Designating a Resuscitation Area in the emergency unit

Rationale

Early recognition and resuscitation of conditions requiring time-sensitive management saves lives. A standardized approach in a designated resuscitation area ensures that the sickest patients in the emergency unit are clearly identified and receive necessary life-saving care. Dedicated resuscitation areas ensure that essential material resources are accessible and providers are aware of critical patients as soon as possible.

Use of the Resuscitation Area

- Upon arrival to the emergency unit, all patients are triaged.
- Patients triaged as “red” are immediately transferred to the resuscitation area.
- Triage personnel alert emergency unit staff as patients are transferred to the resuscitation area (e.g., overhead announcement).
- Alert triggers an immediate response of clinical personnel to the resuscitation area.
- Pre-hospital providers or bystanders remain until report is given to the receiving medical team.
- Patients in the resuscitation area are the top staff priority.
- The emergency unit ideally has other staff not assigned to the resuscitation area that continue to care for lower acuity patients.
- Initial assessment and resuscitation are followed by monitoring and re-evaluation.
- After initial resuscitation, team leader releases additional providers to care for other patients.
- Care plan (diagnostic, management and disposition) is developed before the team leaves the resuscitation area.
Staff

- Staff trained in resuscitation respond immediately to the resuscitation area.
- At the beginning of each shift, resuscitation area providers (doctors, nurses, technicians) are clearly identified and this information communicated on a centrally visible white board, chalk board, or monitor.
- If assigned to the resuscitation area, staff duties should not have them far from the emergency unit during their shift to enable a rapid response to critically ill patients.

Space

- For rapid reception of patients, the resuscitation area is easily accessible to the main emergency unit entry areas including the ambulance entrance, main entrance and triage area.
- The resuscitation area is easily visible from the main nurses’ station and physician work area, and staff is aware of its location and function.
- The resuscitation area has enough space to accommodate multiple providers and equipment.
- Easy access to radiology, operating theatres and intensive care unit.

Equipment and Supplies

The resuscitation area is equipped to handle critically ill patients at all times:

- Essential utilities (e.g., electricity, lights, running water)
- Personal protective equipment for providers (e.g. gloves, gowns) and disposal area for sharps, infectious and non-infectious waste.
- Medications cart equipped with key medications for critically ill patients (e.g., Oxygen, fluids, glucose, pain medications).
- Supplies (e.g., blood vials, IV kits, bandages, needles).
- Equipment to check and monitor vital signs.
- Equipment for airway emergencies (e.g. nasal and oral airways, intubation supplies, oxygen, BVM).
- Equipment for critical procedures (e.g. instruments, ultrasound if available).
- Code cart with advanced life support medications and defibrillator.
- Charting and documentation equipment and supplies.
- Patient gowns and bed linens.