Crash cart management training module

Group 4

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Reviewed Faculty:

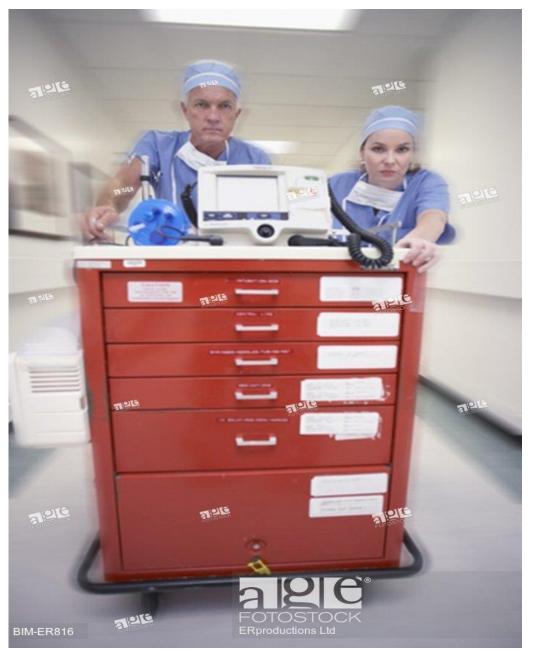
Dr. Lallu Joseph

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Crash cart management training module

- Why ?
- What?
- Who?
- When?
- How ?



Crash cart management training module

Intent

- Identify who responds and train that staff or person
- To Improve the efficiency and reliability of crash cart
- To prevent unnecessary delays in patient care
- Improve patient outcomes

Objective

- At the end of the training, the trainee will be able to
- 1.Describe need to maintain crash cart.
- 2. Describe his role in the maintenance of crash cart.
- 2.Place the crash cart in easily accessible location(clinical area)
- 3. Clearly arrange equipments, drugs in medication drawers
- 4. Respond to code blue
- 5. Replenish medications used for emergency and keep cart ready

• Components

CRASH CART TRAINING MODULE PRESENTATION – GROUP 4 CPQIH

	RESUSCITATION TRAY			LARY	LARYNGOSCOPEY			2 SET BATTERIES IS SEALED			
					7						
	Inj: Adrenaline		Inj: Atrop	tropine Inj: Cal. Gluconate		Inj: Deriphyline	Inj: Hydrocortisone		Inj:25 % Dex. & Sodabi carbonate		
	Defi	Defibrillator		Pulse Oxymeter		BP Apparition		Mock Drill Sheet			
	O2 Cylinder	IV Set			T	Spirit, Cotton, Different Size of Plaster, Scissors, Venflon, Easy fix, Three way Adopter					
		Dis. Glove				IVF- NS -1 R2					
		Dis. Syringes (2ml, 5ml,10ml)			,	Suction Tubes, Folly's catheter Ryle's Tub, Uro bag					
		SUCTION APPARATUS				OTHER MEDICINE 25 % DEXTROSE BICARB PHENYTOIN EPHEDRIN DOPA&DOB CALCIUM					
			BLS k	4		Fani	pment	Ch	ock List		

RACK TOP

- DEFIBRILLATOR Pads, Jelly ,Leads, Nib cuff
- DRUG SYRINGE-ADRENALINE
- NS
- STETHOSCOPE
- BOUGE
- SUCTION CATHETER
- SIDE-CYLINDER

