











Recommendations

Alert	Code	Symbol
Code Fire	Code Red	 Color of Flames
Code Arrest - Adult	Code Blue	
Code Arrest – Pediatrics (Unit Location)	Code Blue	
Infant/Child Abduction	Code Pink	
Combative Person	Code Gray	
Combative Person with weapon	Code Silver	 Silver Blade or gun handle
Bomb Threat	Code Yellow	
Internal Disaster	Triage Internal	
External Disaster	Triage External	
Hazardous Spill	Code Orange	

Pocket Size

Alert	Phone Code XXXXX	Code
Code Fire		Code Red
Code Arrest - Adult		Code Blue
Code Arrest – Pediatrics (Unit Location)		Code Blue
Infant/Child Abduction		Code Pink
Combative Person		Code Gray
Combative Person with weapon		Code Silver
Bomb Threat		Code Yellow
Internal Disaster		Triage Internal
External Disaster		Triage External
Hazardous Spill		Code Orange

ID Badge

Alert	Phone Code XXXXX	Code
Code Fire		Code Red
Code Arrest - Adult		Code Blue
Code Arrest – Pediatrics (Unit Location)		Code Blue
Infant/Child Abduction		Code Pink
Combative Person		Code Gray
Combative Person with weapon		Code Silver
Bomb Threat		Code Yellow
Internal Disaster		Triage Internal
External Disaster		Triage External
Hazardous Spill		Code Orange

**Emergency Code
Phone Number is
XXXXX**


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**Your Hospital Logo
Here**

Arizona Code Alert Standardization



“Standardization in code alerts enables healthcare providers who work in multiple facilities to respond appropriately to emergencies, enhancing safety to patients, visitors and themselves.”

Includes cut- out for ID pocket guides and ID badge cards

Background



In November 2006, Arizona lead the nation to standardize color coded wristbands, specifically, DNR, Allergy and Fall Risk. To date, 97% of Arizona's hospitals and 28 other states have adopted this standardization. Since that time, many of Arizona's hospitals have asked if the Arizona Hospital and Healthcare Association (AzHHA) could coordinate an effort that would standardize Code Alerts. Standardization in code alerts enables healthcare workers who work in multiple organizations to respond appropriately to emergencies, enhancing safety to patients, visitors and themselves. Team members representing hospitals across Arizona convened during the summer of 2008. Analyzing Arizona and national data, reviewing recommendations and information from national stakeholder groups, the Team developed recommendations for adoption. The Team recommends the following standardized code alerts be considered for adoption and implementation in your organization in 2009. Standardization is for the following codes:

1. Fire
2. Adult Cardiac Arrest
3. Pediatric Cardiac Arrest
4. Bomb Threat
5. Combative Person
6. Combative Person with Weapon
7. Infant Abduction
8. Pediatric Abduction
9. Internal Disaster
10. External Disaster
11. Hazardous Spill

FAQ's



Question #1: Why do we have to change the codes?

While these are guidelines, not regulations, each facility is strongly encouraged to consider implementing the change of their current code system. With the current shortage of nursing and other healthcare professionals, many organizations share personnel. Having a standardized code alert system reduces the amount of information staff must learn or re-learn, and lessens the opportunity for confusion during an emergency.

Question #2: Why just these codes and not others?

The recommended codes for standardization represent a large group of overhead emergency codes that are broadly used throughout our state. Organizations may need to consider the addition of codes to make the list specific to their facilities' needs.

Question #3: How will this help us?

As we have learned with the statewide standardization of patient wrist bands, standardizing provides us with another tool to promote patient safety. This is one more way to become the safest state in the nation.

Question #4: Do we have a problem already?

We want to be proactive – not reactive. By standardizing code alerts, we prevent avoidable errors and avoid confusion when seconds count.

Question #5: Is this being done nationally?

As of Oct., 2008, ten states have standardized code alerts. We reviewed their materials with our state trends and where possible, aligned our code alerts with them. Should this become a national standard, Arizona will find most code alerts are already in alignment.

Question #6: When does this have to be completed?

Our goal is to have all hospitals standardized by the end of 2009. However, we recognize that there can be extenuating circumstances which may alter the timeline. For example, if you are due for a Joint Commission survey in 2009, you may want to consider implementing the new code colors until after your facility survey is complete.

Question #7: What about the other codes we haven't standardized?

In our initial research, we evaluated the list of codes that were currently being used in Arizona and chose the codes that were common to the majority of the facilities. There are 11 codes we are recommending for standardization. Your facility may opt to implement additional codes which are not on the standardized list. This is acceptable and expected since the needs of every facility varies. If you do decide to implement additional code colors at your facility, we ask that you choose a different color than the codes we have standardized.

Question #8: Are we changing our code notification process (using a pager vs. overhead alert etc.) and does this change our response?

No, we are only standardizing the code color /alert – not the process for how your facility responds to a code. The process for notification and response will be facility specific.

Question #9: Who decided code alerts should be relayed by colors and not numbers or names?

Colors are easier to learn and recognized than number codes. Having a consistent color code system is easier to learn and reduces the amount of information an employee must learn or re-learn, reducing the opportunity for confusion during emergencies.

Question #10: Who determines what specific events trigger the code?

Each facility will be responsible for defining the specific events and procedures that will trigger a Code Triage Internal or External. It's important that hospitals keep in mind the concept of an "All Hazards" approach when thinking about disasters and other events.

Question #11: What does The Joint Commission or CMS say about this?

We are not aware of any concerns being expressed by CMS or The Joint Commission. Assuring the safety and well being of patients would include developing and implementing appropriate emergency preparedness plans and capabilities. Standardizing codes supports preparation and compliance.

Arizona Hospital's Emergency Code Standardization

Code	Color	Explanation
Fire	Red	Currently used for greater than 80% of AZ hospitals and in 11 states with standardization.
Cardiac Arrest - Adult	Blue	Currently used for greater than 80% of AZ hospitals and in 11 states with standardization.
Cardiac Arrest – Peds	Blue	Currently used for the majority of AZ hospitals and in 11 states with standardization. The color for pediatrics and adults code is the same. By calling the location of the code, staff will know if adult or pediatric code.
Bomb Threat	Yellow	Used in more than one third of AZ hospitals and half of the states that have standardized.
Combative Person	Gray	Code Gray is quickly becoming a national standard for this alert. Showing a progression of threat, the code transitions to silver when a weapon is involved. The color silver was selected because it provides a visual/mental cue for a weapon, such as a knife blade or gun.
Combative Person w/ weapon	Silver	
Infant Abduction Child Abduction	Pink	Of the colors being used for abduction, pink was used nearly 65% of AZ hospitals and in many of the states that have standardized. Other states that are not using Code Pink are using Code Amber. The committee contacted local law enforcement and National Center for Missing and Exploited Children (NCMEC) to determine their support for hospitals using Code Amber for abductions. They advised against using Code Amber because they felt the public would be confused with its "Amber Alert" System. We have combined the code to include infant and child abduction and because the response is the same for both. The overhead page should include the location, age and gender of the missing person.
Internal Disaster	Triage Internal	Over one fourth of AZ hospitals use this alert already. Code Triage - Internal was selected by a majority of states that have standardized.
External Disaster	Triage External	One fourth of AZ hospitals use this alert already. Code Triage – External was selected by a majority of states that have standardized.
Hazardous Spill/Release	Orange	Code Orange was selected by all states that have standardized; this brings Arizona in alignment nationally.

