Hospital Incident Command System (HICS) Emergency Codes

**Code Red**
This is the code used to announce that there is a potential or actual fire within the hospital facility. The hospital operator will announce the location of the fire after stating “Code Red.” Alarms will also sound throughout the hospital. If you see fire or smoke in any area of the hospital, you should follow the steps in the acronym R-A-C-E & P-A-S-S. They stand for:

- **R**escue (any persons from the immediate area of the fire)
- **A**larm (pull “notifier” alarm box or dial 4444)
- **C**onfine (close all doors and windows)
- **E**xtinguish (use appropriate fire extinguisher)
- **P**ull (the pin from the extinguisher)
- **A**im (the nozzle or hose at base of flames)
- **S**queeze (the handle to release the chemical)
- **S**weep (across base of flames)

It may be necessary to evacuate a portion of the hospital. The person in charge of the unit will make this decision based on the potential of the fire spreading, the amount of smoke or other hazards or conditions that would be detrimental to the quality of patient care (noise, patient’s request, patient is frightened, etc.). One employee from each department should respond to the location announced with a fire extinguisher. Remember, there are two basic types of fire extinguishers in our hospital: the ABC dry chemical fire extinguisher and the HALON gas fire extinguisher. While ABC dry chemical extinguishers can be used on any type of fire, Halon is the preferred fire extinguisher for "expensive" electronics; therefore, they are found in areas where this equipment is located.

**Code Blue**
A common misconception is that a Code Blue should only be called for cardiac or respiratory arrest. A Code Blue should be called for any potentially life threatening medical condition. The idea is to prevent a cardiac or respiratory arrest from happening in the first place. You will get immediate assistance with any patient, anywhere on the hospital grounds by calling 4444. Tell the operator that you have a Code Blue situation and the location of the incident (be specific when giving the location). Do not call a Code Blue for people who have tripped and twisted their ankle. But, if they hit their head and are unconscious, that is a medical emergency. If in doubt, call a Code. “Better safe than sorry.” The nurse caring for the patient should respond with the chart to the Code Blue. An ER nurse, ICU nurse, Cardiopulmonary Tech, Lab Phlebotomist, X-ray Tech and the ER physician will respond on all Code Blue announcements.

**Code Pink**
A Code Pink is an announcement that an infant or child has been abducted from within our facility. This is a serious matter that requires immediate action by the staff of the hospital. Each employee should go to the nearest exit/entrance to the building and stand guard. Do not allow any person, including employees, into or out of the building until the Code Pink has been cleared. As we have fire drills, we will have quarterly Code Pink drills to test our ability to prevent an abduction. Only a couple of people in the hospital will know if it is a drill or not. You will not know, so you should act each time as if it were the real thing because it might be. **DO NOT attempt to stop an armed abductor.** Instead, get as good a description of the individual as possible. If you can safely follow the abductor to their vehicle, get a vehicle description as well. Vehicle license numbers would be helpful to the police in apprehending the culprit, also.

**Code Yellow**
Is the notification that a serious/critical trauma patient will be arriving or has arrived by private vehicle into the E.R. Designated individuals and departments that participate in the resuscitation of the trauma victim will respond according to protocols developed to provide maximum benefit to trauma patients. Example: During a Code Trauma, no elective CT scans are started until the trauma patient is stabilized or has had any necessary CT scans done. Only those pre-designated people need to respond. Please do not respond unless you are one of them.
**Code Triage**

The administrative person in charge of the hospital will call a Code Triage when notified by any department (usually ER) of a potential or actual disaster that will affect the hospital. Disasters can be from outside the hospital or within the hospital. In small hospitals like Pioneers, the need for a Code Triage to be called is relatively common. If the ER is full and there is an accident requiring that the hospital receive more than a few critically injured or ill persons, a Code Triage will be necessary. We have an effective plan in force to meet these demands; it is called the “Emergency Preparedness Manual” and is located in each department of the hospital. Each employee is responsible to be familiar with his/her duties when a Code Triage is called. If you come from home to help during a disaster, you should report to the “MANPOWER POOL” in the Auditorium to advise that you are here to work. This is very important for several reasons. We need to know who came for safety reasons. We need to know what our manpower actually is and if we need more help. It is also important for budgetary requirements to know how much overtime is going to be necessary. At times, the Hospital can be reimbursed for your time if it is properly documented. If part of the building becomes damaged, we need to know who is in that area.

**Code Grey**

We work with the public on a daily basis. On occasion, someone might be unhappy with any number of things or they may be emotionally unstable. We want everyone within the perimeter of our facility to feel safe and to actually be safe. At Pioneers, we have a Zero Tolerance for Violence. A Code Grey means that someone needs our help in a potentially violent situation. Each employee, who can safely respond, should do so. Many times, just a show of force by the staff will stop the violence from happening. If you feel threatened by any person and fear that a situation may turn violent, call 4444, tell the operator, “Code Grey” and the exact location of the incident. Take a step back and to the side of the offensive person. Do not challenge the person. Do not get in the person’s “space.” He or she may feel threatened by you and strike out. Remember, if you don’t respond when you could have, the next time it could be you that needs the help and maybe some employees won’t show up for you. People who should not respond to a Code Grey are pregnant women and those who have patients to take care of at the time.

**Code Orange**

Until April 15, 2000, Code Orange was a disaster notification. Now Code Orange notifies that there is a hazardous chemical spill or other toxic emergency within the hospital. The substance can be a chemical or a radiation hazard requiring evacuation of the areas involved and limited access by trained personnel only. If the spill contaminates people, the HazMat Team may be required to decontaminate those involved. The incident commander will determine when the HazMat team is to be called after consultation with various agencies involved with this type of incident. Employees should strictly follow the policies and guidelines set down in the Emergency Preparedness Manual for this type of incident. When a Code Orange is called, do not go to the location. This is a notification of a dangerous situation and the location will be contaminated. Move a safe distance away from the location and take your patients with you until the situation is cleared.

*Please review the Emergency Preparedness Manual in your department every six months to keep up-to-date on any changes so you will be prepared*