and network leadership**
 - **as identified by the campus emergency management coordinator and the campus emergency management council/committee.**

1.12 Emergency Communications: VOLO

Emergency Communications

LVHN selected VOLO as the network wide mass notification system for emergencies.

- Colleagues are automatically enrolled using contact information from Lawson.
- Colleagues will receive automated notifications such as text messages, email, and voice messages with incident alerts and specific actions to take.



Notes:

LVHN selected VOLO as the network wide mass notification system for emergencies.

- Colleagues are automatically enrolled using contact information from Lawson.
- Colleagues will receive automated notifications such as text messages, email, and voice messages with incident alerts and specific actions to take.

1.13 Emergency Communications

Emergency Communications

LV Region, LVH-Carbon, and LVH-Dickson City

LVH-Highland and LVH-1503 N. Cedar Crest

LVH-Hazleton

LVH-Pocono

LVH-Schuylkill

Click on your location for site specific information.



Dial 911 for any emergency occurring outside of the hospital exchanges.

Notes:

Click on your location for specific information regarding emergency communications. If you are outside of the hospital exchanges, dial 911.

Please note LV Region includes: LVH-CC, LVH-Muhl, LVH-17, LVH-Tilghman, and LVH-Hecktown Oaks.

LVH-Highland and LVH-1503 N. Cedar Crest were formerly Coordinated Health Hospitals.


1.14 LVR, LVH Carbon, LVH Dickson City Emergency Communications

Emergency Communications

In an emergency situation, ensure your own safety first. Then, notify Emergency Dispatch by dialing:

555
from an LVHN extension

610-402-5555
from a cell phone

A photograph showing a person's hands interacting with a black office telephone. One hand is holding the receiver to the ear, while the other hand is pressing a button on the keypad. The background is a light blue gradient with a subtle wave pattern.

Notes:

Emergency Communications for LV Region, LVH-Carbon, and LVH- Dickson City

Please note Lehigh Valley Region includes: LVH-CC, LVH-Muhl, LVH-17, LVH-Tilghman, and LVH-Hecktown Oaks.

When responding to an emergency, the first and most important step is to ensure your own personal safety.

In any emergency situation, you should notify Emergency Dispatch by dialing 555. Report your emergency to the dispatcher and stay on the phone. You can also call from a cell phone by dialing 610-402-5555. You should only hang up if your life is in danger or if the dispatcher tells you to.

1.15 Highland and 1503

LVH-Highland and LVH-1503 N. Cedar Crest Emergency Communications

Code Red, Code White and Code 45
Dial 911 and then report the code to 610-402-5555

Code Blue
Activate code buttons and follow established response procedures

All other Codes
Call 610-402-5555



Notes:

LVH-Highland and LVH-1503 N. Cedar Crest Emergency Communications

Please note these locations were formerly LVH-CH

When responding to an emergency, the first and most important step is to ensure your own personal safety.

Code Red, Code White and Code 45

Dial 911 then report the code to 610-402-5555

Code Blue

Activate code buttons and follow established response procedures

All other Codes

Call 610-402-5555

1.16 LVHS-Emergency Paging Process

LVH-Schuylkill Emergency Paging Process

1. Dial 333
2. State the emergency code and your location (patient unit or area/ room) in a calm, clear manner



Notes:

LVH-Schuylkill Emergency Communications

When responding to an emergency, the first and most important step is to ensure your own personal safety.

In any emergency situation, dial 333. Report your emergency to the dispatcher and stay on the phone. You should only hang up if your life is in danger or if the dispatcher tells you to.

1.17 LV Region, LVH Carbon LVH Dickson City Emergency Communications

Emergency Communications

Dial 911 only if you are located in an off campus location that is not a hospital exchange (610-402, 969, 484-884, 862) or if the 555 service is not working.

During a disaster, contact 555 via phone or unit radio to report any emergency conditions. If the ECC or NEOC is activated, contact information for these centers will also be published in both electronic and written announcements.



Notes:

You should only call 911 if you are located in an off campus location that is not a hospital exchange ((610) 402, 969, (484) 884, 862) or if the 555 service is not working.

1.18 LVR Emergency Communications

Emergency Communications


For Inpatient Units at LVH-CC, LVH-17, LVH-M, and LVH-Tilghman Only:

In case of a communication outage, your Inpatient Unit Emergency Radio should be set to "on" and in charging base at all times for back-up communications.

Confirm that your radio channel matches your location.

In the event of a critical incident, you will hear a paging tone followed by additional communication.

It is critical that all radios remain on and charged at all times.



Notes:

LVHN will utilize a variety of communications methods in order to alert colleagues, patients, and visitors of an emergency condition. These may include overhead paging, alpha-numeric paging, E-Mail, and reverse notification via our VOLO Mass Notification.

INPATIENT UNIT EMERGENCY RADIOS:

Inpatient units at our Cedar Crest, Tilghman, and 17th St., and Muhlenberg sites have an assigned emergency radio. This radio is meant for redundant emergency alerting and communications during disasters.

Radio Operations:

The radio should be in the "On" position (front display lit) and seated in its charging base at all times. Please familiarize yourself with the location of the emergency radio in your unit and ensure it is plugged in and charging. A charging radio will be identified by a red or green light illuminated on the charging base.

Radio Channel:

The channel displayed on your emergency radio should be listed as your campus alert channel. For example, units at the Cedar Crest Campus should note that their radio is monitoring the "CC ALERT" channel, units at the Muhlenberg Campus should note that their radio is on the "Muhl Alert" channel, etc.

The radio will not make any noise while it is on the alert channel, however in the event of a critical incident, the communications center can activate a paging tone on all radios and open the channel for communications to each unit. It is critical that all radios remain on and charged


at all times.

1.19 LVR Emergency Communications

Emergency Communications

What can you expect from LVHN in an Emergency?

- Emergency dispatch will contact 911 while you are on the line and provide instructions.
- Security officers will be sent to your location.
- LVHN Emergency Management will respond.
- Emergency Management will follow-up after the incident.



Notes:


After you call 555, the Emergency Dispatch will contact the 911 center while you are on the line and provide you with emergency instructions. Security officers will also be sent to your location.

LVHN Emergency Management will respond to the emergency with the appropriate personnel for the event. They will act as the Incident Management Team and will assist in controlling the situation. Emergency Management will also request and obtain any additional resources needed to handle the situation.

After the incident, Emergency Management will follow up with you or your department.

1.20 LVHH-Emergency Paging Process

LVH-Hazleton Emergency Paging Process



1. Dial 180# using any phone within the organization. This will give you access to the building wide announcement system.
2. Announce the emergency code and your location twice in a calm, clear manner

Notes:

LVH-Hazleton Emergency Communications


When responding to an emergency, the first and most important step is to ensure your own personal safety.

In any emergency situation, dial 180# using any phone within the organization. This will give you access to the building wide announcement system. Announce the emergency code and your location twice in a calm, clear manner.

1.21 LVHP-Emergency Paging Process

LVH-Pocono Emergency Paging Process

1. Dial 3333
2. State the emergency code and your location (patient unit or area/room) in a calm, clear manner



Notes:

LVH-Pocono Emergency Communications


When responding to an emergency, the first and most important step is to ensure your own personal safety.

In any emergency situation, you should notify Emergency Dispatch by dialing 3333. Report your emergency to the dispatcher and stay on the phone. You should only hang up if your life is in danger or if the dispatcher tells you to.

1.22 Emergency Radios LVH-P

Emergency Radios at LVH-Pocono

- Emergency radios have been assigned to unit directors on each floor.
- In the event of an emergency incident or telecommunications outage, Public Safety and Emergency Management staff at LVH-Pocono will communicate via in-person rounding, overhead page, or tiger connect to provide instructions for use.
- These radios can transmit directly to the Security Officers working at Pocono.
- Radios should be kept on the charger to ensure they are ready for use.



Notes:

Emergency Radios at LVH-Pocono

- Emergency radios have been assigned to unit directors on each floor.
- In the event of an emergency incident or telecommunications outage, Public Safety and Emergency Management staff at LVH-Pocono will communicate via in-person rounding, overhead page, or tiger connect to provide instructions for use.
- These radios can transmit directly to the Security Officers working at Pocono.
- Radios should be kept on the charger to ensure they are ready for use.

1.23 Standardized Codes

Print this slide in Resources!

