

Transferring Guidelines for **Code Aorta/Mass Code Aorta
Ruptured or Symptomatic Thoracic/Abdominal Aortic Aneurysm**

Accepted Transfer of a Patient with a confirmed diagnosis on CTA or Ultrasound
Pt must be accepted by the Vascular/Cardiothoracic Division Attending
Notify Attending 30 minutes before arrival of patient

Imperative that transferring physician upload digital images immediately

Vasc/CT Attending Determines
Code Activation by ED Attending after determination by Vascular/CT Attending/Vascular Fellow or an Imaging Study has confirmed rupture Thoracic/AAA Dx

****STAT CTA**
cx, abd., & pelvis

Call **"Code Aorta"**

***Ruptured or Symptomatic**
Non-ruptured & call **"Code Aorta"**

Non-Ruptured and Non-Symptomatic:
Follow Attending's Plan of Care

- Initial Management**
- STAT: CBC, Chem 8, PT/INR, PTT, Troponin, Lactic acid, T&S, EKG
 - **Permissive Hypotension Resuscitation: SBP 80-90**
 - Initiate Ruptured Aorta Powerplan
 - **IF** initiating massive transfusion protocol: **MUST** call Blood Bank to request blood products **AND** OR team to deliver blood products from Blood Bank to OR
 - Alert OR team and Sr. Vascular Fellow
 - Verify uploaded images to PACS
 - Consent forms at bedside
 - Pain Control with Morphine or Fentanyl, Avoid Sedation medications-small doses, avoid hypotension

Transfer to OR

If no prompt response from Vascular Fellow or Vascular/CT Attending call **"Mass Code Aorta"*
(Page to all Vascular & CT Surgery Attendings)

**** (Endovascular protocol) Even if creat. pending/not WNL (potential for rupture) Call Sr. Vasc Resident/Fellow/Attending with questions regarding renal function**

ED or Inpatient Guidelines for **Code Aorta/Mass Code Aorta**



High suspicion for Ruptured or Symptomatic TAA or AAA

- Sudden onset severe, chest, shoulder or abdominal pain
 - Hemodynamic instability
- Family History of Aortic aneurysm
- Presence of pulsatile abdominal mass
- Current or past smoking history

Hemodynamically Stable \geq SBP 90 & Mentating

Notify Vascular Fellow On Call who will immediately contact the On Call CT/ Vascular Attending

Hemodynamically Unstable \leq SBP 90 & Not Mentating

STAT Quick Bedside Ultrasound

****STAT CTA
cx, abd., & pelvis**

**Ruptured or Symptomatic Non-Ruptured
Call "Code Aorta"**

**Inconclusive
Vasc Fellow contacts Vasc/CT Surg
Attending**

Vasc/CT Surg Attending determines

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***Ruptured or Symptomatic
Non-ruptured & call
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**Non-Ruptured and Non-Symptomatic:
follow Attendings
Plan of Care**

**Negative
Continue ER workup**

****STAT CTA
cx, abd., & pelvis**

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Non-ruptured & call
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**Non-Ruptured &
Non-Symptomatic:
Follow Attending's
Plan of Care**

Initial Management

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