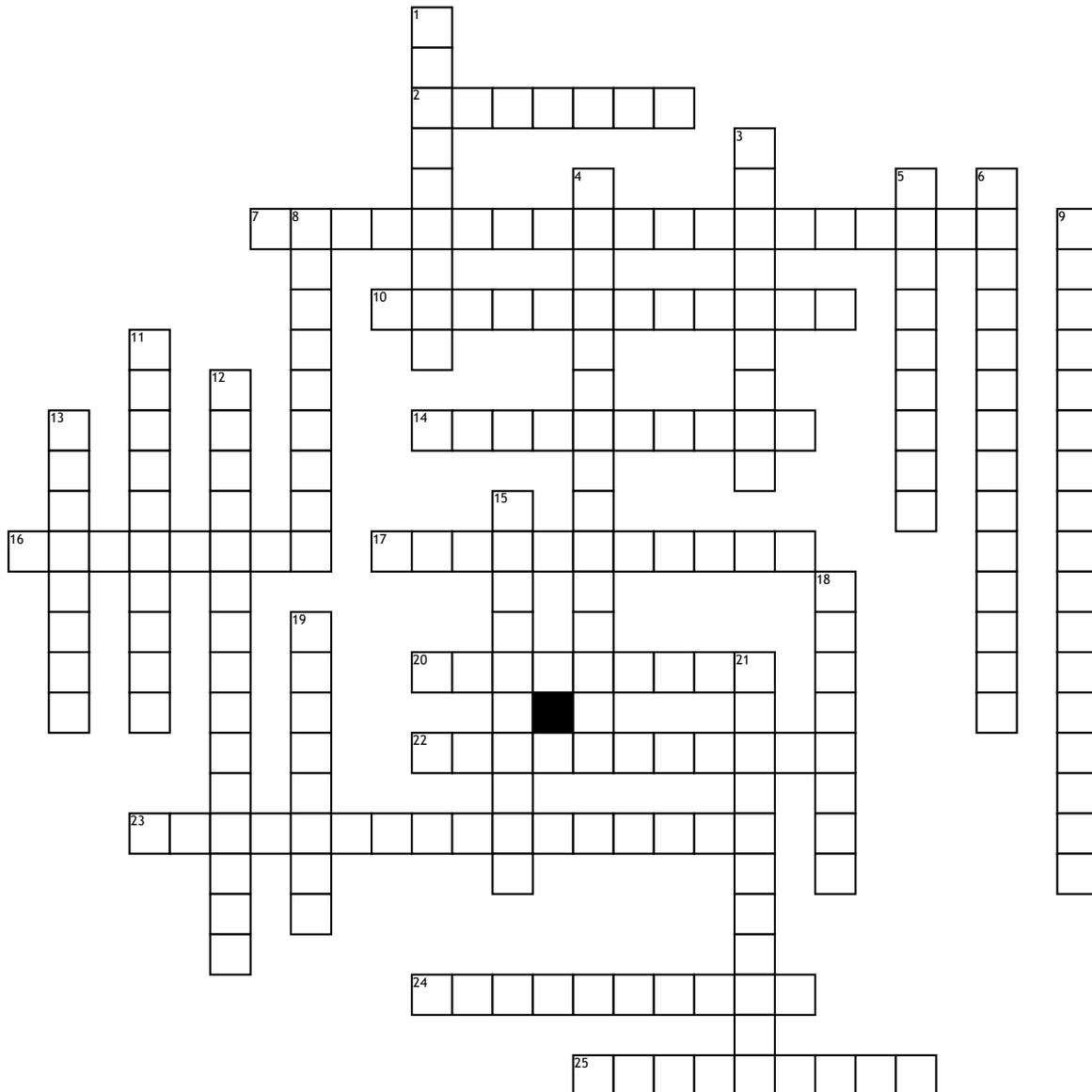


Name: \_\_\_\_\_

Date: \_\_\_\_\_

# Code Blue, RSI, and Crash Cart



**Across**

- 2. IV fluid location in crash cart
- 7. Two medications for RSI that are not located in the Crash Cart or the "Orange Box".
- 10. Considered central access. Preferred over endotracheal route when IV not available.
- 14. Medications stored in the second drawer of the crash cart.
- 16. Second line for symptomatic bradycardia.
- 17. No longer a first line medication.
- 20. Drawer #1 medications
- 22. Best route of administration.
- 23. Indicated for severe hyperkalemia or Ca channel blocker overdose.

24. For reversal of benzodiazepines; can induce Sz's

25. Stabilizes myocardial cell membrane. (ie: Torsades)

**Down**

- 1. Alternative anti-arrhythmic for ventricular arrhythmias. Is also an anesthetic.
- 3. Can cause flatline on EKG
- 4. Levophed for hypotension is a potent \_\_\_\_\_.
- 5. Can be used for RSI sedation or seizures
- 6. Used with dextrose for hyperkalemia
- 8. Anesthetic in RSI box that cannot be used in children <10yo

9. Med with mult. indications inc. hyperkalemia, metab. acidosis, and overdose of acidic medications

11. Anti-arrhythmic that can be given by IVP only when there is no pulse.

12. NMB used first line for ET tube placement.

13. Used for narcotic overdose.

15. Non-depolarizing NMB

18. Helps with pediatric dosing.

19. First line for symptomatic bradycardia.

21. Given as 1mg IVP every 3-5min.