



Stanislaus County Emergency Medical Services Agency

ALS Ground Ambulance Inspection Form

Name of Provider: _____ Inspection Date: _____ Location: _____

Unit #: _____ License Number: _____

VEHICLE INFORMATION:

Mileage: _____ CHP Inspection Date: _____ Communications Check: _____

Year: _____ Make: _____ VIN #: _____

General Condition and Cleanliness: _____

Exterior/Exterior Compartments: _____

Interior/Interior Compartments: _____

Patient Compartment Doors (*hinges, gaskets, latches, and pins*): _____

Other: _____

+Optional Item – An item marked with the plus (+) sign is an item available to be chosen by the provider but is not obligatory

	STANDARD INVENTORY For GROUND AMBULANCES		ALS	MEETS STANDARDS/COMMENTS
1.	KED		1	
2.	Scoop Stretcher		1	
3.	Spinal Immobilization Board		2	
4.	Backboard Straps		3 sets	
5.	Pediatric Immobilization Device		1	
6.	Patient Carry Tarp		1	
7.	Burn Pack (clean sheets, towels, gown, sterile gloves)		1	
8.	Rigid Collars adjustable – Adult and Pediatric		4 each	
9.	Foam Head Restraints or Comparable Device		3	
10.	Cold Packs		4	
11.	Hot Packs		4	
12.	Traction Splints (adult & pediatric)		1 each	

	STANDARD INVENTORY For GROUND AMBULANCES	ALS	MEETS STANDARDS/COMMENTS
13.	Rigid Extremity Splints (leg & arm, pediatric and adult)	1 each	
14.	Petroleum Jelly Gauze (Sterile)	4	
15.	5 x 9 ABD Pad	4	
16.	4 x 4 Sterile Compress	4	
17.	4" Curlex Rolls	4	
18.	Bandage Shears	1	
19.	10 x 30 inch or Large Universal Dressing	2	
20.	Rolls of Tape – one must be hypoallergenic	Assorted	
21.	4 x 4's Non-Sterile	1 package	
22.	Hemostatic Dressings	2	
23.	Triangular Bandage	2	
24.	Exam gloves (Small, Medium, Large, and X-Large)	1 box each size	
25.	Non-Latex Exam Gloves (Small, Medium, Large and X-Large)	2 pairs each	
26.	Thermometer, Medical Grade Non-Contact Infrared Forehead	1	
27.	OB Commercial/Pre-packaged pack meeting Title 13, Section 1103.2(a)(16) requirements that also includes survival blanket and scalpel	1	
28.	Oral Pharyngeal Airways (sizes 00 through 6)	2 sets	
29.	Nasal Pharyngeal Airways (sizes peds through adult)	2 sets	
30.	Bag-Valve Device (Adult, Pediatric, neonate)	1 each	
31.	Wall Mounted Flow Meters, Capable of 0-15 Liter Per Minute Flow	2	
32.	Nasal Cannulas (adult)	6	
33.	Nasal Cannulas (pediatric)	4	
34.	Oxygen Mask with Reservoirs (adult and pediatric)	4 each	
35.	Oxygen Supply > 10 liters/min x 20 minutes	1	
36.	Portable Oxygen Supply with Bottle and Regulator	2	
37.	Wrench for Oxygen Valve	1	
38.	Suction Handle Tip Rigid Catheters	2	
39.	Non-collapsible suction tubing	2	
40.	Suction devices, stationary & portable.	1 each	
41.	Suction catheters size 6 – 14 French	1 each	
42.	Bite stick	2	
43.	Perilaryngeal or Supraglottic Airway Device - King Airway or I-Gel manufacturer recommended sizing – Adult and Pediatric	2 each size	

