

CCT Checklist/Survival Guide

PRE-SHIFT RESIDENT CHECKLIST:

Trauma Bay

CCT Surgical/Trauma Instrument Trays (R-side shelves)
*Please make sure the proper number of kits are present.
These are time-sensitive instrument trays that need to be available in the trauma room at all times.*

- ☐ Cordis (4)
 - ☐ Central line kits (6)
 - ☐ Peritoneal Lavage (2)
 - ☐ Tracheostomy (3)
 - ☐ Thoracotomy (2)
 - ☐ Chest Tube Tray (3)
 - ☐ Chest Tubes (Check ALL 3 Compartments)
 - ☐ Pleurevac Drain (3)
 - ☐ OB Kits (3)
- If there are any kits missing or if any are used during your shift, let the charge nurse know so they can be replaced (call ext 3644, Central Sterile for replacing surgical trays).**

L-side shelves

- ☐ Hemostatic dressings
- ☐ Reboa
- ☐ Pelvic Binders
- ☐ Arterial Lines

Items to be aware of that are in the Pyxis in CCT 1

- ☐ Cric kit and Size 6 and 8 DCT Trachs
- ☐ Tourniquets
- ☐ TV Pacemaker, Medtronic Pulse Generator and Magnet
- ☐ Tono-Pen
- ☐ Ring Cutter
- ☐ Extra bougies and Videolaryngoscope Blades
- ☐ Rigid stylets
- ☐ Stryker Needle
- ☐ Blakemore Tube
- ☐ EZ-IO Device, Needles

Glidescope

- ☐ Make sure it is turned on and plugged in
 - ☐ Supplies: S3/S4 blade x 2 each, 2-4 rigid stylets, 4 Bougies
 - ☐ Disposable Bronchoscopes (3) Behind Door to Medication/Pyxis Room
- Do NOT open and preload blades or tubes.**

Orange Airway Box

- ☐ Make sure at least one per red medical code cart
- ☐ Can have extra one in CCT 1 and in medication room

Each bed should have:

- ☐ BVM, Suction, NC, OxyMask
 - o Do NOT open yankauer or tubing
 - o Extra sealed supplies are in the airway box

All CCT Rooms

Each bed should have:

- ☐ BVM available
- ☐ Suction
 - Canister attached is the ONLY thing that should be set-up
 - Sealed yankauer/tubing available and obtained if needed
 - Turn on suction to make sure it works
- ☐ Nasal Cannula and OxyMask

Ultrasound

- ☐ Make sure it is plugged in and charging
 - ☐ Supplies: Gel, Tegaderm, Probe cover, Wipes.
- NO IV SUPPLIES**
- ☐ **Please clean the ultrasound before and after each use.** No Ultrasound Gel should be left on the US Probes.

Important materials located in the Supermarket (across from CCT Trauma Bay Room 1):

Please familiarize yourself with the following procedural trays/kits. Be sure to note where they are in the supermarket.

- ☐ Wayne Pneumothorax Trays
- ☐ Pericardiocentesis Trays
- ☐ Lumbar Puncture Kits
- ☐ Thoracentesis Trays
- ☐ Transvenous Pacer Kit
- ☐ Extra Central Line Kits
- ☐ MidLine Catheter Trays
- ☐ Double Lumen Hemodialysis Catheters (16/20/24 cm)
- ☐ Arterial Lines

*** if any equipment or supplies noted above is running low or is not stocked, let the Charge Nurse know ASAP! ***

CCT UPDATES (as of August 2021):

Overall CCT Environment of Care:

- Do not preload equipment unless needed for use, do not spike or load the Level One Infuser
- Do not leave used/opened/soiled equipment at the bedside
- Do not leave sharps out unattended either in the trauma bay or in the ultrasound machines
- When there is an opportunity to discuss an educational topic on shift, please include nursing in the group discussions when possible

IV Supplies

We are no longer setting up IV supplies. Sharps should NOT be left out unattended either in the trauma bay or in the ultrasound machines.

Sutures

Sutures are now present just above the suture trays/staples in the trauma bay on the back wall. Sutures will be re-stocked including the must have sutures for ED/trauma wound care.

Rigid Stylets

There are blue top (non-disposable) and black top (disposable) rigid stylets for the Video Laryngoscope. **Do NOT discard the Blue top Rigid Stylets**; these go to **central sterile** after use, as they are non-disposable. When in doubt about whether to throw it away or send it to central sterile after use, just send it to Central Sterile after use. Rigid stylets are located in the pyxis.

