

## DETERIORATING PATIENT:

# Escalation of care

## Appendix 2 – Guideline for Medical Imaging Department

**CALL A MET (DIAL 777) ANYTIME FOR URGENT MEDICAL TREATMENT**

### Use of ViCTOR observation charts in Medical Imaging:

ViCTOR charts should be used for all patients undergoing a procedure or imaging requiring sedation, and for the last set of patient observations following a general anaesthetic if the patient is being transferred to a ward.

### Escalation of care:

Escalation of care within medical imaging should occur according to the RCH Escalation of care procedure.

Any patient whose observations fall in the **ORANGE** or **PURPLE ZONE** - Notify the AUM (ASCOM 52547)

The table below clarifies the responsible medical team according to the patient group.

Patients group	Escalation of Care Contact
Patient's undergoing general anaesthesia	<ul style="list-style-type: none"><li>• Contact anaesthetist (ASCOM 52000) or</li><li>• Call MET (dial 777)</li></ul>
Outpatients within department undergoing medical imaging	<ul style="list-style-type: none"><li>• Contact Duty Radiologist (ASCOM 57621) or</li><li>• Call MET (dial 777)</li></ul>
Inpatients within department undergoing imaging	<ul style="list-style-type: none"><li>• Contact bed-card team ASCOM or</li><li>• Call MET (dial 777)</li></ul>
Sedation prescribed	<ul style="list-style-type: none"><li>• Contact Anaesthetist (ASCOM 52000) or</li><li>• Call MET (dial 777)</li></ul>

## MODIFYING EMERGENCY RESPONSE CRITERIA IN MEDICAL IMAGING

Patients recovering from general anaesthesia and sedation may initially breach the coloured zones of the ViCTOR charts. Most patient's observations will normalise during the Recovery period. A patient whose observations fall outside the white zone at the time of planned transfer to the ward or home must be reviewed by the medical escalation of care contact prior to discharge.

Any patient being transferred to the ward with observations outside the white zone must have a modification to emergency calling criteria completed by the reviewing doctor responsible (as per the RCH medical emergency response procedure):

#### Emergency calling criteria can **ONLY** be modified:

- In a stable patient, where there is a clear underlying clinical reason
- By no more than 20%
- By a doctor of registrar level or above
- For a duration up to 2 hours

#### Any modification of the purple zone emergency response criteria:

- Bed-card consultant & PICU outreach (ASCOM 52327) must be informed by doctor completing modification
- Bed-card team must review the patient within 2 hours to determine if continued modification of emergency calling criteria is appropriate

#### Changes to emergency response criteria must be clearly documented and handed over:

- Modify thresholds on the observation chart
- Justify in the events/comments section of the observation chart
- Detail information about assessment in medical notes

**REMEMBER AT ANY TIME YOU CAN REQUEST A RAPID REVIEW OR MET CALL**