POLICY STATEMENT:

It is the policy of the Texas Tech University Health Sciences Center (TTUHSC) Ambulatory Clinics to standardize the contents of all crash carts when utilized and provide quality control of all emergency equipment.

SCOPE:

This policy applies to all TTUHSC Ambulatory clinics operated through its schools.

POLICY:

1. Each department will determine the need for and type of emergency medical equipment to be utilized in their area.

2. Crash carts will be maintained and supplied in accordance with the crash cart minimum requirements list (see 2.03.A. Crash Cart Supplies and Drugs). All other drug boxes or emergency kits will be stocked in accordance with the department’s needs.

3. Additional supplies and/or equipment may not be added to the crash cart.

4. If additional equipment or medications are required by a clinical area, it must be maintained and stored separately.

PROCEDURE:

1. Crash Carts:
   a. Crash carts should be locked. Once a month all HSC clinic carts should be opened and checked for outdated supplies. Internal and external equipment should be checked by ensuring proper function of oxygen tank/gauge, suction equipment, AED. Every HSC clinic should participate in the monthly checking whether it be jointly with the housing clinic or by alternating the responsibility (see 2.03.B. Emergency Equipment Checklist). All nurses should be familiar with the cart contents and content locations (see 2.03.C.Amarillo, 2.03.C.Lubbock, 2.03.C.Odessa, Emergency Equipment Inventory).
   b. Medication stocks must be checked monthly for expired drugs during the open checking procedure. If drugs are to expire within 30 days, they should be replaced to assure that a medication does not expire before the next scheduled open monthly check.
   c. Crash carts checks should be documented on the lists maintained on the cart.
   d. Whenever the integrity of the lock has been altered, the cart should be opened and the entire contents of the cart should be checked.
   e. Restocking after use:
      1) The Nurse Manager/Head Nurse or designee from the clinic that used the cart will be responsible for restocking.
2. Drug Box or Other Emergency Equipment:
   
a. A drug box should contain a supply of drugs, approved by the Department Professional Staff, for use in emergencies only. A list of the contents should be maintained for monthly inspections.

b. The emergency drug supply will be stored in a clearly marked portable container.

c. An expiration label should be placed on the drug box to insure that no expired drugs remain in the box. The earliest expiration date should be written on the label, and a designated nurse will be responsible for replacing the medication when the expiration date is reached.

d. The emergency drug boxes should be inspected monthly by the Nurse Manager/Head Nurse or a designee. The lock will be broken to obtain entrance to the drug box, medications checked and the lock replaced. Inspections should be documented.

APPROVAL AUTHORITY:

This policy shall be recommended for approval by the Joint Ambulatory Policy Committee to the Council of Deans.

RESPONSIBILITY AND REVISIONS:

It is the responsibility of the Joint Ambulatory Policy Committee to review and initiate necessary revisions based on collaboration and input by and through Quality Improvement/Performance Improvement, Risk Management and the Office of Institutional Compliance.

RIGHT TO CHANGE POLICY:

TTUHSC reserves the right to interpret, change, modify, amend or rescind this policy in whole or in part at any time to reflect changes in policy and/or law.

CERTIFICATION:

This policy was approved by the Council of Deans on April 7, 2016.

Attachments

2.03.A – Crash Cart Supplies and Drugs
2.03.B – Emergency Equipment Check List
2.03.C.Amarillo – Emergency Equipment Inventory
2.03.C.Lubbock – Emergency Equipment Inventory
2.03.C.Odessa – Emergency Equipment Inventory