Written Emergency Plan

(this is only a sample plan, modify it to your appropriate training level and situation)

* Notify doctor and open Emergency kit (Airway/AED/Oxygen/Suction)
* Ask doctor if 911 should be activated
* Position patient head down, legs up (if tolerated)
* Open airway (head tilt/chin lift)
* Is patient breathing? If not, use bag valve mask with oxygen
* Is oxygen on (unless hyperventilation)?
* Does patient have a pulse? If not, initiate chest compressions
* Ask doctor if AED should be used
* follow ACLS/PALS algorithms if appropriate
* Ask again about 911 if not already called
* Front office needs to head to back of office to assist, employee at outside door to guide EMS
* IV Access (if able/appropriate)
* One assistant needs to record events, medication dosage and time, and AED shocks and time administered
* Ask Dr. about reversal drugs if sedation used;
* Flumazenil- 0.2mg=2cc [reverses Versed]
* Naloxone- 0.2-0.4mg [reverses Fentanyl]
* Ask Dr. again if 9-11 needs to be called if not called earlier
* If EMS is called front office needs to make copy of recorded events when they arrive and give to EMS.

Building address to give to 911: