

INTRODUCTION

Crash cart is meant for storage and transportation of vital equipments and drugs which may be required during emergencies . For successful management in cardiopulmonary emergencies in golden hours there is need of appropriate crash cart with awareness of staff regarding its content and location .

AIM

To observe and study the compliance of crash cart's content in Nehru hospital at P.G.I.M.E.R Chandigarh

OBJECTIVES

1.

• To observe the availability of crash cart's contents in wards and ICU's of Nehru hospital at PGIMER Chandigarh

2.

• To assess any deficiency in the contents

Methodology:

Study design : Cross sectional
Observational study

Study area :All the wards & ICU's of Nehru hospital of PGIMER , Chandigarh .

Study duration:8 weeks (April – may 2018
Data collection method : Direct observation with pretested checklist taken from another tertiary care hospital (JIPMER)

Sample Size: 56 C rash carts

Data collection tool :checklist

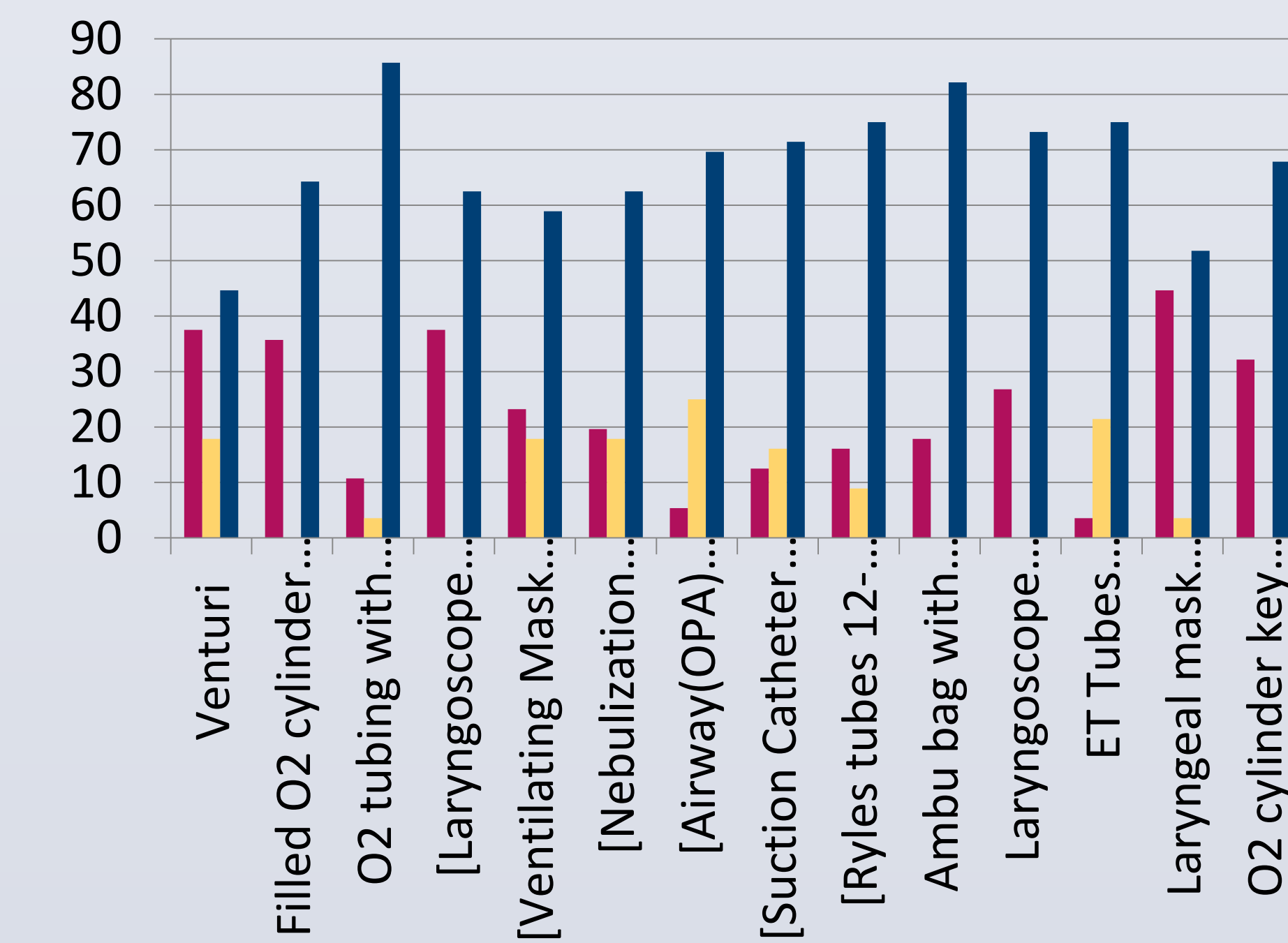
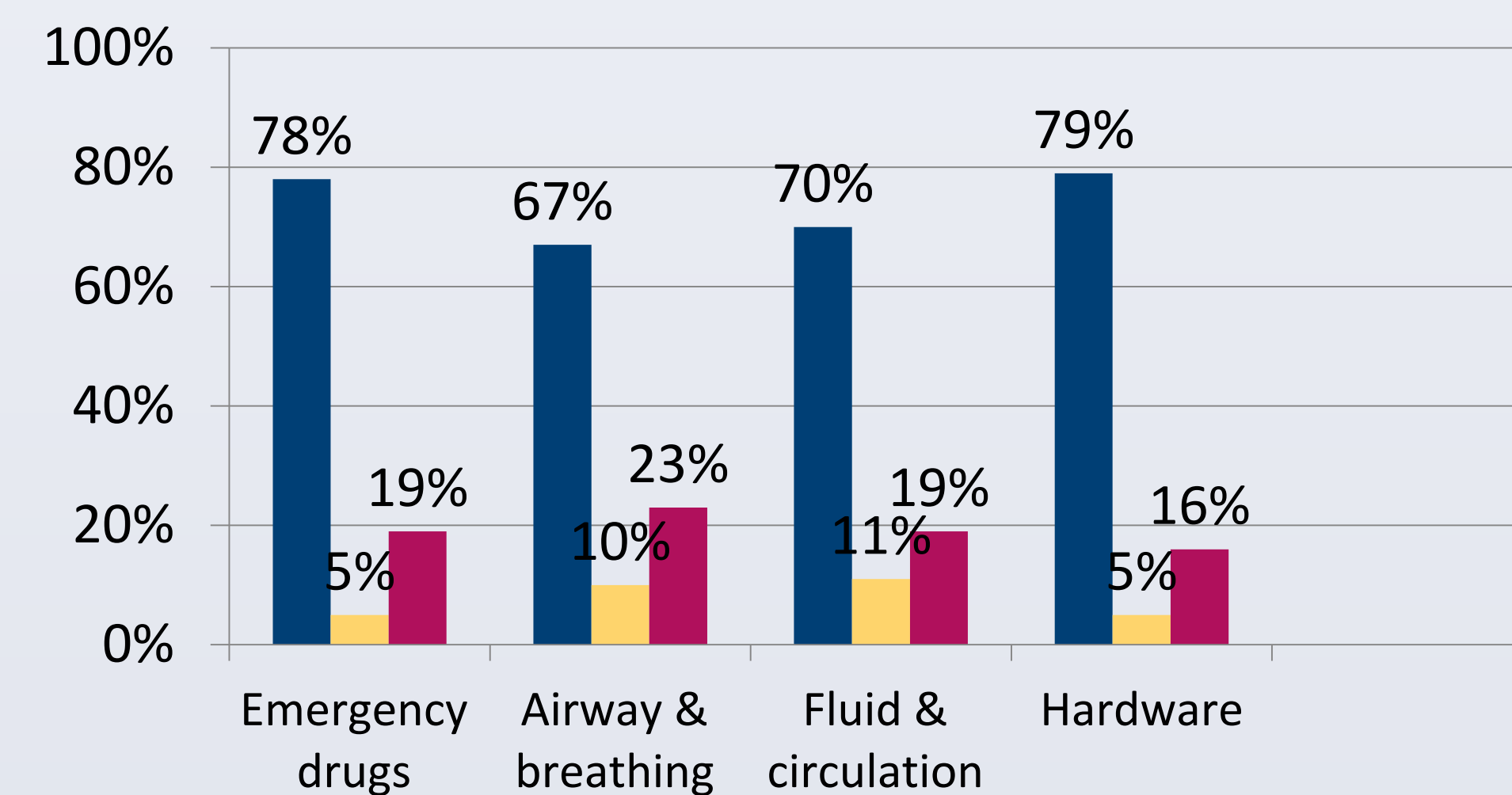
Data procedure :once checklist filled ,and data taken into excel sheet and after evaluation its represented as graphs

