

Code Event Hot Debriefing

To enter electronically, scan QR code. No need to complete sheet if use QR code.

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- 144	ш.	ш.	H	
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Patient MRN:		_	
Event Date/Time:	/	:	_ AM PM
Debriefing Leader:		_	

Before Debriefing:

• If possible, ensure that you are in a quiet place. Assign a team member who is not leading the debriefing to fill out this form.

		•	s, physicians, and any other involved clinicians. Ensure bedside staff availability erform debriefing within 4 hours of the event.
Were the following team members in Attending(s) Fellow(s) Resident(s) Hospitalist(s) Nurse practitioner(s)	vited? Plea	se check off who	attended the debrief. Unurse(s) Unu
will review a summary of the answer as will be shared with our under the state of t	ig is to imprevent then share openlinit leaders	rove the quality of discuss what wen ly during this debr to improve patient	care provided to patients; it is a nonjudgmental place to discuss our performance. We twell and what could be improved in the future." efing but not to share what we discuss outside of this group. Discussion highlights care."
what went well and what could have	Went well	Needs Improvement	are for this patient? Please check one and add comments as necessary. Comments
Clear roles/responsibilities (event leader, CPR coach, documenter, outside room leaders, etc) Closed loop and clearly heard			
communication Shared mental model, everyone aware of the reason for the code			
Equipment & Medications			
Other			
After Debriefing: 1. Thank participants for their partic 2. Be sure participants know there a		es to debrief furth	Did this debriefing take less than 10 minutes? Y N Did this debriefing take place within 4 hours of the event? Y N

- reaching out to their supervisor or the Employee Assistance Program.
- 3. Return debriefing form to Resource Nurse office (across from 7S-22).

Did this debriefing take less than 10 minutes? Y N				
Did this debriefing take place within 4 hours of the event?				
What made if difficult to perform this debriefing?				