



**OBSTETRICS AND GYNAECOLOGY
CLINICAL PRACTICE GUIDELINE**

Resuscitation trolley / warmer / cart checking and equipment (adult and neonatal)

Scope (Staff):	WNHS Obstetrics and Gynaecology Directorate staff
Scope (Area):	Obstetrics and Gynaecology Directorate clinical areas at KEMH

This document should be read in conjunction with this [Disclaimer](#)

Aim

- To ensure that all minimum requirements for adult and neonatal resuscitation equipment are met in line with the Australian Resuscitation Council.

General points (adult and neonatal)

1. All nurses and midwives should be orientated to checking the resuscitation trolley / warmer / carts in their work area.
2. Maintain the sterility of packets by not writing on, or highlighting, expiry dates.
3. Checklists approved and supplied by the resuscitation and neonatal committees should not be altered (e.g. to contain additional items) without the approval of the respective committee.
4. The trolley/ warmer/cart should not have additional unnecessary equipment (that is not listed on the checklist).
5. A checklist should be attached to the trolley/warmer/cart at all times.
 - The contents must be checked against the list attached to the trolley (note- depending on location, individual trolleys may have extra equipment and supplies, and these will be noted on the individualised checklist attached to the trolley).



Adult resuscitation trolley

1. The resuscitation trolley and defibrillator should be **checked weekly (or sooner if the seal is broken)** by a Registered Nurse / Midwife, Enrolled Nurse or Anaesthetic Technician.
 - The person who carried out the check should record and sign this in the record on the trolley.
 - Trolley contents should be **rechecked after each use**.
2. All defibrillators should be checked according to the manufacturer's directions.
3. The oxygen cylinder must be at least $\frac{3}{4}$ full.

Neonatal resuscitation warmer and cart

1. The resuscitation **Warmer** and **Cart** should be checked by a Registered Nurse, Midwife or Enrolled Nurse and the status of checking should be communicated at handover of each shift [**RCA recommendation Feb 2019***]. The person who carried out the check should sign the cart record. Check the:
 - **Neonatal Resuscitation Warmer equipment** AND that the **Neonatal Resuscitation Cart is sealed EACH SHIFT [Recommendation Feb 2019*]**
 - **Cart** full contents **WEEKLY** 
 - Both **Warmer** and **Cart** **rechecked after each use**
 - In areas that are closed over weekends e.g. clinics, **Warmer** / **Cart** should be checked at the start of the next day it re-opens for patient care.
2. Replace equipment as required.
 - Replace air/oxygen cylinders at 10,000kpa.
 - When checking the equipment, expiry dates must also be checked. All equipment that has expired or is close to its expiry date must be replaced immediately.
3. Wipe over Neonatal Resus **Warmer** and **Cart** with hospital grade disinfectant post use and to remove any dust.

*RCA note: In 2019, an RCA recommended to check the neonatal 'trolley' each shift. This wording was amended in Nov 2021 with the supply of additional lockable neonatal 'carts'. Language therefore changed from 'trolley' to 'warmer' and 'cart'. Frequency of checks continues each shift.

References and resources

Australian Resuscitation Council. [The ARC Guidelines \(external website\)](#)

- ANZCOR Guideline 13.1 – Introduction to Resuscitation of the Newborn Infant (2018) (section 5.1 Recommended equipment and drugs)

Related legislation and policies

Department of Health MP 0086/18: [Recognising and Responding to Acute Deterioration Policy](#)

Related WNHS policies, procedures and guidelines

WNHS Policy: [Recognising and Responding to Acute Physiological \(Clinical\) Deterioration](#)
Obstetrics & Gynaecology guideline: [Acute Deterioration: Resuscitation and Life Support](#)

Keywords:	resuscitation trolley, checking, defibrillator, adult, neonatal, resuscitation, checking, resusc, equipment		
Document owner:	Obstetrics and Gynaecology Directorate WNHS		
Author / Reviewer:	Anaesthesia Department; SCN Equipment Nurse; Resuscitation Sub-committee		
Date first issued:	Nov 2018 (v1.0)	Version:	3
Reviewed dates:	Feb 2019 (v1.2); March 2019 (v1.3); Nov 2019 (v1.4); August 2020 (v2.0); Nov 2021 (v3)	Next review date:	Nov 2024
Supersedes:	In Nov 2021, version 3 supersedes v2.0 (dated Aug 2020)		
Approved by:	Perioperative Services Management Sub Committee (adult section)	Date:	28/10/2021
	WNHS Resuscitation Sub-Committee	Date:	02/11/2021
Endorsed by:	Obstetrics and Gynaecology Directorate Management Committee [OOS approved with Medical and Nurse Midwife Co Directors]	Date:	26/10/2021
Noted by:	CAHS Neonatal Coordinating Group (neonatal section)	Date:	23/11/2021
NSQHS Standards (v2) applicable:	<input checked="" type="checkbox"/>  1: Clinical Governance <input type="checkbox"/>  2: Partnering with Consumers <input type="checkbox"/>  3: Preventing and Controlling Healthcare Associated Infection <input checked="" type="checkbox"/>  4: Medication Safety	<input type="checkbox"/>  5: Comprehensive Care <input type="checkbox"/>  6: Communicating for Safety <input type="checkbox"/>  7: Blood Management <input checked="" type="checkbox"/>  8: Recognising and Responding to Acute Deterioration	

**Printed or personally saved electronic copies of this document are considered uncontrolled.
Access the current version from WNHS HealthPoint.**

Version history

Version number	Date	Summary
1.0	Nov 2018	First version. History: In Nov 2018 amalgamated two individual guidelines on resuscitation trolley equipment checking dating from Sept 2016. <ol style="list-style-type: none"> 1. Resuscitation Trolley (Adult) Equipment and Checking (dated Nov 2016) 2. Resuscitation Trolley (Neonatal) Equipment and Checking (dated Sept 2016)
1.2	Feb 2019	RCA amendment- check neonatal trolley each shift
1.3	Mar 2019	Minor amendments- 18/3/2019- added anaesthetics technicians to list of staff who check the adult resusc trolley. 22/3/2019- Adjusted two medication names to correct title and quantity in neonatal medication box supplied by pharmacy. Added 'supplied by pharmacy' for the non-PVC bags as per Pharmacy request. Changed name in adult trolley of fluid from Dextrose 10% to Glucose.
1.4	Nov 2019	PACU trolley contents amended
2	Aug 2020	Amendments- brand 'plum pump' changed to 'volumetric pump', masks for airborne precautions added, added GTN, intralipid and glucometer to relevant trolleys
3	Nov 2021	<ul style="list-style-type: none"> • Contents lists removed from guideline- staff to check as per lists attached to each adult resuscitation trolley, neonatal resuscitation warmer and cart (different areas have different requirements as governed by Resuscitation Sub-Committee and Neonatology) • Maintain sterility of packaging- do not write on or highlight expiry dates • New neonatal 'carts' added to store equipment. Language changed from 'trolley' to 'warmer and cart' and whole list updated with additional equipment, individualised to locations that require specialised equipment. • Amended - word 'Defibrillator' removed from neonatal key points – there is no defibrillator on neonatal trolley

This document can be made available in alternative formats on request for a person with a disability.

© North Metropolitan Health Service 2021

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the *Copyright Act 1968*, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.

www.nmhs.health.wa.gov.au