

Daily Equipment Checklist-ICU

Month and Year:	Unit:	Bed number:
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Check each piece of equipment daily.

- Cleaned daily(detergent&water)
- Alarms set
- No cracks/breaks
- Fully Functional-no error readings
- All consumables eg probes/cables present and functional
- No exposed wires
- Phototherapy lights <1000hrs & all working
- Suction unit-clean liner, tubing and catheter connected. Suction pressure- maximum 20cmH₂O. Suction pressure present.
- Oxygen (flow meter& blender)-aquapack/humidifier changed if used. No air leaks. Flow meters functional.

Equipment item: Record Serial/Equip. numbers below	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Ventilator																															
Nasal Cpap																															
Humidifier																															
Syringe Pump																															
Infusion Pump																															
Patient Monitor																															
ICU Crib																															
Oxygen																															
Suction																															
Stethoscope																															
Action																															
Sign																															