

# 2022

## RESUSCITATION TROLLEY

Tagged trolley check sheet  
(CITY & HACKNEY ONLY)

**ADULT EMERGENCY EQUIPMENT LIST AND SIGNING SHEET**  
TO BE CHECKED DAILY BY A REGISTERED MEMBER OF STAFF - ENTER ACTUAL QUANTITY INTO EACH BOX: DO NOT TICK

Entire contents **MUST BE** checked after use or after replacing items, and the draws sealed with a new security seal

WEEKS COMMENCING \_\_\_\_\_ WARD \_\_\_\_\_

*Please note that all items must be stored in its packaging*

### Daily checks

Qty Req	Item	Date →	M	T	W	T	F	S	S	M	T	W	T	F	S	S
<b>TOP OF TROLLEY</b>																
1	Sharps Bin (empty)															
1	Defibrillator (AED) - pads pre-attached															
1	Blood glucose monitor (calibrated daily. See Clinical Room Daily Checks)															
1	Level 3, AGP PPE box															
<b>REAR &amp; SIDE</b>																
1	Portable Suction Machine- suction tubing connected; do not connect Yankaeur															
1	Oxygen Cylinder (minimum 3/4 full)															
1	Endotracheal tube introducer 15CH (bougie) – to be stored straight															
2	Suction catheter size 14CH															
2	Suction catheter size 12CH															
<b>GENERIC TROLLEY CHECKS</b>																
	Is the main compartment security seal intact Y/N?															
	Does the security seal number match this paperwork (see below) Y/N?															
	Is the next item due to expire in main compartment still in date (see below) Y/N?															
	Clean external surfaces <b>daily</b>															
<b>ADDITIONAL CHECKS</b>																
1	Spare CD oxygen cylinder in the treatment /clinical room is full Y/N?															

**Adult Emergency Trolley Contents List and Signing Sheet (CHCMH ONLY). Valid from 25/05/2022 until 31/12/2022.**  
Any item(s) not on this list **MUST** be removed

# 2022

WARD \_\_\_\_\_

ENTER ACTUAL QUANTITY INTO EACH BOX: DO NOT TICK

**Main draws pre-tagging check**

Qty Req	Item	Qty	Expiry Date	Qty	Expiry Date	Qty	Expiry Date
<b>DRAWER 1: AIRWAY</b>							
1	I-Gel Supraglottic Airway size 3						
1	I-Gel Supraglottic Airway size 4						
1	I-Gel Supraglottic Airway size 5						
2	Sachets water based lubricant jelly						
1	10ml syringe for cuff inflation						
1	Roll of 3 metre 2" ribbon gauze						
2	Yankaeur suction catheter						
1	Catheter mount						
1	Adult laryngoscope handle		N/A		N/A		N/A
1	Size 3 Macintosh disposable laryngoscope blade <i>(compatible with handle)</i>						
1	Size 4 Macintosh disposable laryngoscope blade <i>(compatible with handle)</i>						
2	Size C Battery for laryngoscope		N/A		N/A		N/A
1	Adult bacterial/viral filter + HME						
1	Cuffed Endotracheal Tube size 6.0mm						
1	Cuffed Endotracheal Tube size 7.0mm						
1	Cuffed Endotracheal Tube size 8.0mm						
1	Cuffed Endotracheal Tube size 9.0mm						
<b>DRAWER 2: BREATHING</b>							
1	Bag Valve Mask with reservoir bag and tubing						
1	Magill's forceps						
1	Tuff cut scissors		N/A		N/A		N/A
1	Stethoscope		N/A		N/A		N/A
1	Oropharyngeal airway size 2						
1	Oropharyngeal airway size 3						
1	Oropharyngeal airway size 4						
1	Nasopharyngeal airway size 6						
1	Nasopharyngeal airway size 7						
1	Fingertip pulse oximeter		N/A		N/A		N/A

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<b>DRAWER 2: BREATHING (cont.)</b>							
1	Adult nebuliser face mask with pot and tubing						
1	Adult oxygen face mask with reservoir bag and tubing						
<b>DRAWER 3: CIRCULATION</b>							
2	IV Cannula 14G (Orange/Brown)						
2	IV Cannula 16G (Grey)						
2	IV Cannula 18G (Green)						
2	IV Cannula 20G (Pink)						
4	Sodium Chloride 0.9% ampoule 10ml, <b>for injection</b>						
1	Blood tubes – Urea and electrolytes U&E Serum (Yellow)						
1	Blood tubes – Full Blood Count - FBC (Purple)						
1	Blood tubes – Coagulation (Blue)						
1	Blood tubes – Group & Save/Cross-match (Pink)						
1	Blood tubes – Glucose (Grey)						
1	Disposable tourniquet or disposable tourniquet roll		N/A		N/A		N/A
1	Pen torch		N/A		N/A		N/A
2	Razors		N/A		N/A		N/A
2 packs	Gauze Swabs						
4	Needles 21G (green)						
4	Syringe 20ml						
4	Syringe 10ml						
5	Chlorohexidine wipes						
1	Roll of Micropore or Transpore tape		N/A		N/A		N/A
2	IV dressing						
2	Arterial Blood Gas Syringe						
2	Three-way Tap						
<b>DRAWER 4: DRUGS</b>							
1	Red bag: ELFT drugs (sealed)						
1	Sodium Chloride 0.9% intravenous infusion 1000mL bag						
1	10% Glucose 500mL bag						
1	Blue box: Homerton drugs (sealed)						
2	IV Fluid administration (giving) set						

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DRAWER 5: PPE AED SPARES							
6	Pair non-sterile gloves		N/A		N/A		N/A
6	Goggles		N/A		N/A		N/A
6	Aprons		N/A		N/A		N/A
1	Burns dressing						
1	Spare defibrillator battery <i>(compatible with AED)</i>						
1	Hands free defibrillator pads <i>(compatible with AED)</i>						
1	Ligature cutter		N/A		N/A		N/A
1	Waters circuit						
1	Pressure infusion bag		N/A		N/A		N/A
1	Large wound dressing						
		<b>Checked by</b> →					

Clean internal surfaces <b>before</b> sealing			
Enter <b>expiry date</b> of next item to expire			
State <b>next item</b> to expire			
Enter <b>security seal</b> unique number			

<p>Ward Managers Band 7 or Deputy Band 6 must check and sign on a weekly basis to confirm that all checks have been undertaken.</p>	Print name:	Print name:
	Signature:	Signature:
	Date:	Date:

Completion of this form indicates that all equipment is present, clean functional and in date.  
Any problems must be highlighted on the issues sheet and reported immediately to the Nurse in Charge or the DSN

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**Resuscitation Checklist Issues**

Day & Date	Highlighted issue (e.g. post 2222 call, equipment problem.)	Action Taken	Reported by	Outcome of action taken

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