



# Telemetry Safety Bundle: Practice Standards & Communication

**Purpose:** The Telemetry Safety Bundle sets a standard of care for HCA Healthcare Divisions and Facilities that provide telemetry monitoring of heart rhythms for patients.

**Scope:** This guidance applies to all patients requiring ECG monitoring via wireless telemetry and **not intended for bedside or holter monitoring.**

**Responsibility:** Telemetry monitoring must be administered under the order of a licensed practitioner initiated within 30min of arrival to unit. Furthermore, the temporary interruption (bathing, cleaning, etc.) and discontinuation is only permitted under the order of a licensed practitioner.

**Considerations:** Telemetry monitoring must be administered by trained individuals, who are competent in the application and maintenance of telemetry devices as well as cardiac monitoring and rhythm interpretation.

**Accuracy:** Accurate electrode placement cannot be overemphasized as an essential component to the accurate identification of monitored rhythms. For arrhythmia monitoring, V1 is commonly utilized because of its helpfulness in distinguishing Ventricular Tachycardia from aberrancy (wide atrial tachycardia).



## Staff Roles and Responsibilities

### Registered Nurses

- ✓ **The Registered Nurse (RN) maintains overall accountability for telemetry monitoring.** If the RN chooses to delegate any element of responsibility, **tasks must be performed by a caregiver with documented & demonstrated competency.**
- ✓ Telemetry must be placed on patient **within 30 minutes** of order placement or arrival to unit.
- ✓ Interpretation will be documented by the RN, no less than once per shift.
- ✓ Telemetry patients **should not travel off telemetry or off the unit without the accompaniment of a trained, competent caregiver,** unless authorized by a licensed practitioner.
- ✓ Telemetry application should be performed with **2 patient identifiers, telemetry box number, and rhythm transmission confirmation** completed by the trained, competent caregiver.
- ✓ Application of telemetry monitoring should be documented in the **Orderable Intervention** within the EHR. Rhythm changes and escalations to providers should be documented in **Manage/Refer/Contact/Notify.**
- ✓ Follow recommendations in the Telemetry Equipment Huddle Card for device and electrode maintenance.

### Telemetry Technicians

- ✓ Upon confirmation of transmission, a rhythm strip will be printed with initial cardiac rhythm interpretation and provided to the RN for validation.
- ✓ **Promptly notify primary nurse of rhythm changes and/or alarms** requiring intervention. **Document escalation in Manage/Refer/Contact/Notify.**
- ✓ **Proactively evaluate facility telemetry boxes for battery level** to reduce nuisance alarms and ensure telemetry boxes remain in proper working order.
- ✓ Customization of alarm parameters outside of the system default is **only permitted with a licensed practitioner's order.**
- ✓ **Communicate temporary discontinuation of telemetry with primary nurse and monitor time off telemetry** to decrease likelihood of adverse events.
- ✓ Follow recommendations in the Telemetry Equipment Huddle Card for device and electrode maintenance.
  - Maintain count of Facility telemetry box inventory and available telemetry boxes.
  - Clean telemetry boxes according to manufacturer instructions and report any device defects to Facility Biomed team for repair/replacement.

See back for  
additional information



# Communication Escalation Matrix

Alert Type	Agent	Documentation of Notification	Documentation of Response/ Resolution (close the loop)	Communication	Tracing/ Retrieving	Technology
Leads off - signal <u>still</u> transmitting	Telemetry Tech	M/R/C/N screen by Telemetry Tech	M/R/C/Nscreen by RN	Phone call/iMobile	EHR	EHR
	Primary RN					
Leads off - tele <u>NOT</u> transmitting	Telemetry Tech	M/R/C/Nscreen by Telemetry Tech	M/R/C/Nscreen by RN	Phone call/iMobile  If <u>unanswered</u> via standard escalation pathway - Call "Telemetry Alert"	EHR	EHR
	Primary RN					
	Charge RN					
	Response Team					
Battery	Telemetry Tech	M/R/C/N screen by Telemetry Tech	M/R/C/Nscreen by RN	Phone call/iMobile	EHR	EHR
	Primary RN					
Non-Lethal Rhythm	Telemetry Tech	M/R/C/N screen by Telemetry Tech	M/R/C/N screen by RN	Phone call/iMobile If <u>unanswered</u> – Call a "Telemetry Alert" or "Rapid Response"	EHR	EHR
	Primary RN					
	Charge RN					
Lethal Rhythm	Telemetry Tech	M/R/C/N screen by Telemetry Tech	M/R/C/Nscreen by RN	Call a Code  AND  Phone call/iMobile	EHR	EHR
	Primary RN					
	Charge RN					
	Code Team					

### Telemetry Notification and Escalation Pathways:

- ✓ Telemetry Technicians should promptly notify the primary nurse of any cardiac arrhythmias, rhythm changes, and/or alarms requiring intervention.
- ✓ Rhythm changes, life-threatening arrhythmias, and/or loss of signal will be responded to in an immediate manner.
  - Alarm notifications & communications should be captured by the Telemetry Technician on the facility-specific Telemetry Notification Log or via Manage/Refer/Contact/Notify screen in the EHR.
    - ❖ The *Manage/Refer/Contact/Notify* screen is not an assessment screen, therefore provisioning of Telemetry Technicians is an option.
- ✓ Defined escalation pathways should be utilized to ensure timely notification and treatment as indicated.
  - Use of overhead paging should follow facility-specific policy. Note that overhead paging can be a minimally effective intervention, and should be used as a last line of defense.
- ✓ If an alert exceeds the third level of the defined escalation pathway or remains unmanaged, a "Near Miss" should be reported and investigated per facility specific procedures.