**REGISTRO REVISION DE CADUCIDADES MATERIAL CARRO PARADA**

|  |  |  |  |
| --- | --- | --- | --- |
| **Unidad de Gestión Clínica:** |  | **GFH:** |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | |
| **MATERIAL / MES** | | **Ene** | **Feb** | **Mar** | **Abr** | **May** | **Jun** | **Jul** | **Ago** | **Sep** | **Oct** | **Nov** | **Dic** |
| **SISTEMA RESPIRATORIO** | |  | | | | | | | | | | | |
| Balón autohinchable (ambú) con reservorio y alargadera de oxígeno | |  |  |  |  |  |  |  |  |  |  |  |  |
| Cánula Guedel: | * Núm. 3 |  |  |  |  |  |  |  |  |  |  |  |  |
| * Núm. 4 |  |  |  |  |  |  |  |  |  |  |  |  |
| * Núm. 5 |  |  |  |  |  |  |  |  |  |  |  |  |
| Guía intubación | |  |  |  |  |  |  |  |  |  |  |  |  |
| Pilas de laringoscopio | |  |  |  |  |  |  |  |  |  |  |  |  |
| Bala de O2 | |  |  |  |  |  |  |  |  |  |  |  |  |
| Humidificador | |  |  |  |  |  |  |  |  |  |  |  |  |
| Lubricante hidrófilo | |  |  |  |  |  |  |  |  |  |  |  |  |
| Mascarilla de O2 facial transparente: | * Mediana |  |  |  |  |  |  |  |  |  |  |  |  |
| * Grande |  |  |  |  |  |  |  |  |  |  |  |  |
| Mascarilla oxígeno con reservorio | |  |  |  |  |  |  |  |  |  |  |  |  |
| Sonda aspiración: | * Núm. 14 |  |  |  |  |  |  |  |  |  |  |  |  |
| * Núm. 16 |  |  |  |  |  |  |  |  |  |  |  |  |
| * Núm. 18 |  |  |  |  |  |  |  |  |  |  |  |  |
| Tubo endotraqueal: | * Núm. 7 |  |  |  |  |  |  |  |  |  |  |  |  |
| * Núm. 7,5 |  |  |  |  |  |  |  |  |  |  |  |  |
| * Núm. 8 |  |  |  |  |  |  |  |  |  |  |  |  |
| * Núm. 8,5 |  |  |  |  |  |  |  |  |  |  |  |  |
| Mascarillas laríngeas: | * Tamaño 4 |  |  |  |  |  |  |  |  |  |  |  |  |
| * Tamaño 5 |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **FLUIDOS** |  |  |  |  |  |  |  |  |  |  |  |  |
| \*Bicarbonato 1 molar 250 cc |  |  |  |  |  |  |  |  |  |  |  |  |
| Suero fisiológico 100 cc |  |  |  |  |  |  |  |  |  |  |  |  |
| Suero fisiológico 500 cc |  |  |  |  |  |  |  |  |  |  |  |  |
| Glucosado 50% 100 cc |  |  |  |  |  |  |  |  |  |  |  |  |
| Suero glucosado 5% 500 cc |  |  |  |  |  |  |  |  |  |  |  |  |
| Suero ringer lactato 500cc |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MEDICACIÓN** |  |  |  |  |  |  |  |  |  |  |  |  |
| Kit medicación RCP |  |  |  |  |  |  |  |  |  |  |  |  |
| Kit medicación refrigerada |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **MATERIAL / MES** | | **Ene** | **Feb** | **Mar** | **Abr** | **May** | **Jun** | **Jul** | **Ago** | **Sep** | **Oct** | **Nov** | **Dic** |
| **SISTEMA CARDIOVASCULAR** | |  |  |  |  |  |  |  |  |  |  |  |  |
| Agujas IV | |  |  |  |  |  |  |  |  |  |  |  |  |
| Agujas subcutáneas | |  |  |  |  |  |  |  |  |  |  |  |  |
| Catéter venoso: | * Núm. 16 |  |  |  |  |  |  |  |  |  |  |  |  |
| * Núm. 18 |  |  |  |  |  |  |  |  |  |  |  |  |
| * Núm. 20 |  |  |  |  |  |  |  |  |  |  |  |  |
| Electrodos monitorización | |  |  |  |  |  |  |  |  |  |  |  |  |
| Palas adhesivas DESA (paquete) | |  |  |  |  |  |  |  |  |  |  |  |  |
| Gel conductor | |  |  |  |  |  |  |  |  |  |  |  |  |
| Jeringas: | * 5 ml |  |  |  |  |  |  |  |  |  |  |  |  |
| * 10 ml |  |  |  |  |  |  |  |  |  |  |  |  |
| Jeringas de gasometría | |  |  |  |  |  |  |  |  |  |  |  |  |
| Llave tres pasos con alargadera | |  |  |  |  |  |  |  |  |  |  |  |  |
| Sistema bomba infusión | |  |  |  |  |  |  |  |  |  |  |  |  |
| Sistema infusión venosa | |  |  |  |  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **OTRO MATERIAL** | |  | | | | | | | | | | | |
| Apósitos | |  |  |  |  |  |  |  |  |  |  |  |  |
| Betadine | |  |  |  |  |  |  |  |  |  |  |  |  |
| Compresas | |  |  |  |  |  |  |  |  |  |  |  |  |
| Esparadrapo | |  |  |  |  |  |  |  |  |  |  |  |  |
| Gasas | |  |  |  |  |  |  |  |  |  |  |  |  |
| Guantes: | * Pequeño |  |  |  |  |  |  |  |  |  |  |  |  |
| * Mediano |  |  |  |  |  |  |  |  |  |  |  |  |
| * Grande |  |  |  |  |  |  |  |  |  |  |  |  |
| Vendas | |  |  |  |  |  |  |  |  |  |  |  |  |
| Renovación completa de material y documentación\* | |  |  |  |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |  |  |  |
| Apellidos y nombre enfermera responsable  Fecha revisión | |  |  |  |  |  |  |  |  |  |  |  |  |
| Apellidos y nombre auxiliar enfermería responsable  Fecha revisión | |  |  |  |  |  |  |  |  |  |  |  |  |
| \****En la revisión de enero de cada año, se realizará una renovación completa del material y documentación de cada carro*** | | | | | | | | | | | | | |