

SUNNYBROOK CODE ORANGE / MASS CASUALTY INCIDENT (MCI)

ANESTHESIA ACTION PLAN - **AFTER HOURS & WEEKENDS**

OBJECTIVE

To be able to manage the flow of patient care in the operating rooms (ORs) during a Code Orange response. Code Orange can be classified as Alert, Minor (ED can manage with current resources) or Major (ED will require extra staff).

Refer to Emergency Preparedness Anesthesia Department document and Sunnybrook's policies & procedures for Code Orange – MCI (<http://sunnynet.ca//Default.aspx?cid=101342&lang=1>)

STEPS

- **Plan for anesthesia staffing**
In the case of Code Orange: Mass Casualty Incident event, there is initiation of an automatic notification system, activated by a tier 1 anesthesiologist, which will notify all staff anesthesiologist on the departmental fan-out list of the event via text message to their cell phones. Log into the Incident Command Centre (ICC) (<http://icc/>) to identify staff that have responded to the automatic notification alert and are available. Bring in the number of staff you anticipate requiring to manage the MCI.
- **Anesthesiologist to act as OR Liaison in Emergency Department (ED)**
As soon as possible, send an experienced anesthesiologist to the ED to keep communications open to OR and assist with patient resuscitation. Assign the Block phone to them (extension 7861).
Upon arrival to ED, they should head to Primary Command Post in **Green Zone** to receive a **red vest** – affix yellow Anesthesia Trauma sticker to front and back of vest (*stickers found in Trauma Bay*).
- **1st call Anesthesiologist should become temporary OR Code Orange Coordinator**
Work with OR Nursing Team Leader to facilitate communication & coordination of staff & facilities. Once available, OR Patient Care Manager should take over role of OR Code Orange Coordinator.
 - **Log into the Incident Command Centre whiteboard** (<http://icc/>)
Identify & plan for patients that will need surgery, liaising with ED Anesthesiologist
 - **Alert current operating rooms**
Finish current surgical procedures as soon as possible
 - **Assess status of operating rooms**
Identify empty ORs. Hold or cancel elective and less urgent cases.
 - **Contact PACU** (extension 4240)
Accelerate transfer of patients to floors/ICU's in preparation for high volume of cases
 - **Assign anesthesia staff & cases to specific ORs using OR white board**
Set up for trauma/emergency cases

- **Coordinate with blood bank** (extension 4051)
Verify adequate supply of blood products, and identify patients requiring MTPs (if known)
- **Coordinate with other patient care areas**
ICU's, OB, etc. to ensure continuity of care for new and existing patients
- **Ensure adequate OR supplies**
Coordinate with anesthesia assistants (extension 6290) & supply personnel to ensure adequate supplies of fluids, medications, disposables, etc.
- **Hazardous material event (biologic / chemical / radiation)**
Review special personal protective and patient care procedures. Good resources include:
 - Sunnybrook: <http://sunynet.ca//Default.aspx?cid=101390&lang=1>
 - Centre for Disease Control & Prevention: <https://emergency.cdc.gov/bioterrorism/>