DATA ANALYSIS

Data analysis done in two ways

I) Content Analysis

- a)Availability of Emergency drugs (ED)
- b)Airway & Breathing equipments (A& B)
- c) Fluid and circulation Equipments (F& C)
- d) Hardware &(e) Others

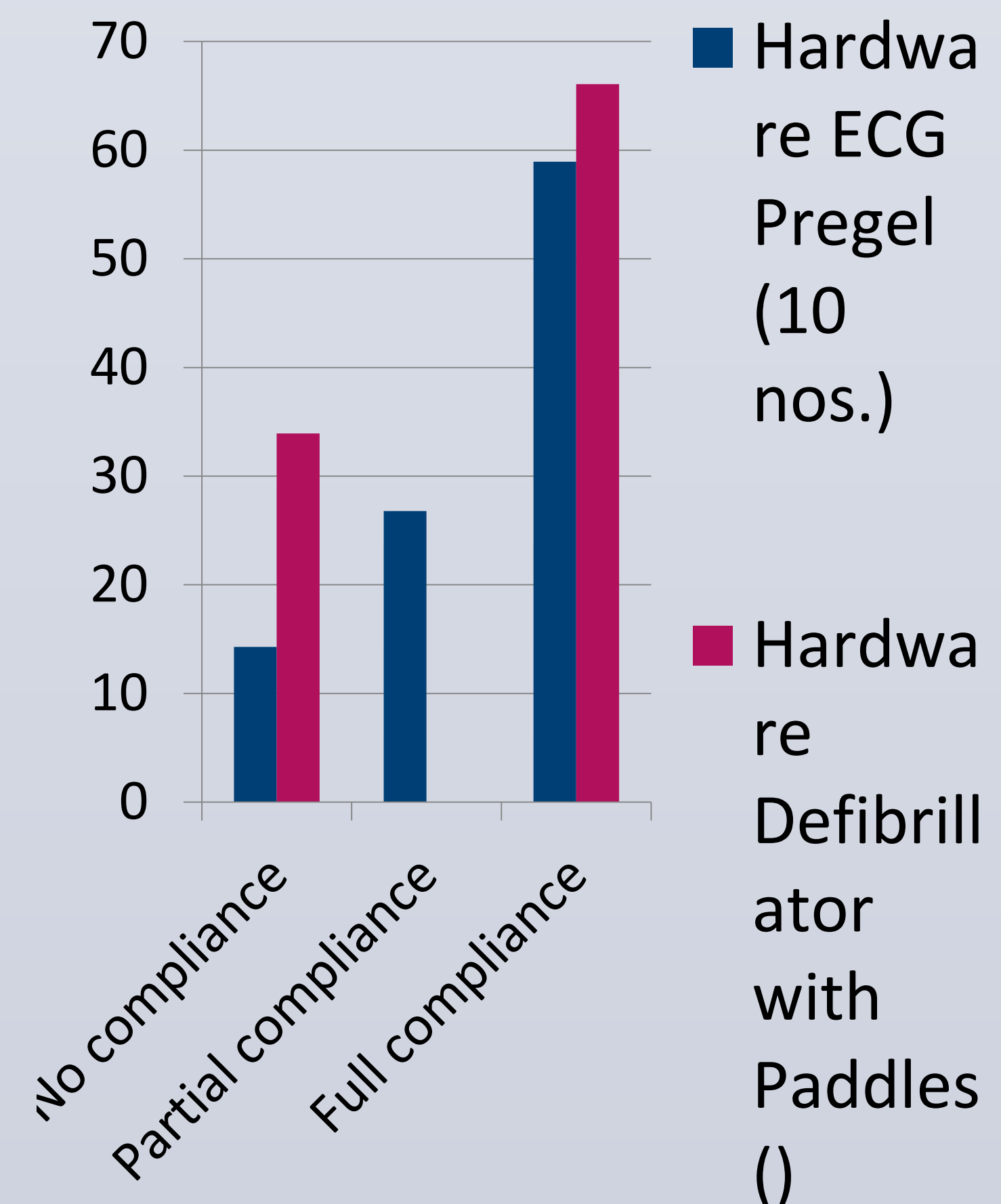
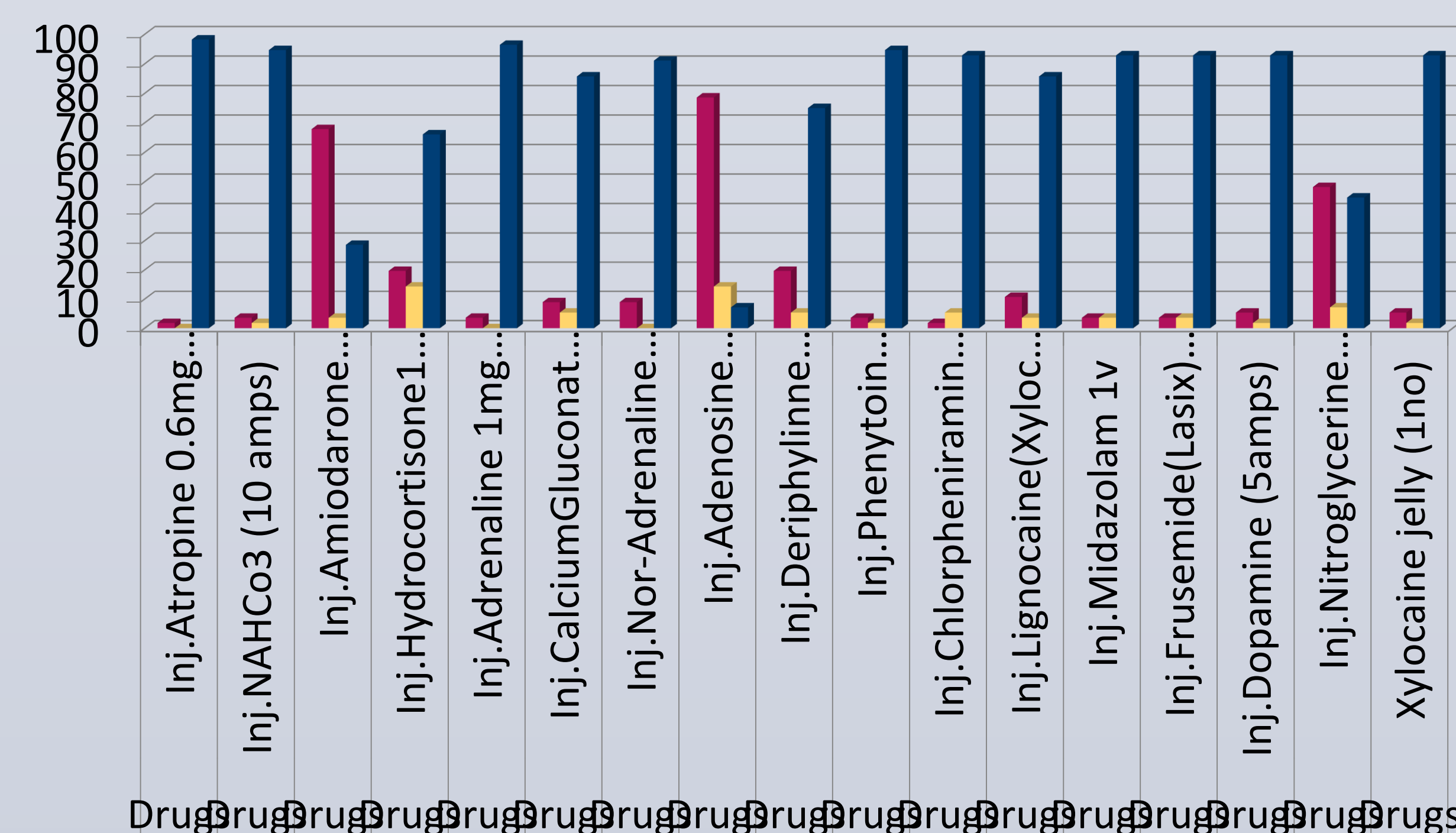
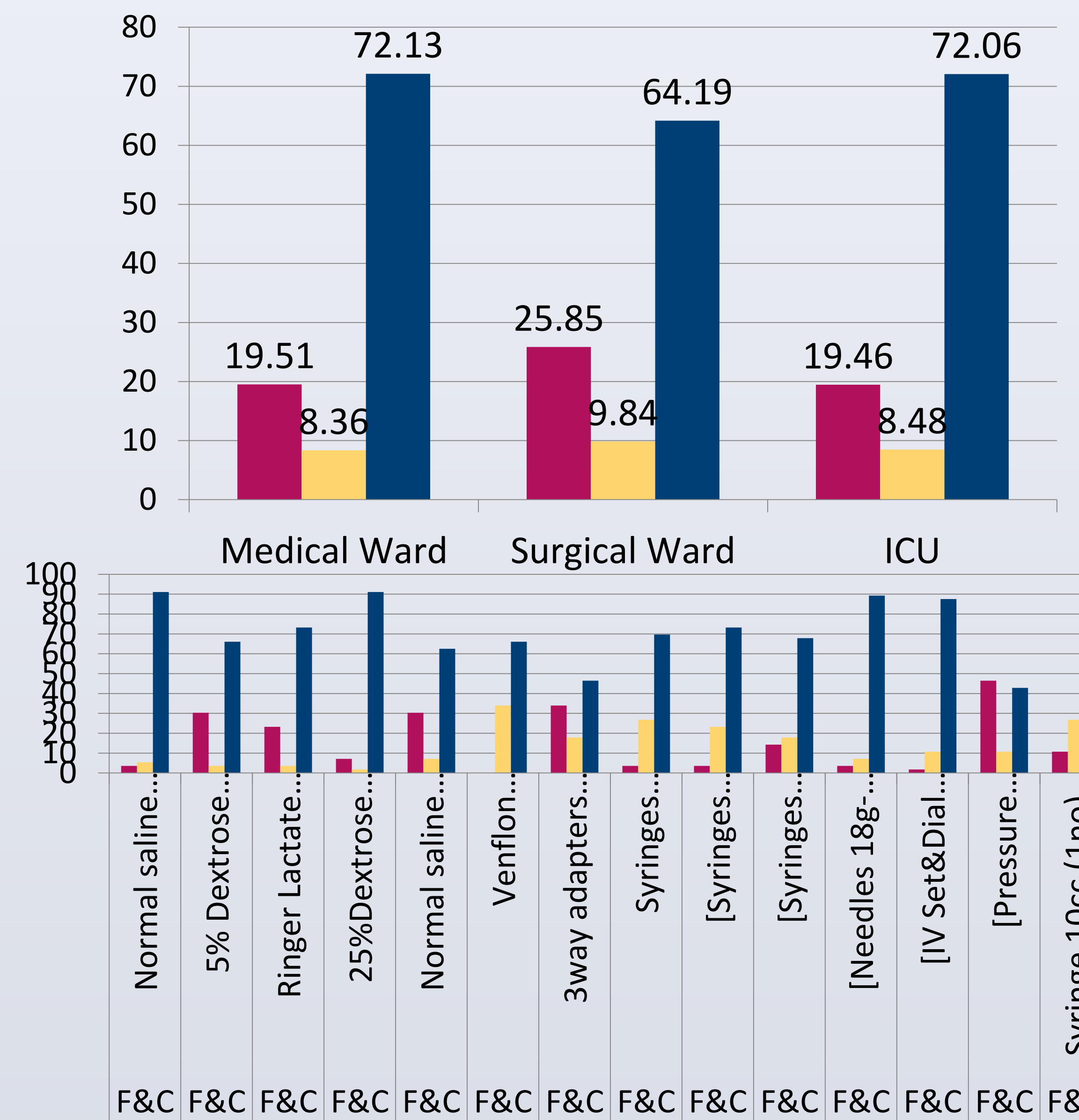


