

## Section of EMS - Training Site Inspection List

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Name of Training Site \_\_\_\_\_

Program Training Site Representative \_\_\_\_\_

Location Address \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

**Academic Setting**

**Clinical Setting (attach affiliation agreements)**

**Field Setting (attach affiliation agreements)**

**Satisfactory    Unsatisfactory**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Copy of 2009 Educations Standards**

**Copy of 2009 EMT Instructor Guidelines**

**Copy of 2009 Advanced EMT Instructor Guidelines**

**Copy of 2009 Paramedic Instructor Guidelines**

**Copy of 2010 AR EMS Transition Course**

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**Student ID Tags (for internship)**

**Required Equipment (list attached)**

**Required Supplies (list attached)**

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**Audio-Visuals to Support Educational Process**

**Copy of Current Rules & Regulations for EMS**

\_\_\_\_\_

\_\_\_\_\_

**Certified EMT Instructor(s)- Provide List of Names**

**Adheres to Current Rules and Regulations for EMS**

**Program Medical Director- (attach letter of agreement)**

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\_\_\_\_\_

\_\_\_\_\_

**Inspected by** \_\_\_\_\_

**Date** \_\_\_\_\_

**Training Site Representative** \_\_\_\_\_ **Date** \_\_\_\_\_

**Recommendation:**                      **Approved** \_\_\_\_\_ **Disapproved** \_\_\_\_\_

**Approval Period:**                      **From** \_\_\_\_\_ **to** \_\_\_\_\_

## Section of EMS - Training Site Inspection List

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### Required Equipment and Supplies for all EMT, AEMT and Paramedic

| <u>Quantity</u> | <u>Description of Item</u>  | <u>Notes</u> |
|-----------------|---|--------------|
| 1 _____         | Paramedic Shears/Bandage Scissors   | _____        |
| 2 _____         | Bag-Valve-Mask w/O2 reservoir – Adult   | _____        |
| 1 _____         | Bag-Valve-Mask w/O2 reservoir – Pediatric<br>(1 per 10 students)                            | _____        |
| 1 _____         | Bag-Valve-Mask w/O2 reservoir – Infant<br>(1 per 10 students)                               | _____        |
| 1 _____         | Set Oropharyngeal Airways<br>Assorted sizes (infant & adult)                                | _____        |
| 1 _____         | Set Nasopharyngeal Airways<br>Assorted sizes (infant & adult)                               | _____        |
| 1 _____         | Resuscitator, Oxygen w/demand valve & flow control  | _____        |
| 1 _____         | Regulator, Oxygen with humidifier attachment<br>Advanced level course 3 Regulators required | _____        |
| 1 _____         | Humidifier Bottle   | _____        |
| 1 _____         | Oxygen Tanks – size D or E w/wrench<br>Advanced level course 3 oxygen tanks required        | _____        |
| * _____         | Sphygmomanometer (B/P) Adult – (1 per 5 students)   | _____        |
| 1 _____         | Sphygmomanometer (B/P) Child  | _____        |
| 1 _____         | Sphygmomanometer (B/P) Infant   | _____        |
| 1 _____         | Stethoscope, Training with dual earpieces   | _____        |
| * _____         | Stethoscope (1/student) – documentation if student-provided _____                           | _____        |
| 1 _____         | Suction Device, Portable- Battery Powered   | _____        |
| 1 _____         | Traction Splint (unipolar or bipolar) with Accessories                                      | _____        |
| 2 _____         | Sets of Padded Board Splints (3 sizes per set)<br>(2 each, approx.- 15”, 36”, and 54”)      | _____        |
| 2 _____         | SAM Splints   | _____        |
| 2 _____         | Wire Ladder Splints   | _____        |
| 1 _____         | Long Backboard with accessories   | _____        |
| 1 _____         | Vest-type Immobilization Device (example- KED)  | _____        |
| 3 _____         | Cervical Collars (3 sizes or 3 adjustable)  | _____        |
| 1 _____         | Head Immobilization Device (commercial or improvised)                                       | _____        |
| 1 _____         | Ambulance Cot, adjustable w/ mattress & linen   | _____        |

\* Documentation required if student provided.

**Note- Available Items Must Not Come Off of a Registered Ambulance!**

## Section of EMS - Training Site Inspection List

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### Required Equipment and Supplies for all EMT, AEMT and Paramedic (2)

