

**UC Riverside, School of Medicine Policies and Procedures****Policy Title:** Responding to a Medical Emergency at UCR Health Clinics**Policy Number:** 950-03-028

<b>Responsible Officer:</b>	Chief Medical Officer
<b>Responsible Office:</b>	Clinical Affairs
<b>Origination Date:</b>	March 2022
<b>Date of Revision:</b>	September 2022; June 2023; Oct 2023; Jan 2024; Feb 2024
<b>Scope:</b>	Applies to all UCR Health Clinics Providers and Staff

**I. Policy Summary**

Provide guidance for UCR Health clinic staff and providers when any individual exhibits signs of acute distress at the UCR Health Clinics.

**II. Definitions**

**A. Distress:** For this policy, the term distress is defined as any subjective or objective indication of acute suffering on the part of any individual.

1. Subjective expressions of distress include statements such as:
  - a. "I feel like I'm going to faint,"
  - b. "I feel dizzy," or
  - c. "I'm having trouble breathing."
2. Objective signs of distress may include
  - a. facial pallor,
  - b. sweating, falling,
  - c. holding one's head in lap, groaning, or
  - d. holding one's hands to the throat or chest.

**B. Responder:** For this policy, the term responder is defined as the first provider or staff member who observes a person in distress.

**III. Policy**

- A.** All UCR Health clinic providers and staff shall respond to any individual in distress according to the procedure described below
- B.** All UCR Health clinic providers and staff shall be trained and certified in Basic Cardiopulmonary Resuscitation (BLS) as required by UCR policy.

**IV. Procedures**

- A.** Upon seeing an individual in distress, the responder shall:
  1. Go to their aid, and
  2. Assess the acuity of the situation.
    - a. If serious bodily harm is imminent or if the situation seems imminently life threatening, the responder shall call 911 (or instruct a colleague to do so). The individual in distress may refuse to be treated by paramedics on the scene but cannot prevent the responder from calling 911 if deemed prudent under the circumstances.

- b. If serious bodily harm is not imminent and the situation does not seem imminently life threatening, the responder shall alert all personnel that there is a patient in distress requiring attention and:
  - i. All providers and clinical staff will respond immediately and
  - ii. Provider will direct necessary medical interventions (including CPR if necessary).
  - iii. Call 911 if necessary.
- 3. Clinic manager (or designee) will direct resource at the scene and support to patient family and other patients in the clinic during the medical emergency.
- 4. Once the paramedics arrive at the scene, the provider will transfer care to the paramedics.
- 5. Clinic manager will file an incident report using the UCR Health incident reporting system, at the first opportunity to document the medical emergency.

APPROVALS:

PATIENT SAFETY COMMITTEE (02/29/2024)

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**Addendum One: Clinic Emergency Box Contents Checklist****Adult Medical Emergency Box Contents: Version, Feb 2024***For Personnel: 2 adult masks/notepad & pen*

- Medication
  - 4 Glucagon/Glucose Injection 1mg
  - Trueplus Glucose Tablet 15g
  - 1 EpiPen Auto-injector 0.3 mg (0.3ml) for ( $\geq$ 66 lbs)
  - 1 vial Diphenhydramine for IM injection (50mg/ml)
  - 4 tabs ASA (81mg, not enteric coated) Chewable.
  - One bottle Nitroglycerine 0.4 mg total 25 tabs
  - 1 Ventolin inhaler, 90mcg per actuation
  - 2 Albuterol Sulfate 2.5 mg/ 3ml nebulizer solution
  - One bottle EZ Charcoal Pellets 25 grams
  - 1 vial Naloxone 4 mg/actuation for nasal administration
  - 2 Ammonia towelette 0.7g (0.025oz) per pouch
- Medication administration supplies
  - Alcohol prep pads
  - 2, 1 ml syringes
  - 2, 3 ml syringes
  - 21G needles X2
  - 23G needles X2
  - 25G needles X2
  - 2 18G needles
  - O2 tank cylinder on a portable rack
  - Oxygen nasal cannula
  - Oxygen extension tubing
  - Nebulizer machine (with disposable mouthpiece and tubing)
  - 1 aerochamber
- Other supplies
  - Non-sterile latex free gloves
  - Protective goggles
  - 1 roll adhesive tape
  - 1 roll paper tape
  - 1 stethoscope
  - 1 sphygmomanometer (small, medium and large cuffs, 1 each)
  - 1 disposable CPR mask
  - 1 adult resuscitator bag/mask
  - 1 pair of scissors
  - 1 pack nonsterile 4x4 gauze

