Emergency Protocol



* Call out: Alpha if CPR is needed Bravo if Medical Emergency

Doctor sends Staff #1 to call 911 and inform front office staff of the emergency situation.

Staff #1 hands the phone to one of the front office personnel to update 911 with any patient changes during ambulance's route to your location.

If the patient does not have any breathing difficulty, or no changes to Pt. behavior, you may advise the ambulance that you are requesting no lights and sirens

Staff #2 will meet and direct the emergency response team.

Staff #3 gets the AED, O2, Backboard, Timeline Clipboard and First Aid Kit and Emergency Kit

Staff #4 will start a Timeline. This is required if the patient has received any medication from the Doctor, nitrous, or anesthesia. You have 30 days to submit the documentation to the Board of Dentistry.

Staff #5 gets pt.'s chart for health history. Make a copy if the information on medications, health history or allergies is at any length. If no history, note this on the timeline.

If necessary, one staff will secure breathing, one will administer CPR while a third staff records any pertinent information and be at the ready to take over CPR. Backboard will be placed and CPR done on the chair with a stool as a brace for the head. 30 chest/ 2 breaths/ 5 cycles.

Please look at CPR quick sheet.

Remaining office staff will maintain order and if necessary clear the waiting room.

When starting the AED:

Age over 1year

No clothes from waist up

No medication patches (place on pt. Bib for medics)

No standing water (urination is ok) Wipe off sweat on the chest

No placing electrode pads on pacemaker, diabetic pump, etc.

* If obstructions are noted, place pads front to back*

No thick hair – use Duck tape, waxing strips or one safety razor per swipe.

Pads can not be placed so that they overlap or are closer than one inch.

If child too small, place pads on front of pt. and back of pt. so that it matches the pictures on the AED.

Follow instructions from the AED.