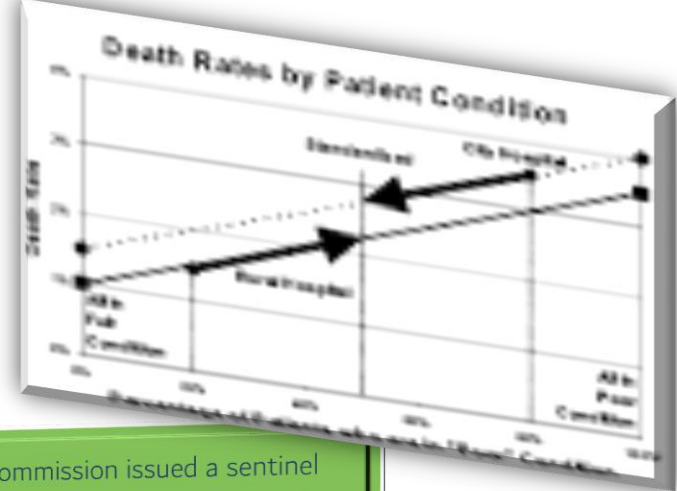


BETTER LATE THAN NEVER

Introduction:

Research shows that unexpected cardiopulmonary arrests and deaths in hospitals are preceded by about 6½ hours of warning signs, subtle changes, and signs of clinical instability. Thus, nurses and other multidisciplinary team members must promptly recognize and respond to subtle changes in a patient's condition to prevent such unexpected arrests and deaths



Special considerations: The Joint Commission issued a sentinel event alert concerning medical device alarm safety because alarm-related events have been associated with permanent loss of function and death. Among the major contributing factors were improper alarm settings, inappropriately turned off alarms, and alarm signals not audible to staff. Make sure that alarm limits are set appropriately and that alarms are turned on, functioning properly, and audible to staff. Follow facility guidelines for preventing alarm fatigue.

EARLY WARNING SIGNS: An early warning score can help you determine when to activate the rapid response team. The table below outlines scoring parameters for an adult patient. To use the early warning score, you assign a score to each patient parameter and then total the scores. If the patient's total score is more than 3, notify the practitioner and the rapid response team.



References

Agency for Healthcare Research and Quality. (2016). "Patient safety primer: Rapid response systems" [Online]. Accessed July 2017 via the Web at <https://psnet.ahrq.gov/primers/primer/4/rapid-response-systems>

Patient condition changes, recognizing and responding

MATERNITY UNITS- LH