Name of Policy: **Emergency Conditions** **Policy Number**: 3364-118-10 **Approving Officer**: Chief Executive Officer Chief Nursing Officer **Responsible Agent**: Nursing Director Hemodialysis Unit **Scope**: The University of Toledo Medical Center	UTOLEDO HEALTH **Effective date:** October 2026 **Original effective date**: September 1982
Key words:	

	New policy proposal		Minor/technical revision of existing policy
	Major revision of existing policy	X	Reaffirmation of existing policy

(A) Policy statement

Emergency conditions will be handled in a specific, effective manner.

(B) Purpose of policy

To provide specific protocol in which emergency conditions are handled.

(C) Procedure

(1) Cardiac/respiratory arrest - code blue.
- (a) Initiate CPR.
- (b) Summon code blue team @ 77 or hit code button
- (c) Discontinue hemodialysis treatment.
- (d) Maintain hemodialysis access for IV use if necessary.

(2) Hemolysis of blood.
- (a) Stop hemodialysis treatment.
- (b) Do not return blood in dialyzer and tubing.
- (c) Obtain sample of blood in lavender, and light green tube, to confirm hemolysis and evaluate K+.
- (d) If ordered by nephrologist, obtain sample of dialysate for chemical analysis and osmolarity measurement.
- (e) Biomedical engineering to check machine before return to service.

(3) Severe hypotension.
- (a) Lower head of chair or bed.
- (b) Reduce or stop ultrafiltration target.
- (c) Reduce blood flow.
- (d) Use IV normal saline fluid replacement to increase blood pressure.
- (e) Monitor BP closely thereafter.
- (f) Call RRT @2222 if needed

(4) Air embolus.
- (a) Clamp venous blood line and turn off blood pump.
- (b) Lower head and turn patient on left side in order to prevent as much air as possible from reaching vital organs such as brain, heart, and lungs.
- (c) Administer 100% O2, per non-rebreather mask.
- (d) Assess vital signs and neurological status.
- (e) Call RRT@ 2222 or call a code blue @77 or hit code button if appropriate.

(5) Prolonged bleeding.
- (a) Notify nephrology fellow and/or attending.
- (b) Stop heparin administration.
- (c) Control bleeding with pressure.
- (d) Use Gelfoam according to manufacturers' recommendation on access sites per physician order.

Approved by:

/s/
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Chief Executive Officer

Date

/s/
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Chief Nursing Officer

Date

Policies Superseded by this Policy:
- *None*

Initial effective date: September 1982

Review/Revision Date:

1983	March 1995
1984	April 1996
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