



## Letter to the Editor

### Establishing a standard “Cardiac Arrest Call” telephone number for all hospitals in Europe—2222\*



Sir,

Outside hospitals in Europe there is a single standard emergency telephone number, 112, that can be dialled free of charge from telephones in order to reach the emergency services. Inside hospitals in Europe there is no single standard emergency telephone number for “cardiac arrest calls” to summon the resuscitation team to patients. This seems to be an oversight which if standardised could improve patient safety, efficiency and be increasingly important as staff frequently move between hospitals in their own countries and throughout Europe.

112 was first standardised in 1972 by a recommendation from the European Conference of Postal and Telecommunications Administrations (CEPT), a pan European body a bit like the European Board of Anaesthesiology. 19 years later it was confirmed by a decision of the EU Council in 1991 and subsequently reaffirmed in 2002 by article 26 of the Universal Service Directive.

Some hospitals have a call bell system for cardiac arrests but the majority use a telephone number and it seems that there is currently a very wide variety of numbers used that appear to be have been chosen by hospitals locally at random. A study showed 27 different numbers used in just one country<sup>1</sup> and standardisation of the “cardiac arrest call” number throughout Europe seems long overdue.

It is important that the “cardiac arrest call” number should be instinctive for doctors and nurses – just like the 112 number is in Europe for the general population. It is common sense that using the same number throughout Europe would reduce the incidence of delays and confusion by staff having to remember or find the correct number for each hospital when trying to summon the resuscitation team. Stressful situations such as this automatically reduce the human’s ability to accurately and speedily recall information and precious time could be lost and patients’ lives put at risk.

In November 2015 the European Board of Anaesthesiology (EBA) made a recommendation for the establishment of a standard Cardiac Arrest call telephone number in European hospitals<sup>2</sup> and recommended the number 2222.

Any number was possible but 2222 is already the standard number in the few European countries that presently have a standard

national number and wider success can be built on this. There is also some logic as most hospitals use 4 digit numbers, it is in the middle of the top line of most key pads, could be identified in low lighting, and is memorable. It is unlikely that an alternative number would be any better and debating this would only further delay standardisation and the benefits for patients and staff of implementation.

The EBA recommendation is already supported by the European Patient Safety Foundation and representations are being made at National and EU level to help implementation but these central processes can be slow.

In the meantime however the variety of numbers used suggests that the choice of number was probably made in hospitals locally. Therefore it should be possible for hospitals locally to make a new decision, with patient safety in mind, to standardise their own number to 2222. Any hospitals wishing to do this may find the action guidance from the National Patient Safety Agency<sup>1</sup> and NSS Health Facilities Scotland<sup>3</sup> useful.

#### Conflict of interest statement

The author is Chair of the Patient Safety Committee of the European Board of Anaesthesiology, no other conflict of interest declared.

#### References

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3. Safety Action Notice. Establishing extension number 2222 in Scotland as a standard cardiac arrest call in hospitals. NSS Health Facilities Scotland; 2007. <http://www.hfs.scot.nhs.uk/publications/PSAN0714.pdf> [accessed 03.05.16].

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