

Mission Hospital- Process for notifying operator to call a Code Blue in an inpatient room

The Code Blue button located in patient rooms on all Nursing Units notify the operator to call a Code Blue (Mission Hospital only).

- ❑ If a patient is found unresponsive in a inpatient area, the Code Blue button should be activated immediately.
- ❑ A notification is sent directly to the PBX Operator Code Blue Console when the Code Blue Button is pushed in the patient room. Any caregiver can press this button.
 - Always listen for the Code Blue to be called overhead. If a Code Blue is not called within **one minute**, call the PBX Operator to activate a Code Blue.
- ❑ Departments that do not call a Code Blue Overhead are exempt and will need to follow the current internal Code Blue Notification process i.e. ED, ORs, NICU, PICU, etc.



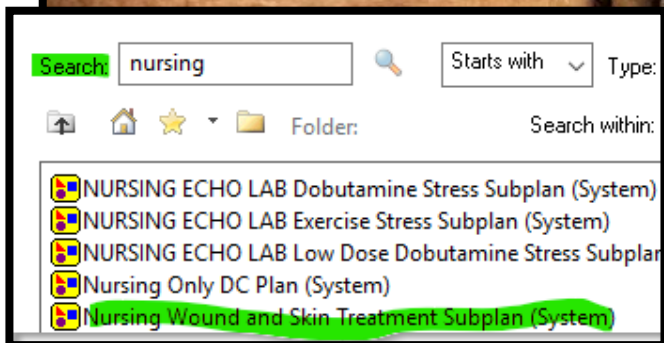
Wound of the Week (wow!): What is it?

Extravasation with wound

AKA IV infiltrate

- Follow Wound and Skin Subplan
 - Blisters Intact or Ruptured-Not on Feet:
 - Xeroform with cover dressing

- Wound Care Consult



Wound Care Consult Order and Recommendation	
<input checked="" type="checkbox"/> Blisters Intact or Ruptured - Not On Feet:	Every other Day, see order comments
<input checked="" type="checkbox"/> Dressing, Change	Blisters Intact or Ruptured - Not On Feet: 1. Cleanse wound 2. Apply Bismuth gauze (e.g. Xeroform). 3. Cover with dry gauze.

Use of Sterile Ultrasound Gel

☐ ☒ Always use single-use, sterile ultrasound gel for:

- **Percutaneous Procedures:**
 - Central & peripheral IV line placement
 - Amniocentesis
 - Paracentesis
 - Tissue biopsy
 - Surgical procedures
- **Non-intact skin** (e.g., wounds, abrasions)
- **Fresh surgical sites**



☐ ☐ Do NOT Use Nonsterile Gel (bottled ultrasound gel)

- **Never** use nonsterile bottled ultrasound gel for procedures involving skin puncture or surgical sites.
- Do not use nonsterile ultrasound gel for **pre-procedure visualization**

☐ Best Practice

- Always use **single-use packets** of sterile ultrasound gel
- Use **sterile probe covers** whenever feasible
- Check expiration dates and packaging integrity

☐ Why It Matters

- Outbreak Alert: Burkholderia stabilis infections have been linked to contaminated nonsterile, multiuse ultrasound gel.
- These infections can be serious and preventable with proper gel selection and usage.



Important Update: Ativan Shortage and Versed Guidelines



Due to a nationwide shortage of IV lorazepam (Ativan) (2 mg/mL) vials, we are implementing the following temporary guidelines to ensure appropriate medication use and patient safety:

- **Lorazepam Restriction:** IV lorazepam use is now restricted to ED, ICU, and Pediatric patients only for the treatment of seizures.
- **Midazolam (Versed) Substitution:**
 1. **Non-ICU Areas (IV Push):** IV push midazolam (2 mg/2 mL) is approved for use in non-ICU areas with a **maximum dose of 2 mg per administration**. Exceptions are made only for comfort care or intubated patients awaiting transfer.
 2. **Midazolam IV Push Frequency:** Do not administer IV push midazolam (2 mg/2 mL) more frequently than every 4 hours (Q4H) from the previous dose due to delayed accumulation.
 3. **Acute Agitation:** For acute agitation, the recommended route and dosing is **2 mg IM Q4H PRN**. IV push midazolam for acute agitation is **prohibited**. IV midazolam's is not effective for agitation management due to rapid onset and shorter duration of action, compared to IV lorazepam.
- **IM Midazolam for Seizures:** IM midazolam (5 mg/mL) is appropriate for PRN seizure management:
 1. **Patients weighing ≤ 40 kg: 5 mg IM, ONCE.**
 2. **Patients weighing > 40 kg: 10 mg IM, ONCE.**
- **Midazolam 5 mg/mL Storage:** Due to supply volume, the 5 mg/mL midazolam product is stocked in **only one Pyxis per unit**. Please use the "Global Find" function on your station to locate it.



- **Patient Monitoring & Communication:** Given the delayed accumulation of midazolam, **more frequent patient assessments and direct provider communication** are essential. For all PRN seizure IM midazolam doses (which are ONCE), a provider assessment is required for any subsequent dosing.
- **Patient Transfers (ED/ICU):** For patients transferring from the ED or ICU to a lower level of care, **all IV lorazepam orders must be discontinued and adjusted to midazolam**. Please collaborate with the provider to address this during the transfer process.




Clinical Updates

Baxter Pump Updates-Updated Pushed 7/29/25

- Last Tuesday, July 29, 2025, an important update was released for Baxter IV Pumps to address various issues.
- If a Baxter pump was plugged in, it should have automatically downloaded the new library and prompted the nurse to "accept" it.
- Confirm that each pump has been updated to version "**Cerner-IO NCDV 2023 v1 Version 33**" before patient use.
- Please contact BioMed for pumps that are not connecting to the wireless network and/or are not taking the updates.

Order comment for Specialty Bed/Mattress Update: Go-live 7/28/25

- Order Comment Current state – "Contact vendor to obtain Specialty Bed (generated from specialty bed screening form)"
- Order Comment Future state – "This patient qualifies for a specialty (air) mattress. Check patient room for a bed labeled "air" or "air powered". If not available on the unit, ask HUC to order one from the vendor or Transport (after hours).

	Specialty Bed/Mattress	Completed	06/04/25 1:58:34 EDT
This patient qualifies for a specialty (air) mattress. Check patient room for a bed labeled "air" or "air powered". If not available on the unit, ask HUC to order one from the vendor or Transport (after hours).			

- Reminder-Do not Delay Transfers while waiting on a specialty bed or mattress

TapNGo Reminders

To help keep patient data secure and your workflow smooth, remember these TapNGo best practices:

- Always badge out when leaving your workstation. It protects patient information and speeds up reconnection time.
- Reconnects take 15–30 seconds — we're continuously working to make that even faster.
- Your apps travel with you: When you badge back in, your session picks up where you left off.
- After 5 minutes of inactivity, your session will auto-lock. Just badge back in to resume.

Thank you for helping us safeguard patient data and enhance care through smart use of technology.