PURPOSE
To assure that an emergency supply cart containing age 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.

POLICY STATEMENTS
Emergency Code Carts will be maintained in designated Patient Care Areas (insert code cart locations list Appendix A) and checked on a daily basis. The defibrillators will be checked and tested daily.

SCOPE OF AUTHORITY / COMPETENCY
RN/Anesthesia Tech/Clinical Technology Technician/Respiratory Therapy/Operations Managers/Technical Care Associate

PROCEDURE:
Each departmental responsibility will be in accordance with the guidelines as follows:
**EQUIPMENT**
Multi drawer code cart with defibrillator

**CODE CART CHECKING PROCEDURE**
See Code Cart Content Checklist

1. The responsible person will complete the Code Cart Daily Checklist including date/sign/initial upon completion of procedure.

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<th>KEY POINTS</th>
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| 1    | • Code carts will be plugged in and secured with a breakaway RED OR YELLOW numbered seal when not in use.  
• Replacement of numbered seal can be obtained from pharmacy | • Red Seal is applied when the cart is complete and ready for use  
• Yellow Seal is applied when cart is need of exchange example post code or non intact  
• The plastic seal will be inspected for integrity.  
• Red Seals will be secured in respective area’s pyxis medication cabinets | |
| 2    | • Emergency equipment/code carts are to be checked for integrity and function daily by designated staff members of each area  
• Code Carts located in all patient care areas open 24 Hours will be checked by 10 AM daily. | • The Operations Manager assumes responsibility and will designate a staff member to perform the daily checks for the code carts on their respective units (See Daily Defibrillator Checks for procedure).  
• Code carts in areas that are not open 24 hours will have documentation showing “Closed” on the code cart daily checklist  
• In patient care areas that are not open 24 hours a day /7 days a week the emergency equipment is checked ASAP when reopened for patient care. | |
| 3    | **Daily Defibrillator Checks**  
• Make sure the power is off;  
• Connect the 50 ohm test load to the multifunction patient cable;  
• Connect patient multifunction cable to monitor;  
• Unplug the AC power cord  
• Press and hold “Strip” while turning the Energy select knob to **MANUAL ON** to start the test;  
• Follow prompts;  
• Plug the AC power cord back in;  
• If machine does not pass test, remove from service and contact Clinical Technology Management.  
• Check expiration dates on multifunction defibrillator electrodes pads - replace them if expiration date has passed. | • The multifunction electrode pads should be disconnected for the 50 ohm test and reconnected upon completion  
• The AC power cord is disconnected to make sure the battery is functional  
• IMPORTANT: The AC power cord must be reconnected to maintain the integrity of the battery  
• A report will be printed when the check is complete; all systems will read passed. The data card will read as “data card not present” unless there has been one installed in your device. |
- The person performing the defibrillator system check will date and initial the print out after removing the previous strip.

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- Paddles/Cables/Connectors:
  - Make sure there are no cracks, broken wires or other visible signs of damage.
  - Make sure the connectors engage securely.
- AC Power:
  - Plug the power cord into a power outlet and connect it to the HeartStart XL Biphasic defibrillator.
  - Verify that the power and charging indicators on the front of the HeartStart XL Biphasic defibrillator/monitor are lit.
- Make sure the printer:
  - Has sufficient paper
  - Prints properly

Paddles should be checked once a month and after each use.
- For specific defibrillator operator manuals, please access the appropriate link below:
  - HeartStart XL biphasic
  - HeartStart MRx
  - LifePak 20/20e

EXCHANGE AND PROCESSING OF CARTS

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| 1    | • All ADULT Code Carts, except those in the OR, will be processed by Clinical Technology.  
      • Pediatric Carts will be maintained by the areas in which they are housed.  
      • Pediatric Code Cart Stock  
      • Pediatric Code Cart Component List  
      • Newborn Code Cart Content Checklist  
      • NICU Code Cart Content Checklist | • Indicates that the cart has been used or the integrity of the cart is broken and needs exchange  
      • The Code Cart Content Checklist and the Daily Code Cart Checklist are to remain with the Code Cart of origin and are not to be transferred to the replacement cart  
      • Future link to processing Standard Work Instruction (SWI).  
      • Code carts needed outside of normal processing operation hours may be retrieved from room 8316. |
| 2    | Post Utilization Process (after code blue/rapid response or any break in the red seal)  
      • Remove charge card from used drug box, complete the form and affix patient label.  
      • Return label to used drug box and place the box in the appropriate drawer of the used cart.  
      • Lock the used cart with the Yellow seal  
      • The Code cart seal must be intact at all times  
      • The designated party will exchange the used Code Cart for a stocked Code Cart. The replacement cart must have the red seal intact.  
      • The used code cart will be returned to 8NR Room 8312 for processing and a ready cart will be obtained from the equipment storage area.  
      • All Code Carts are to be processed monthly by clinical technology.  
      • This process occurs within the 1st week of every month by designated staff member | |
| 3    | A new code cart checklist will be started on the first day of each month. The completed | |
month’s sheet must be submitted to the unit/department manager.

REFERENCES


REPLACES
Crash Cart and Defibrillator, Checking Procedure, 5/12
Biphasic Defibrillator /Monitor 11/11

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Key Reviewers: Patient Care Directors; Operations Managers; Critical Care Council; Clinical Support and Research; Respiratory Therapy and Clinical Technology Management; Policy Council, Pharmacy

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