Emergency Management Codes

Name of Code	Description
Code Red	Fire or smoke emergency
Code Blue	Cardio-pulmonary arrest
Pediatric Code Blue	Pediatric cardio-pulmonary arrest
Code Green	Medical gas/ vacuum emergency
Code Pink	Child/infant abduction
Code White	Bomb threat
Code Crimson	Massive blood loss (L&D areas only)
Code Gray	Missing adult
Code Yellow	Facility lock-down
Control Team	Behavioral dysfunction
Code 45	Hazardous situation/ active shooter
Chemical Spill	Notification of chemical spill
MCI or Disaster Alert	Mass casualty incident or disaster
All clear	All clear; incident concluded

Notes:

This chart can be downloaded or printed from the Resources tab.

1.24 Code Red

At the Point of Origin

Away from the Point of Origin

All Clear

What is Code Red?

A Code Red is a fire or smoke emergency situation. If you see or smell smoke or if you see flames arcing, sparking, or any other indications of fire, you must consider it a REAL fire and respond appropriately. If a Code Red is announced, utilize the RACE process. Know the location of fire exits, fire doors, smoke compartments, and fire extinguishers.


A more detailed explanation of what you should do in a fire or smoke emergency is covered in the Fire Safety Annual Training course.

Notes:

A Code Red is a fire/smoke emergency situation. A Code Red will be announced if a pull box is activated, a heat or smoke detector is activated, or a Code Red is initiated through your site's emergency communications.

A more detailed explanation of what you should do in a fire or smoke emergency is covered in the Fire Safety: Annual Training course.

Point of Origin (Slide Layer)



At the Point of Origin

At the Point of Origin

Away from the Point of Origin

All Clear

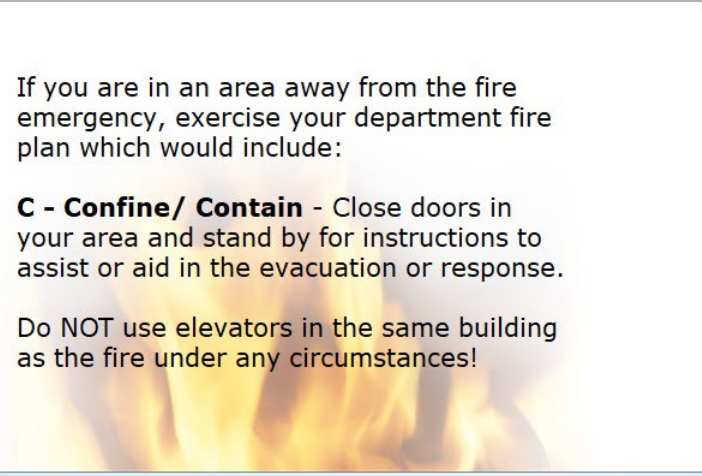
R Rescue

A Alarm

C Confine

E Evacuate

Away (Slide Layer)



Away from the Point of Origin

At the Point of Origin

Away from the Point of Origin

All Clear

If you are in an area away from the fire emergency, exercise your department fire plan which would include:

C - Confine/ Contain - Close doors in your area and stand by for instructions to assist or aid in the evacuation or response.

Do NOT use elevators in the same building as the fire under any circumstances!

All clear (Slide Layer)

At the Point of Origin

Away from the Point of Origin

All Clear

All Clear

The "Code Red - All Clear" announcement will be made when it has been determined what the cause of the alarm was and the area has been determined safe by hospital and/or fire emergency personnel.

More Info (Slide Layer)

At the Point of Origin

Away from the Point of Origin

All Clear

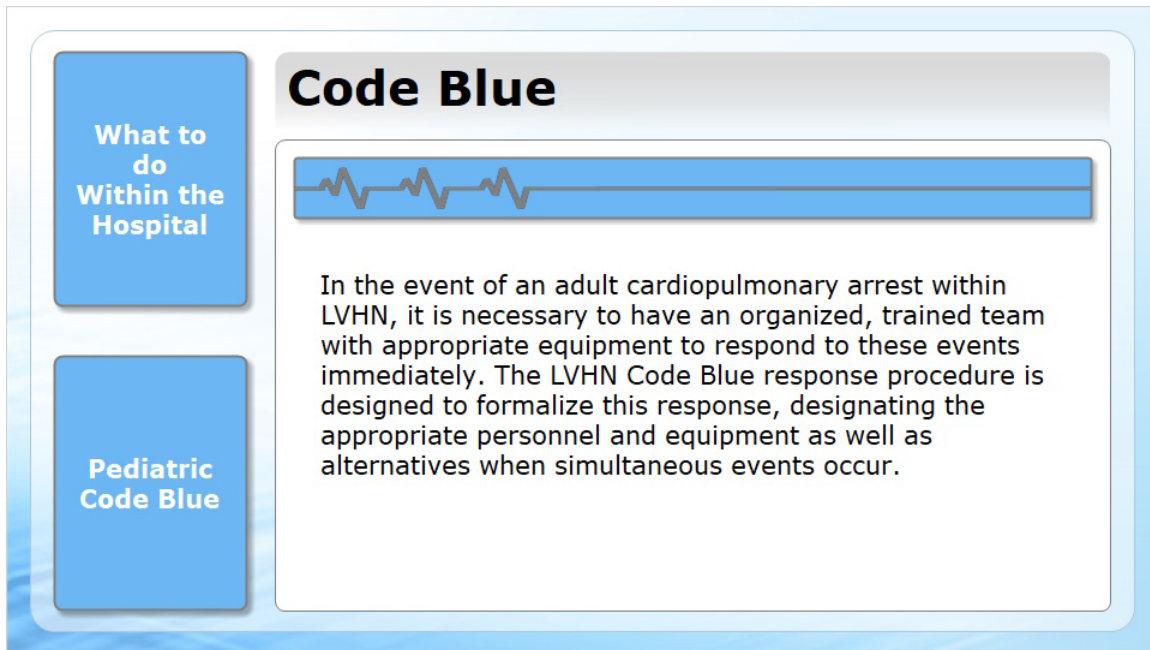
What is Code Red?

A Code Red is a fire or smoke emergency situation. If you see or smell smoke or if you see flames arcing, sparking, or any other indications of fire, you must consider it REAL fire and respond appropriately. If a Code Red is announced, utilize the RACE process. Know the location of fire extinguishers and fire exits.

Click on each blue tile to the left for more information.

A more detailed explanation of what you should do in a fire or smoke emergency is covered in the Fire Safety Annual Training course.

1.25 Code Blue



The graphic is a light blue-bordered box containing information about Code Blue. On the left side, there are two blue rectangular buttons with white text. The top button says "What to do Within the Hospital" and the bottom button says "Pediatric Code Blue". To the right of these buttons is a grey header with the text "Code Blue" in bold black font. Below the header is a blue horizontal bar with a white ECG line. Underneath the bar is a white text box with a black border containing the following text: "In the event of an adult cardiopulmonary arrest within LVHN, it is necessary to have an organized, trained team with appropriate equipment to respond to these events immediately. The LVHN Code Blue response procedure is designed to formalize this response, designating the appropriate personnel and equipment as well as alternatives when simultaneous events occur."

Notes:

In the event of a cardiopulmonary arrest within LVHN, it is necessary to have an organized, trained team with appropriate equipment to respond to these events immediately. The LVHN Code Blue response procedure is designed to formalize this response, designating the appropriate personnel and equipment as well as alternatives when simultaneous events occur.

When a Code Blue occurs, press the Code Blue Button where applicable. Initiate your site's emergency communications and provide the following information: Adult or Pediatric Code Blue, Building Location, Wing (pavilion), floor, unit, room number. If you are not actively caring for the patient, work to keep the area free of traffic and unessential personnel.

The Code Blue Response Team will vary by location. At most sites, the response team will consist of a Code Team Leader, Physician in Charge, Code Team Members and other Clinical Services Staff.

At the LVH-Tilghman campus, the response team will consist of a physician, DO, or CRNA, and clinical staff. When an attending physician is at the bedside, he/she may assume the role of Team Leader.

At the LVH-17th street campus only, the Medical Quick Response Service (MQRS) will consist of a nurse and technician from the Emergency Department, a security guard, and a respiratory technician. Other clinical services staff should also report as available. *Please Note: There is no Code Blue Response Team at the 17th Street Campus.*


Additional Pediatric Code Blue team members may include anesthesia, a pediatrician, and pediatric nurses.

in Hospital (Slide Layer)

What to do Within the Hospital

Pediatric Code Blue

What to do Within the Hospital




1. Press the Code Blue Button where applicable.
2. Initiate your site's emergency communications and provide the following information:
 - Adult or Pediatric Code Blue
 - Building Location
 - Wing (pavilion), floor, unit, room number
 - Specify if it is a patient, visitor or staff member

Pediatric Code Blue (Slide Layer)

What to do Within the Hospital

Pediatric Code Blue

Pediatric Code Blue



A Pediatric Code Blue is a pediatric cardiac arrest. Pediatric Code Blue team members will respond after an overhead announcement is made.

