



EMERGENCY

 In

 The

 Office Setting

Top Three Complications

← Airway Management

← Failed Resuscitation

← Poor Patient Selection

Be Prepared

⤵ A Successful Office Practice
Just Doesn't Happen.....

⤵ It Requires Diligent Planning!

Planning For Disaster

➤ Transfer Agreement

➤ Clinical Issues

➤ Staff Plan

➤ Patient Care

➤ Documentation

Transfer Agreement

Should Be Written

Physician Admitting Privileges

Nearest Hospital to facility

Clinical Issues

 Monitoring

 Emergency Drugs

 Emergency Equipment

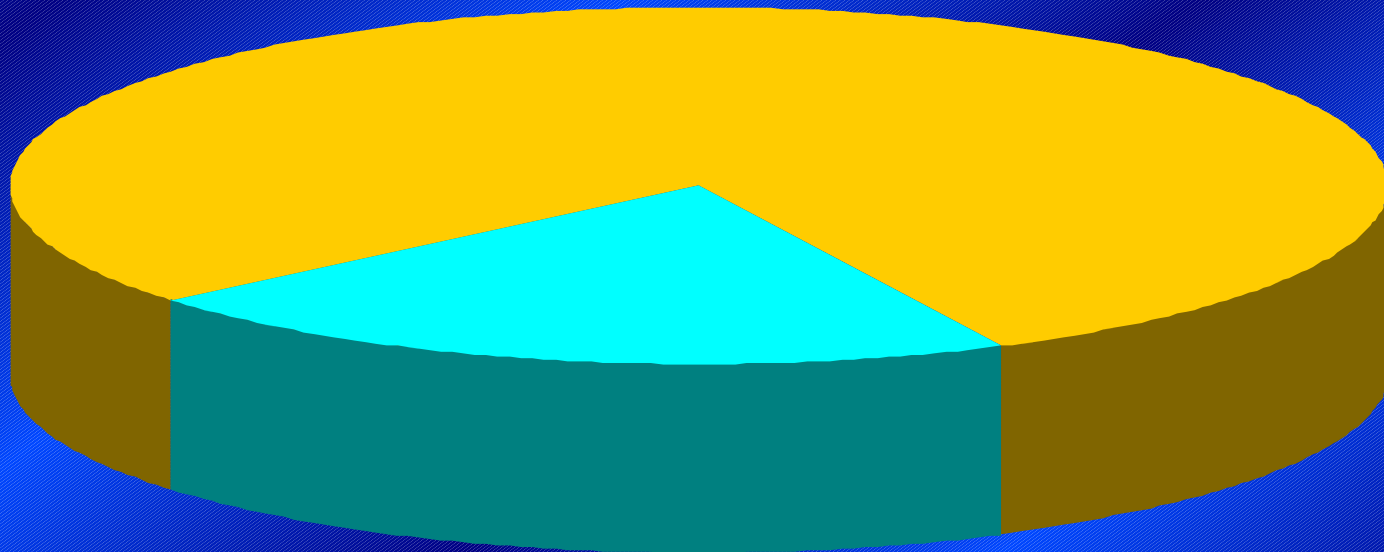
 Emergency Plan

CRNA Role

- Assist with developing plan
- Insist on drills and evaluate
- Participate in staff preparation
- Staff ACLS/BCLS/PALS

ACLS Certification

YES - 79%



NO - 21%



Staff Plan

- ⤵ Coded Alert for emergency
- ⤵ Clear assignment for each area
- ⤵ Should support patient care
- ⤵ Should support family
- ⤵ Should expedite transfer

Staff Plan

- ☞ Contact 911 or transport plan
- ☞ Alert Hospital ER of problem
- ☞ Move family to private area
- ☞ Prepare patient for transport
- ☞ CRNA to accompany patient

Patient's Family

- Private Quiet Area
- Staff assigned to be present
- Physician explanation ASAP
- Should be driven to hospital
- CRNA and physician meeting

Documentation

☞ Clear concise notes

☞ Complete record

☞ No time gaps

Arrival at Hospital

- Turnover care to hospital staff
- Report to ER Physician/Staff
- Remain in a supportive role
- Family meeting

What Next?

- Report to insurance company
- Incident report to facility
- Medical equipment act
- Maintain confidentiality
- Review case

??? Questions ???

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