



# McLean County Area EMS System

1609 Northbrook Drive, Ste 8  
Normal, IL 61761

Phone: (309) 827-4348  
Fax: (309) 808-4235

## ALS INSPECTION FORM

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

<b>V</b>	VIN	
<b>E</b>	Make	
<b>H</b>	Model	
<b>I</b>	Manufacturer	
<b>C</b>	Year	
<b>L</b>	Status	<input type="checkbox"/> Front-Line <input type="checkbox"/> Reserve <input type="checkbox"/> Upgrade
<b>E</b>	Type	<input type="checkbox"/> Transport <input type="checkbox"/> Non-transport

<b>D</b>	Inspection	/	/
<b>A</b>	Safety	/	/
<b>T</b>	License Plate	/	/
<b>E</b>			
<b>S</b>			

Inspector to collect current roster

Vehicle Notes:

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<b>C</b> <b>L</b> <b>I</b> <b>A</b>	Y N	Is a glucometer training log available on demand and up to date?
	Y N	Does glucometer training log match with agency's personnel roster?
	Y N	Is a glucometer testing log available on demand and up to date?
	Y N	Is the time/date correct on glucometer?
	Y N	Does glucometer(s) test within acceptable range?
		Glucometer Strip Lot #
		Glucometer Control Lot #
		Glucometer Make/Model

Glucometer Notes:

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Medications (Nonscheduled)				
Medication	Concentration/Packaging/Form	Earliest Expiration Date	Minimum Required	Total on Board
Acetaminophen	325 mg tab		36	
Adenosine	6 mg/2 ml		5	
Albuterol	2.5 mg/3 ml; plastic ampule; single use		3	
Amiodarone	150 mg/3 ml		8	
Aspirin	Chewable; 81mg/tab		36	
Atropine	1 mg/10 ml		5	
Benzocaine	56 g (bottle); "Cetacaine"			
Calcium chloride	1 g/10 ml		1	
Dextrose 50%	25 g/50 ml		2	
Diphenhydramine	50 mg/1 ml		2	
Dopamine	400 mg/250 ml; premixed bag		1	
Epinephrine	1 mg/1 ml (1:1000)		1	
Epinephrine	1 mg/10 ml (1:10,000)		10	



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Medications (Nonscheduled)				
Medication	Concentration/Packaging/Form	Earliest Expiration Date	Minimum Required	Total on Board
Epinephrine	30 mg/30 ml (1:1000)		1	
Furosemide	100 mg/10 ml		1	
Glucagon	1mg/1ml vial		1	
Ipratropium	0.5 mg/2.5 ml		3	
Lidocaine	100 mg/5 ml (For IO anesthesia)		1	
Magnesium sulfate	5 g/10 ml		1	
Methylprednisolone	125 mg/2 ml		2	
Naloxone	2mg/2ml		2	
Nitroglycerin	SUBLINGUAL (tab or spray), 0.4mg dose		1 (bottle)	
Nitroglycerin	TRANSDERMAL paste; with paper		1	
Nitroglycerin <sup>1</sup>	INFUSION; 50 mg/250 ml bottle		1	
Ondansetron	2 mg/1 ml		2	
Oral glucose	Oral gel; at least 15g per package		2	
Phenylephrine, 1%	15 ml; nasal spray; "neosynephrine"		1	
Racemic epinephrine	2.25% (0.5 ml)		2	
Saline, hypertonic 3%	500 ml		1	
	Is the hypertonic saline stored in a manner that clearly distinguishes it from isotonic saline?			Y N
Saline, normal 0.9%	1000 ml		8	
Saline, normal 0.9%	250 ml		2	
Sodium bicarbonate	50 mEq/50 ml		1	
Thiamine	100 mg/1 ml		2	
Tranexamic Acid (TXA)	1000 mg/10 ml		1	

Medications (SCHEDULED**)				
Medication	Concentration/Packaging/Form	Earliest Expiration Date	Exact Requirement	Total on Board
Diazepam	10 mg/2 ml (Overall onboard must = 40mg)		4	
Etomidate	40 mg/20 ml		1	
Fentanyl	50 mcg/1 ml -OR- 100mcg/ 2 ml (Overall onboard must =200mcg)		Must = 200 mcg	
Haloperidol	5 mg/1 ml		1	
Lorazepam	2 mg/1 ml (Overall onboard must = 4mg)		2	
Midazolam	5mg/5 ml (Overall onboard must = 20mg)		4	
Morphine Sulfate	10 mg/1 ml (Overall onboard must =10mg)		1	
	Are scheduled medications secured in an appropriate manner?			Y N
	Is a sealed and numbered tag applied to all storage points?			Y N
	Is a scheduled medication log readily available?			Y N
	Is the scheduled medication log within requirements (double signatures, tag tracking, etc?)			Y N

<sup>1</sup> If ALS unit is pump equipped.



