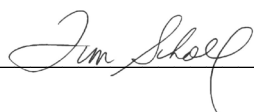


SOP Number:	205.12	
Title:	Emergency Code Blue Procedure	
Version Number	Effective Date	Changes
205.12	30 September 2025	Reviewed

Directors Signature:  Date: 2025/SEP/30

1. SCOPE

This SOP describes the procedure to be followed in the event of a code blue in the 3T MRI facility.

2. PROCEDURES

a. CODE BLUE – Adult Cardiac Arrest

- The 3T MRI Facility has hospital Code Blue coverage which does **NOT** extend into the hallways, office areas, or other laboratories surrounding the facility. In the event of an emergency in any other area please contact campus police at **911**. A Code Blue is specifically defined as an adult cardiac arrest. The code team is dispatched through LHSC hospital switchboard and directed to the 3T suite if they are notified of a Code Blue emergency.
- The MR operator at the time of the incident is responsible for following the emergency code blue procedures set out in this SOP. If the MR operator is somehow compromised, one of the experimental support personnel must follow the procedure. This procedure is very explicit and is posted in the 3T suite, on the desk below the “Door Release” button shown in Figure 1.1.



Figure 1.1 “Door Release” Button

- There are two “Door Release” buttons located within TIRF. One is located on the wall, left of the MR console in the 3T suite, and the other is located on the wall above the bed in the ultrasound room. Both are shown in Figures 1.2 & 1.3 below.
- The signs of a cardiac arrest are all the following collectively:
 - The person is not reactive
 - The person is not breathing
 - The person does not have a pulse

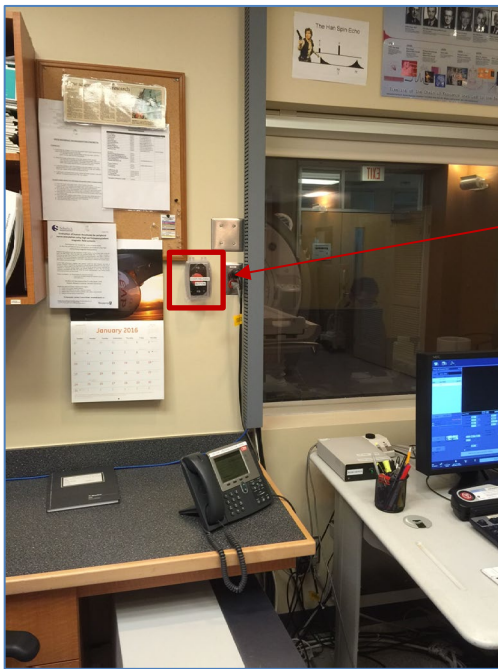


Figure 1.2 3T MRI Suite

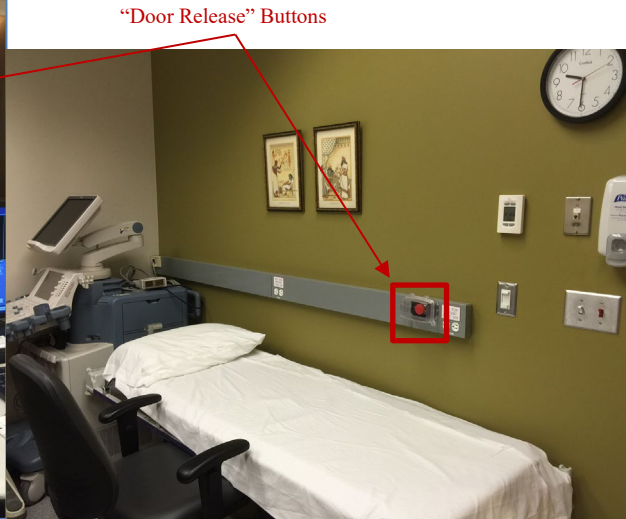


Figure 1.3 Ultrasound Room

- If someone within the 3T MRI facility is showing signs of cardiac arrest, the emergency code blue procedure must be followed as set out in **Section B** below.

b. Emergency Code Blue Procedure

- Dial **55555** – Inform the switchboard operator “We have an adult (or “pediatric” for children) code blue at Robarts Research Institute, Level 2 MRI, via 3rd floor hospital link, past the cafeteria toward Schulich, on the last hall on the left”.
- The code team will need to obtain access to the building – press the “**Door Release**” button on the wall next to the MRI operator console.
 - This will allow the code team access through either the 1st, or 3rd floor link between University Hospital and Robarts for a 10-minute period. Robart’s security, and Western campus police will also be notified. **Please note that the depression of this button does NOT unlock the security doors to the 3T suite.**
 - Each successive press of the “Door Release” button will extend the unlocked period by 10 minutes
- If possible, have someone wait by the link access doors for the code team to arrive. You may want to get help (if possible) from other lab members who are nearby at this time.
- Remove the volunteer/patient from the scanner.

