

CODE CART SCAVENGER HUNT

OBJECTIVES:

Instructions:

1. Pick up the teaching code cart from the central supply room on the ground floor
2. Briefly name actively deteriorating states for the clinical scenarios provided
3. Understand equipment needs for the initiation of treatment in certain rapid response/code scenarios
- 4. Familiarize yourself with code cart content**
5. Return the contents of the teaching code cart to its original place
6. Return the teaching code cart to the central supply room on the ground floor

CODE CART SCAVENGER HUNT CASE #1

Jenny is a 10 year old girl with ALL s/p induction chemotherapy who was admitted for fever and neutropenia. She has a port for IV access. A rapid response was called for tachycardia and borderline blood pressures.

1. What is going on with this patient?
2. How would you treat this patient?
3. Which items would you require to initiate treatment?

CODE CART SCAVENGER HUNT CASE #1

1. What is going on with this patient?
Jenny most likely has compensated septic shock.

2. How would you treat this patient?
Jenny needs aggressive fluid hydration with NS or LR.

3. Which items would you require to initiate treatment?
 - a. Since port may be only IV access, consider initiation of a shorter, large bore PIV
 - i. IV start equipment: PIV start kit, IV catheters, T-connector [must be flushed], NS flush
 - b. NS fluid
 - c. Spike for fluid bag
 - d. 60 cc syringe
 - e. +/- IV tubing with stopcock

Please locate the above items within the code cart.

CODE CART SCAVENGER HUNT CASE #2

Carla is a 16 year old girl with SLE who is getting a rituximab infusion. She has a Power PICC for IV access. A rapid response is called for tachycardia, hypotension, dyspnea, nausea and rapidly progressive urticaria.

1. What is going on with this patient?
2. How would you treat this patient?
3. What items would you need to treat this patient?

CODE CART SCAVENGER HUNT CASE #2

1. What is going on with this patient?

Carla is in anaphylactic shock.

2. How would you treat this patient?

Carla will require intramuscular epinephrine for anaphylaxis. With intramuscular dosing, we use epinephrine 1:1000, 0.01 mg/kg IM. She may need fluid resuscitation, antihistamines, steroids and albuterol.

3. What items would you need to treat this patient?

- a. See case #1 for fluid resuscitation needs
- b. IM needle for administration of epinephrine
- c. Epinephrine 1:1000

True/False: Epinephrine 1:1000 is located in the code cart.

Please locate the IM needle for epinephrine administration in the code cart.

Part 2: Carla develops stridor, and the team leader requests preparation for emergent intubation. Pharmacy is drawing up medications for rapid sequence intubation. What items will be required for rapid sequence intubation?

CODE CART SCAVENGER HUNT CASE #2

Part 2: What items will be required for rapid sequence intubation?

1. Appropriate size mask for bag mask ventilation
2. Ambubag or anesthesia bag for bag mask ventilation
3. Laryngoscope
 - a. Blade
 - b. Handle
4. Endotracheal tube
 - a. Dependent on the upper airway edema, you may need to have smaller sizes available. Consider cuffed ETT 6, 6.5 and 7.
5. Stylet
6. Syringe, 10 cc [for cuff inflation]

Please locate the above items on the code cart.

CODE CART SCAVENGER HUNT CASE #3

Jose is a 1 month old ex-term baby boy who was admitted for acute respiratory distress and dehydration due to RSV bronchiolitis. A code blue is called for apnea. The bedside nurse has initiated bag mask ventilation, but the patient has a heart rate of 40 with cap refill of 3-4 seconds.

1. What is going on with this patient?
2. How would you treat this patient?

CODE CART SCAVENGER HUNT CASE #3

1. What is going on with this patient?

Jose has bradycardia with poor perfusion likely due to respiratory failure.

2. How would you treat this patient?

CPR should be initiated.

3. Where are the documentation forms for Code Blue located?
4. Where is the PALS Algorithm card located?
5. Find the neonatal pads for the Zoll which can be used to monitor CPR efficiency.
6. Find the neonatal blood pressure cuff.

During CPR, you notice that the abdomen is becoming increasingly distended and bag mask ventilation appears to be more difficult.

7. Why is the abdomen more distended?
8. How would you treat this?
9. What items would you need?

CODE CART SCAVENGER HUNT CASE #3

3. Where are the documentation forms for Code Blue located?
On the side of the code cart on a clipboard
4. Where is the PALS Algorithm card located?
On the side of the code cart on a clipboard
5. Find the neonatal pads for the Zoll which can be used to monitor CPR efficiency.
Connect the neonatal pads to the Zoll.
6. Find the neonatal blood pressure cuff.
Connect the neonatal blood pressure cuff to the Zoll.
7. Why is the abdomen more distended?
Abdominal distention is common with bag mask ventilation. As air is being pushed into the lungs, some will be pushed through the esophagus to the stomach.
8. How would you treat this?
You would decompress the abdomen.
9. What items would you need?
 - a. Oral gastric tube
 - b. Large syringe

Please locate these items on the code cart.