

## Glasgow Clinical Trials Unit Standard Operating Procedure

SOP number	<b>17.001</b>	Version	<b>5.0</b>
Title	<b>Adult Emergency Resuscitation Procedures in GCRF</b>		

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SOP category	17 NHS GG&C Clinical Research Facility – Clinical			
<b>Staff Category</b>	<b>R</b>	<b>A</b>	<b>C</b>	<b>I</b>
Nursing	X			
Administration	X			
Principal Investigator	X			
Clinical Research Fellow	X			
GCRF Manager		X		
GCRF Associate Director				X
Senior R&I Manager				X

### 1. Scope

This procedure applies to all Glasgow Clinical Research Facility (GCRF) staff.

### 2. Purpose

The purpose of this Standard Operating Procedure (SOP) is to define the responsibilities and procedure to be followed for the emergency resuscitation of an adult in GCRF. For the purpose of this SOP, GCRF includes:

- New Lister Building, Glasgow Royal Infirmary
- 5<sup>th</sup> Floor, Neurosciences Building, Queen Elizabeth University Hospitals
- 6<sup>th</sup> Floor, Respiratory Research Area, Gartnavel General Hospital

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### **3. Procedures**

All clinical staff must familiarise themselves with the location and content of the Emergency Trolleys and the location of the emergency drugs and telephones in all clinical areas.

GCRF staff working in other clinical areas should familiarise and adhere to local emergency resuscitation procedures.

#### **3.1. Emergency Trolley**

GCRF clinical areas have a fully stocked and maintained emergency trolley.

#### **3.2. Resuscitation - Immediate Response**

In the event of a clinical emergency:

- Immediately call out for help and activate emergency buzzer system.
- Ensure personal safety – observe for sharps, body fluid spillage and electrical equipment in operation.
- **Follow Adult Life Support algorithm (appendix 1 Advanced Life Support; appendix 2 Adult in-hospital resuscitation)**

#### **3.3. One member of staff must call emergency number 2222 with the following:**

- State emergency team required
- State exact location, including hospital site

#### **3.4. Enable emergency support services**

For all areas:

- Ensure door entry systems are disabled to allow resuscitation team access to the clinical area.
- A member of staff should direct members of the resuscitation team to the clinical situation.
- Ensure safety of other patients and remove them from area wherever possible.

#### **3.5. Arrival of resuscitation team**

- GCRF staff should continue to support the resuscitation following arrival of the resuscitation team.
- The resuscitation team should be given a clear verbal history including nature of the research study and if any Investigational Medicinal Product (IMP) was administered.
- Health Records should be available electronically; if not they should be located as soon as possible.
- Research study documentation should be present in the GCRF at any patient visit; if not present they should be located as soon as possible.
- The Principal Investigator, if not present, should be notified as soon as possible about the event.
- Where possible, the senior nurse or doctor must ensure the next of kin is contacted as soon as possible. If the next of kin is present at the time of the incident, they should be kept informed and supported by GCRF staff.

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### **3.6. Patient transfer**

Transfer from the GCRF will be directed by the resuscitation team to an acute setting. The attending nurse/medical staff will provide relevant clinical and research handover on transfer.

The GCRF nurse should remain with the team until the patient is stabilised and transferred to an appropriate hospital department.

### **3.7. Documentation**

The senior nurse or attending medical staff must clearly record the events associated with the clinical emergency in the participant's health records as soon as possible after the event.

GCRF study nurse:

- Must record event in NHS Datix System
- Complete all relevant study documentation
- Inform GCRF QA Lead of the event
- Complete NHS GG&C Resuscitation Form – scan top copy into participant's health record and send carbon copy to site Resuscitation Officer.

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### 4. Referenced documents

- Resuscitation Council (UK) Advanced Life Support Algorithm
- NHS GG&C Resuscitation Treatment Record

### 5. Related documents

- Form 17.001A – Emergency Trolley Signoff
- Form 17.001B – GCRF QEUH Adult Emergency Trolley Checklist
- Form 17.001C – GCRF GRI Emergency Trolley Checklist
- Form 17.001D – GCRF GGH Emergency Trolley Checklist
- GUI 17.001A – GCRF Emergency Trolley Checks
- GUI 17.001B – Psychiatric Emergency
- Form 17.032A – GCRF Spot Check Rota
- Resuscitation Council (UK) Guidelines
- NHS Greater Glasgow & Clyde Resuscitation Policies

### 6. Document history

Version	Date	Description
Draft	06/09/07	Creation of SOP
1.0	22/11/07	Release of Version 1 (for review)
1.1	19/05/08	Released to staff
2.0	23/02/12	Amendment to include additional areas
2.1	25/11/13	Periodic review complete. Significant changes to provide clearer guidance on procedures in event of cardiac arrest
2.2	08/06/15	Minor changes to reflect all relevant research facilities and Checklist Form 17.017A is correct version
3.0	15/07/16	SOP restructure Update to SOP template v1.4 Update to GCRF sites Change of title Change approved and released by Minor admin changes
4.0	27/02/18	Addition of GUI 17.001B
5.0		RACI matrix added Minor changes Change of author Addition Form 17.001D

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Appendix 1



