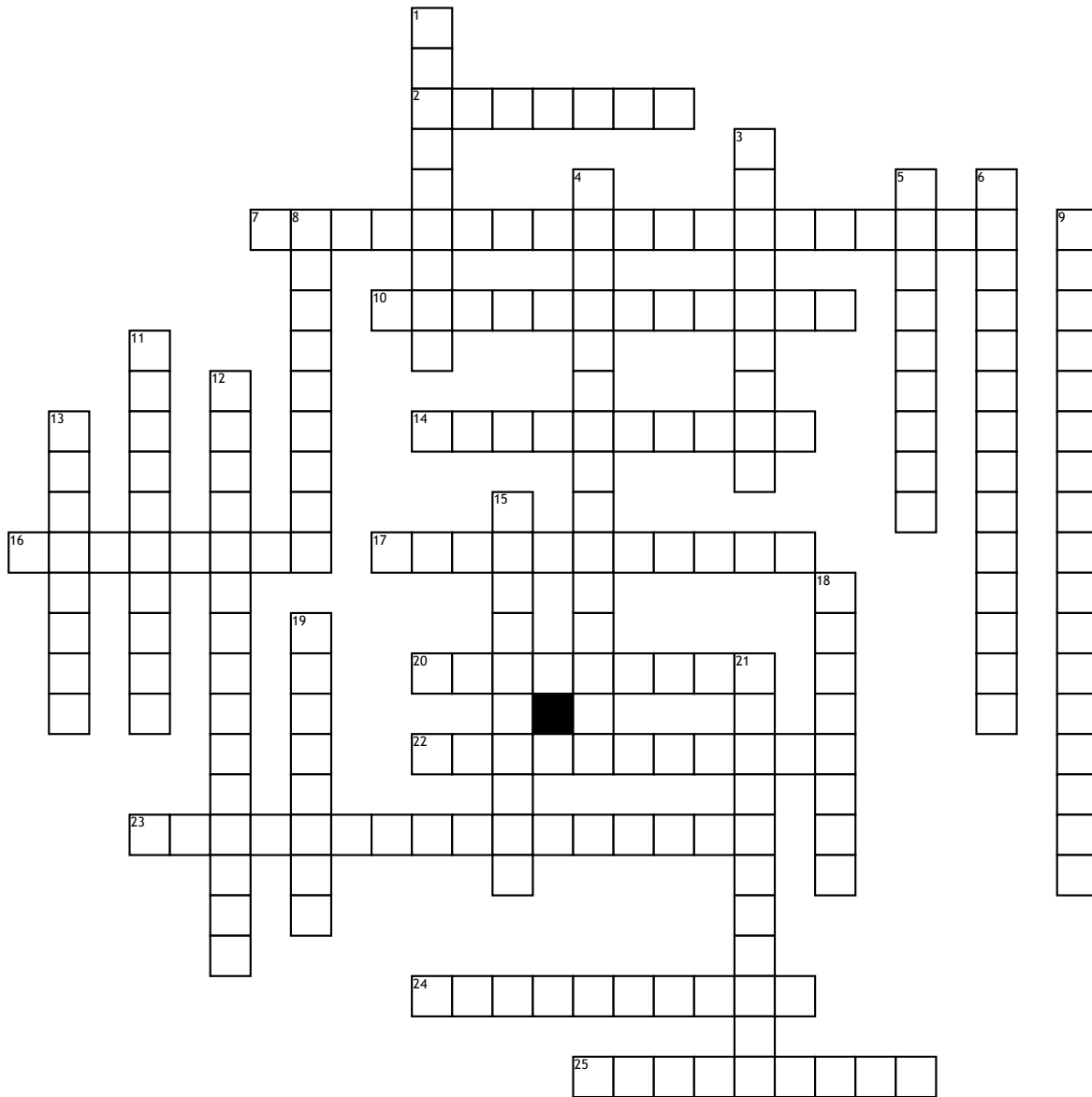


Name: \_\_\_\_\_ Date: \_\_\_\_\_

# 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 arrhythmia's. 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.