

<b>Facility:</b>	<b>Illinois College of Optometry and Illinois Eye Institute</b>
<b>Policy:</b>	<b>Health Emergency Response</b>
<b>Manual:</b>	<b>Environment of Care</b>
<b>Effective:</b>	<b>December 2000</b>
<b>Revised:</b>	<b>March 2008 (M.Butz)</b>
<b>Review Dates:</b>	<b>March 2002 (V.Conrad) March 2008 (M.Butz) November 2015 (M.Butz)</b>

## **HEALTH EMERGENCY RESPONSE**

### **PURPOSE:**

To provide any person experiencing a serious health emergency while in the institution the best chance, to the level of our ability and resources, of limiting disability and avoiding death.

### **POLICY:**

The procedure outlined provides a clear protocol for life support response to health emergency situations such as heart attack, respiratory arrest, etc. and should be followed as appropriate for the situation.

### **PROCEDURE:**

#### During Normal Operating Hours:

The most senior staff e.g. faculty or security personnel will be in charge of the scene/incident.

1. The first individual (“responder”) who has assessed according to their level of CPR training that a person requires emergency care should call out “Emergency!” or Help!” loudly until another staff member, optometry student or resident, etc. responds. Before initiating CPR, if necessary to the situation (i.e. the victim is not breathing), the first responder should directly point at someone nearby (“caller”) and instruct them to call 911 immediately. The first person on-site should then initiate life support procedures including CPR, if necessary to the situation.
2. The “caller” should go to the nearest phone and dial 911 to alert Emergency Medical Services (EMS). *This will automatically alert the security office.* The security personnel will respond to the scene. The security personnel will either go to the entrance to guide EMS to the site or select another person to go to the entrance for this purpose. Masks that can be used for performing CPR can be found next to the sink in every IEI service consultation room or in the auto-defibrillator wall case. These masks may be used for infants, children or adults and have a one-way valve attached.
3. If the victim is not breathing the “responder” (or another designated person if the responder is actively administering CPR) should retrieve the auto-defibrillator unit at this point. If another responder is available, this can be done at the same time 911 is being called. These units can be found in/near the Illinois Eye Institute. One in the

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first floor corridor near the utility elevator (across from the Cornea Center for Excellence, near the stairwell and double fire doors.) The other unit is located in the corridor on the second floor near the utility elevator, the stairwell and the fire double doors across from the Financial Aid office. An alarm will sound as you open the wall case, do not try to silence the alarm or close the case.

4. The auto-defibrillator unit should be used as indicated by the instructions. *NOTE: the auto-defibrillator should not be used on children less than eight years old or weighing less than 55 pounds.*
5. The most senior person in charge of the scene will remain until the EMS team (e.g. paramedics) has arrived. This person should inquire as to which hospital the patient will be transferred.
6. The most senior person in charge of the scene should file an incident report with the security office as soon as is appropriate. The Chief of Security will forward the report to the Senior Director of Compliance and Quality Improvement and any other appropriate personnel which may include as the Vice President of Patient Care Services, the Vice President of Administration, the Dean of Student Affairs or the Dean of Academic Affairs. A disaster drill/response evaluation form may be used to evaluate the procedure/response to a health emergency in order to constantly improve the institution's readiness to properly handle future situations.

After Normal Operating Hours:

1. The individual who has first contact with the person appearing to require emergency assistance will evaluate that person according to their level of training and should call out "Emergency!" or "Help!" loudly.
2. If any other person responds, the procedure should occur in the same manner as previously outlined for normal operating hours.
3. If no other person responds, 911 will be called by the first responder and then CPR initiated, if necessary to the situation. The security office will be automatically notified of the room location and will respond to the scene.
4. The responding security personnel will retrieve the auto-defibrillator unit, if necessary to the situation. A CPR mask for infants, children and adults can be found in the wall case with the auto-defibrillator.
5. The procedure should occur in the same manner as previously outlined for normal operating hours.

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Equipment Monitoring and Maintenance:

The auto-defibrillator will be monitored daily (for the presence of the illuminated “red X”) by the Biomedical Engineering and/or Security personnel. The Biomedical Engineering personnel will inspect the auto-defibrillator twice a year and replace batteries, etc.

The Biomedical Engineering should be notified after the unit is utilized in order to restock the auto-defibrillator’s pc card, pads, gloves, etc.