

HACKETTSTOWN REGIONAL MEDICAL CENTER

MONITOR TECH'S MANUAL
(Scope)

TITLE: PHYSICIAN NOTIFICATION OF RHYTHM CHANGES

PURPOSE: To outline the procedure to make physicians aware of significant changes in patient's cardiac rate and rhythm.

EQUIPMENT

- LIST:**
1. Telemetry Transmitter
 2. Central Station
 3. **Black** pen

| CONTENT: | PROCEDURE STEPS | KEY POINTS |
|----------|---|---|
| | 1. Observe patient's rate and rhythm via Central station. | a. Continual visual assessment of patient's cardiac rate/rhythm. b. Rhythm strips obtained q 4 hours and PRN. |
| | 2. Obtain rhythm strips detailing alterations in cardiac rate and rhythm. | a. Automatic strips obtained when alarm parameters are exceeded. b. Manual strips to be obtained by Telemetry Tech or Critical Care nursing staff. |
| | 3. Interpretation of rhythm strip performed and recorded. | Telemetry Tech will complete for patients housed in PCU and Med-Surg. ICCU nursing staff shall perform rhythm interpretation. |
| | 4. Telemetry Tech informs RN of patient with an arrhythmia. | Use two patient identifiers when notifying RN of changes. |
| | 5. Monitor Tech will document interpretation noting the date/time of the event and the name of nurse that received the rhythm change information. | |
| | 6. Physicians will be notified by the RN of rate and/or rhythm changes in desired time from no greater than 10 – 15 minutes post changes. | Communication with the physician is essential to ensure optimum patient care and treatment. |
| | 7. Rhythm changes will be identified and documented by the primary nurse in the EMR as well as the physician notification. | |
| | 8. Any orders received from the physician will be written on the physician order form and communicated to monitor tech when appropriate. | |

