

## ECLS Specialist Shift Checks in addition to routine patient care

<b>Hourly</b>	Pump pressure Alarm limits P1 max 350mmHg, P2 max 300mmHg and Flow limits 0.5L below and 0.5L above)	ACT first 12 hours	Sweep gas FIO2 and flow rate attached to wall supply. Spare full oxygen bottle	Water heater temperature and water level	<b>Oxygenator Checks</b>  exhaust port clear?  Air at top of oxygenator?  Clots in oxygenator?	ECMO circuit walkthrough "tip to tip"  Sutures? Cable ties? Pigtails finger tight? 3 way taps correct position?	Blood in P1 or P2 lines?		
<b>4 hourly</b>	Patient ABGs								
<b>6 hourly</b>	APTT	"Cough" the oxygenator							
<b>12 hourly Every shift change</b>	Emergency equipment checked Clamps, O2 cylinder full and open at valve	Main and Back up console plugged in to mains. Back up console working correctly	Spare ECLS circuit wet primed at bedside	Perfusionist contact details &  ECLS Consultant contact details	Smart sites on ports	Re-zero pressure transducers	FBC & Coagulation studies	U&E's, Ca, PO4, Mg, LFTS, LDH, plasma free haemoglobin	Perfusionist or ECLS Nurse to take pre/post oxygenator blood gas as indicated
<b>24 hourly</b>	Weight in Kgs	CXR	Arterial line blood cultures						
<b>72 hourly</b>	Cross match	Change smart sites							

