

STATE OF DELAWARE WATER AMBULANCE INSPECTION SHEET

COMMUNICATIONS	YES	NO	N/A
Two way, reliable communication between EMT, Dispatcher, and Medical Direction (See SFPC Ambulance Regulation under Communications Requirements)			
INFECTION CONTROL	YES	NO	N/A
2 Biohazard bags			
3 Hepa masks			
12 Eye/Mouth/Nose protection (disposable)			
3 disposable gowns			
12 pairs disposable gloves			
Disinfectant hand wash, commercial antimicrobial (towelette, spray or liquid)			
Disinfectant solution or wipes for cleaning equipment.			
OBSTETRICAL	YES	NO	N/A
2 O.B. kits (sterile) to include – 1 drape sheet, 1 pair of rubber gloves, 1 receiving blanket, 1 bulb aspirator, 2 hand towels, 2 cord clamps or umbilical tape.			
MONITORING AND DEFBRILLATION	YES	NO	N/A
1 SAED (Semi-Automatic External Defibrillator)			
1 SAED Kit (1 Razor, 2 Adult/1 Pediatric Pads or Key, 1 Small Towel, 1 pocket mask with a one-way valve.			
IMMOBILIZATION DEVICES	YES	NO	N/A
Adult & Pediatric splints for 2 arms & 2 legs (inflatable splints, vacuum splints, SAM Splints, or wooden padded boards)			
1 Adult and 1 Pediatric Traction splint or equivalent femur traction splint with all straps			
1 KED or equivalent extraction device with all straps			
3 back boards with appropriate securing straps attached to board (2 Adult & 1 Pediatric x-ray translucent) NO WOODEN BACKBOARDS. 1 with Floatation Capability.			

IMMOBILIZATION DEVICES cont.	YES	NO	N/A
3 complete head immobilization devices (Three Dimensional foam head blocks that adhere to spine board by Velcro, locking straps or click and lock head blocks)			
4 Adult & 4 Pediatric sized cervical stabilization devices/extrication collars (may be adjustable)			
1 Flexible stretcher Removed Reeves type			
1 Pelvic Stabilization Device (see Pelvic Stabilization Protocol).			
MISCELLANEOUS EQUIPMENT	YES	NO	N/A
1 folding stretcher or squad bench (optional)			
1 Stair Chair or Combination Stretcher/Chair			
3 Blood Pressure Cuffs All Latex Free (large adult, adult and peds)			
1 Adult Stethoscope Latex Free			
1 Pediatric Stethoscope Latex Free			
2 Towels or similar disposable towels			
2 Blankets			
12 Triage Tags shall be tags not ribbons.			
2 Liters of sterile normal saline solution or distilled water for irrigation (any size bottles-totaling 2 liters)			
4 Ice Packs			
4 Hot Packs			
1 Burn Kit w/sterile sheet. The kit can be commercially purchased or self-made and must contain the following items: 1 – 12 x 12, 1 – 20 x 30, 1 – 15 x 20, 1 – 60 x 90 Sterile Burn Sheets, 1 Liter Saline, 2 – Sterile Roll Self-Adhering Gauze Bandages, 2 – 5 x 9, 4 – 4 x 4, 4 – 2 x 2 Gauze Pads and Cloth Tape. No water gel dressing is allowed. Dry dressings only.			
2 Working Pen Lights			
2 Emesis pans or basin			
1 Pillow Optional			
2 Sets of Sheets			
Glucometer with all required equipment			

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MISCELLANEOUS EQUIPMENT cont.	YES	NO	N/A
2 Tubes Oral Glucose (Not expired)			
Seat Belt Extender for at least 1 seat (unless seatbelt extends 60 inches)			
1 Pulse Ox/CO- Oximeter			
Soft Restraint System (See Restraint Protocol – Restraints shall be padded and easily removable).			
Thermometer – Under the tongue type, ear or forehead type. No rectal thermometer. (See Heat Emergency Protocol).			
INJURY PREVENTION EQUIPMENT	YES	NO	N/A
1 Flashlight			
1 Fire Extinguisher (minimum 5lb ABC dry chemical) Inspected within last 2 years			
1 Sharps Container			
Personal CO2 Monitor attached to jump bag.			
PASS Tags – 2 per crew member (Rehab Protocol)			
DOT Book – Emergency Response Guide Book			
TOOLS	YES	NO	N/A
1 16 oz Claw Hammer			
1 Flat-head Screwdriver			
1 Set of Pliers			
1 Adjustable Wrench			
Ring Cutter			
Seatbelt Cutter			
1 Wrecking bar 24” minimum			
1 Set of Battery Jumper Cables			
1 Spring-loaded center punch			

VEHICLE INSPECTION	YES	NO	N/A
Glass (No cracks or obstructions)			
Patient Compartment AC/Heater environmental system shall be capable of heating and cooling the patient care area to a warmth of 78 degrees and a cooling to 70 degrees. (See Hot/Cold Weather Protocol).			
Wipers – operable (do they clear windshield)			
Horn – Operable (manufacture installed)			
Body Condition (holes, rust, major damage)			
Warning devices – operable: Emergency lights and sirens			
Two Way Radio Communication with reliable source			
Exhaust System (leaks under vehicle or high CO reading in patient compartment)			
“Unit Identification Number” shall match identification number on unit permit.			
<u>OPTIONAL CARE - Maintain packaging and adhere to expiration dates.</u>	YES	NO	N/A
CPAP			
Narcan			
ASA – Aspirin 81 mg.			
Albuterol			
Epi-Pen			
Mark I Kit/Duodote			
Electronic access to the Standing Orders and Protocols			

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ALL ITEMS LISTED ON THIS FORM MUST OPERATE WITHIN ITS INTENDED FUNCTION

DO NOT SEND THIS FORM IN WITH THE APPLICATION FOR AMBULANCE PERMIT

Member with unit at time of inspection: _____

Inspector Signature: _____

Last Updated 4/21/15