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## Medications (SCHEDULED\*\*)

Medication	Concentration/Packaging/Form	Earliest Expiration Date	Exact Requirement	Total on Board
	Does the scheduled medication log show a true and accurate account of all scheduled medications present on the ambulance (at time of inspection)?			Y N

\*\*Scheduled/controlled medication by federal, state, and/or system standards. Follow all appropriate regulatory requirements. Ensure all paperwork completed in accordance with policy.

## Cardiac Monitor

Item	Notes	Earliest Expiration Date	Minimum Required	Total on Board
Monitor	Must turn on/ be operational		1	
Adult Pads	Compatible with AED		1	
Pediatric Pads	Alternate: pediatric "key" capability		1	
	Is the internal clock on monitor accurate?			Y N
	12-Lead capabilities present and in operating order?			Y N
	Is self check successful and error free?			Y N
	Has agency experienced any unresolved issues in regards to ECG transmission?			Y N

## Equipment

Item	Packaging/Form/Size	Earliest Expiration Date	Minimum Required	Total on Board
CPAP Devices	Disposable; at least 2 different sizes; adjustable PEEP		2 (each size) for transport vehicles 1 (each size) for non-transport	
Endotracheal tubes	ONE EACH SIZE (2.0-9.0) including ½ sizes		1 each	
ETT holder			2	
ETT introducer	("Bougie")		1	
ETT stylets			2	
Jet insufflator			1	
King Airway	Size 3		1	
King Airway	Size 4		1	
King Airway	Size 5		1	
Laryngoscope blades	ONE EACH SIZE (1-4), straight or curved		1 each	
	Do all blades seat tightly within handle, light up, and function appropriately?			Y N
Syringe, catheter tip	Approx. 60 ml; for NG/OG confirmation		1	
Laryngoscope handle	Adult		1	
Laryngoscope, spare batteries	Must match appropriate size for handle		1 (set)	
Lubricating jelly	("KY")Tubes		2	
Nebulizer kit	Must include mouthpiece and neb. Mask		2	
Oro-/Naso-gastric tube	18 french; dual lumen; "saalem-sump" style		2	



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Equipment				
Item	Packaging/Form/Size	Earliest Expiration Date	Minimum Required	Total on Board
Pertrach			1	
Syringe	60 ml		1	
Quik-Clot ®	Individual Packet		2	
Tape, ½"			2	
Tape, 1"			2	
Tourniquet	System approved; commercial		1	
Wrap, self-adherent	("Coban"), 3" roll		2	
Glucometer	**SEE CLIA ABOVE**		1	
Glucometer Test Strips	Compatible with glucometer		1 (bottle)	
Pulse Oximeter	Unit		1	
	Is pulse oximeter in working order and approved for service?			Y N
Thermometer	Capable of core temperature measurement		1	
Alcohol prep pads			10	
Betadine prep pads			10	
Blood tubes, vacutainer needles, barrels	Assorted sizes/colors based on current requirements		Variety	
EZ-IO, drill	Unit		1	
	Does EZ-IO drill function appropriately?			Y N
Filter Tubing	0.22 micron filter; extension set or administration set		1	
EZ-IO, needle	Adult		2	
EZ-IO, needle	Pediatric		2	
IV arm board			1	
IV catheter	14 ga		3	
IV catheter	16 ga		3	
IV catheter	18 ga		4	
IV catheter	20 ga		4	
IV catheter	22 ga		2	
IV hand board			1	
MAD (Device)			2	
Needle	18 ga.		3	
Razors, prep			2	
Syringe	12 ml or larger		3	
Tubing, blood			1	
Tubing, IV	Macro drip (10 gtts/ml)		4	
Tubing, IV	Micro drip (60 gtts/ml)		2	
Venous tourniquet			4	
Eye/face protection			2	



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## Optional Equipment

Item	Packaging/Form/Size	Earliest Expiration Date		Total on Board
Adenosine	12 mg/4 ml			
EZ-IO, needle	Bariatric			
Filter needles				
IV catheter	24 ga			
IV Pump				
Laryngoscope handle	Pediatric			
Pediatric IV tubing	("Buretrol")			
Syringe	3 ml			
IV Pump tubing	Nitroglycerin-safe			
D <sub>5</sub> W	100 ml; DEHP/PVC free <sup>2</sup>			
Amiodarone	Premixed injection, 150 mg/100 ml <sup>2</sup>			

## Paperwork Requirements

Item	Notes	Earliest Expiration Date	Minimum Required	Total on Board
Patient Care Forms	Non-transport; System approved (ONLY FOR NONTRANSPORT VEHICLES)		10	
Patient Refusal Forms	System-approved		10	
Computer for PCR Charting	(ONLY FOR TRANSPORT VEHICLES)		1	

Inspection Notes:

Agency Representative (Print and Sign): \_\_\_\_\_

EMS System Representative (Print and Sign): \_\_\_\_\_

Office Staff: Is this vehicle in the System Plan?

Copy of form provided to:

State

Agency

EMS System Records

<sup>2</sup> Must carry either D5W or premixed amiodarone. Stocking both is recommended.