SECTION OF EMS AND TRAUMA SYSTEMS
REQUIRED **PARAMEDIC** EQUIPMENT INSPECTION LIST

SERVICE I.D. _____ INSPECTION DATE _____ BODY TYPE (T1) (T2) (T3) RESCUE
VIN _____ MODEL YEAR _____ FD CH DD INT OTHER
DECAL _____-PA VEHICLE LICENSE NUMBER _____ INSPECTOR'S INITIALS _____

STRETCHER, ELEVATING _____(1)
BANDAGE/**EMT** SHEARS _____(1)
HEMOSTAT _____(1)
WINDOW PUNCH/ENTRY DEVICE _____(1)
SCALPEL _____(1)
B/P CUFF/MANOMETER(**Infant, Child, Adult, & Lg. Adult) _____(1 ea.) by Oct 2008**
STETHOSCOPE _____(1)
EXAM GLOVES _____(1 BOX)
ANTISEPTIC HAND CLEANSER _____(1)
ISOLATION KITS _____(2
NEBULIZER _____(1)
BETADINE SOLUTION _____(1 BOTTLE)
O B KIT _____(1)
INTRAOSSEOUS NEEDLES**(Pedi)** _____(2)
STERILE GLOVES _____(4 PAIR)
OPA SET 0-1-2-3-4 _____(1 EACH)
LARYNGOSCOPE HANDLES _____(2)
LARYNG. BLADES (1-4 OR 0-3) _____(1 EACH)
ET TUBE 3 or 3.5 mm _____(1)
ET TUBE 4 or 4.5 mm _____(1)
ET TUBE 5 or 5.5 mm _____(1)
ET TUBE 6 or 6.5 mm _____(1)
ET TUBE 7 or 7.5 mm _____(2)
ET TUBE 8 or 8.5 mm _____(2)
Esophageal Tracheal Multi-Lumen Airway _____(1) by Oct 2008
MAGILL FORCEPS ADULT & PEDI _____(1 EACH)
ADULT & PEDI ET STYLETTE _____(1 **EACH)**
PEDI DRUG CHART or TAPE _____(1)
MONITOR/DEFIBRILLATOR _____(1)
PATIENT CABLES _____(2 SETS)
PEDI DEFIB PADDLES OR PADS _____(1 SET)
ADULT ELECTRODES _____(6 SETS)
PEDI ELECTRODES _____(2 SETS)
EKG PAPER _____(2)
ON-BOARD OXYGEN _____(*)
PORTABLE OXYGEN _____(1)
BAG VALVE:
ADULT _____(1)
PEDI _____(1)
INFANT _____(1)
NASAL CANNULAE _____(2)
OXYGEN MASKS:
NON REBREATHER _____(2)
PEDI- **O2 Mask** _____(1)
INFANT- **O2 Mask** _____(1)
Radio Frequencies:
Enroute to scene: 155.235 mHz. _____
At scene: 155.280 mHz. _____
Departing scene: 155.340 mHz. _____

** MAST TROUSERS _____(1)
IV START SETS/TOURNIQUET _____(6)
IV CATH 16ga _____(3)
IV CATH 18ga _____(3)
IV CATH 20ga _____(3)
IV CATH 22ga _____(3)
IV CATH 24ga _____(3)
SYRINGE 1cc _____(1)
SYRINGE 3/5cc _____(3)
SYRINGE 10/12cc _____(3)
SYRINGE 60cc _____(1)
NEEDLE 18ga _____(6) **OR**
Demonstrate ability to administer IM, SQ and IV piggy back
EMESIS BASIN OR EQUIVALENT _____(1)
CRIC KIT or 10/12ga NEEDLE _____(1)
MICRO DRIP INFUSION SETS _____(2) AND)
MACRO DRIP INFUSION SETS _____(2) OR
ADJUSTABLE DRIP SETS _____(4)
0.9% SALINE INFUSION _____(4L)
RINGERS LACTATE INFUSION _____(4L)
STERILE SALINE IRRIGATION _____(2L)
PORTABLE SUCTION _____(1)
ON-BOARD SUCTION _____(1)
SUCTION TUBING _____(2)
SUCTION CATH 8 or 10 FR _____(1)
SUCTION CATH 14 or 18 FR _____(2)
CERVICAL COLLARS: ADULT _____(3)
PEDI _____(2)
INFANT _____(1)
4X4 PADS _____
ABD DRESSING S (PADS) _____
TRAUMA DRESSING 10X30 _____(2)
ROLLER GAUZE _____(6)
BOARD SPLINTS:
LONG AND SHORT _____(2 EACH) OR
FRACTURE PACK _____(1 SET)
TRACTION SPLINT _____(1)
KED/SHORT SPINE BOARD _____(1)
LONG SPINE BOARD _____**(2)**
SPINE BOARD STRAPS _____ (**2** SETS)
FOLDING STRETCHER or SCOOP
STRETCHER or STAIR CHAIR _____ (1)
Triage Tags/Tape (Color coded
Black, Red, Yellow, Green) _____ **(25)**
If tape utilized: one roll of each color required.
Pulse Oximetry (By October 2008) _____**(1)**
ADULT & PEDI ETCO2 DETECTOR _____(1 EACH)
(Capnography Monitor Accepted)

* Gauge pressure – 200 X cylinder factor = minutes
(Must be able to supply oxygen flow at 15 LPM for a period of 30 min.)
Cylinder factors:
D cylinder = .16 M cylinder = 1.56
E cylinder = .28 G cylinder = 2.41
H , K cyl. = 3.14
** Mast trousers to be carried and/or used at medical director's discretion
Refer to Mass Casualty Rules & Regulations for required radio frequencies.

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Optional Skills:
Adult Intraosseous (Tibial **& Humerus)**
2 Adult needles _____
Continuous Positive Airway Pressure (CPAP) _____
Huber Needles _____
Central Venous Device Access _____
Cardiac Thrombolytic Medications _____

The above skills are optional; ambulance service's medical director will select equipment utilized. Protocol submission/approval by Section of EMS required prior to implementation.