**Addendum One: Clinic Emergency Box Contents Checklist (Continue)****Infant/ Pediatric Medical Emergency Box contents: Version Feb 2024**

- For Personnel: 2 adult masks/notepad & pen
- Medication
  - 4 Glucagon/Glucose Injection 1mg
  - Trueplus Glucose Tablet 15g
  - 1 EpiPen Auto-injector 0.15 mg (0.3ml) for (33lbs-66lbs)
  - 1 EpiPen Auto-injector 0.3 mg (0.3ml) for (≥66 lbs)
  - 1 vial Diphenhydramine for IM injection (50mg/ml) – **NOT for Neonate/ premature infants**
  - 1 Ventolin inhaler, 90mcg per actuation
  - 1 vial Naloxone 4mg for nasal administration
  - 2 Albuterol Sulfate 2.5 mg/ 3ml nebulizer solution
  - 2 Ammonia towelette 0.7g (0.025oz) per pouch
- Medication administration supplies
  - 1 current year Broselow tape
  - Alcohol prep pads
  - 2, 1 ml syringes
  - 2, 3 ml syringes
  - 21G needles X2
  - 23G needles X2
  - 25G needles X2
  - 2 18G needles
  - Pedi face masks for O2 administration (x4 difference size)
  - O2 tank cylinder on a portable rack
  - Oxygen nasal cannula
  - Oxygen extension tubing
  - Nebulizer machine (with disposable mouthpiece and tubing)
  - 1 aerochamber
- Other supplies
  - Non-sterile latex free gloves
  - Protective goggles
  - 1 roll adhesive tape
  - 1 roll paper tape
  - 1 pedi - stethoscope
  - 1 sphygmomanometer (infant, pedi, small, medium and large cuffs, 1 ea)
  - 1 disposable CPR mask
  - 1 each Pedi/infant/neonate size bag/mask
  - 1 pair of scissors
  - 1 pack nonsterile 4x4 gauze

**Addendum One: Clinic Emergency Box Contents Checklist (Continue)**  
**Women's Health Clinic ONLY Delivery Emergency Box contents: Version Jan 2024**

**MEDICATION**

- 1 bottle PVP Prep solution (10 percent povidone iodine, 4oz)
- Oxytocin 1 ml vials (10 units per ml) 2 vials included for total of 20 units

**MEDICATION ADMINISTRATION SUPPLIES**

- 3cc syringe with 23g x 1 in needle (x1)

**OTHER SUPPLIES**

- 2 sterile surgical gowns
- 4 pair sterile surgical gloves (size 7 x 2 and size 8 x 2)
- 4 chucks (blue plastic backing with absorbent white liner)
- 2 packs of 4x4 (each pack contains 2 gauzes)
- Kelly forceps x 2 (cord clamps)
- Ob pads x 2
- 1 bulb syringe
- 2 receiving blankets.
- Baby beanie x 1
- Biohazard bags x 2 (one for placenta and one for refuse)
- A pair of scissors.

## **Addendum Two: Medical Emergency Box contents and equipment maintenance, education, and Condition C drill Version March 2022**

### **Initial set up**

1. Medical emergency boxes (adults and peds) will be in designated location in the Clinic.
2. AED will be located by the medical emergency boxes at a designated location in the Clinic.
3. Nebulizer machine will be located by the medical emergency boxes at a designated location in the Clinic.
4. An Oxygen tank will be secured to portable rack located by the medical emergency boxes at a designated location in the Clinic.

### **Routine Maintenance**

1. Daily: The clinic will assign a clinic staff to check the integrity of emergency box contents and related equipment daily, when clinic is open, using the daily Medical Emergency Box equipment/supplies integrity checklist.
2. Once a month or when the medical emergency box seal is broken, the designated clinic staff must perform full content and equipment inspection and replacement of items.
3. All checklists are kept at the manager's office for 3 years.

### **Education**

1. All providers and staff will receive initial orientation of emergency box contents and emergency equipment location.
2. All new providers and staff will be orientation to the medical emergency procedure.
3. All new staff will be oriented to routine maintenance process.