	STANDARD INVENTORY For GROUND AMBULANCES		ALS	MEETS STANDARDS/COMMENTS
44.	Bougie		2	
45.	ETCO2 Detector (colormetric is no longer required)		2	
46.	12-lead EKG Monitor with paper print out capable of transcutaneous pacing; wave form capnography with recording capability; defibrillator with variable power control and a range capability of 25-360 joules (or clinically equivalent biphasic energy doses). All monitor/defibrillators shall have the capability to perform synchronized cardioversion		1	
47.	CPAP device capable of delivering adjustable pressures ranging from 5 - 10 cm H ₂ O with FiO ₂ concentrations equal to or greater than 30% oxygen and capable of fitting small, medium and large adult sizes .		1 each	
48.	Laryngoscope Handle with 1set of spare batteries		2	
49.	Video Laryngoscope + with Approval of Agency Medical Director		1	
50.	Laryngoscope blades 1 set (sizes 4 to 0) Miller		1 set	
51.	Laryngoscope blades 1 set (sizes 4 to 1) Mac		1 set	
52.	Endotracheal tubes and adapters ranging in size from and 5.5 through 9.5 (cuffed) in increments of 0.5 mm.		1 set	
53.	Endotracheal tube stylets to fit all size tubes		1 set	
54.	McGill forceps both child and adult sizes		1 each	
55.	Water soluble lubrication jelly		3	
56.	Nebulizer (hand-held and mask style)		2 each	
57.	Jet Insufflation Device capable of delivering 50 psi with on-off valve and Luer Lock Tip		1	
58.	IV Catheter Needles Size 10 or 12 gauge OR approved NCD Kit		2	
59.	Blood Pressure cuff adult		2	
60.	Blood Pressure cuffs pediatric and extra long		1 each	
61.	Broselow Tape - latest version or an approved Length Based Tape		1	
62.	Stethoscope		1	
63.	Normal Saline for Irrigation 1000 ml		4	
64.	Sheets, pillows, pillowcases, towels		2 sets	
65.	Blankets		2	
66.	Ankle and wrist restraints		1 set	

	STANDARD INVENTORY For GROUND AMBULANCES	ALS	MEETS STANDARDS/COMMENTS
67.	Emesis Basin/Bag	4	
68.	Bedpan	1	
69.	Urinal	1	
70.	Antibacterial disinfectant solution for cleanup	1	
71.	EpiRite Syringe	0	
72.	Pulse Oximeter	1	
73.	Glucose Monitoring System	1	
74.	Adenosine 6 mg/2 ml concentration	36 mg	
75.	Albuterol 3 ml of a .5% solution	8	
76.	Amiodarone 150 mg/3ml ampule (Provider must carry either Amiodarone or Lidocaine or both, if they choose)	6 ampules	
77.	Aspirin (chewable) tablets	16 tablets	
78.	Atropine Sulfate 1 mg/10 ml concentration (1 mg preload)	2	
79.	Atropine Sulfate 20 ml of a .4 mg/1 ml concentration	1 vial	
80.	Calcium Chloride	2 gm	
81.	Dextrose 25% (2.5 gm/preload)	2	
82.	Dextrose 50% preload 25 gm/50ml	2	
83.	Diphenhydramine (Benadryl) 50mg/1ml or a 25 mg/ml concentration	100 mg	
84.	Epinephrine 1:1,000 (1 mg/ml)	3 mg	
85.	Epinephrine 1:10,000 (1mg/10ml)	10 mg	
86.	Fentanyl 50 mcg/ml Maximum 400mcg (Provider must carry either Fentanyl or Morphine Sulfate or both, if they choose as outlined in SCEMSA Policy 439.00)	200 mcg	
87.	Glucagon 1mg/ml	2 mg	
88.	Instant Glucose	2 tubes	
89.	Ketamine +	100mg	
90.	Lidocaine 100mg/10ml (preloads) (Provider must carry either Amiodarone or Lidocaine or both if they choose)	3	
91.			
92.	Midazolam (Versed) as outlined in SCEMSA Policy 439.00 –20 mg(5mg/ml)Maximum – 40 mg	20 mg	
93.	Morphine Sulfate –Maximum – 60 mg (Provider must carry either Fentanyl or Morphine Sulfate or both if they choose as outlined in SCEMSA Policy 439.00)	20 mg	
94.	Mucosal Atomizer 3ml	4	
95.	Naloxone (Narcan)	8 mg	

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96.	Nitroglycerine spray bottle capable of providing a metered dose of 0.4 mg/spray		1 bottle with sufficient supply to treat 2 patients	
97.	Nitroglycerine 0.4 Tablets +		16 tablets	
98.	Nitroglycerine Paste 2% ointment with tape for application		1 ointment	
99.				
100.	Odansetron (Zofran) 4.0 mg tablets or 4 mg/2 ml vials		4	
101.	Sodium Bicarbonate 50 mEq/50 ml concentration		2	
102.	TXA 1000 mg/10 ml		2	
103.	Betadine Preps		5	
104.	Band-Aids Miscellaneous sizes		1 package	
105.	Medication added labels		Multiple 5each	
106.	Intraosseous Needles (Stainless Steel) 15, 25 & 45			
107.	IO Drill +		1 each	
108.	IV Catheter Needles Sizes 14 through 22 gauge		5 each	
109.	Huber Needle 20 gauge, 1", bent tip, non-coring		2	
110.	Needles for injections Size 18 or 19 gauge Size 21, 23, 24 or 25 gauge		3 each	
111.	Normal Saline 1000 ml must be kept within a range of 100 to 110 degrees Fahrenheit. This cache of solution must be dated and either used or discarded within 28 days of warming.		2	
112.				
113.	Normal Saline 100 ml		2	
114.	Normal Saline 1000 ml		6	
115.	Macro-Drip Set (10-20 gtts/ml)		6	
116.	Micro-Drip Set (60 gtts/ml)		2	
117.	Pediatric 100 ml or 150ml Volume Control Chamber Administration Sets		2	
118.	Extension Tubing		6	
119.	Syringes 1, 3, 5, 10, 60 ml		2 each	
120.	IV Tourniquets		5	
121.	Sharps Container(s) as necessary, incl. one in ambulance and one in EMS bag		2	
122.	Alcohol Preps		Multiple	
123.	12-lead Electrode Pads		20	