Additional Pediatric Code Blue team members may include anesthesia, a pediatrician, and pediatric nurses.

More Info (Slide Layer)

Code Blue

What to do Within the Hospital

Pediatric Code Blue

In the event of an adult cardiopulmonary arrest within LVHN, it is necessary to have an organized, trained team with appropriate skills and equipment. This team's response procedure is designed to formalize this response, designating the appropriate personnel and equipment as well as alternatives when simultaneous events occur.

Click on each blue tile to the left for more information.



1.26 Code Green

What is Code Green?


Code Green

What to do: Step A

What to do: Step B

What to do: Step C

Code Green is the partial or total loss of "piped in" medical gases. Medical gases include oxygen, medical air, nitrous oxide, nitrogen and vacuum. When one or more of these systems fail, and activates an alarm, a Code Green will be announced. This will alert the appropriate departments to investigate and implement their contingency plan.



Notes:

A Code Green is the partial or total loss of "piped in" medical gases. The medical gases available

include oxygen, medical air, nitrous oxide, nitrogen and vacuum.

When one or more of these systems fail, and activates an alarm, a Code Green will be announced. This will alert the appropriate departments to investigate and implement their contingency plan.

All patient care areas, which receive centrally supplied medical gases via wall mounted gas outlets, can experience a system failure. This failure activates an audio/visual alarm on the alarm panel, located in each patient care area. Each area is known as a ZONE.

When an oxygen supply is lost, our response must be immediate, almost second nature.

About Code Green (Slide Layer)

Code Green


What to do: Step A

What to do: Step B

What to do: Step C

What is Code Green?

All patient care areas, which receive centrally supplied medical gases via wall mounted gas outlets, can experience a system failure. This failure activates an audio/visual alarm on the alarm panel, located in each patient care area. Each area is known as a ZONE. When an oxygen supply is lost, our response must be immediate, almost second nature.



A (Slide Layer)

Code Green

What to do: Step A

What to do: Step B

What to do: Step C

What to do: Step A

Initiate Your Site's Emergency Communications Process and give the following info:

1. Name
2. Site
3. Location
4. "We have a Code Green in progress. The alarm panel on the wall is indicating a/an (type of gas) alarm."

B (Slide Layer)

Code Green

What to do: Step A

What to do: Step B

What to do: Step C

What to do: Step B

Assign the following tasks:

- Check all patients known to be on oxygen to see if they are receiving the proper flow. If not, set patients up on available oxygen cylinders. Triage when necessary.
- Conduct a room-to-room patient inventory and document all patients on oxygen.
- Print oxygen work list from computer and have available in your area for the Respiratory Coordinator and/or Engineering.
- You may stat page the Respiratory Coordinator and/or Engineering.
- Make sure your existing oxygen cylinders are full.

C (Slide Layer)

Code Green

What to do: Step A

What to do: Step B

What to do: Step C

What to do: Step C

The Respiratory Coordinator will arrange for the delivery of additional oxygen supplies to your area at CC, 17th, & MHC sites.

- Do not send personnel to the oxygen storage rooms for additional cylinders.

At LVH Tilghman, the clinical staff will retrieve oxygen supplies from the med-gas room.

The "Code Green - All Clear" will be announced when the system is fully functional.

More Info (Slide Layer)

Code Green

What to do: Step A


What to do: Step B

What to do: Step C

What is Code Green?

Code Green is the partial or total loss of "piped in" medical gases. Medical gases include oxygen, medical air, nitrous oxide, nitrogen and vacuum. When one or more of these systems fail, and activates an alarm, a Code Green will be announced. This will alert the appropriate departments to investigate and implement their contingency plan.


Click on each blue tile to the left for more information.



1.27 Oxygen Safety

Oxygen Safety

- Regulated Cylinder Storage Area Requirements
- Stem Valve Storage Area Requirements
- Transport of Oxygen Cylinders
- Security of Medical Gas Cylinders



You must make sure your patients have enough oxygen at all times.

Per policy, each patient care area is responsible for ensuring their compressed gas storage areas:

- Have the proper cylinder par levels
- Are kept in a clean working environment
- Meet storage area requirements

Notes:

The Joint Commission has implemented new safety standards for handling of oxygen because of documented serious events in which patients who needed oxygen were endangered due to low or empty oxygen tanks. You must make sure patients have enough oxygen at all times. Everyone must know how to transport and store oxygen safely.

Make sure that you choose a tank from the FULL/ FOR USE bin to make sure there is enough oxygen for transport of patient. Return a tank to the cart labeled EMPTY when in Pocono and Schuylkill locations: the tank has less than 500 psi, and in Lehigh Valley and Hazleton locations: the tank has less than 800 psi.

Transport (Slide Layer)

Oxygen Safety

Transport of Oxygen Cylinders




- Carry oxygen cylinders over shoulder
- Carry oxygen cylinders by regulator
- Lay oxygen cylinders on patient's stretcher or lap
- Drag or roll cylinders

Always use a cylinder cart or hand truck with a chain/belt in place!

Storage (Slide Layer)

Oxygen Safety

Stem Valve Storage Area Requirements



Stem-valve cylinder: cylinders that contain a valve without a permanently attached regulator.


Make sure that you choose a tank from the **FULL/FOR USE** cart that has a seal over the valve outlet.

Make sure that when you return a tank, you place all tanks without a seal or regulator in the cart labeled **EMPTY**.

Regulated (Slide Layer)

Oxygen Safety

Regulated Cylinder Storage Area Requirements



Regulated cylinder: cylinders that have a permanently attached regulator.

Choose a tank from the **FULL/FOR USE** cart to ensure there is enough oxygen for transport of patient.

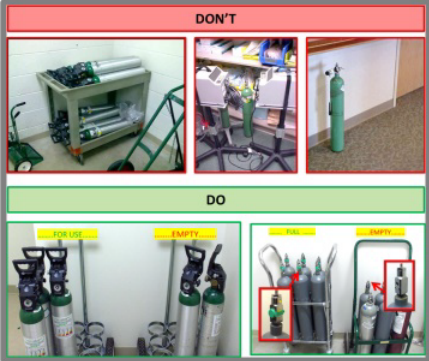
Return a tank to the cart labeled **EMPTY**:

- Pocono and Schuylkill locations: the tank has **less than 500 psi**
- Lehigh Valley and Hazleton locations: the tank has **less than 800 psi**

Security (Slide Layer)

Oxygen Safety

Security of Medical Gas Cylinders



- Do not store cylinders lying down horizontally or stacked, unless in an approved rack limited to 6 feet in height
- Ensure the location is where there is no danger of being knocked over, damaged by passing or falling objects or subject to tampering by unauthorized persons
- Secure all cylinders whether FULL, FOR USE, or EMPTY
- Secure all cylinders in an approved cylinder cart

The racks need to be maintained in close proximity and should not be touching, and should be clearly labeled.

1.28 Code Pink

What is Code Pink?



A Code Pink is the emergency code for a missing child. This definition can include: infant abduction, suspected kidnapping, or a reported missing child. There are very sophisticated security measures in place in our Labor and Delivery, Pediatrics and other high risk areas from preventing this type of emergency from happening. Activations of these security systems will also trigger a Code Pink.

What to do in Code Pink

If you hear Code Pink announced

Locations Near Pediatric Areas

Notes:

A Code Pink is the emergency code for a missing child. This definition includes many different scenarios. For example, infant abduction, suspected kidnapping, or a reported missing child.

There are very sophisticated security measures in place in our Labor and Delivery, Pediatrics and other high risk areas from preventing this type of emergency from happening. However, it is important that you know what to do and how you can play a role in a Code Pink.

Do (Slide Layer)

What to do in Code Pink

If you hear Code Pink announced


Locations Near Pediatric Areas

What to do in Code Pink

If you suspect a missing child emergency, initiate your site's emergency communications and provide as much information as possible.

For example:

1. Do you have a description of the child?
2. Do you know when and where they were last seen?
3. Did you see anyone in the area who did not belong there?



Help (Slide Layer)

What to do in Code Pink

If you hear Code Pink announced

Locations Near Pediatric Areas

If you hear Code Pink announced

If you hear Code Pink announced, immediately begin a search of your area. Look down corridors and entrances to elevators and stairwells. Report any suspicious activity. Secure all exits in your area. No one will be allowed to exit the building or campus until they are cleared by Hospital Security or the "Code Pink All Clear" is given.



Units Near Peds (Slide Layer)

What to do in Code Pink


If you hear Code Pink announced

Locations Near Pediatric Areas

Locations Near Pediatric Areas

Specific clinical units and non-clinical departments, based on their proximity to pediatric areas, may have unique responsibilities for a code on their campus.