| <u>Quantity</u> | <u>Description of Item</u>   | <u>Notes</u> |
|-----------------|--|--------------|
| 1 _____         | Folding Stretcher w/ restraints ( <i>available</i> )                                   | _____        |
| 1 _____         | Poison Kit (activated charcoal)  | _____        |
| 1 _____         | Oxygen Mask (Venturi) for demonstration  | _____        |
| 1 _____         | Oxygen Masks- Adult (Nonrebreather)  | _____        |
| 1 _____         | Oxygen Mask- Adult (Simple) for demonstration  | _____        |
| 1 _____         | Oxygen Mask- Pediatric (Nonrebreather)   | _____        |
| 1 _____         | Oxygen Mask- Pediatric (Simple)  | _____        |
| 1 _____         | Oxygen Tubing – 6' length  | _____        |
| 1 _____         | Nasal Cannula  | _____        |
| 1 _____         | Suction extension tubing   | _____        |
| 1 _____         | Catheter, Suction – Rigid  | _____        |
| 1 _____         | Catheter, Suction – Flexible (adult & pediatric)                                       | _____        |
| 1 _____         | OB Kit   | _____        |
| 1 _____         | Burn Sheet   | _____        |
| 1 _____         | Vaseline gauze   | _____        |
| 1 _____         | Moulage Kit or Equivalent  | _____        |
| 1 _____         | Box of Hypoallergenic Tape 1" or 2" or 3"  | _____        |
| 12 _____        | Triangular Bandages  | _____        |
| 1 _____         | Box of 2" X 2" Gauze dressings   | _____        |
| 1 _____         | Box of 4" X 4" Gauze dressings   | _____        |
| 6 _____         | ABD – 8" X 10" or 9" X 12" Trauma Dressings  | _____        |
| 12 _____        | Roller Type Bandage (i.e. Kling or Kerlix)   | _____        |
| * _____         | Penlights or equivalent (1 per student)  | _____        |
| 1 _____         | Tongue Blade   | _____        |
| 1 _____         | Automated External Defibrillator- with Defibrillation Pads<br>(or Simulator / Trainer) | _____        |
| 1 _____         | Defibrillator Manikin (must be able to receive shocks)                                 | _____        |
| * _____         | Protective Eyewear (1 per student)   | _____        |
| 1 _____         | Infectious Disease Packets (Gloves, Gowns and Goggles)                                 | _____        |

\* Documentation required if student provided.

(*available*)- Must show letter of agreement for agency providing equipment.

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### Required Equipment and Supplies for all EMT, AEMT and Paramedic (2)

| <u>Quantity</u> | <u>Description of Item</u>             | <u>Notes</u> |
|-----------------|--|--------------|
| 1 _____         | Pocket Mask w/ one-way valve, O2 inlet | _____        |
| 1 _____         | Nebulizer with Albuterol               | _____        |
| 1 _____         | Nitroglycerin Training Bottles         | _____        |
| 1 _____         | Hand Held Inhaler and Spacers          | _____        |
| 1 _____         | Tube of Glucose or Substitute          | _____        |
| 1 _____         | Box Gloves, nonsterile                 | _____        |
| 2 _____         | Epinephrine Auto Injector Trainers     | _____        |
| 1 _____         | Glucometer                             | _____        |
| 1 _____         | Pulse Oximetry Device                  | _____        |
| 1 _____         | Stair Chair ( <i>available</i> )       | _____        |
| 1 _____         | Scoop Stretcher ( <i>available</i> )   | _____        |
| 1 _____         | Set of Triage Tags                     | _____        |
| 1 _____         | Sterile Water or Saline                | _____        |
| 1 _____         | commercial tourniquet                  | _____        |

### Extrication Equipment

Extrication must be conducted in accordance with the memo titled "Extrication Training for EMT Students" and dated June 20, 1995

The Training Site must document how extrication training will be provided and extrication tools must be available during those training sessions.

**Audio – visual equipment to support the educational process**

Quantity Description of Item:

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**\* Documentation required if student provided.**

## Section of EMS - Training Site Inspection List

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**(available)- Must show letter of agreement for agency providing equipment.**

**Note- Available Items Must Not Come Off of a Registered Ambulance!  
Required Equipment and Supplies for, AEMT and Paramedic Sites**

| <u>Quantity</u> | <u>Description of Item</u>   | <u>Notes</u> |
|-----------------|--|--------------|
| 1               | Venous Practice Arm  | _____        |
| 1               | Tourniquet for IV Administration   | _____        |
| 50              | Each IV Catheters - 22 gauge   | _____        |
| 2               | Each IV Catheters – 14g, 16g, 18g, 20g,                                    | _____        |
| 2               | Infusion Sets, butterfly – various sizes                                   | _____        |
| 10              | IV Administration Sets – Macro drip  | _____        |
| 1               | Blood Administration Set for Demonstration                                 | _____        |
| 2               | IV Administration Sets – Micro drip  | _____        |
| 1               | <b>Box Alcohol Preps</b>   | _____        |
| **12            | 500 or 1000ml IV Solutions – Normal Saline                                 | _____        |
| **12            | 500 or 1000ml IV Solutions – Lactated Ringers                              | _____        |
| **              | D50W Preload Syringes  | _____        |
| 1               | Narcan   | _____        |
| 1               | Epinephrine 1:1000   | _____        |
| 1               | Glucagon   | _____        |
| 2               | Sharps Container (any size)  | _____        |
| 2               | IV Extension Tubing  | _____        |
| 1               | Intubation Manikin (Adult)   | _____        |
| 1               | Combitube – with syringes  | _____        |
| 1               | PTL- Pharyngo-Tracheal Lumen/  | _____        |
| 1               | King Airway  | _____        |
| 1               | Tube Lubrication Gel (Water-based lubricant)                               | _____        |
| 2               | Lubricant, silicone spray or appropriate device                            | _____        |
| **              | For training purposes only, may be expired.                                |              |
| 1               | CPAP/BiPap unit ( <i>available</i> )                                       | _____        |
| 1               | Intraosseous Infusion Manikin  | _____        |
| 4               | Intraosseous Needles (16g or 18g)  | _____        |
| 1               | IO Device (Drill or Manual)  | _____        |
| 2               | 50cc or 60cc Syringes  | _____        |
| 2               | 20cc Syringes  | _____        |
| 2               | 10cc or 12cc Syringes  | _____        |
| 2               | 5cc or 6cc Syringes  | _____        |
| 1               | Box, 3cc Syringes with Needles<br>(or separates - needles separate 1 1/2") | _____        |
| 1               | Box, 1cc Tuberculin Syringes   | _____        |
|                 | 20g or 22g Needles (1 per student)   | _____        |

