

### Section 10.13: Working Codes

A working code refers to a CPR in progress. The responding units to the scene will advise “Working Code” or “CPR in Progress” in the case that they begin performing CPR. There are multiple functions that then must be performed by the Texas A&M EMS dispatcher for situations such as these.

The following procedures must be performed for every Working Code incident:

1. Time stamp the incident in CAD.
2. Tone-out 811, if not already responding.
  - a. If it was a non-ambulance unit that called the code, dispatch an ambulance as well.
3. Contact UPD and request that officers respond.
4. Page the Administrator Emergency group with a dispatch statement.
5. Keep time record of resuscitative efforts:
  - a. When “Working Code” or “CPR in Progress” is called, the dispatcher should acknowledge this traffic and begin timing the crew until patient care is transferred or resuscitation attempts are terminated. This time is to be recorded in trip notes.

Depending on the circumstances, other steps may need to be performed as well. These should be done only at crew request:

1. Contacting CSFD for an engine response for manpower.
  - a. In the case our ambulance is on scene and needs additional personnel, an engine may be needed to assist them. CSFD needs to be advised that only an engine is needed and not an ambulance.
2. Time stamping procedures for on scene units.
  - a. Due to the complexity of patient management during a code, the units caring for the patient may ask dispatch to add interventions to the trip notes as they do not have the time to write them down. Even if the dispatcher does not know the intervention, it should be added to the call notes for the units to retrieve later in writing their reports.
3. Notification of the hospital.
  - a. Depending on the situation, the units may advise for dispatch to contact the hospital they will be transporting to so that the hospital can prepare for their arrival. When doing this, the dispatcher should advise as much information that they know, but make sure the hospital knows that they are the dispatcher and not those actually treating the patient.

In the case that the crew terminates resuscitative efforts on scene, the call is to be canceled as **Field Termination**.