### **"Condition C" Drill**

1. Every quarter, there will be an unannounced "Condition C" drill at the clinic.
2. Clinic Manager will facilitate post "Condition C" drill debrief discussion with clinic team and document on "Condition C" Critique form.
3. All "Condition C" Critique forms is kept at the manager's office for 3 years.

**Addendum Three: Medical Emergency Box equipment/supplies integrity checklist (v Feb/2024)**

Clinic Location: \_\_\_\_\_

Month: \_\_\_\_\_

Year: \_\_\_\_\_

Date	Adult emergency medical box – intact/ security Tag #	First expirable from adult med box date	Infant/ Pediatric emergency medical box- intact/ security tag #	First expirable from peds med box date	Women's Health Clinic ONLY Delivery emergency medical box – intact/ security Tag #	First expirable from Women's Health Delivery med box date	AED 1: _____ Batt ery fully char ged. Y/N	AED 2: _____ Battery fully charged. Y/N	O2 tank 75%- 100% on rack Y/N	Staff completed the check. print / initial name.
Example	Yes/ 123	00/00/00	Yes/ 456	00/00/00	Yes/ 789	00/00/00	Y	Y	Y	XYZ
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This maintenance record should be retained at the manager's office for 3 years.

**Addendum Four: "Condition C" Drill Critique (v March/2022)**

Clinic Location: \_\_\_\_\_

Date and time of "Condition C" Drill: \_\_\_\_\_

Person Completed this form (Please Print Name): \_\_\_\_\_

Criteria	Yes	No	NA	Notes
Staff/ providers were alerted of patient distress within 30 seconds				
Provider direct necessary medical interventions (including CPR if necessary).				
Staff called 911 as soon as provider indicate need.				
Clinic manager (or designee) direct resource at the scene and support to patient family and other patients in the clinic during the medical emergency.				
Provider transfer care to the paramedics when paramedics arrives.				

Staff feedback:

Area to improve:

**This Condition C Critique form should be retained at the manager's office for 3 years.**



**Addendum Five: Adult: contents expiration checklist version February 2024**

Quantity	Adult Box: Items with expiration dates only	Expiration date
—	_____	
4	Glucagon/Glucose Injection 1mg	
6	Trueplus Glucose Tablet 15g	
1 kit	EpiPen Auto-injector 0.3 mg (0.3ml) for (≥66 lbs)	
1 vial	Diphenhydramine (50mg/ml)	
4 tablets	ASA (81mg, not enteric coated), chewable.	
1	Ventolin Inhaler 90mcg per actuation	
2	Albuterol Sulfate 2.5 mg/ 3ml nebulizer solution	
1 vial	Naloxone 4mg for nasal administration	
2	Ammonia towelette 0.7g (0.025oz) per pouch	
1	Nitroglycerine 0.4 mg total 25 tabs bottle	
1 bottle	EZ Charcoal Pellets 25 grams	
10	Alcohol Prep Pads	
2	1 ml Syringe	
2	3 ml Syringe	
2	21 Gauge Needle	
2	23 Gauge Needle	
2	25 Gauge Needle	
2	18 Gauge Needle	
1	Oxygen Nasal Cannula	
1	Disposable Nebulizer Mouthpiece	
1	Nebulizer Tubing	
1	Aero chamber	
5 pairs	Non-sterile Latex Free Gloves	
1	Disposable CPR Mask	
1	Adult Resuscitator Bag/Mask	
1	Pack nonsterile 4x4 gauze	
2	Adult Masks for Personnel	

**Addendum Five: Infant/Peds contents expiration checklist version February 2024**

Quantity	Infant and peds: Items with expiration dates only	Expiration date
4	Glucagon/Glucose Injection 1mg	
6	Trueplus Glucose Tablet 15g	
1 kit	EpiPen Auto-injector 0.15 mg (0.3ml) for 33-66 lbs	
1 kit	EpiPen Auto-injector 0.3 mg (0.3ml) for (≥66 lbs)	
1 vial	Diphenhydramine (50mg/ml)	
1	Ventolin Inhaler, 90mcg per actuation	
1 vial	Naloxone 4mg for nasal administration	
2	Albuterol Sulfate 2.5mg/3ml nebulizer solution	
2	Ammonia towelette 0.7g (0.025oz) per pouch	
1	Current year Broselow tape for reference	
10	Alcohol Prep Pads	
2	1 ml Syringe	
2	3 ml Syringe	
2	23 Gauge Needle	
2	25 Gauge Needle	
2	18 Gauge Needle	
4 different sizes	Pedi face masks for O2 administration	
1	Oxygen Nasal Cannula	
1	Disposable Nebulizer Mouthpiece	
1	Nebulizer Tubing	
1	Aero chamber	
5 pairs	Non-sterile Latex Free Gloves	
1	Disposable CPR Mask	
1	Adult Resuscitator Bag/Mask	
1	Pack nonsterile 4x4 gauze	
<b>For Personnel</b>		
2	Adult Masks	