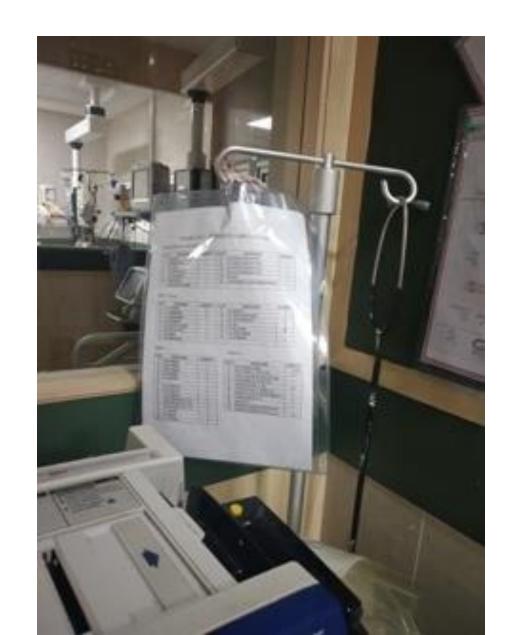




LIST ON TOP

- Drugs
- Equipment's





RACK 1

- ATROPINE
- ADRENALINE
- 25 % DEXTROSE
- BICARB
- PHENYTOIN
- EPHEDRIN
- DOPA&DOB
- CALCIUM





RACK 1







- SYRINGE
- VENFLON
- SUTURE MATERIAL
- NEEDLES





- ICD TUBE
- RYLES TUBE
- FOLYS CATHETER
- SUCTION CATHETER
- PLASTER TO FIX
- LIGNOCAINE JELLY







- CENTRAL LINE & VENFLON DRESSING
- ETCO2 PROBE
- BLOOD SET
- SUTURE MATERIAL
- ABG SYRINGE



- ET TUBE
- AIRWAY
- BATTERY
- PLASTER
- SYRINGE TO AIR INLATE
- MASK
- TONGUE DEPRESSOR
- MCGILLS FORCEPS





- TRACHEOSTOMY TUBE
- BAINS CIRCUIT
- POLY MASK
- LARYNGOSCOPE
- ADULT NEB KIT
- ARTERIAL LINE KIT
- CENTRAL LINE KIT





USES

- IN CODE BLUE
- MEDICAL EMERGENCY
- SURGICAL EMERGENCY
- TRANSPORT
- AIR WAY MANAGEMENT TOOL
- IV SUPPLY MEDICATION





Clearly arrange equipments, drugs in medication drawers

- Laminated lists and available on the cart
- Emergency medications List as identified
- Equipments list
- Label drawers clearly and in standardized manner
- Arrange medications adequate quantities
- Arrange necessary equipments

GROUP-4

CODE BLUE DRILL/MEDICAL EMERGENCY

Location: Date: Start Time: Stop Time:

Recorder:

Objective	Time	Yes	No	Comments(explain negative answer)
Employee finding victim(1 st respondent)				negative answer)
assess the victim or summons someone				
who can assess the victim				
1 st responder calls or instructs other				
person to call				
1 st responder or the one who calls				
gives the following information to				
the				
✓ Requests that a "Code Blue" be				
announced				
✓ States the name of the facility				
✓ State the specific location				
within the facility				
✓ States reason for the code, brief				
description of the situation				
Practice code blue drill				
announcement is pages				
Proper CPR is initiated				
Essential staff(i.e. physician,				
registered nurse) respond to the code				
blue announcement promptly				
Adequate staff respond to code blue				
announcement promptly				
Registered nurse functions code				
leaders until the physician /				
anaesthetist arrives by:				
Designating employee to bring				
emergency equipment				
Designating the registered nurse to				
serve as the recorder on flow sheet				
Emergency equipment arrives on the				
spot				

GROUP -4

CODE BLUE EVALUATION FORM

Mock Drill	Date:Time
Actual Code Blue	Location:

	Actual Code Blue	Location					
.No	Check List	Yes	No	N/A	Comments		
1.	Was staff able to identify cardiac/respiratory arrest status?						
2.	Was CPR begun when the cardiac/respiratory arrest was identified?						
3.	Did the first person called for help appropriately?						
4.	Did Registered Nurse/designee call 555 appropriately?						
5 .	Was code properly announced?						
6.	Was public announcement System clear?						
7.	Was correct location announced?						
<u>7.</u> 8.	Did nurse lead the resuscitation effort effectively until code blue team arrived?						
9.	Did code blue team arrive in a reasonable time?				Tick one *1min-acceptable *3mins-acceptable *Over 3 mins- Unacceptable		
0.	Was cardiac compression performed uninterrupted until code team arrived?				•		
1.	Was the pulse obtainable during the act of cardiac compression?						
2.	Was an airway established and ventilation maintained until code blue team arrived?						
3.	Was correct breathing and compression ratio maintained?						
4.	Was correct hand position utilized?						

Thankyou

• Good luck

