Intubation Kit in ICU

Scope

|  |  |  |
| --- | --- | --- |
| Site, Facilities, Business Units | Departments, Divisions, Operational Areas | People applicable to(Medical, Nursing, Allied Health and Health Sciences staff) |
| Fiona Stanley Hospital | Intensive Care Unit  | Medical, Nursing and Pharmacy Staff |

Rationale for Kit

The Intensive Care Unit (ICU) is located on Level 1 and provides intensive care for adults with life-threatening illnesses, injuries or complications. In the case of emergency, quick access to certain medications is essential and potentially life-saving.

The kit is designed to provide rapid access to time critical medications required for intubation in patients experiencing respiratory distress from COVID-19.

Definitions

|  |  |
| --- | --- |
| Medication Kit | Medications decanted out of a central medication imprest point to a tamper evident container in a location within a closer proximity to their likely clinical use. |

Storage of the kit

* The medication kit contents are stored in tamper-proof packaging (i.e. sealed plastic bag or sealable box)
* The kit is to be stored in the ICU non-imprest controlled drug cupboard
* Expiry checking of the kit is the responsibility of the ICU NUM or their delegate
* Receipt, removal and daily inventory checks of the box are to be recorded in the controlled drug register. A second witness is required for all transactions.

Responsibilities

1. Pharmacy is responsible for the compilation of the kit
2. Nursing are responsible for ordering replacement kits
3. The ICU NUM will ensure the expiry date and inventory count of the kits is checked regularly and replaced when expired
4. The ICU NUM ensures that any controlled drug discrepancy in the kit will be dealt with the same way as any other S8/S4R discrepancy

Contents

|  |  |
| --- | --- |
| **Medication**  | **Quantity** |
| Fentanyl 500microgram/10mL | 1 Ampoule |
| Ketamine 200mg/2mL | 1 Vial |
| Metaraminol 10mg/mL | 1 Ampoule |
| Midazolam 5mg/mL | 2 Ampoules |
| Propofol 200mg/20mL | 1 Vial |
| Rocuronium 50mg/5mL | 4 Vials (90 day expiry) |
| Suxamethonium 100mg/2mL | 2 prefilled syringes (90 day expiry) |

Standard Operating Procedure

1. The medications are stored in tamper proof packaging with list of contents and expiry dates visible. Rocuronium and suxamethonium will have a 3 month expiry date once removed from the fridge and stored in the kit. The expiry date will be labelled on the outer packaging along with an individual kit number.
2. The kits are stored in the non-imprest controlled drug cupboard. All kit transactions will require an authorised witness.
3. Use of the medications in the kit is at all times under the instruction of intensive care specialist
4. Receipt, removal and inventory checks of the kit are to be recorded in the controlled drug register. A second witness is required for all transactions.
5. Medications used in the intubation of a COVID-19 patient are not to be returned to the clean utility room The medication kit contents are to be wasted in the pharmaceutical waste bin if unused and this must be documented retrospectively in the controlled drug register.

Related Standards/Policy

NSQHS 9.2.4 –Action is taken to improve the responsiveness and effectiveness of the recognition and response systems.

1. **Standard 1 - Governance for Safety and Quality in Health Service Organisations**

1.1.1 An organisation-wide management system is in place for the development, implementation and regular review of policies, procedures and/or protocols.

1.1.2 The impact on patient safety and quality of care is considered in business decision making.

1. **Standard 4- Medication Safety**.

4.1.1 Governance arrangements are in place to support the development, implementation and maintenance of organisation wide medication safety systems.