**Addendum Five: Women's Health Clinic Emergency Delivery Kit contents expiration checklist (version January 2024)**

<b>Quantity</b>	<b>Women's Health Clinic Emergency Delivery: Items with expiration dates only</b>	<b>Expiration date</b>
2	Sterile surgical gowns	
4 pairs	Sterile surgical gloves (size 7 x 2 and size 8 x 2)	
4 chucks	Chucks (blue plastic backing with absorbent white liner)	
2 packs	4x4 (each pack contains 2 gauzes)	
2	Kelly forceps (cord clamps)	
2 pads	Ob pads	
1 bottle	PVP Prep solution (10 percent povidone iodine, 4oz)	
2 vials total 20 units	Oxytocin 1 ml vials (10 units per ml)	
1	3cc syringe with 23g needle	
1	Bulb syringe	
2	Receiving blankets.	
1	Baby beanie	
2	Biohazard bags (one for placenta and one for refuse)	
1 pair	Scissors	

**Addendum Six: Dosage Chart modified from IEHP sample dosage chart.**

Medication	Adults	Pediatrics
Albuterol sulfate* a) Inhalation solution (0.0836% - 2.5 mg/ 3 ml)  b) Inhalation aerosol metered dose (90 mcg/actuation).	2.5mg to 5mg every 20 minutes for 3 doses, then 2.5 mg to 10 mg every 1 to 4 hours PRN  4 to 8 inhalations every 20 minutes for up to 4 hours, then 1 to 4 hours PRN	Children: 2.5 mg to 5 mg every 20 minutes for 3 doses, then 2.5 mg to 10 mg every 1 to 4 hours PRN. Infants & Neonates: 2.5 mg every 20 minutes for the first hour PRN; if there is rapid response, can change to every 3 to 4 hours PRN. Children: 2 to 10 inhalations every 20 minutes for 2 to 3 doses; if rapid response, can change to every 3 to 4 hours PRN. Infants & Neonates: 2 to 6 inhalations every 20 minutes for 2 to 3 doses; if there is rapid response, can change to every 3 to 4 hours PRN.
Acetylsalicylic acid (Aspirin)* Chewable tablet 81 mg (not enteric coated)	For myocardial infarction (MI): Chew 2 to 4 tablets upon presentation or within 48 hours of stroke	Not recommended
Diphenhydramine HCL Injection, USP (50 mg/ml)**	10 mg to 50 mg IM (not to exceed 400 mg/day)	Children: 1 to 2 mg/kg/dose IM (not to exceed 50 mg/dose). Neonates (< 4 weeks)/premature infants: <b>NOT RECOMMENDED</b>
Epinephrine Auto-injector: Epipen (Epinephrine 0.3 mg) Epipen Jr (Epinephrine 0.15 mg)	> 66 lbs: 0.3mg IM or subcutaneous into anterolateral aspect of the thigh, through clothing if necessary.	33 to 66 lbs: 0.15 mg/dose IM or subcutaneous into the anterolateral aspect of the thigh. < 33 lbs: <b>NOT RECOMMENDED</b>
Glucagon/Glucose Injection** (emergency medication for low blood sugar) 1 mg (1 unit)	< 20 kg: 0.5 mg or 20 to 30 mcg/kg IM or subcutaneous. >20 kg: 1 mg IM or subcutaneous. If the patient does not respond in 15 minutes, may give 1 to 2 more doses.	< 20 kg: 0.5 mg or 20 to 30 mcg/kg IM, or subcutaneous >20 kg: 1 mg IM or subcutaneous (If the patient does not respond in 15 minutes, may give 1 to 2 more doses).
Trueplus Glucose Tablet 15g	15 gm (3 to 4 tablets) by mouth, may repeat in 15 minutes if hypoglycemic symptoms do not resolve.	Children: 10 to 20 gm (0.3 gm/kg) by mouth, may repeat in 15 minutes if hypoglycemic symptoms do not resolve. <u>Crushed tablet PRN for younger children, please check with physicians.</u> Infants & Neonates (< 4 weeks): <b>NOT RECOMMENDED</b> . Parenteral route recommended (IM glucagon).
Naloxone* Nasal spray (4 mg/actuation)	Spray 4 mg into 1 nostril. If desired response is not achieved after 2 to 3 minutes, give a second dose intranasally into alternate nostril.	Spray 4 mg into 1 nostril. If desired response is not achieved after 2 to 3 minutes, give a second dose intranasally into alternate nostril.
Nitroglycerin* SL tablet forms (0.3 mg or 0.4 mg)	0.3 to 0.4 mg sublingually or in buccal pouch at onset, may repeat in 5 minutes: max 3 tabs in 15 minutes. <u>Monitor and record blood pressure.</u>	<b>NOT RECOMMENDED FOR UNDER 18 YEARS OLD</b>
One bottle EZ Charcoal Pellets 25 grams.	48 LB + entire amount of Reconstituted liquid	Contact Poison Control