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124.	Defibrillator Pads – Adult and Pediatric	2	
125.	12-lead Monitor cables (one with monitor, one back-up)	2 sets	
126.	Charged batteries (backups for defibrillator)	1	
127.	MCI Kit containing the following: Set of five MCI vests per Agency Policy 810.00; 25 triage tags; Set of ICS Forms as specified in SCEMSA Policy 810.00; Complete set of oral airways ranging from sizes 0-6; 4 additional airways in each of the following sizes 4,5,6; 4 - 4 x 4 trauma compresses with ties; 4 - Tourniquets; Pair of bandage scissors/shears;	1	
128.	Radio able to communicate with authorized dispatch center in area of operation.	1	
129.	Radio able to transmit and receive communications on appropriate med-net frequencies and private line tones with hospitals and DCF in unit's service area and surrounding counties. Radios used for communication with hospital must be accessible in the patient compartment.	1	
130.	Portable radio able to transmit and receive communications with authorized dispatch center in area of operation.	1	
131.	Cell Phone in compliance with contractual requirements	1	
132.	Satellite Phone +	1	

D. Recommended Inventory

The following matrix contains equipment and medical supplies recommended to be available to EMS responders on their person, in the unit, or in quarters for dispatch to the scene if necessary.

Recommended ITEMS per person	Carried, Stored in Unit or In Quarters	
Hard hat – Work helmet (Blue)	Unit	1 per person
Eye Protection	Carried	1 per person
Hearing Protection	Carried	1 per person
Body Garment(uniform blue)	Carried	1 per person
Garment – single use	Unit	1 per person
Hooded, chemical resistant clothing	Quarters	1 per person
Jacket – EMS w/reflective stripes	Unit	1 per person
Gloves – chemical-protective Nitrile	Unit	1 box
Gloves work	Unit	1 pair per person
Footwear worn	Carried	1 pair per person
Footwear covers	Unit	1 pair per person
N-100 or N-95 mask	Unit	5
Escape Hood	Carried	1 per person
Flashlight or headlamp	Carried	1 per person
Knife, folding	Carried	1 per person

Recommended ITEMS per person	Carried, Stored in Unit or In Quarters	
Scissors/Shears	Carried	1 per person
Stethoscope	Carried	1 per person
Personal communication device (radio)	Carried	1 per person
Mark I Auto-injector Kit	Unit	1 per person
Recommended Extended Operations Equipment		
Daypack –with the following equipment		1
One quart water		1
One water purification unit		1
One set of rain gear		1
Set of emergency garments		1
MRE's for 72 hrs.		1
1 set ear protection		1
Mark I Auto-injector Kit		1
Field Operations Guide (FOG)		1

Form Continued on Next Page

Check Appropriate Box	Finding
	PASS – Vehicle met all of the requirements of SCEMSA Policy 407.00 - Ground Ambulance Equipment and Medical Supply Inventory
	INITIAL FAILURE – PASS UPON IMMEDIATE RESUPPLY – Vehicle did not meet the minimum requirements outlined in SCEMSA Policy 407.00 – Ground Ambulance Equipment and Medical Supply Inventory at the time of inspection. Vehicle was able to immediately be re stocked with missing equipment and/or drugs. Please list the equipment and/or drugs that were missing during the initial inspection:
	FAILURE – OUT OF SERVICE – Vehicle did not meet the minimum requirements outlined in SCEMSA Policy 407.00 – Ground Ambulance Equipment and Medical Supply Inventory at the time of initial inspection and Provider was not able to immediately re stock the vehicle. If inspection results in a finding of “Failure – Out of Service”, the Provider must notify the Stanislaus County EMS Agency at 209-552-3600 within 2 hours of said finding.

I hereby certify under penalty of perjury that all information on this inspection form is true and correct to the best of my knowledge and belief, and I understand that any falsification or omission of material facts may cause a finding of being in material breach of our company’s ambulance provider agreement.

Inspection Conducted By: _____ **Date:** _____

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Provider Manager or Supervisor Signature: _____ **Date:** _____