Code Cart

**Purpose**
To assure that an emergency supply cart containing appropriate drugs, supplies, and monitoring equipment used in the care and initial treatment of cardiopulmonary arrest victims, including emergency airway and defibrillator components is available and ready for use in all areas of the hospital.

**Scope**
Respiratory Care Services maintains and stocks all emergency supply carts that are available for resuscitation.

**Accountability**
- Code carts are the responsibility of Respiratory Care Service and all trained qualified personnel.
- Staff involved with the use, restocking, or checking of the cart must have received training.

**Physician's Order**
As determined and required by the UTMB Resuscitation Committee.

**Indications**
- The Cart is primarily used in resuscitation situations called by a physician, nurse or therapist.
- The cart is used for called codes, pre-code, or non-code situations in which supplies are needed urgently, such as rapid response activations.

**Goals**
To ensure a properly stocked and functioning emergency cart for use with initial treatment of resuscitation events.

**Equipment**
See attached cart stock list.

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### Procedure

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
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</table>
| 1    | Code cart contents:  
- Designated staff in nursing service will perform daily code cart checks and notify RCS if equipment is malfunctioning, the lock is broken, supplies are missing, or supplies are expiring/expired  
- Code carts not assigned to nursing service departments will be checked by Respiratory Care Services.  
- The internal supplies are checked when restocking and after use. This is done on both the cart and the airway pack.  
- The top of the cart and Side Bin contains medications supplied by Pharmacy. Replace when required  
- Drawers #1, #2, #3, #4, and the bottom compartment, are stocked according to the attached contents list.  
| 2'   | A legible signature and supply status is required on both the Pharmacy Drug Tray and Cart Content lists. The expiration of the first item to expire should be included on the label affixed to the top right side bin. |

### Special Considerations
- Used carts are to be made functional as soon as they are released from the arrest area.
- Usage as a supply cart leading to replacement of any missing equipment may be at the expense of the nursing unit when a cart is found unsecured and no patient event has been called.

### Safety Precautions
- When responding to a code, a backup cart and portable O2 tank is to be brought to the arrest site as quickly as possible from the department storage area. This ensures replacement cart availability and O2 for transport purposes.
- Carts are to be pushed rapidly, but are not to be run with. This is to prevent personnel, other patient, or visitor injury as well as equipment damage.
- The back-up cart shall have a transport defibrillator for use if needed.
Appendix

Code Cart Equipment List

Ambulatory Clinic Process for Code Cart Replacement

Back-up battery power summary.

Infection Control

Follow procedures outlined in Healthcare Epidemiology Policies and Procedures #2.24; Respiratory Care Services


References

Resuscitation Committee Minutes


### Outside of Cart:

1. Portable suction with tubing
2. Oxygen E-cylinder
3. Zoll R Series or LifePak defib
4. Pack defib paper
5. Adult defib electrode
6. Pack of Adult ECG electrodes
7. Broselow tape
8. Backboard (Attached)

####Clipboard w/Code 99 Forms:
- (4) Resuscitation Flow Sheet
  - Adult
  - Pediatric
- (4) Resuscitation Flow Sheet

####RCS Policies/Documentation:
- 7.04.01 “Code Cart”
- 7.04.02 “Code Cart Checking Procedure”
- Daily code cart check form

### Drawer #1

####Airway management kit:
- Styles (one each):
  - Adult Stylet 14Fr
  - Pediatric Stylet 10 Fr
  - Pediatric Stylet 6Fr
- Endotracheal Tubes (one each):
  - 2.5 Uncuffed
  - 3.0 Uncuffed
  - 3.5 Uncuffed
  - 4.0 Uncuffed
  - 5.0 Uncuffed
  - 6.0 Cuffed
  - 7.0 Cuffed
  - 7.5 Cuffed
  - 8.0 Cuffed
- (1) Hemostat (packaged)
- (1) Laryngoscope Handle

####Laryngoscope Blades (one each):
- Miller #0
- Miller #1
- Miller #2
- Miller #4
- MacIntosh #3
- Magill Forceps:
  - Magill Adult
  - Magill Pediatric
- Oral Airways (one each):
  - 60mm
  - 80mm
  - 90mm
  - 100mm
- Tongue Blade/Bite Block
- Suction Catheters (one each):
  - 6.5Fr
  - 10Fr
  - 14Fr
- Yankauer Tip Suction
- 1 Sargiube
- 10cc
- Trach Tie (4ft)
- CO2 detector