These may include sending staff to monitor stairwells and exit paths.



Please refer to your campus code pink plan and unit leadership for specific details.


1.29 Code White

Bomb Threat

What to do in Code White

All Clear

What is Code White?



A Code White is the Emergency Code for a bomb threat. An overhead page for a Code White will only be announced when it has been determined that the nature of the threat will require an area or facility wide evacuation.

If evacuation is needed, specific instructions regarding relocation and evacuation will be made via the overhead announcement and emergency communications cascade.

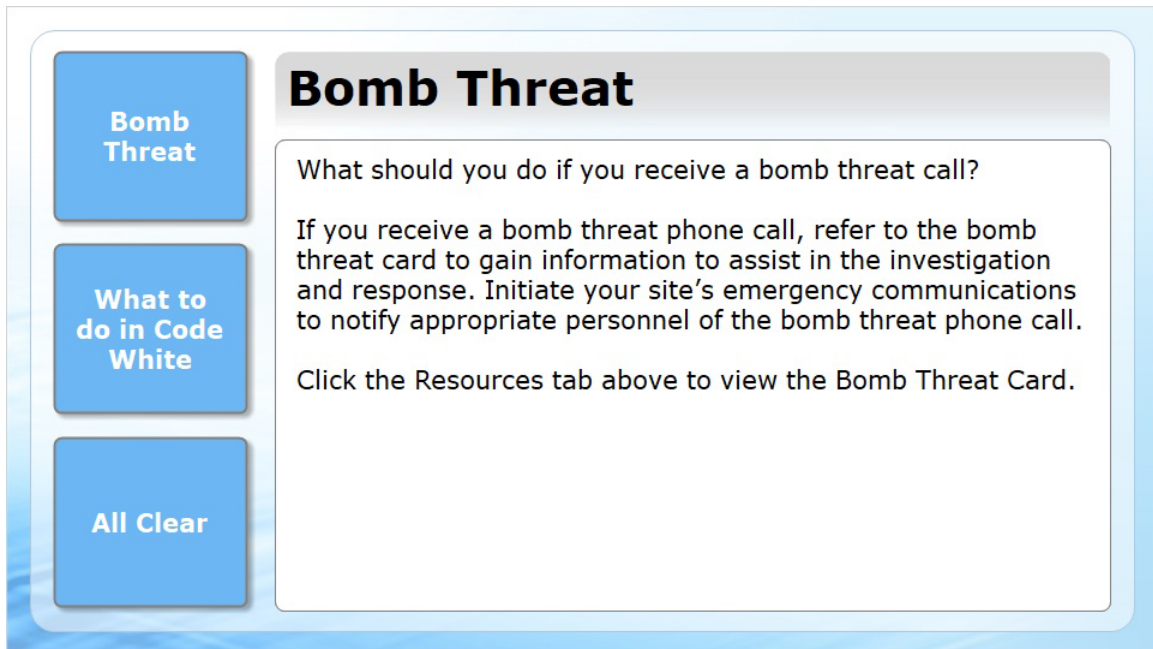
Notes:

A Code White is the Emergency Code for a bomb threat. An overhead page for a Code White will

only be announced when it has been determined that the nature of the threat will require an area or facility wide evacuation.

If evacuation is needed, specific instructions regarding relocation and evacuation will be made via the overhead announcement and emergency communications cascade.

threat (Slide Layer)



The image shows a slide layer interface for a 'Bomb Threat' scenario. It features a light blue background with a white content area. On the left side, there are three blue buttons stacked vertically: 'Bomb Threat', 'What to do in Code White', and 'All Clear'. The main content area has a grey header with the text 'Bomb Threat' in bold. Below the header, there is a white box containing the following text:

What should you do if you receive a bomb threat call?

If you receive a bomb threat phone call, refer to the bomb threat card to gain information to assist in the investigation and response. Initiate your site's emergency communications to notify appropriate personnel of the bomb threat phone call.

Click the Resources tab above to view the Bomb Threat Card.

Do (Slide Layer)

This slide layer features a vertical navigation menu on the left with three blue buttons: 'Bomb Threat', 'What to do in Code White', and 'All Clear'. The main content area has a grey header 'What to do in Code White' and a white text box containing two paragraphs of instructions.

Bomb Threat

What to do in Code White

All Clear

What to do in Code White

During a Code White Alert, a search team will be organized to walk through all areas of the site(s) determined by the emergency manager, the local police, and fire departments having jurisdiction.

You should continue normal operation unless you are instructed otherwise by your Supervisor. Each employee can assist in the search by helping identify anything out of place or unfamiliar in their respective areas. Do not touch or disturb any suspicious or unfamiliar packages or containers. Immediately inform appropriate personnel if a suspicious or unfamiliar package or container is found.

All clear (Slide Layer)

This slide layer features a vertical navigation menu on the left with three blue buttons: 'Bomb Threat', 'What to do in Code White', and 'All Clear'. The main content area has a grey header 'All Clear' and a white text box containing one paragraph of information.

Bomb Threat

What to do in Code White

All Clear

All Clear

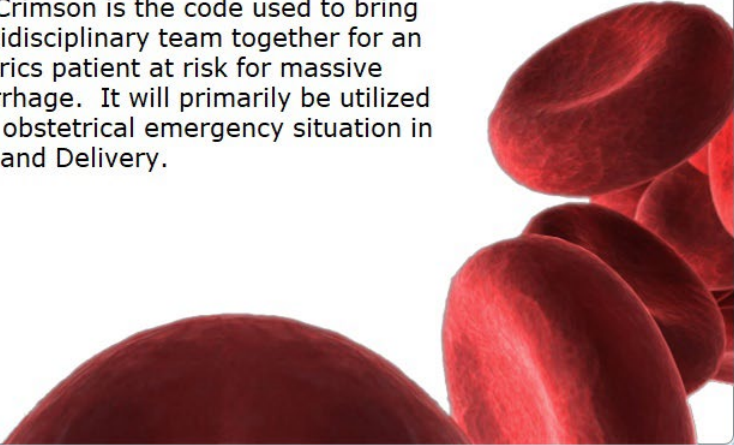
The "Code White - All Clear" will be announced when the site or area has been determined to be safe and secure by the Administrator-on-Call, the emergency manager, the local police and fire departments.

1.30 Code Crimson

What is Code Crimson?

Code Crimson

Code Crimson is the code used to bring a multidisciplinary team together for an obstetrics patient at risk for massive hemorrhage. It will primarily be utilized for an obstetrical emergency situation in Labor and Delivery.



Notes:


Code Crimson is the designation to be used to denote an obstetrical emergency situation. It will primarily be utilized for an obstetrical emergency situation in the Labor and Delivery, but it is not limited to this area.

1.31 Code Gray

What is Code Gray?

Code Gray is an audio code designation alerting the organization to an elopement of a patient with cognitive impairment. Code Gray is intended for the patient with Alzheimer's disease, dementia or memory impairment who is missing or eloped.

These patients who may be at risk for elopement will be identified with a colored circle on their hospital wrist band. This alerts all hospital personnel of the patient's cognitive impairment and risk for elopement. Elopement is when a patient leaves the hospital without a discharge order or notification of intent to leave.



What to do in Code Gray

If you hear Code Gray announced

Notes:

Code Gray is an audio code designation alerting the organization to an elopement of a patient with cognitive impairment. Code Gray is intended for the patient with Alzheimer's disease, dementia or memory impairment who is missing or eloped.

These patients who may be at risk for elopement will be identified with a colored circle on their hospital wrist band. This alerts all hospital personnel of the patient's cognitive impairment and risk for elopement. Elopement is when a patient leaves the hospital without a discharge order or notification of intent to leave.


Do (Slide Layer)

What to do in Code Gray

If you believe a patient is missing, initiate your site's emergency communications.

- Identify yourself & your location
- Request a code gray notification
- Provide a physical description of the patient
- The mental state of the patient
- Anything else you think may be helpful to locate the patient

Search your entire area including stairwells, lobbies, other close departments. Secure the department, including all means of egress & exits



What to do in Code Gray

If you hear Code Gray announced

Help (Slide Layer)

If you hear Code Gray

If you hear the Code Gray announcement, immediately begin a search of your area. Look down corridors and entrances to elevators and stairwells. Report any suspicious activity. Secure all exits in your area.

What to do in Code Gray


If you hear Code Gray announced

1.32 Code Yellow

**What to do
in a Code
Yellow -
LOCKDOWN**

Code Yellow – LOCKDOWN

A facility lockdown may be ordered to prevent a threat (violent person, biological, chemical or nuclear agents) from entering the facility, or to prevent personnel from exiting the facility in the event a hazard exists outside of the facility.



