



Department of Public Health
Emergency Medical Services Agency

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This policy supersedes any other existing policy on this subject.

Equal Opportunity Employer

Subject: **ALS UNIT EQUIPMENT AND SUPPLY INVENTORY**

Authority: California Health and Safety Code, Division 2.5, Sections 1797.220 and 1798(a).
California Code of Regulations, Division 9, Section 100167(b)(3).

Purpose: To establish the minimum equipment and drug inventory standards for all ALS units operating within the jurisdiction of the Merced County EMS Agency. ALS Unit equipment and drug inventories shall be established consistent with the current Prehospital Treatment Protocols, and shall be amended concomitantly with changes to said Treatment Protocols, as required.

Policy: It shall be the responsibility of the on-duty paramedic to ensure that his/her assigned ALS Unit is fully stocked with the following minimum equipment and drug inventory at the beginning of each shift. Any ALS Unit found to be missing any items identified in this policy as "Essential" shall place the unit out of service until such time as the discrepancy is corrected. All ALS units shall be fully re-stocked following the completion of each shift and re-stocked after calls as required to remain in compliance with the specifications herein.

If an ALS Unit is requested by the Authorized EMS Dispatch Center to respond for an emergency call prior to being re-stocked, said unit may respond as long as there are no "essential" items missing, and the unit has adequate equipment and drugs to provide proper patient care, as defined by the EMS Treatment Protocols. Should an ALS Unit be requested to respond with inadequate equipment or drugs, as defined above, or with "essential" items missing, said unit may respond in a "first responder" status only, and the EMS Dispatch Center shall simultaneously dispatch a properly equipped and staffed ALS Unit to the scene for care and patient transportation. The provider will file a Situation Report with Agency whenever an ALS Unit responds, in any capacity, to an incident without all essential items.

The equipment and drugs listed in this policy shall be in addition to those required by the California Code of Regulations, Title 13, Sections 1103 and 1103.2.

This policy may be suspended by the EMS Medical Director or his designee in the event of a declared or actual disaster.

APPROVED:

ON-FILE

Tammy Moss Chandler
Director of Public Health

James Andrews, MD
EMS Medical Director

1. COMMUNICATIONS

All ALS Units shall have radios which are capable of transmitting and receiving communications with the Merced County Authorized EMS Dispatch Center.

- * All ALS Units shall have Med-Net radios for the purpose of communicating with the Base Hospital and the Disaster Control Facility within Merced County, and the capability of transmitting and receiving on the appropriate Med-Net frequencies and private line tones for the base hospitals in the surrounding counties. Radios used for communications with the base hospital shall be accessible in the patient compartment.

All ALS Units shall be equipped with no less than one (1) portable radio, capable of communicating with the ALS Unit while on-scene of an emergency.

2. DRUG AND IV SOLUTION MAINTENANCE

All drugs and/or solutions shall clearly display the manufacturer's label indicating the name of the drug/solution, dosage, route of administration, expiration date, and the lot number.

The expiration date of all drugs and IV solutions shall be checked, at a minimum, on the first day of each month. All drugs and/or solutions that will expire within 45 days shall be clearly marked, and must be replaced no later than 48 hours prior to the expiration date.

Drugs shall be maintained in both the ALS Unit and the medical bag carried on-scene by the crew. Each ALS Ambulance Service Provider shall determine the drugs to be carried in the medical bag so as to meet the identified needs of their service area. Controlled drugs shall be stored in accordance with the Agency Controlled Substance Policy.

ALS Ambulance Service Providers shall take provisions to maintain medications and IV solutions within the manufacturer's recommended temperature range. Providers shall maintain two IV bags of normal saline at or near a normal physiological temperature range.

3. DRUGS (MINIMUM SUPPLY)

Adenosine:	Total of 30 mg.
Aspirin:	Chewable, 81mg x 1 bottle
Atropine Sulfate:	1 mg preloads x 2 and 10 mg multi-dose vial
Calcium Chloride:	1 gm pre-load x 2
Dextrose:	25 gm in 50 ml pre-load x 2
Diphenhydramine Injectable:	50 mg x 2
Dopamine:	200 mg/5ml x 2 or 1 pre-mix infusion solution
	500 cc 800mcg/cc
Epinephrine:	1 mg of 1:10,000 x 8 1 mg of 1:1000 x 4 30 mg of 1:1000 multi-dose
Furosemide Injectable :	Total of 200 mg
Glucagon:	1 mg x 2
Instant Glucose:	2 tubes
Lidocaine:	100 mg pre-load x 4 and 2 gm for dilution or 1 pre-mix infusion solution
	500cc 4mg/cc
Magnesium Sulfate:	2 Preloads (5 gms)

Naloxone:	Total of 10 mg
Nitroglycerin:	1/150 (0.4) SL
Nitroglycerin Paste:	1 tube with 10 patches
Normal Saline:	For dilution - total of 20 ml
Oxygen:	1 fixed large capacity cylinder and 1 portable cylinder capable of delivering 10 lpm oxygen for one hour
Proventil:	0.1 mg/cc x 2
Sodium bicarbonate:	50 meq/50 ml pre-loads x 2

