

NEWBORN NURSERY EQUIPMENT CHECKLIST

Newborn Nursery

Use a ✓ to indicate agreement with the statement

Emergency #:

- Peds RRT, Adult ERT, DART – 410-955-4444
- NICU – 410-955-5255
- BAT or HAT – 410-955-9444

*Infant warmer present in PACU set in Pre-warm Mode; *Air and oxygen cable connected to gas source; *Stethoscope: Present/Clean; *Temp Probe: Present/Clean; *Baby hat, bulb syringe, cord clamp & pulse oximeter present; *Peds ambu bag, mask, oxygen tubing, T-piece resuscitator present; *Transwarmer not expired; *#6 & #8 Fr suction catheters (2); *Infant warmer drawers stocked; *NeoLog Form present	Cardiac monitor plugged into outlet and charging (1) ECG whip; TenderTrodé Plus™ ECG electrodes; SpO2 cable and sensors; Blue BP cable	Check for presence of (2) vests <u>Location:</u> Top of Emergency Cart	<u>Newborn procedure room equipment:</u> Check function: Suction tubing & canister; #8F & #6F suction catheters; Peds Ambu bag	
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Name _____	Title _____	Initial _____	Name _____	Title _____	Initial _____	Name _____	Title _____	Initial _____
Name _____	Title _____	Initial _____	Name _____	Title _____	Initial _____	Name _____	Title _____	Initial _____
Name _____	Title _____	Initial _____	Name _____	Title _____	Initial _____	Name _____	Title _____	Initial _____

Directions: Read directions under each column. Unless otherwise indicated, use a ✓ to indicate agreement with the statement. Keep completed checklist for one month on the unit (e.g., clipboard, binder), then give completed checklists to Nurse Manager for storage for 7 years on Adult units and 23 years on Pediatric units. Refer to Emergency Equipment Inventory and Defibrillator Check Procedure (GEN322).