Notes:

A facility lockdown may be ordered to prevent a threat (violent person, biological, chemical or nuclear agents) from entering the facility, or to prevent personnel from exiting the facility in the event a hazard exists outside of the facility.

Do (Slide Layer)

What to do in a Code Yellow - LOCKDOWN

What to do in Code Yellow - LOCKDOWN

Procedure:

1. "Code Yellow" will be announced three times.
2. The primary responsibility of staff is to protect the safety of patients, visitors and themselves. Evacuation of an area, taking cover behind solid objects, moving away from windows or doors or other steps may need to be taken depending upon the reason for the lock down and perceived threat.
3. The Incident Commander will direct staff as to the appropriate response to the lockdown situation.
4. LVHN, through the campus Incident Commander and Security department, will partner with local and state law enforcement to support lockdown activities as needed

1.33 Control Team

What to do when the Control Team is called

Other ways you can help

What is Control Team?



The Control Team will respond to scenarios when an individual exhibits behavioral dyscontrol and poses a threat or harm to themselves and/or others. LVHN personnel who have completed specific training respond to these emergencies.

Notes:

Control Team is the emergency code for a patient or visitor who is exhibiting behavioral

dyscontrol and poses a threat or harm to themselves and/or others. LVHN personnel who have completed specific training respond to these emergencies.


Do (Slide Layer)

What to do when the Control Team is called

Other ways you can help

What to do

1. Initiate your site's emergency communications.
 - If you are not sure if the Control Team should be called, notify Security staff so that they may evaluate the situation and take the appropriate action.
2. When responders arrive, provide a summary of the situation to them.
3. If you are not directly involved with the code response, you can assist other patients or perform other duties assigned by your supervisor.



Help (Slide Layer)

What to do when the Control Team is called

Other ways you can help

Other ways you can help

Stay clear of the area where the Control Team is responding to allow the responders to quickly and efficiently do their job with minimal obstruction and delay.





1.34 Code 45

What to do in Code 45

CRASE Course and FEMA Resources

Active Shooter Video Link

What is Code 45?

An individual with a weapon	
Structural collapse	
A suspicious package	
A release of a gas or chemical	

Notes:

Code 45 is LVHN's code designation for a potentially dangerous situation, where it is necessary

for people to remove themselves from, and stay away from, the affected area. This situation may include: an individual with a weapon, a structural collapse of part of a building, discovery of a suspicious package, or release of chemical or biological agent or release of a gas.

It is important for all staff to know how to respond to a Code 45 situation. If a Code 45 occurs in your area:

- You will hear “**Code 45**” announced, followed by the specific location and hazard (i.e. “Code 45 – hostile threat – main lobby,” or “Code 45 – chemical spill – loading dock”)
- Security officers will respond
- If possible, leave the area as quickly and safely as possible
- Security officers will be the only personnel authorized to be in the area. Security will call upon outside agencies such as law enforcement, fire departments or EMS, if needed.
- After a Code 45 situation, “CODE 45 ALL CLEAR” announcement will be made. This will signify to you it is safe to return to that area.

LVHN Security and Office of Emergency Preparedness are taking a proactive approach in responding to such critical incidents.

- The Security Department and local Law Enforcement agencies utilize preventative actions and try to deter such incidents
- LVHN has introduced a new policy to the Network Safety manual title “Code 45.” This policy can be found in the Emergency Operations and Public Safety Manual in Policy Tech, or wherever your site-specific policies are found.

When placed in a dangerous situation at a hospital exchange, initiate your site’s emergency communications. If you are NOT located at a LVHN location with a hospital exchange, please call 911.

Over recent years, many healthcare facilities have experienced violent crisis situations, such as domestic relation disputes, bomb threats, hostage incidents, and shootings. Lehigh Valley Health Network Security and Office of Emergency Preparedness are taking a proactive approach in responding to such critical incidents. Our Security Department and local Law Enforcement agencies utilize preventative actions and try to deter such incidents within our organization. However, the reality is that they may happen.

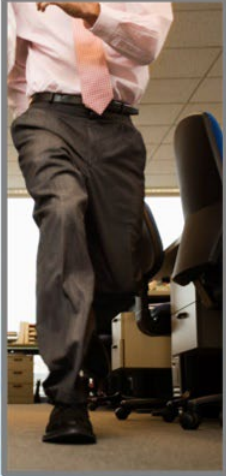
Do (Slide Layer)

What to do in Code 45

CRASE Course and FEMA Resources

Active Shooter Video Link

What to do in Code 45



You hear "Code 45" announced.

If in immediate danger, evacuate or shelter in a safe place!

If not in immediate danger, secure area, initiate your site's emergency communications, and await further instruction.

If you are NOT located at a LVHN location with a hospital exchange, dial 911.

After the Code 45 situation, you will hear the "CODE 45 ALL CLEAR" announcement. This will signify it is safe to return to that area.

CRASE Course (Slide Layer)

What to do in Code 45

CRASE Course and FEMA Resources

Active Shooter Video Link

CRASE Course and FEMA Resources

Attend a Civilian Response to Active Shooter Events (CRASE) course at LVHN:

Registration for the CRASE course is conducted through the Education Calendar found on the LVHN intranet.

Search for "CRASE" using keywords.


Additional Video Resources from FEMA can be viewed by clicking the links below:

Click here for important information on Bleeding Control Kits

1.35 Workplace Violence

Workplace Violence

- Report any suspicious activity or threatening behavior to security immediately
- It is always better to call for assistance early rather than rush to call after the situation has escalated
- If at anytime you feel you are in direct danger, leave the dangerous situation or area



Notes:

Report any suspicious activity or threatening behavior to security immediately. It is always better to call for assistance early rather than rush to call after the situation has escalated. If at anytime you feel you are in direct danger, leave the dangerous situation or area.

1.36 Avoid, Deny, Defend Video

View the Texas State University Advanced Law Enforcement Rapid Response Training (ALERRT) Video, “Avoid Deny Defend: Civilian Response to Active Shooter Events,” at the following link:

<https://www.youtube.com/watch?v=j0It68YxLQQ>.

1.37 Bleeding Control Kits & AEDs

Bleeding Control Kits & AEDs

Bleeding Control Kits

- Available for use by trained bystanders and colleagues to initiate life-saving treatment for massive hemorrhage
- Contain a tourniquet, pressure dressing, 2 pairs of gloves, and a pair of trauma sheers
- Located within each public-access AED cabinet throughout the Lehigh Valley area sites of the network

Automated External Defibrillators (AEDs)

- AEDs are located in public spaces such as hallways, lobbies, and gathering spaces
- Anytime an AED is removed from a cabinet or used, dial 555 (Lehigh Valley), 180# (Hazleton), 3333 (Pocono), or 333 (Schuylkill) to start the emergency response process. Dial 911 from outpatient locations.

Notes:

Bleeding Control Kits & AEDs

Bleeding Control Kits

- Available for use by trained bystanders and colleagues to initiate life-saving treatment for massive hemorrhage
- Contain a tourniquet, pressure dressing, 2 pairs of gloves, and a pair of trauma sheers
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- Anytime an AED is removed from a cabinet or used, dial 555 (Lehigh Valley), 180# (Hazleton), 3333 (Pocono), or 333 (Schuylkill) to start the emergency response process

1.38 Chemical Spill

What is a Chemical Spill?

Chemical Spill

A chemical spill is an unintentional release of a hazardous material.

Only clean up small spills of chemicals with which you routinely use, are aware of the hazards, and which represent a low risk to personnel.

Report large spills or spills of chemicals with which you are not familiar by initiating your site's emergency communications.



Notes:


A chemical spill is an unintentional release of a hazardous material. Only clean up small spills of chemicals with which you routinely use, are aware of the hazards, and which represent a low risk to personnel. Report large spills or spills of chemicals with which you are not familiar by initiating your site's emergency communications.

1.39 MCI Disaster Alert

MCI or Disaster Alert

What is an MCI or Disaster Alert

An MCI is a mass casualty incident. The Emergency Department physician and/or ER charge nurse will confirm the nature of the emergency and estimated number of victims & communicate to the telephone operator. Key personnel will be notified of the incident.



Notes:

An MCI is a mass casualty incident. The Emergency Department physician and/or ER charge nurse will confirm the nature of the emergency and estimated number of victims & communicate to the telephone operator. Key personnel will be notified of the incident.

