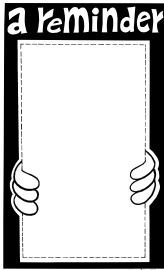


Chapter 22

Reports, Infection Control, Emergencies, and Special Services

Census Recording



- Daily census for operational and statistical purposes.
- Record on census all patients, admissions, transfers, discharges, and deaths.
- Record level of nursing care for each pt.
- Data collected for 24hrs, ending @ 2400.
- Information given to admitting dept.
- Admitting compiles info for entire hosp
- May be done on a computer.
- Record info as it becomes census data.

Incident Reports



- An episode that doesn't normally occur.
- Includes pts, visitors, personnel, and students.
- Accidents, thefts, errors, blood exposure.
- HUC completes witnessed incident reports .
- Unwitnessed incidents, HUC **prepares** form only, **witnesses complete** form.
- Incident report written for insignificant incidences.
- Incident report studied by risk management to learn how to prevent further problems.
- In case of a law suit.
- Employee must be seen by physician for workman's comp
- Does not become part of the permanent record.
- Keep plenty of Incident Report forms on hand.

Infection Control-Isolation, Protective Care



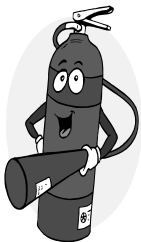
- Strict isolation, private room, meningitis, TB
- Reverse isolation to protect the patient.
- Nosocomial infection acquired in the hosp.
- Epidemiologist or infection control nurse maintains infection records, and investigates
- Card System placed on pts door
- HUC orders isolation cart
- Infants and children with pulmonary tuberculosis don't require isolation.
- AIDS disclosure vary from state to state.
- AIDS may be in medical file, not on other forms.
- Only people who perform invasive procedures on patient are told AIDS dx.

Emergencies



- Know where the Crash Cart is kept.
- Notify the switchboard to page code team.
- Direct code arrest team to patient's room.
- Take chart to patient's room after removing information sheet.
- Label specimens, send to lab, computer entry
- Notify all physicians connected with the patient's case.
- Notify the patient's family of the situation.
- Call depts for treatments/supplies prn.
- Alert admissions for possible transfer to ICU.
- Prepare requisitions or charge slips prn.
- Successful code, follow procedure for transfer
- Unsuccessful code, follow postmortem care.

Fire Safety



- Note placement of alarms, extinguishers.
- Learn the code name for fire, ie Code Red.
- May assist in evacuation of patients.
- May assist in closing doors to patient's rooms.
- Know how to use the proper extinguisher.
Class A: wood, paper, clothing
Class B: flammable liquids and vapors
Class C: electrical equipment
Class D: combustible or reactive metals
- All fires, no matter how small are reported to the hospital fire marshal.

Electrical Safety

- Avoid extension cords
- Don't overload circuits
- Inspect cords and plugs for fraying
- Unplug equipment when servicing
- Unplug equipment that has liquid spilled in it
- Don't use equipment that is malfunctioning

Disaster Procedure



- Large number injured during flood, fire, bombing, accident, etc.
- Be familiar with the Disaster Plan Book.
- Disaster drills held once or twice a year.
- Disaster procedure activated by announcing disaster code.
- HUC handles communications and calls all off-duty personnel who must return to the hospital.
- Know the HUC role at your facility during a disaster.

Flowers and Mail



- Volunteer brings flowers to unit.
- Flowers not allowed in ICU units.
- Balloons not allowed in Peds
- HUC directs volunteer to room if patient can have flowers.
- If flowers delivered directly to unit, HUC ascertains if pt is on unit before dismissing florist.
- HUC signs delivery slip, then delivers flowers to patient's room.
- Mail delivered to unit qd. HUC writes room and bed number on envelopes.
- If discharged, write in pencil "discharged" and return to mail room.
- HUC or volunteer distributes mail to pts

Summary

- When emergencies occur, there is no time to look in a book for directions.
- Know what your role is in all emergencies
- The other tasks in this chapter may not be part of your regular routine, therefore review the procedures in your hospital as time permits.
