

**NURSING SERVICES
EMERGENCY TROLLEY CHECKLIST**

WARD/ UNIT:.....

YEAR.....

NO	ITEMS	DATE (WEEKLY)								
	TOP SHELF	Max	Min	Expired						
1	Defibrillator	1	-							
2	ETT Tube Size:		-							
	6.5	1	-							
	7.0	1	-							
	7.5	1	-							
	8.0	1	-							
3	Introducer (Adult)	1	-							
4	Adult Airway size: 3, 4, 5	1/1/1	-							
5	Pead Airway size: 0, 00, 1,2	1/1/1/1	-							
6	KY Jelly	1	-							
7	Laryngoscope Blade:									
8	Adult : 2, 3, 4.	1/1/1	-							
9	Pead : 0, 00, 1	1/1/1	-							
10	Laryngoscope Handle Adult/Pead	1/1	-							
11	Wooden Spatulla	1	-							
12	Cotton Tape/Plaster	1								
13	Batteries (Small , Medium)	2/2	-							
14	Mag gill Forcep (Adult & Pead)	1/1	-							
15	Yaunker Suction(Adult)	2	1							
16	ECG Electrodes: (Adult & Pead)	1Pack	-							
17	Defib Pad	1 Pack	-							
18	Torch Light	1	-							
19	Scissors	1	-							
20	Bougie	1	-							
21	Dis. Glove	1 Box	-							
22	Electrode Jel	1	-							
23	Oxygen Tank with Regulator	1	-							
24	Sharp Container	1	-							
25	Stethoscope	1	-							
26	Chest Clamp	2	-							
27	AED Cable	1	-							

NO	1st DRAWER	DATE (WEEKLY)									
	LIST OF DRUG / DATE	Max	Min	Expired							
1	IV.Adrenaline 1mg/ml	10	5								
2	IV. Adenosine 3mg/ml	4	2								
3	IV. Atropine 1mg/ml	6	3								
4	IV. Amiodarone 150mg/3ml	4	2								
5	IV. Calcium Gluconate 10% 1g/10ml	2	1								
6	IV. Dobutamine 250mg/20ml	2	1								
7	IV.Dopamine 200mg/5ml	3	1								
8	IV.Frusemide20mg/2ml	2	1								
9	IV. Hydrocortisone 100mg	2	1								
10	IV. Lignocaine HCL 1% 50mg/5ml	2	1								
11	IV. Phenylephrine 1mg/ml	1	0								
12	IV. Sodium Bicarbonate 8.4%/50ml	2	1								
13	IV. Verapamil 5mg/2ml	1	0								

NO	2nd DRAWER	DATE (WEEKLY)									
	ITEM /DATE	Max	Min	Expired							
1	Syringe 50cc	2	1								
2	20cc Syringe	2	1								
3	10cc syringe	4	2								
4	5cc Syringe	4	2								
5	3cc Syringe	4	2								
6	1cc Syringe	2	1								
7	Yellow Stoper	2	1								
8	Vasofix/introcaïn Size:										
	14	2	1								
	16	2	1								
	18	2	1								
	20	2	1								
	22	2	1								
	24	2	1								
9	3 Way Stop Cock	2	1								
10	Angiocath Size :14, 16	2/2	1/1								
11	3 Way Stopcoch 10cm	2	1								
12	Micropore Plaster (1/2, 1")	1/1	-								
13	Alcohol Swab	10	5								
14	Perfusor Tubing	5	3								
15	Intrafix Primline	2	1								
16	Blood Administration Set	2	1								
17	Mini Spike V Green	2	1								
18	Needle Size:										
	18	5	2								
	21	5	2								
	23	5	2								
	25	5	2								

NO	3rd DRAWER	DATE (WEEKLY)									
	ITEM / DATE	Max	Min	Expired							
1	NG Tube Size:										
	6	2	1								
	8	2	1								
	10	2	1								
	12	2	1								
	14	2	1								
	16	2	1								
2	Suction Catheter Size:										
	6	2	1								
	8	2	1								
	10	2	1								
	12	2	1								
	14	2	1								
	16	2	1								
3	Laryngeal Mask Size:										
	3	1	-								
	4	1	-								
4	Strile Glove Size:										
	6.0	1	-								
	6.5	1	-								
	7.0	1	-								
	7.5	1	-								
	8.0	1	-								
5	ET Tube Adult and Pead Size:										
	2.0	2	1								
	2.5	2	1								
	3.0	2	1								
	3.5	2	1								
	4.0	2	1								
	4.5	2	1								
	5.0	2	1								
	5.5	2	1								
	6.0	2	1								
6	Tracheostomy Tube: Size 7.0 mm	2	1								
7	Nasopharyngeal Airway size 6.0, 7.0	1/1	-								

NO	4rd DRAWER	DATE (WEEKLY)									
	ITEM / DATE	Max	Min	Expired							
1	Adult Ambu Bag + Mask	1	-								
2	Wall Oxygen Flowmeter +Humidifier	1	-								
3	Receiving Tray	1	-								
4	PPE (Goggles, Mask, Apron)	1/1/1	-								
5	Oxygen Mask and Nasal Cannula:										
	• Adult HFM, O2 Face Mask	1/1	-								
	•Adult Nasal Cannula	1	-								
	•Pead HFM, O2 Face Mask	1	-								
	•Pead Nasal cannula	1	-								
6	Pead Ambu Bag + Mask	1	-								
7	Neonate Ambu bag + Mask	1	-								
	SIDE COMPARTMENT										
1	N/Saline x 1	1	-								
2	D/Saline x 1	1	-								
3	Gelafusin x 1	1	-								
4	S. Lactate x 1	1									
5	1/2 N/Saline x 1	1	-								
6	1/5 Dex Saline x 1	1	-								
7	D 5%	1									
8	D10%	1									
STAFF SIGNATURE											
STAFF NAME											