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**Note- Available Items Must Not Come Off of a Registered Ambulance!**

## Section of EMS - Training Site Inspection List

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### Required Equipment and Supplies for AEMT and Paramedic Sites

| <u>Quantity</u> | <u>Description of Item</u>                            | <u>Notes</u> |
|-----------------|---|--------------|
| 1               | Intubation Manikin (Infant)                           | _____        |
| **12            | D5W, 250ml or 500ml                                   | _____        |
| 1               | Length Based Resuscitation Tape or equivalent         | _____        |
| 1               | Hemostat  | _____        |
| 1               | Each Magill forceps, Adult & Pediatric                | _____        |
| 1               | Nasogastric Tube                                      | _____        |
| 2               | Laryngoscope handles, with batteries                  | _____        |
| 1               | Each, Laryngoscope Blades- 1, 2, 3, and 4 (curved)    | _____        |
| 1               | Each, Laryngoscope Blades- 0,1, 2, 3 and 4 (straight) | _____        |
| 2               | End-tidal CO2 Detectors                               | _____        |
| 1               | Endotracheal Tube, 3.0                                | _____        |
| 1               | Endotracheal Tube, 4.0                                | _____        |
| 1               | Endotracheal Tube, 5.0                                | _____        |
| 1               | Endotracheal Tube, 6.0                                | _____        |
| 3               | Endotracheal Tubes, 7.0                               | _____        |
| 3               | Endotracheal Tubes, 8.0                               | _____        |
| 1               | Endotracheal Tube, 8.5                                | _____        |
| 1               | Endotracheal Tube, 9.0                                | _____        |
| 1               | Each Stylette, Adult & Pediatric                      | _____        |

\*\* For training purposes only, may be expired.

**(available)- Must show letter of agreement for agency providing equipment.**

**Note- Available Items Must Not Come Off Of A Registered Ambulance!**

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### Required Equipment and Supplies for AEMT and Paramedic Sites

| <u>Quantity</u> | <u>Description of Item</u>  | <u>Notes</u> |
|-----------------|---|--------------|
| 1 _____         | Defibrillator<br>(with oscilloscope and printer, transcutaneous pacing system and capable of synchronized cardioversion). | _____        |
| 2 _____         | EKG Cables  | _____        |
| 1 _____         | Box Electrode Pads  | _____        |
| 2 _____         | Rolls EKG Paper   | _____        |
| 1 _____         | Arrhythmia Generator-<br>(Compatible with manikin and monitor/defibrillator)  | _____        |
| 2 _____         | Pacing Pads or Combo Pads   | _____        |
| 1 _____         | Set- Defibrillation Pads  | _____        |
| 1 _____         | Tube- Electrode Gel (Defibrillation)  | _____        |
| 1 _____         | Obstetrical Delivery Manikin ( <i>available</i> )   | _____        |
| 1 _____         | Needle Decompression Manikin (thoracic injuries)  | _____        |
| 2 _____         | Three-way Stopcock Valves (for I.O. Administration)   | _____        |
| 1 _____         | Bottle Normal Saline or Bacteriostatic Water or<br>Sterile Water for Injections   | _____        |
| *** _____       | Variety of Preloaded Syringes (can be expired)  | _____        |
| 1 _____         | In-line small-volume nebulizer/ with BVM capabilities   | _____        |
| 1 _____         | Each Needle, 10g or 12g or Crico Kit<br>(for cricothyrotomy)  | _____        |
| 1 _____         | Cricothyrotomy Trainer<br>**or** Tracheostomy Trainer   | _____        |
| 1 _____         | Automatic Transport Ventilator ( <i>available</i> )   | _____        |

\*\*\* For State/National Registry exam, must include atropine, epinephrine 1: 10,000 and dextrose 50% plus several others.

**(available)- Must show letter of agreement for agency providing equipment.  
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