

CRASH CART MEDICATION MAINTENANCE SIMPLIFIED

REAL SOLUTIONS TO REAL CHALLENGES

A 2017 survey of medical professionals identified four major challenges in crash cart medication maintenance:

RISK - Without proper cart maintenance, necessary medications might not be available in the event of an emergency.

TIME - Manually checking and ordering medications isn't efficient for clinic staff members.

COST - Most individuals surveyed had little knowledge of actual costs

PROCESS - It's difficult to manage the contents and status of multiple crash carts.

RISK: WHAT IF THE CRASH CART ISN'T STOCKED?

This is the worst-case scenario. Not only could someone's life be in danger, but the organization could face high-risk exposure. After all, crash cart preparedness isn't optional. It's a directive from the Joint Commission for accreditation. The Joint Commission also recommends and encourages the use of technology for documentation and compliance.¹

DRAMATICALLY SHRINK THE CRASH CART MEDICATION MANAGEMENT TIME DRAIN

With a central platform to manage crash cart medication, organizations have real-time status of the medications. "What once was noted on paper and hung by each cart is now available at a glance with OnTraq dashboard. I can see all my crash carts contents and status online, anytime," said one charge nurse. "This is especially helpful at accreditation inspection time."

HOW IT WORKS:

- The OnTraq web application tracks the expiration dates of the items currently in the crash cart.
- Prior to expiration, the system automatically places a reorder of the soon-to-expire item.
- Replacement items are shipped, and the new items and expiration dates are updated in the system.
- The status of each medication by name, NDC, and expiration date are available online in OnTraq anytime.
- Any medication that is on National Backorder is flagged in the system (Substitutes and/or alternative medications are provided where applicable).

HOW COSTS ADD UP

There are tangible and intangible costs associated with crash cart medication maintenance.

TANGIBLE COSTS:

- Having to purchase in bulk versus smaller quantities (for example, \$100 for a box versus \$4 for single item).
- Wasted medications purchased in bulk that expire; or medications that are short dated by the manufacturer.
- Shipping costs can sometimes be as much as the actual medication when ordered and shipped individually.

INTANGIBLE COSTS:

- Wages paid to check and document inventory, and order replacements (At average wages of \$50 an hour).
- If the staff spends one hour per month checking and ordering medications, that's \$600 per year.
- Potential fines or shutdown for non-compliance.
- Patient harm.

1. <https://www.jointcommission.org/>

A CRASH CART AUTO-REPLENISHMENT PROGRAM REDUCES EMERGENCY MEDICATION MANAGEMENT COSTS

To reduce costs and compliance risks, the Crash Cart Auto-Replenishment (CCAR) program is the ideal solution.

COST REDUCTION BENEFITS INCLUDE

- Flat fee versus monthly fluctuation in expenses. Paid quarterly or annually, provides a flat, pre-budgeted expense item that is easy to predict and manage.
- Reduced costs, saving an organization as much as \$1,851 a month as you can see in this example (not including wasted product).

ONE CLIENT COMMENTED,

"With the replenishment program, I automatically receive new medications right before the expiration date, without having to worry if somebody remembered to place the reorder."

(ACTUAL CUSTOMER LIST)		CCAR	Vendor B (\$)	Vendor C (\$)	Unit of Sale
Med/Item Name	Qty Needed		Ext. Cost	Ext. Cost	
Epinephrine 1:10000 (0.1mg/ml)	4	✓	40	40	
Atropine 1 mg (0.1mg/ml)	4	✓	40	37	
Calcium Chloride 1 gm (100mg/ml)	4	✓	40	53	
Magnesium Sulfate 5gm/10ml (4Meqmg++/ml)	2	✓	20	47	
Sodium Bicarbonate 8.4% 50meq (1MEq/ml)	1	✓	10	15	
Adenocard (Adenosine) 6mg/2ml (3mg/ml)	4	✓	40	292	
50% Dextrose 25gm (0.5/ml)	3	✓	30	49	
Epinephrine 1mg/mL SQ/IM	1	✓	10	12	
2% Lidocaine 100mg (20mg/ml)	4	✓	40	24	
2% Lidocaine Jelly	1	✓	10	28	Box
Pediatric 25% dextrose 2.5gm	1	✓	10	40	Box
NaCl Syringe	6	✓	60	n/a	
Digoxin 500mcg/2ml	1	✓	10	11	
Etomidate 20mg 2mg/ml	1	✓	48	48	Box
Levophed	1	✓	30	180	Box
Amiodarone 150mg (50mg/ml)	3	✓	30	30	
Benadryl 50mg/ml	1	✓	10	5	
Narcan 0.4mg/ml	2	✓	60	76	
Glycopyrrolate 0.2mg/ml	2	✓	20	356	Box
Flumazenil .05mg/ml	2	✓	20	55	Box
Verapamil 2.5mg/ml	2	✓	60	85	
Diltizem (cardizem) 25mg	4	✓	40	n/a	
Albuterol 0.083% 2.5mg/3ml	2	✓	60	139	
Dopamine 400mg/5% D5W	2	✓	20	14	
Lactated Ringers 500ml	2	✓	120	120	Box
0.9% NaCl 250ml	1	✓	120	120	Box
0.9% NaCl 1000ml	1	✓	60	60	Box
Hetastarch 6% 500ml	2	✓	176	176	Case
Intralipids	3	✓	749	749	Case
Totals			\$1650	\$1983	\$2901
Labor			\$0	\$600	\$600
Total			\$1650	\$2583	\$3501
CCAR SAVES YOU:			\$933	\$1851	
Not including waste			\$333	\$1251	

AVOID RISK WITH A SYSTEM THAT WORKS

The best way to avoid risk is to know the crash cart is ready to go at all times. The Crash Cart Auto-Replenishment program provides this peace of mind. Mitigate risk better by using a better process for crash cart management. Practices realize savings and reduce waste by choosing to automate crash cart medication management.



Call your Henry Schein Sales Consultant for more information or call 1-877-523-7468