



# McLean County Area EMS System

705 N. East Street  
Bloomington, IL 61701

Phone: (309) 827-4348  
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## BLS Medication Replacement Form

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

Date: \_\_\_\_\_ Unit #: \_\_\_\_\_

Patient Name: \_\_\_\_\_ Patient ID #: \_\_\_\_\_

\* Medications are approved for administration by EMT-Basic level personnel

MEDICATION	STRENGTH/ VOLUME	CONTAINER	TOTAL ADMINISTERED	TOTAL REQUESTED
Albuterol (Proventil)	2.5 mg/3 ml	Vial		
Aspirin, Chewable	81 mg tablet	36/Bottle		
Glucose		Oral Gel		
Epinephrine (1:1000)	0.3 mg/2 ml	Epi-Pen		
Epinephrine (1:1000)	0.15 mg/2 ml	Epi-Pen Jr.		
Nitroglycerin	0.4 mg	Metered Spray or Tablets		
Glucagon	1mg/1 unit	Vial		
Naloxone (Narcan)	2mg/2ml	Ampule		

Comments: \_\_\_\_\_

Emergency  
Department RN/MD: \_\_\_\_\_

Signature

Agency Representative: \_\_\_\_\_

Signature

Pharmacy Representative: \_\_\_\_\_

Signature