Blue Difficult Airway Carts – 2 in trauma bay

These carts contain supplies for difficult airway management and intubation. There is a checklist on top of the cart outlining each item. Nurses are responsible for maintaining the supplies in the cart. However, **residents should be aware of each of these supplies, how to use them and where to find them both in the cart and not in the cart (i.e. shelves on back wall and supermarket)**. These carts may be subject to changes and we will continue to update in real time.

Supplies includes:

- **Direct Laryngoscopy:** Mac/Miller blades and blade handles, ET tubes, EtCO2 color detector, syringes
- **Rescue Devices:** LMA, NPA, OPA, tongue depressors, 60cc syringe, surgilube, PEEP valves
- **Surgical/Back up Supplies:** Scalpels, Tracheostomy tube boxes, Bougies, Gauze, S3/S4 glidescope blades
- **Oxygen, EtCO2 Monitoring:** EtCO2 waveform detectors, Oxygen masks, Nasal cannula
- ETT fastener, Yankauer, Suction tubing
- Extra ET tubes, BVM

Orange Airway Boxes – 1 on each medical (Red) code cart

These carts contain supplies for airway management. These boxes are SEALED. They are logged by nursing as part of checking the medical code carts. **If opened, let the charge nurse know as they are to be sent to central sterile (x3644) for replacement.** Supplies includes:

- DL blades, NPA, OPA, ETCO2 detector, tongue depressors, syringes, surgilube, scalpels, PEEP valves, McGill Forceps, ET Tubes (6.0-8.0), stylets, Yankauer, suction tubing, LMAs (size 3/4), Airway Exchange Catheter
- Notes: airway exchange catheter is NOT a Bougie. If you need a Bougie, you will need to get one from the airway cart

- To review in detail the contents of the airway boxes, go to Sharepoint, policies and procedures section, and type in "Code Cart" within the policy search section; open the first entry on "CPR arrest and code cart management" and scroll down to pages 13 and 14 for images and lists of the airway box contents.

Zoll defibrillators

Review the online free educational videos: R Series Training Videos (Software Version 14) and (Software after Version 14). <https://www.zoll.com/contact/elearning/videos/r-series>

Scan the QR code to log your attendance after reviewing the videos.



Procedural Sedation

An updated Procedural Sedation Policy is available on SharePoint. A few important reminders below:

- We must perform and document a **Pre-Sedation Assessment** prior to performing Procedural Sedation. This should be performed in EPIC prior to the start of the procedure.
- There should be separate **informed consents**: one for the planned procedure and one for the procedural sedation.
- All patients undergoing procedural sedation should have continuous waveform ETCO2 monitoring.
- Upon discharge, we should be providing patients with **discharge instructions** pertaining to the procedure performed, as well as to the sedation.

Malignant Hyperthermia

- The MH cart is present in CCT Room 3 on the left (yellow cart) just below the MH poster.
- Dantrolene (Ryanodex) is located in drawer 1 of the yellow malignant hyperthermia cart.
- The full malignant hyperthermia policy is located on SHAREPOINT, Policies and Procedure Section, Under "Hospital Wide Procedures" in alphabetical order titled Malignant Hyperthermia; please review, especially Attachment B (page 6) in the policy for non-operating room management of Malignant Hyperthermia.

Post Cardiac Arrest Targeted Temperature Management

We have a recently updated Post Cardiac Arrest Targeted Temperature Management Institutional Policy available on SharePoint. To find the complete policy, please go to SharePoint and type in the Policy Search "Cardiac Arrest;" The Policy is Titled "Targeted Temperature Management following Cardiac Arrest." A poster highlighting the main CCT relevant Critical Actions for Post Cardiac Arrest TTM (designed by Dr. Watson) is posted in CCT for point of care reference. The Altrix Stryker device for surface TTM is located in CCT 3 next to the Malignant Hyperthermia Cart.

Neurocritical Care Patients

- **Traumatic** Intracranial hemorrhages → Trauma & Neurosurgery Consultants per TBI and Trauma Team Activation Guidelines
- **Nontraumatic** intracranial hemorrhages/hemorrhagic stroke syndromes (e.g. Spontaneous ICH, SAH) → Stroke & Neurosurgery Consults
- **Patients going to NeuroICU** → **contact NeuroICU Attending directly** (contact info list on AMION)