## **Adult Resuscitation Trolley Checklist**

	Mon	Tue	Wed	Thurs	Fri	Sat	Sun	
Date:								
Time:								
Print name:								
Signature:								
Top/Side of trolley								
<b>Top</b> Defibrillator with 1xAdult/Child pads- passed daily self-check	Run Op Check							
Top ECG dot electrodes (1x pack of 3)								
<i>Top</i> Sharps Bin								
Left side CD sized oxygen cylinder (full)								
Left side Bougie Unopened								
Left side Suction Catheters size 12Ch & 14Ch								
Left side Gloves (Medium and Large/XL)								
Right side Suction Unit (Plugged in and tested)								
Drugs Drawer		The Princess Alexandra Hospital NHS						
In-date Universal Cardiac Resuscitation Kit 2 X Anaphylactic Shock Kits		NHS Trust						
Glucose IV 10% - 500 ml bag			لكازيون					
Disposable razor		For Resuscitation Trolley Resources  ← Scan the QR Code						
Airway Drawer								
Sealed (Blue) Airway Tray & In-date								
Breathing Drawer				← Scal	i tile Qi	oue		
Disposable Adult Bag-Valve-Mask with size 5 face mask attached								
Adult Mapelson-C Breathing circuit								
Adult Non-Rebreathe mask		]		3A/ 1/	4.			
Circulation/IV Access drawer		Ward/Location						
Sealed (Red) IV access tray and in date		Harlow RDU- East & North Herts Trust  Defibrillator: Philips DFM Philips DFM Defibrillator:  Additional Operation check required weekly; Please perform operation check every Monday						
IV Fluids Drawer								
2x blood & 2x IV administration giving sets								
2x 1000ml bags of 0.9% saline								
1 x Pressure bag								
Miscellaneous Drawer				r icase perioriii opera	tion check every is	<u>ionaay</u>		
Suction catheters - 2 x size 12 & 14				Philips DFM	Monda	ay		
Spare suction unit liner, tubing & yankeur		1		defibrillator				
1x spare set of compatible Adult/Child defibrillator pads		]		Operation Che				
Spare ECG dot electrodes (4x pack of 3)		Tick When Completed:						
Ligature Cutter		1						
1x spare Universal Cardiac Resuscitation Kits								
Trolley <u>cleaned, dusted</u> & <u>sealed</u> after check completed	Seal number:	Seal number:	Seal number:	Seal number:	Seal number:	Seal number:	Seal number:	
If re-check required please add seal number and initial								

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