## Hospital emergency codes. An appraisal

Daifullah M. Al-Aboud, SBD, ABD, Khalid M. Al-Aboud, SBD, ABD.

Polor codes have been in use in health care facilities for some time. Without creating panic situation to the patients and visitors of the hospital, the purpose of these codes is to provide a particular message to the staff of the hospital on an emergency condition. The meaning of these codes are disseminated to employees upon joining a hospital, and sometimes, they are printed on their hospital badges. The operator of the hospital is the one usually announcing the codes through the hospital radio system after receiving a message from one member of the hospital on the occurrence of an emergency situation. The codes can also be suffixed when necessary with such terms as "alert", "stat", "confirmed" and "cancelled". However, a big problem with the coding system is non-uniformity. Not only do color codes being used in various states differed, but also within different hospitals in the same state. Although the codes used for fire (Red) and medical emergency (Blue) are almost similar in many hospitals of California, however, there are more than 47 different codes for infant abduction, and 61 for combative person at different hospitals. As such, instead of serving its purpose, due to non-uniformity, the coding might lead to confusion among the staff leading to unnecessary results.

There is a real need for unifying the color codes internationally. It will be prudent to establish coordination among various health associations. Various institutions and association should participate and create one internationally acceptable set of standardized color codes. Adopting code uniformity enable numerous individuals who work across multiple facilities to respond appropriately to specific emergencies, enhancing their own safety, as well as the safety of patients and visitors. To facilitate code uniformity, there should be a standardized set of uniform codes and guidelines that can be adopted by all healthcare facilities.<sup>2</sup> Such standardization will prevent any difficulty in adaptation, which may face healthcare workers if they move from one hospital to another that has different emergency codes.

Various points to adhere to, while deciding upon the standard set should be as follows:<sup>3,4</sup> A. The types of codes should be limited, as fewer codes will be easy to remember. B. The codes should be consistent with various national standards where possible to foster clear communication in the event of a national disaster. C. Definitions should be clear, consistent, and brief. D. Flexible guidelines can be created to deal with emergencies. Additional customization can be carried out according to a specific facility. E. Hospitals may add modifiers to codes as appropriate, for example, location of emergency.

One such guideline developed by the Hospital Association of Southern California<sup>5</sup> is available online. This includes the purpose, definition, policy, and procedure of

**Table 1 -** Some codes used in hospitals for emergency situations.

Emergency situation	Color
Fire	Red
Cardiac arrest	Blue
Infant/child abduction	Yellow
Security threat	Grey
Hazardous material spill	Orange
Disaster/natural disaster	Black

various codes. Table 1 list some commonly used hospital emergency codes. In addition, we also want to stress the importance of having uniform hospital emergency codes in the hospitals of different sectors that provide health care in the Kingdom of Saudi Arabia. These codes should be taught to students in the medical colleges and all health care employees should be updated during orientation periods before joining the work force.

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From the Dermatology Department (Al-Aboud D), King Khalid Military City Hospital, Hafer Al Baten, and Dermatology Department (Al-Aboud K), King Faisal Hospital, Makkah, Kingdom of Saudi Arabia. Address correspondence and reprints request to: Dr. Khalid M. Al-Aboud, Medical Director, King Faisal Hospital, PO Box 5440, Makkah 21955, Kingdom of Saudi Arabia. Tel. +966 (2) 5566411. Fax. +966 (2) 5563523/5574350. E-mail: amoa65@hotmail.com

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