

Frequently Asked Questions

1. The hospital has never used wristbands. Why should we consider it now?

- A. While there is much discussion about whether “to band or not to band,” a literature review to date has not conclusively identified a better intervention. Because an increasing number of health care professionals are employed in multiple hospitals simultaneously, it is imperative that current processes take this into consideration. In addition, many facilities supplement local health care professionals with registry and traveler staff members. Although not a substitute for medical record review, an alert wristband on the patient quickly can communicate critical information.

2. This hospital does not use wristbands for DNRs. Why should we consider adopting this?

- A. Wristbands are used in most Texas hospitals to communicate an alert. Because an increasing number of health care professionals work in multiple hospitals simultaneously and many facilities supplement local providers with registry and traveler staff members, confusion can result when the same colors are used for different alerts. A standard-color wristband communicates a quick warning to everyone. The DNR wristband also communicates to the patient and family that the hospital is clear about their end-of-life wishes. By not using the DNR wristband, a code could be called inappropriately and create serious consequences.

3. Why not use blue for DNR?

Many Texas hospitals call a code by announcing “Code Blue.” Having a blue DNR wristband to indicate “no code” easily could create confusion. To avoid creating any second guessing about whether to call a code in this critical moment, blue was not used.

4. Why didn’t you select green for DNR?

- A. Due to color blindness concerns, green was avoided completely. Also, the color green often has a “go ahead” connotation, such as with traffic lights. The possibility of sending “mixed messages” in a critical moment must be avoided.

5. So, if the hospital adopts the purple DNR wristband, then do staff members still need to look in the chart?

- A. Yes. Some hospitals do not use wristbands for DNRs because they want the chart to be reviewed first for the most current code designation. However, that should be the practice in all cases – whether a wristband is being used or not. Code status can change throughout a hospitalization. It is important to know the current status so the patient’s and family’s wishes can be honored.

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6. Why was red selected for allergies?

- A. Red was selected due to the January 2008 survey conducted with Texas hospitals that indicated one-half of hospitals already use the color red. Continuing with an established color that already has such overwhelming use makes sense.

7. Are there any other reasons for using red for allergies?

- A. Research of other industries indicates that red has an association that implies extreme concern. The American National Standards Institute has designated certain colors with very specific warnings. ANSI uses red to communicate “stop!” or “danger!” That message should hold true for communicating an allergy status. When a caregiver sees a red allergy alert band, he/she should be prompted to “stop” and double-check if the patient is allergic to the medication, food or treatment about to be delivered.

8. Do we write the allergies on the wristband too?

- A. No. Allergies should be written in the medical record according to your hospital’s policy and procedure. Allergies should not be written on the wristband for several reasons:
 1. Legibility may hinder the correct interpretation of the allergy listed.

2. Someone could assume that the list of allergies written on the wristband is comprehensive. However, space is limited on a wristband and some patients have 12 or more allergies. Some allergies could be omitted inadvertently – leading to confusion or missing an allergy.

3. Throughout a hospitalization, allergies may be discovered by other caregivers, such as dietitians, radiologists, pharmacists, etc. This information typically is added to the medical record and could fail to be added to a wristband. By having one source of information to reference, such as the medical record, staff members in all disciplines know where to add newly discovered allergies.

9. Why did you select yellow for fall risk?

- A. Research of other industries indicates that yellow implies “caution!” Think of traffic lights; a yellow light cautions that the light is about to turn red, and drivers should either clear the intersection quickly or prepare to stop. The American National Standards Institute uses yellow to communicate “tripping or falling hazards.” It fits well in health care too when associated with a fall risk. Caregivers need to know to be on alert and use caution with a person who has history of previous falls, dizziness or balance problems, tires easily or is confused about his current surroundings.

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10. Why even use an alert band for fall risk?

- A. According to the Centers for Disease Control and Prevention, falls are an area of great concern in the aging population. According to the CDC:
1. More than a third of adults age 65 or older fall each year.
 2. Older adults are hospitalized for fall-related injuries five times more often than they are for injuries from other causes.
 3. Of those who fall, 20-30 percent suffer moderate to severe injuries that reduce mobility and independence, and increase the risk of premature death.
 4. The total cost of all fall injuries for people age 65 or older in 1994 was \$27.3 billion (in current dollars).
 5. By 2020, the cost of fall injuries is expected to reach \$43.8 billion (in current dollars). Hospital admissions for hip fractures among people over age 65 have increased steadily, from 230,000 admissions in 1988 to 338,000 admissions in 1999.
 6. The number of hip fractures is expected to exceed 500,000 by the year 2040. As the aging population enters the acute-care environment, one must consider the risk that is present and do everything possible to communicate that to hospital staff. For more information about falls and related statistics, go to:
www.cdc.gov/ncipc/factsheets/fallcost.htm

11. Who decided on these colors?

- A. The Texas project is modeled after the original work done by the Arizona Hospital and Healthcare Association and the experiences of other states that have adopted standardized colors for patient alert wristbands. The consensus of the Texas Hospital Association, Texas Organization of Nurse Executives, TMF Health Quality Institute and Texas A&M Health Science Center Rural and Community Health Institute was to use the three colors adopted by all of the states that have implemented standardized colors.

For questions or comments regarding this project, please contact the Texas Hospital Association:

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