Medication	Adults	Pediatrics
Remove Seal. Reconstitute into an oral suspension by adding 4 oz. of water to bottle, replacing cap and shaking well, or by pouring contents into a separate container, adding 4 oz. water, and stirring thoroughly. <u>Do not give activated charcoal until after the patient has vomited unless directed by health professional. Do not use in persons who are not fully conscious.</u>		
Oxygen delivery system – tank is at least 3/4 full if only one tank is available.	6 to 8 L/minute May consider any oxygen delivery systems if appropriate	Children: 1 to 4 L/minute Nasal prongs or nasal catheters preferred; can consider face mask, head box, or incubator for older children. Infants & Neonates (< 4 weeks): 1 to 2 L/minute Nasal prongs or nasal catheters preferred
Ammonia Towelette 0.7g (0.025oz) per pouch <u>Warning: For external use only. Flammable.</u>	Tear open and wave pouch under nostrils. Do not remove one pad from pouch. Do not use near flammable source	Tear open and wave pouch under nostrils. Do not remove one pad from pouch. Do not use near flammable source
For Women's Health Clinic ONLY emergency delivery: Oxytocin 1ml vials (10 units per ml) total 20 units	Oxytocin 1ml vials (10 units per ml) total 20 units, IM	Oxytocin 1ml vials (10 units per ml) total 20 units, IM

\* Only one emergency medication strength or route is required.

\*\* This medication strength and route treats the widest age range of the population and meets the state requirement for this medication category. All medication strengths and routes must be considered to provide emergency treatment for the population served, as applicable.

**Emergency Kit Must Include:**

- Appropriate Sizes ESIP needles/syringes
- Alcohol Wipes
- Nasal Cannula/ Oxygen Mask (Infant, Child, Adult)
- Ambu Bags (Infant, Child, Adult)
- Bulb Syringe
- Oxygen Tank (at least ¾ full)

References:

<https://www.pdr.net/drug-summary/Albuterol-Sulfate-Inhalation-Solution-0-083--albuterol-sulfate-1427>  
[https://www.accessdata.fda.gov/drugsatfda\\_docs/label/2013/091526lbl.pdf](https://www.accessdata.fda.gov/drugsatfda_docs/label/2013/091526lbl.pdf) <https://www.benadryl.com/benadryl-dosing-guide>  
<https://www.health.harvard.edu/heart-health/aspirin-for-heart-attack-chew-or-swallow>  
<https://www.pdr.net/drug-summary/Adrenalin-epinephrine-3036> <https://www.pdr.net/drug-summary/Glucagon-glucagon--rDNA-origin--290>  
<https://medlineplus.gov/druginfo/meds/a682480.html#:~:text=Glucagon%20is%20used%20along%20with,stored%20sugar%20to%20the%20blood>  
<https://www.fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/narcan-naloxone-nasal-spray-approved-reverse-opioid-overdose>  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5753997/>  
[https://www.accessdata.fda.gov/drugsatfda\\_docs/label/2014/021134s007lbl.pdf](https://www.accessdata.fda.gov/drugsatfda_docs/label/2014/021134s007lbl.pdf) (Page 8)