

**Effective Date:** 9/2025

**Initial Effective Date**: 3/3/2024

**TITLE: Code Cart Procedure** 

**Policy Superseded: 3364-100-45-10** 

**Responsibility:** All code carts will be uniformly and fully equipped throughout the University of Toledo Medical Center to facilitate cardiopulmonary and cerebral resuscitation.

<u>Purpose:</u> The purpose of the code cart procedure is to standardize the appearance and contents of all code carts so that they are fully functional and easily recognizable to those persons attempting cardiorespiratory and cerebral resuscitation. Additionally, this guideline establishes the workflow for cart review, post code, when items are reported missing.

## **Procedure:**

- All code carts will be standardized as bright red carts.
- 2. Each code cart should have a monitor-defibrillator which will not be removed from the code cart except for cardiorespiratory resuscitation.
- 3. The locations of the code cart will be determined by the Medical Executive Committee with input from the Code Blue Committee (see appendix A).
- 4. All code carts will be identical and therefore interchangeable.
- 5. a. Nursing/Ancillary departments will be responsible to check that the breakaway lock is intact on the code cart, oxygen tank is at an adequate PSI for use, and presence of the backboard on the cart. The function of the defibrillator/monitor machines will be checked according to the Lifepak 20 Operators Checklist. If deficiencies are discovered, they will be corrected by that department or notification to the responsible department will occur.
  - b. Respiratory Care will be responsible to check that the breakaway lock on the Broselow bag is intact. If deficiencies are discovered, they will be corrected by Respiratory Care. Items to be re-stocked after use are the responsibility of the Respiratory Care department.
  - c. Due to access restrictions in the following areas, CVL, OR, Cardiac Rehab Phase II & III (Morse Center), Medical Mall, Endoscopy Unit, Outpatient Physical Therapy and George Isaac Center, the daily checks described in (a) will be the responsibility of department management.
  - d. It will be the responsibility of department to check the function of the defibrillator/monitor machines on a daily basis in the acute care areas that provides care to patients on a 24/7 basis. Other patient care areas that have operational hours that are not 24/7 will have the defibrillator/ monitor machines checked during normal hours of operation. If a defective machine is discovered, it will be exchanged.

- 6. After use, the code cart will be restocked by Pharmacy and Distribution Services (supply chain). Those individuals doing the restocking will sign their names on an inventory (check-off list). The check-off list will remain in those departments.
- 7. All code carts will be checked by Respiratory Care, Pharmacy, and Distribution Services (supply chain) at six-month intervals to check for any outdated or missing items.
- 8. It is the responsibility of Respiratory Care to exchange the code cart immediately at the conclusion of a code, and to take the used cart to Pharmacy.

**MISSING ITEMS:** In the event items are considered to be missing during or before a code blue, the cart must be reviewed by the applicable departments to ensure compliance with stocking procedures.

- 1. Items missing from the code cart must be logged on the code debriefing sheet and the House Supervisor/Lead RN/designee alerted to the missing items.
  - These code sheets shall be placed aside and used for follow-up once the investigation is completed.
  - Physical review of the cart should occur within 24 hours to ensure timely re-stocking and availability of the cart for use.
  - Findings should be reported within 48 hours. Reports include follow-up on the code debriefing sheet that the investigation was completed, as well as documented in the Patient Safety Net application for process improvement tracking.
- 2. The House Supervisor/Lead RN/designee should perform a visual inspection of the room to ensure items were not displaced prior to the cart leaving the floor.
- 3. The Respiratory therapist will be alerted that the cart has missing items. The cart should be taken to the Pharmacy department, "as is" except for the securement of sharps (do not throw away any non-sharps items opened and on top of the cart).
- 4. The cart will be sequestered in Pharmacy for review of missing items.
  - Missing medications will be investigated and confirmed by the Pharmacy team.
  - Respiratory therapy will investigate and confirm all other missing items from the cart.

Appendix A: Code Cart Locations



Code Cart Locations update 3...

Appendix B: Code Cart Sheet

CODECART SHEET .xlsx

Approved by:

Melissa Kukiela, BSRC, RRT Director, Respiratory Care Initial effective date: 3/3/2024

Review/Revision Completed by: Melissa Kukiela, BSRC, RRT

Director, Respiratory Care Code Blue Committee Review/Revision Date: 7/2024 9/2025

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