

VEHICLE INSPECTION BLS

Basic Life Support

| Α | gency: | License Plate: | | | | | | | | |
|---|-------------------------------------|--|-------------|----------|--|--|--|--|--|--|
| ٧ | IN: | ites | | | | | | | | |
| М | ake: | | Inspection: | | | | | | | |
| М | odel: | | Safety: | | | | | | | |
| Υ | ear: | | | | | | | | | |
| С | Call Sign: | | | | | | | | | |
| Si | Status: Front-Line Reserve Dupgrade | | | | | | | | | |
| Type: Transport Non-Transport | | | | | | | | | | |
| IDPH Inspection Form Required Inconjuction with SAMIC Inspection Form | | | | | | | | | | |
| Cardiac Monitor | | | | | | | | | | |
| | Item | Notes | | Minimum | | | | | | |
| | Cardiac Monitor* | Must be operational | | 1 | | | | | | |
| | 12 Lead Capability* | Must be operational Must be able to transmit | | <u>'</u> | | | | | | |
| | Capnography Capability | Trust be able to transmit | | | | | | | | |
| | Defib Pads | Adult | | 1 | | | | | | |
| | Defib Pads Defib Pads | Pediatric | | 1 | | | | | | |
| | | | | 1 | | | | | | |
| | <u> </u> | SpO2 Sensor Adult | | | | | | | | |
| | | pO2 Sensor Pediatric | | | | | | | | |
| | ECG Printer Paper | A 1 1 | | 2 | | | | | | |
| | Electrodes* | Adult | | 5 Sets | | | | | | |
| | Electrodes* | Pediatric | | 2 sets | | | | | | |
| | Disposable Razor | | | 2 | | | | | | |
| | On Board Charger or Spa | re Battery | | 1 | | | | | | |
| | Α | irway and Oxygen Equ | ıipment | | | | | | | |
| | PEEP Valve | | | 1 | | | | | | |
| | Pulmodyne O2-MAX™ Fixe | Pulmodyne O2-MAX™ Fixed Flow CPAP System with 3-SET™ | | | | | | | | |
| | King LTS-D™ Sizes: 2, 2.5, | 1 each | | | | | | | | |
| | OR | | | | | | | | | |
| | i-gel® Sizes: 1.5, 2, 2.5, 3, 4 | | | | | | | | | |
| | Lubricant | | | 6 | | | | | | |
| | In Line Nebulizer Kit | | | 1 | | | | | | |
| | Nebulizer Kit | | | 2 | | | | | | |
| | Nebulizer Mask | Adult | 2 | | | | | | | |
| | Nebulizer Mask | Pediatric | | 2 | | | | | | |
| | Capnography Cannula* | Adult | 2 | | | | | | | |
| | Capnography Cannula* | Pediatric | | 2 | | | | | | |
| | Capnography ETT Connec | | | 2 | | | | | | |
| Assessment Equipment | | | | | | | | | | |
| | Glucometer | 1 | | | | | | | | |
| | Glucometer Test Strips | 1 | | | | | | | | |
| | | | | | | | | | | |



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| Thermometer | 1 | | | | | | |
|---------------------------|---------------------------------------|---|--|--|--|--|--|
| Fluid Resuscitation | | | | | | | |
| Alcohol Wipes | Alcohol Wipes Box | | | | | | |
| Medication Administration | | | | | | | |
| Syringe | 1 mL | 4 | | | | | |
| Needle | Filter | 4 | | | | | |
| Needle | 18 Gauge | 4 | | | | | |
| Needle | 23 Gauge or similar | 3 | | | | | |
| Mucosal Atomizer Device | Mucosal Atomizer Device (MAD) | | | | | | |
| Trauma Equipment | | | | | | | |
| Combat Application To | Combat Application Tourniquet (C-A-T) | | | | | | |
| Hemostatic Agent Gauz | Hemostatic Agent Gauze | | | | | | |
| SAM® Pelvic Sling | 1 | | | | | | |

| System Representative: | | | | | | | | | |
|------------------------|--|------|--|---|--|--|--|--|--|
| Agency R | | | | | | | | | |
| Notes: | | | | | | | | | |
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| | | | | | | | | | |
| Pass | | Fail | | | | | | | |