### Drawer #1 (cont.)

####Nasogastric tubes (one each):
- 10Fr Replogle
- 14Fr Salem sump
- 18Fr Salem sump
- (1) 60cc Catheter tip syringe
- (2) suction tubing
- (2) Surgilube
- (1) Universal connector
- (1) tape roll
- Adult ECG electrode (2 sets)
- Pediatric ECG electrode (2 sets)
- Packs defib paper
- (1) O2 flowmeter with adapter
- **Endotracheal tubes (one each):**
  - 2.5 Fr
  - 3.0 Fr
  - 3.5 Fr
  - 4.0 Fr
  - 5.0 Fr
  - 6.0 Cuffed
  - 7.0 Cuffed
  - 7.5 Cuffed
  - 8.0 Cuffed

####Suction Catheters (one each):
- (1) Hemostat (packaged)
- (1) Laryngoscope Handle
- Suction Catheters (one each):
  - 6.5Fr
  - 10Fr
  - 14Fr

####**Syringes:**
- (10) 60cc Luer-Lok
- (10) 10cc
- (5) 3cc
- (5) 1cc

####Scissors:
- (1) Scissors

####Syringes:
- (1) 60cc Catheter tip syringe
- (2) pediatric ECG electrode
- Packs defib paper
- (1) O2 flowmeter with adapter
- (1) Laryngoscope Handle
- (1) Hemostat (packaged)
- (1) Laryngoscope Handle
- Suction Catheters (one each):
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####Syringes:
Appendix II – Health System Ambulatory Clinics: Process for Code Cart Replacement

1. The clinical area will determine that a code cart needs to be replaced based on the following scenarios:
   a. Cart contents are used on patient (cart is to be updated immediately)
   b. Items/Drugs on Cart are out of date (1 month prior to expiration)
   c. Notification must occur at least 6 weeks prior to cart expiring

2. The Nursing Supervisor/designee will contact Respiratory Care Services at 409-772-1635 (Department) or 409-692-6756 (Team Lead Cell Phone) to request a cart update and give the following details:
   a. Name of Supervisor/Clinic
   b. Timeframe for replacement (immediate or routine)

3. After receiving notification of an immediate or routine code cart need, Respiratory Care Services will send personnel to assess and update the cart within the identified timeframe.

Appendix III – Defibrillator Back-up battery power Summary

For areas using the Zoll R Series Defibrillator:

R Series products use an easily replaced rechargeable lithium-ion battery pack (the ZOLL SurePower battery pack). A new, fully charged battery pack typically delivers more than 5 hours of ECG monitoring. Use of other functions (such as the defibrillator, printer, or pacemaker) reduces this time. When a LOW BATTERY message appears on the display and the unit emits two beeps in conjunction with the displayed message, the battery must be replaced and recharged. You can charge the battery by either of the following methods:

- **Internal charging** — plug the R Series into an AC power supply to automatically begin charging the installed battery pack. The front panel battery indicator operates as follows:

<table>
<thead>
<tr>
<th>When the indicator is:</th>
<th>It mean:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Steady Yellow</td>
<td>Battery is Charging</td>
</tr>
<tr>
<td>Steady Green</td>
<td>Battery is Charged</td>
</tr>
<tr>
<td>Alternating Yellow and Green</td>
<td>No battery is installed or a battery charging fault has been detected</td>
</tr>
<tr>
<td>Not Lit</td>
<td>The defibrillator is not connected to AC Mains</td>
</tr>
</tbody>
</table>

**Note:** Upon power up, it takes approximately 45 seconds for the LEDs on the battery to accurately display run time.

- **External charging** — use the ZOLL SurePower Battery Charger to charge the battery pack and test the battery’s capacity. For details, refer to the ZOLL SurePower defibrillator battery Operator’s Manual.
For areas using the Medtronic LifePack 20 Defibrillator:
The Medtronic Lifepack 20 Defibrillator/Monitor is an AC line operated device with an internal battery as back-up.

- **AC powered:** 90-132 VAC 50/60Hz, 198-264 VAC 50/60 Hz
- **Internal Battery Backup:** NiMh. Batteries charge while the device operates from AC power.
- **Operating Time:** A new, fully charged internal backup battery will provide the following prior to shut down:

<table>
<thead>
<tr>
<th>Operation on Internal Battery Backup</th>
<th>Total</th>
<th>After Low Battery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitoring (minutes)</td>
<td>120</td>
<td>5</td>
</tr>
<tr>
<td>Monitoring (minutes) without pulse oximetry</td>
<td>135</td>
<td>5</td>
</tr>
<tr>
<td>Defibrillation (360J Discharges)</td>
<td>90</td>
<td>3</td>
</tr>
<tr>
<td>Monitoring plus pacing (minutes @100ma, 60ppm)</td>
<td>70</td>
<td>2</td>
</tr>
</tbody>
</table>

- **Typical Battery Charge Time:** <2 hours when device is powered off and AC power is applied.
- **Low Battery Indication and Message:** When the device is unplugged from AC power, it switches to battery backup. When battery get low, the battery detection icon is indicated with a low battery message in the status area and a warning tone occurs.