1.40 All Clear

The graphic is titled "All Clear" in a bold, black font at the top. Below the title is a large green horizontal bar. To the left of the main content area is a vertical grey box containing the text "What is All Clear?". The main content area contains the words "ALL CLEAR" in a large, green, stylized font. To the right of this text is a smaller text box that reads "This code notifies colleagues that the incident is concluded." Below this text is another large green horizontal bar.

Notes:

All Clear notifies colleagues that the incident is concluded.

1.41 Medical Emergencies

Medical Emergencies


What to do in a Medical Emergency

Emergency Response

“Medical Emergency” is the term used for outpatients, visitors, or colleagues who are experiencing a medical problem that requires urgent attention.

Under EMTALA: The hospital and its employees are responsible to respond to all visitor injuries on the property.

At LVH-Schuylkill, the **Campus Response Team** responds to medical emergencies.



Notes:

“Medical Emergency” is the term used for outpatients, visitors, or colleagues who are experiencing a medical problem that requires urgent attention.

Under EMTALA: The hospital and its employees are responsible to respond to all visitor injuries on the property. Initiate your site’s emergency communications immediately and give your location, name, nature of the medical problem, and a call-back number. The dispatcher may provide instructions for certain medical emergencies. If you are within a building connected to a hospital with an emergency department, the ED response team, Rapid Response Team, and Security will be paged to assess the patient and transport them to the ED.

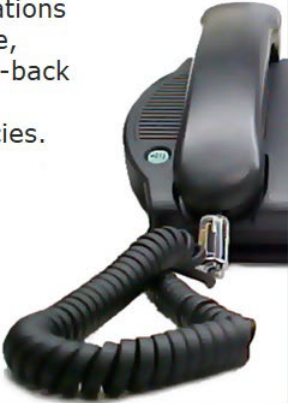
If at an outpatient site or surgical center, the dispatcher will ensure that the local EMS agency is notified and they respond to transport the patient to the hospital.

At LVH-Schuylkill, the Campus Response Team responds to medical emergencies.

Do (Slide Layer)

What to do in a Medical Emergency


Initiate your site's emergency communications immediately and give your location, name, nature of the medical problem, and a call-back number. The dispatcher may provide instructions for certain medical emergencies.



Emergency Response

Help (Slide Layer)

Emergency Response



If you are within a building connected to a hospital with an emergency department, the ED response team, Rapid Response Team, and Security will be paged to assess the patient and transport them to the ED.

If at an outpatient site or surgical center, the dispatcher will ensure that the local EMS agency is notified and they respond to transport the patient to the hospital.

What to do in a Medical Emergency

Emergency Response


1.42 Rapid Response Team

What is the Rapid Response Team?

Rapid Response Team

Team that responds to patients with acute changes to their clinical condition, or visitors or staff who require immediate medical intervention.

At LVH-Hazleton, this team is called the **Clinical Care Response Team**.



Notes:

Team that responds to patients with acute changes to their clinical condition, or visitors or staff who require immediate medical intervention.


At LVH-Hazleton, this team is called the **Clinical Care Response Team**.

1.43 Stroke Alert

Stroke Alert

What is Stroke Alert?

A Stroke Alert is the process for notifying applicable personnel of a patient experiencing stroke symptoms, either pre-hospital or in-patient.



Notes:


A Stroke Alert is the process for notifying applicable personnel of a patient experiencing stroke symptoms, either pre-hospital or in-patient.

1.44 FAST

Stroke

Every 40 seconds, someone in the US has a stroke. When it comes to treating stroke, the sooner, the better. Early recognition and prompt action could save a life. If you think someone is having a stroke, act **FAST** by initiating your site's emergency communications:

- 1199 for inpatients in the LV-Area, LVH-Carbon, or LVH-Dickson City
- 555 for outpatients, visitors, colleagues in the LV-Area, LVH-Carbon, or LVH-Dickson City
- 911 for LVH-Highland and LVH-1503 N. Cedar Crest
- 180# in LVH-Hazleton
- 3333 in LVH-Pocono
- 333 in LVH-Schuylkill



FACE
Drooping

ARM
Weakness

SPEECH
Difficulty

TIME
Is essential

Notes:


Every 40 seconds, someone in the US has a stroke. When it comes to treating stroke, the sooner, the better. Early recognition and prompt action could save a life. FAST is a way to help remember the warning signs of stroke. FAST stands for face drooping, arm weakness, speech difficulty, time is essential (time to call 911). If you think someone is having a stroke, act **FAST** by initiating your site's emergency communications:

- 1199 for inpatients in the LV-Area, LVH-Carbon, or LVH-Dickson City
- 555 for outpatients, visitors, colleagues in the LV-Area, LVH-Carbon, or LVH-Dickson City
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- 180# in LVH-Hazleton
- 3333 in LVH-Pocono
- 333 in LVH-Schuylkill

1.45 Early Heart Attack Care

Early Heart Attack Care

- **Early Signs and symptoms can be non-specific or specific:**
 - Chest discomfort, pressure, aching, burning or fullness are specific signs
 - Weakness, sweating, nausea, and dizziness are non-specific signs
- **Risk factors include:**
 - family history
 - high blood pressure
 - obesity
 - tobacco abuse
 - metabolic issues such as diabetes
 - women birth control pills and pregnancy complications
- **Women and men present differently with heart attack**
 - Men: sweating, chest pain and tightness, heartburn, nausea/vomiting
 - Women: jaw pain, shortness of breath, chest discomfort, backache, extreme fatigue and nausea
- **A heart attack is a life-threatening emergency and seeking medical treatment as early as possible may save a life!**



Notes:

Every 40 seconds, someone in the US has a stroke. When it comes to treating stroke, the sooner, the better. Early recognition and prompt action could save a life. FAST is a way to help remember the warning signs of stroke. FAST stands for face drooping, arm weakness, speech difficulty, time is essential (time to call 911). If you think someone is having a stroke, act **FAST** by initiating your site's emergency communications:

- 1199 for inpatients in the LV-Area, LVH-Carbon, or LVH-Dickson City
- 555 for outpatients, visitors, colleagues in the LV-Area, LVH-Carbon, or LVH-Dickson City
- 911 for LVH-Highland and LVH-1503 N. Cedar Crest
- 180# in LVH-Hazleton
- 3333 in LVH-Pocono
- 333 in LVH-Schuylkill

1.46 Heart Attack

Heart Attack

- In the United States, someone has a heart attack every 40 seconds and annually 805,000 people in the US have a heart attack.
- 1 in every 4 deaths are related to heart disease which is the leading cause of death for men and women in the US.
- Early recognition and prompt action could save a life!
- If you think someone is having a heart attack, act quickly by initiating your sites emergency communications:
 - 1199 for inpatients in the LV-Area, LVH-Carbon, or LVH-Dickson City
 - 555 for outpatients, visitors, colleagues in the LV-Area, LVH-Carbon, or LVH-Dickson City
 - 911 for LVH-Highland and LVH-1503 N. Cedar Crest
 - 180# in LVH-Hazleton
 - 3333 in LVH-Pocono
 - 333 in LVH-Schuylkill

Common Heart Attack Warning Signs

- 1 Pain or discomfort in chest
- 2 Lightheadedness, nausea, or vomiting
- 3 Jaw, neck or back pain
- 4 Discomfort or pain in arm or shoulder
- 5 Shortness of breath

Learn more at Heart.org/HeartAttack.

Notes:

- In the United States, someone has a heart attack every 40 seconds and annually 805,000 people in the US have a heart attack.
- 1 in every 4 deaths are related to heart disease which is the leading cause of death for men and women in the US.
- Early recognition and prompt action could save a life!
- If you think someone is having a heart attack, act quickly by initiating your sites emergency communications:
 - 1199 for inpatients in the LV-Area, LVH-Carbon, or LVH-Dickson City
 - 555 for outpatients, visitors, colleagues in the LV-Area, LVH-Carbon, or LVH-Dickson City
 - 911 for LVH-Highland and LVH-1503 N. Cedar Crest
 - 180# in LVH-Hazleton
 - 3333 in LVH-Pocono
 - 333 in LVH-Schuylkill

1.47 Severe Weather Preparedness

Severe Weather Preparedness

Severe weather can also cause an emergency situation. Tornadoes and winter storms are two events that you should be prepared for.

Click the next button to learn more about what you should do in each type of weather emergency.



Notes:

Severe weather can also cause an emergency situation. Tornadoes and winter storms are two events that you should be prepared for. Click the next button to learn more about what you should do in each type of weather emergency.