II) Area wise Analysis

(a) Surgical wards

(b) Medical wards

(c) ICU 's



CONCLUSION

- Total crash cart observed = 56
- 30 Crash carts are new and in good condition
- 26 crash carts are old one and out of 26 – 4 are in good condition , 2 needs repair & 20 are unrepairable need s to be replaced

- On Area wise compliance - Total average % compliance of NH
- 74% - Full compliance
- 6% Partial Compliance
- 20 % No Compliance

- ICU 's are more compliance than Medical wards and Medical wards are better than Surgical Wards

- Among Emergency Drugs –some of Cardiac medications (Inj. Adenosine / Inj Amiodarone & Inj NTG have poor compliance which may use in SVT's and Arrhythmias. In deficiency of these drugs we may loose patients

- Defibrillator shows poor compliance some need to repair and require regular checking whether its functional or not on daily basis

- Though PGI is centrally supplied but Filled oxygen cylinders have poor compliance which is big worry for such a big running hospital .

SUGGESTIONS

- 1) A standard checklist with total number of contents in standard quantity should be made and followed strictly
- 2) Regular cross checks/ audits should be done to check the quantity, expiry , near expiry and uniformity
- 3) Mandatory Training session for Nursing staff / Doctors should be included in the Induction programs
- 4) A policy regarding maintenance of crash carts and their refilling should be made and followed .
- 5) Responsibility of maintaining crash carts should be assigned to a person .