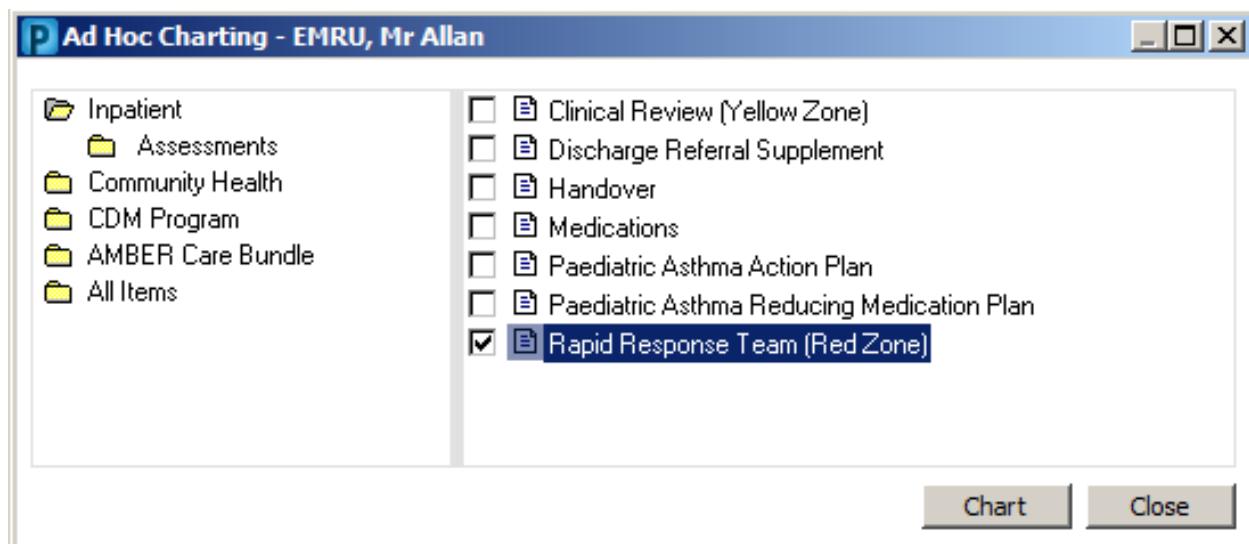


## AD HOC CHARTING



# SECTION 1

SBB Desktop - Citrix Receiver

Rapid Response Team (Red Zone) - EMRU, Mr Allan

\*Performed on: 02/06/2014 1019 AEST

✓ AEST

★ Rapid Response  
★ Assessment, Inter  
RRT All Respond

**Rapid Response (Red Zone)** Last Reviewed: July 2012

**Emru, Allan** MRN: 489 DOB: 30/05/1948 AGE: 66 Years MC: 9999999999  
U 2 23 Adelaide St WOOLLAHRA NSW 2025 SEX: M LOC: 2W; 102; 6

**INTRODUCTION**

Date / Time Patient in Red Zone:  Senior Responder / Team Leader:

Date / Time Call Received:  Additional Responders?  Yes  No

Date / Time Patient First Seen:

Is the Patient on Std. Maternity Obs. Chart?  Yes  No

Teams activated:  Cardiac Arrest Team  CERS Assist  Outreach  
 Rapid Response Team  Attending Medical Team  Other

**SITUATION**

Primary Reason for Rapid Response Activation:

Other reasons for Rapid Response Activation - Red Zone Criteria (Tick all that apply)

Respiratory Arrest  Urine output low  
 Airway obstruction or stridor  Blood Glucose Level low  
 Respiratory Rate high  Blood Glucose Level high  
 Respiratory Rate low  Lactate > 4mmol/L  
 SpO2 low  Deterioration not reversed within 1 hour of Clinical Review  
 Increasing O2 requirements to maintain SpO2  Serious concerns by staff  
 ABG/ABG  Serious concerns by family / patient  
 Systolic Blood Pressure high  Other:  
 Systolic Blood Pressure low  
 Heart Rate high  
 Heart Rate low  
 AVPU Score = P or U  
 Sudden decrease in GCS >= 2 points  
 Seizures

**BACKGROUND**

Previous Clinical Review / Rapid Response (Last 24 hrs):  Yellow Zone trigger without Clinical Review call  
 Yellow Zone trigger with Clinical Review  
 Red Zone trigger without Rapid Response call  
 Red Zone trigger with Rapid Response  
 Not Applicable

Current Medical Orders:  Altered Calling Criteria  Other:  
 Not for Rapid Response  
 Not for CPR  
 Natural Death / Palliative Care Pathway  
 Not Applicable

Background / History:

## SECTION 2

SBB Desktop - Citrix Receiver

Rapid Response Team (Red Zone) - EMRU, Mr Allan

\*Performed on: 02/06/2014 1019 AEST

Rapid Response . Assessment, Intervent.

RRT All Respond

**Assessment, Interventions and Management Plan**

**Emru, Allan** MRN: 489 DOB: 30/05/1948 AGE: 66 Years MC: 9999999999  
U 2 23 Adelaide St WOOLLAHRA NSW 2025 SEX: M LOC: 2W; 102; 6

**ASSESSMENT**

**Airway**

Tracheostomy?  Yes  No

**Breathing**

**Circulation**

**Disability**

**Exposure, Fluids, Glucose**

**Impression / Provisional Diagnosis**

**Clinical Pathway**

Chest Pain Pathway  Sepsis Pathway  Stroke Pathway  Other:

**Interventions**  
(Tick all that apply)

<input type="checkbox"/> No specific intervention	<input type="checkbox"/> Nebulised Medications	<input type="checkbox"/> IV Medications
<input type="checkbox"/> CPR	<input type="checkbox"/> Cardiac Monitoring	<input type="checkbox"/> NGT/OGT
<input type="checkbox"/> Defibrillation	<input type="checkbox"/> ECG	<input type="checkbox"/> Oral/Enteral Medications
<input type="checkbox"/> Airway Management	<input type="checkbox"/> Intravenous Cannula	<input type="checkbox"/> X-Ray
<input type="checkbox"/> Intubation/Ventilation	<input type="checkbox"/> Central venous catheter	<input type="checkbox"/> CAT Scan
<input type="checkbox"/> Bag/Mask Ventilation	<input type="checkbox"/> ABG/VBG	<input type="checkbox"/> Attending Medical Officer contacted
<input type="checkbox"/> Oxygen Therapy	<input type="checkbox"/> Blood Tests	<input type="checkbox"/> Other:
<input type="checkbox"/> CPAP/BIPAP	<input type="checkbox"/> IV Fluids	
<input type="checkbox"/> Tracheostomy Care	<input type="checkbox"/> IV Antibiotics	

**RECOMMENDATIONS**

**Response to Interventions**

**Management Plan**

**Frequency of Observations**

**Outcomes**

Remains on ward  Transfer to Theatre  
 Altered Calling Criteria  Transfer to another hospital  
 Made not for Rapid Response  Died  
 Made not for CPR  
 Referred to palliative care  
 Transfer to higher level of care

**Higher Level of Care**

Date / Time RR Call Completed  Total Time spent attending to RR Call

## SECTION 3

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