1.48 Severe Weather Preparedness

Severe Weather Preparedness

Tornado (or wind storm):

- Listen to local radio and television reports
 - Your local stations will provide further details and what you should do
- Seek shelter in a basement or hallway
- Avoid areas with windows
- Seek shelter under sturdy furniture
- Use your arms to protect your head and neck



Notes:

Tornado (or Wind Storm) Listen to local radio and television reports for tornado watch and warning alerts. Your local radio and television stations will provide further details on the storm event and what you should do. If there is a tornado or severe wind storm, you should seek shelter in a basement or a hallway. If possible, avoid areas with windows. You can also shelter yourself under sturdy furniture. Use your arms to protect your head and neck.

1.49 Severe Weather Preparedness

Severe Weather Preparedness

- Tornado warnings are issued when a tornado has been spotted or confirmed to touch down in close proximity to the warning area.
- Tornado warnings require immediate action.
- Colleagues will be notified of a shelter-in-place tornado warning event via an overhead page.
- If a shelter-in-place order is given for a tornado warning or high-wind warning:
 - Move patients, colleagues and visitors into inner hallways and corridors of the unit (i.e. away from the windows).
 - Close doors to rooms with windows.



Notes:

If a tornado warning is issued, quickly move all patients into the hallway and away from windows. Close all patient room doors.

1.50 Severe Weather Preparedness

Severe Weather Preparedness

- Avoid any unnecessary travel.
- Protect yourself by dressing in layered clothing.
- Be prepared and travel with extra food, water and clothing in case you get stuck in the storm.
- If working during a storm, leave early and give yourself plenty of time to safely get to your location.



Notes:

Winter Storms: During severe winter snow or ice storms, you should avoid any unnecessary travel. If you must go out, remember to protect yourself by dressing in layered clothing. It is also a good idea to be prepared and travel with extra food, water and clothing in case you get stuck in the storm.

If working during a storm, leave early and give yourself plenty of time to safely get to your location.

1.51 My Role in a Disaster

My Role in a Disaster

	Inpatient, ED Nursing & Clinical Support Colleagues		Inpatient, ED Physician & APC Colleagues
	Outpatient, Physician, APC, Nursing & Clinical Support Colleagues		Administrative & Non-clinical Colleagues

Notes:

1.52 Inpatient, ED Nursing & Clinical Support

Inpatient, ED Nursing & Clinical Support

 <p>Communicate Location</p>	 <p>Assess Patients</p>	 <p>Be Prepared</p>
 <p>Maintain Equipment</p>	 <p>Communicate Needs</p>	 <p>Patient Surge Readiness</p>

Notes:

Report (Slide Layer)

Inpatient, ED Nursing & Clinical Support



Report any unmet needs or problems to either the Network EOC, Site ECC or EOC, or the Emergency Communication Center (555 in Lehigh Valley; 3333 at LVH-Pocono; 333 at LVH-Schuylkill; Security Hazleton only).

Return

Communications (Slide Layer)

Inpatient, ED Nursing & Clinical Support



Know the location of your unit's emergency communications equipment, evacuation equipment, and any unit-specific emergency plans you may have.

Return

Emergency (Slide Layer)

Inpatient, ED Nursing & Clinical Support



Keep a set of emergency items in your car or locker to assist with your personal preparedness.

Return

Consult (Slide Layer)

Inpatient, ED Nursing & Clinical Support




When a disaster is declared, or during an emergency event, ensure the charge RN on your floor or unit is aware of your location at all times. Do not leave the unit without informing the charge RN. Communicate with your unit leadership regarding staffing assignments during a disaster.

Return

Patients (Slide Layer)

Inpatient, ED Nursing & Clinical Support

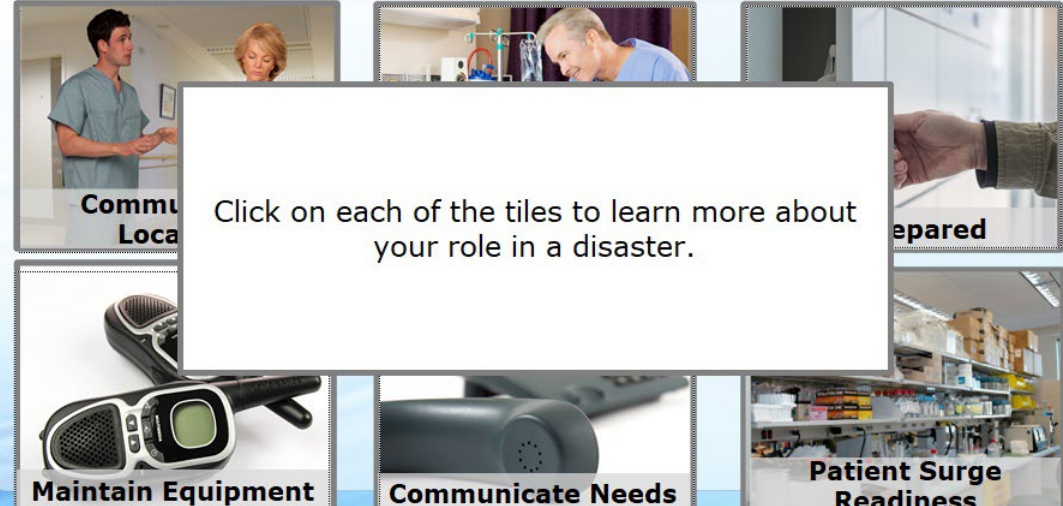


Continually assess and reassess your patients and their ability to ambulate – this will assist you in prioritizing should evacuation be required.

Return

Intro (Slide Layer)

Inpatient, ED Nursing & Clinical Support



Click on each of the tiles to learn more about your role in a disaster.

Commu
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epared

Maintain Equipment

Communicate Needs

Patient Surge
Readiness

Patient Surge Readiness (Slide Layer)

Inpatient, ED Nursing & Clinical Support

Patient Surge Readiness

- LVHN maintains the following for surge readiness:
 - Inpatient and Emergency Department plans for both acute surge (i.e. mass casualty surge) and sustained surge (i.e. pandemic surge)
 - agreements with our supply and pharmaceutical vendors for rapid delivery of supplies during an emergency
 - cache of disaster medical supplies and equipment that can be deployed to supplement patient surge.
 - Crisis Standards of Care plans for allocation of scarce clinical resources during disasters.
 - Any implementation of Crisis Standards of Care plans will be done through the Incident Command System and will be communicated to all impacted colleagues when any modification of standard of care and clinical practice is approved during a disaster.

Next

Requesting Resources (Slide Layer)

Inpatient, ED Nursing & Clinical Support

Requesting Resources

- Response to patient surge will be coordinated through the incident command system and will require activation of the Emergency Operations Plan.
- During an emergency incident where the campus or network Emergency Operations Plan has been activated, any resources that are unavailable through normal channels (staffing, equipment, medical supplies, pharmaceuticals, etc.) should be reported to your supervisor and up to the campus or network Incident Command structure for resolution.
- If LVHN has unmet needs during an emergency that we cannot source through normal or emergency processes, support via Mutual Aid Agreements and unmet needs requests through local, county, and state emergency management officials will be implemented by the LVHN incident command team.

Return

1.53 Inpatient, ED Physician & APC Colleagues

Inpatient, ED Physician & APC Colleagues



Communicate Location



Be Prepared



Evaluate Patients




Communicate Needs



Patient Surge Readiness

Report (Slide Layer)

Inpatient, ED Physician & APC Colleagues



Report any unmet needs or problems to either the Network EOC, Site ECC or EOC or EOC, or the Emergency Communication Center (555 in Lehigh Valley; 3333 at LVH-Pocono; 333 at LVH-Schuylkill; Security Hazleton only).

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Emergency (Slide Layer)

Inpatient, ED Physician & APC Colleagues



Keep a set of emergency items in your car or locker to assist with your personal preparedness.

[Return](#)

Surge Event (Slide Layer)

Inpatient, ED Physician & APC Colleagues




In an acute surge event, follow your department's policy to identify patients who may be able to be discharged to a Long-Term Care or Skilled Nursing Facility in order to help prepared for admission surge

[Return](#)

Consult (Slide Layer)

Inpatient, ED Physician & APC Colleagues



When a disaster is declared, or during an emergency event, notify your physician colleagues and applicable nursing leadership of your location in order to assist with staff accountability.