- Unplug the coil cables.
- Either use the keypad to advance the patient bed out of the scanner or use the cradle release handle at the foot end of the bed by rotating it inward and then pulling the cradle all the way out until it clicks into place as shown in Figure 2.1.



Figure 2.1

- Put both side rails up on the bed.
- Undock the bed using the pedals at the foot end shown in Figure 2.2.

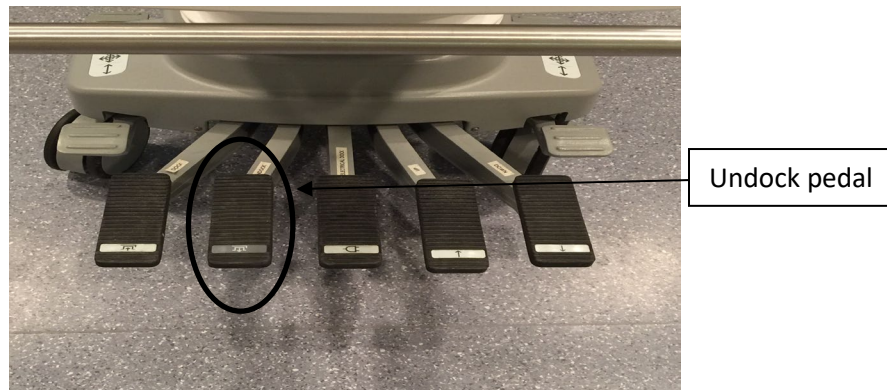


Figure 2.2

- Wheel the bed out of the magnet room and close the door.
- The bed can be lowered by use of the pedals located at the foot end.
- Pull the patient bed out of the magnet room and into the console room. Bring that crash cart into the console room. The crash cart is located just outside the main 3T suite door (Fig 2.3).
- **Under no circumstances is the Cardiac Arrest (“Crash”) Cart to enter the magnet room.** It has many ferrous components, and devices may cease to work when in a peripheral magnetic field.
- Lock the wheels of the patient bed and apply first responder principles to the volunteer/patient until the code team arrives.

- Utilize the AED located outside the main 3T suite door when indicated (Fig 2.4).
 - Only trained personnel can utilize this equipment.
 - Do not perform mouth-to-mouth resuscitation; use the bag valve mask (Ambu bag) provided on the cardiac arrest cart by placing the narrow end of the mask over the person's nose and the wide end over the chin.
 - If required, lower the bed using the pedals located at the foot end to apply first responder principles.
 - When the code team arrives, be sure they do **NOT** bring the Cardiac Arrest Cart into the magnet room, or any other metal equipment they may be wearing.

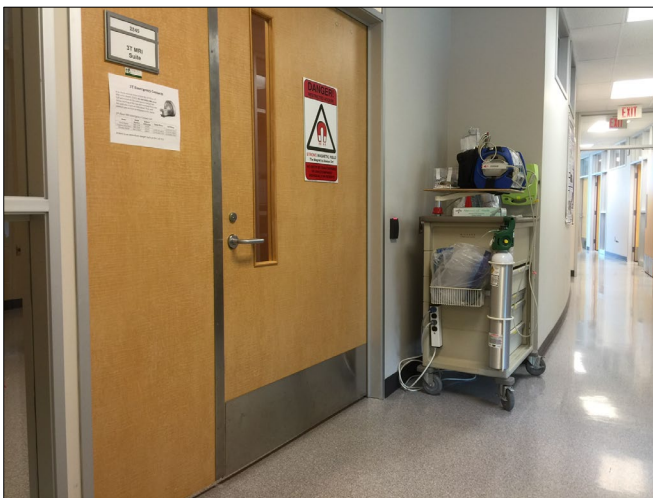


Figure 2.3



Figure 2.4

- Notify the 3T MRI facility manager, or facility director **immediately** following the incident. The facility staff must then file an appropriate Robarts incident report of the situation, and the UWO HSREB must be notified of the occurrence of a Serious Adverse Event.

c. Robarts Research Institute Accident/Incident Investigation Report

This form can be accessed [here](#)

Paper copies are available at the back of section 8 of the 3T MRI SOP Binder.