4. CONTROLLED SUBSTANCES (FIXED AMOUNT)

Versed:	5 mg x 4
Morphine Sulfate:	10 mg x 4

5. IV SOLUTIONS AND SUPPLIES

Alcohol Preps:	
Band-Aids:	ample supply
Medication Labels:	
IV Catheter Needles:	14 thru 24 gauge x 5 each 10 or 12 gauge x 2 each
Normal Saline:	250cc x 2, 1000cc x 8
Macro-drip set (with a minimum of two injection ports):	10-20 gtts/ml x 6
Micro-drip set (with a minimum of two injection ports):	60 gtts/ml x 2
Dial-a-Flow:	x 2
Syringes:	1, 3, 10 and 20 ml x 4,
Syringes, Vanishing Point:	3 & 5 ml x 5
Tape:	x 4 rolls, at least 1 hypo-allergenic
Tourniquets or IV Start Kits:	x 3
Disposable Gloves (exam type):	ample supply
Sterile Vaseline Gauze:	x 6

6. CARDIAC

- * EKG Monitor/Defibrillator with Paper Printout and Defibrillator with a variable power control with a range capability of 25 to 360 watt seconds
- Pediatric Defibrillation Paddles or disposable pads
- All Monitor Defibrillators shall have 12 lead capability
- All Monitor/Defibrillators shall have the capability to administer synchronized cardioversion
- All monitor/defibrillators shall have removable batteries to facilitate immediate replacement
- Electrode Pads: 2 bags (25 each bag)
- * Monitor Cables: x one set (with backup mechanism)
- Backup Batteries for Monitor/Defibrillator: x 1

7. RESPIRATORY

Bougie	Adult x2 Pediatric x2
King Airways:	1 Red 1 Yellow

Oral Pharyngeal Airways (Pediatric through Adult):	x 2
Nasal Pharyngeal Airways (Pediatric through Adult):	x 2
Bag-Valve Device (sterilized disposable)	
* Adult:	x 1
* Pediatric:	x 1
* Neonate:	x 1
* Laryngoscope with two sets of batteries (one set for backup)	
* Laryngoscope Blades (sizes 4 to 1):	1 set curved, 1 set straight
Laryngoscope light bulbs (backup):	1 each size
* Endotracheal Tubes with appropriate adapters:	sizes 2.0 thru 8.0 in 0.5mm increments to fit adult and pediatric tubes
Endotracheal tube stylets:	x 2
Mainstream ETCO ₂ detector	Adult x2
End-tidal CO ₂ detectors:	Pediatric x2
Two (2) wall mounted flow meters:	0-15 l/min measure
Disposable humidifiers for O ₂ flow meters:	x 2
McGill forceps:	Adult & Child sizes
Water soluble lubricating jelly:	amply supply
Nasal Cannula:	Adult x 6
	Pediatric x 4
Oxygen mask with reservoir:	Adult and Ped. x 4
Oxygen tubing adapter (x-mas tree style):	x 2
Oxygen Valve wrenches:	x 2
Suction catheters (french):	sizes 8 thru 14
Suction catheters (handle-tip, rigid):	x 2
Non-collapsible suction tubing:	x 2
Nebulizers (hand-held and mask type):	x 2 each (Pediatric & Adult)
* Suction devices (both with 12mm mercury neg. pressure):	1 - stationary
	1 - portable
Bite sticks:	x 2

8. TRAUMA AND ORTHOPEDICS

KED or comparable device:	x 1
Scoop (style) stretcher :	x 1
* Long backboards:	2 minimum (1 essential)
Spider straps for backboards:	2 sets minimum (1 essential)
Pediatric immobilization device:	x 1
Burn packs (pre-packaged sterile or autoclaved):	x 2
Rigid cervical collars (stiff-neck style):	sizes pediatric & adult adjustable (1 essential)
Head Immobilization device:	x 2 (1 essential)
Cold packs:	x 4
Traction splints:	1 - adult, 1 - Ped.
Extremity splints:	leg and arm
Intraosseous needles:	sizes 15, 18, x 2 each

9. OBSTETRICAL EQUIPMENT

Commercially available packs, meeting the requirements of Title 22, Section 1103.2(a)(17): x 2
Commercially available, survival type aluminum-styled blanket for heat conservation in newborns: x 2

10. MISCELLANEOUS EQUIPMENT

* MCI Vest x 3
* Blood pressure cuffs (1 - adult BP cuff essential): 2 - adult, 1 - Ped.
1 - extra long, 1-Infant
* Stethoscope (1 - stethoscope essential): x 2
Normal saline for irrigation: 1000 ml x 4
* Patient Gurney: x 1
Glucometer (with accessories): x 1
Pulse Oximeter (with Adult & Peds sensors): x 1
Broselow Pediatric Tape x 1

11. PERSONAL PROTECTIVE EQUIPMENT**

Rescue/Work Helmet (NFPA 1951 Standard) x 2
Reflective Jacket x 2
Eye Protection Work Goggles x 2
Bio-protection Kit (hooded suit, goggles, gloves, and shoe Covers) x 2
N-95 Masks x 8 (4 each size)
Multi-Use Work Gloves x 2 pr.
P-100 Masks x 3

All items listed in this inventory with an asterisk (*) to the left shall be considered essential for the purpose of this policy.

** Personal Protective Equipment must be replaced immediately after use, unless extra stock is available in the ambulance for the crew members.