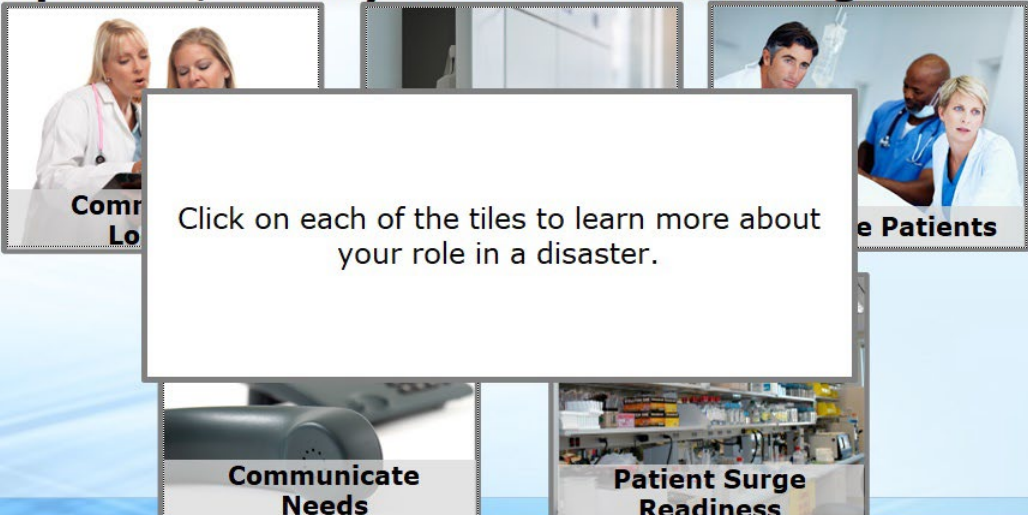
At LVH-Pocono, this will be coordinated through a labor pool upon activation of a disaster or emergency event.

Licensed Independent Providers should communicate with their patients, nursing colleagues, and hospital physician and provider colleagues to coordinate care of their patients.

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Intro (Slide Layer)

Inpatient, ED Physician & APC Colleagues



Click on each of the tiles to learn more about your role in a disaster.

Communicate Needs

Patient Surge Readiness

Patient Surge Readiness (Slide Layer)

Inpatient, ED Physician & APC Colleagues

Patient Surge Readiness

- LVHN maintains the following for surge readiness:
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 - Any implementation of Crisis Standards of Care plans will be done through the Incident Command System and will be communicated to all impacted colleagues when any modification of standard of care and clinical practice is approved during a disaster.

Next

Requesting Resources (Slide Layer)

Inpatient, ED Physician & APC Colleagues

Requesting Resources

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- During an emergency incident where the campus or network Emergency Operations Plan has been activated, any resources that are unavailable through normal channels (staffing, equipment, medical supplies, pharmaceuticals, etc.) should be reported to your supervisor and up to the campus or network Incident Command structure for resolution.
- If LVHN has unmet needs during an emergency that we cannot source through normal or emergency processes, support via Mutual Aid Agreements and unmet needs requests through local, county, and state emergency management officials will be implemented by the LVHN incident command team.

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1.54 Outpatient Physician, APC, Nursing, & Clinical Support Colleagues

Outpatient Physician, APC, Nursing, & Clinical Support Colleagues



Consult Leadership


Be Prepared

Be Ready to Assist

Communicate Needs

Report (Slide Layer)

Outpatient Physician, APC, Nursing, & Clinical Support Colleagues




Report any unmet needs or problems to either the Network EOC, Site ECC, or the Emergency Communication Center (555 in Lehigh Valley; 3333 at LVH-Pocono; 333 at LVH-Schuylkill; Security Hazleton only).

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Emergency (Slide Layer)

Outpatient Physician, APC, Nursing, & Clinical Support Colleagues




Keep a set of emergency items in your car or locker to assist with your personal preparedness.

Return

Surge Event (Slide Layer)

Outpatient Physician, APC, Nursing, & Clinical Support Colleagues




In emergencies that create a large surge of patients in the community, outpatient practices, express-cares, and outpatient sites are critical to assist in decompressing non-urgent patient surge in emergency departments.

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Consult (Slide Layer)

Outpatient Physician, APC, Nursing, & Clinical Support Colleagues

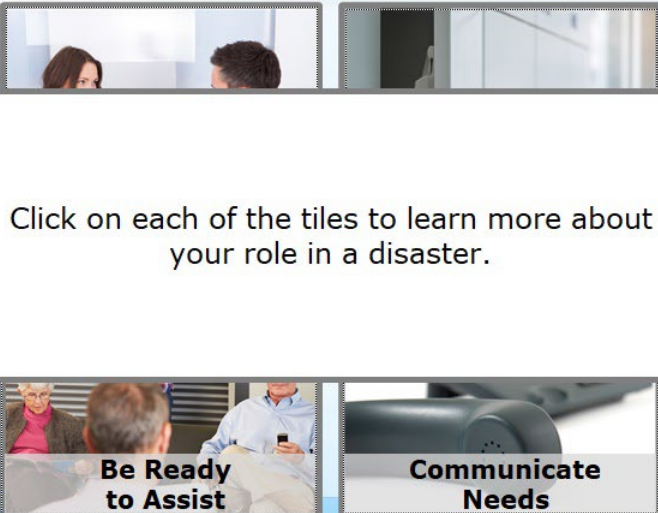


Consult with site and practice leadership to determine if the emergency will impact your practice or health center's ability to provide care.

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Intro (Slide Layer)

Outpatient Physician, APC, Nursing, & Clinical Support Colleagues




Click on each of the tiles to learn more about your role in a disaster.

Be Ready to Assist


Communicate Needs

1.55 Administrative & Non-Clinical Colleagues


Administrative & Non-Clinical Colleagues



Consult Leadership




Be Prepared



Communicate Needs

Report (Slide Layer)

Administrative & Non-Clinical Colleagues




Report any unmet needs or problems to either the Network EOC, Site ECC or EOC, or the Emergency Communication Center (555 in Lehigh Valley; 3333 at LVH-Pocono; 333 at LVH-Schuylkill; Security Hazleton only).

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Emergency (Slide Layer)

Administrative & Non-Clinical Colleagues




Keep a set of emergency items in your car or locker to assist with your personal preparedness.

Return

Consult (Slide Layer)

Administrative & Non-Clinical Colleagues

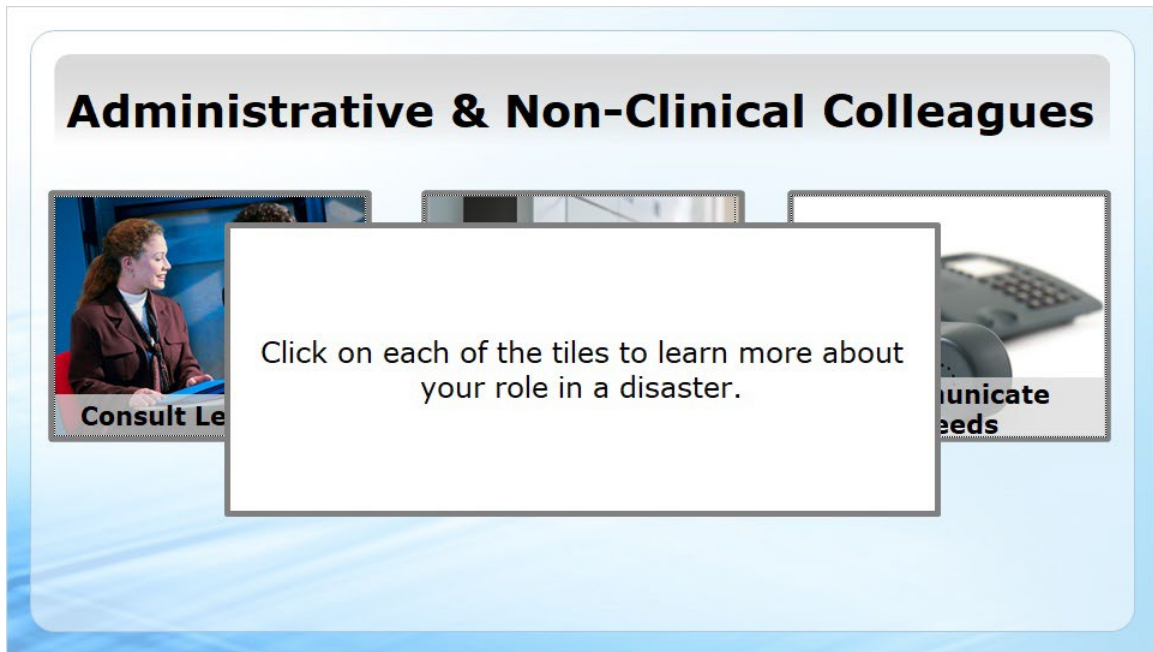


Consult with your supervisor regarding your role during a disaster. Many non-clinical departments play a key role in ensuring our network's ability to care for patients during a disaster.

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Intro (Slide Layer)

Administrative & Non-Clinical Colleagues



Click on each of the tiles to learn more about your role in a disaster.

Consult Le

Communicate needs