

State Fire Prevention Commission

Delaware BLS Ambulance Inspection Minimum Requirements

| GENERAL | | | | BANDAGING / BLEEDING CONTROL | YES | NO | N/A |
|--|---|----------|------------------------------------|--|-----|----|-----|
| 1. Supplies that have been removed from their packaging to circumvent the expir removed from service/use as non-sterile. | ration da | ates wil | l be | 1 - Trauma Shears | | | |
| The state of the s | | | | 4 - Rolls Adhesive Tape 2 - 1", 2 - 2" (must be hypoallergenic) | | | |
| 2. Any emergency medical supplies past its expiration date shall be removed from service. | | | 12 - Combination Dressings (5"x9") | | | | |
| | 24 - Sterile Gauze Pads (4"x4") | | | | | | |
| 3. Any medical supplies or equipment deemed to be ALS equipment by OEMS will be removed from the unit. | | | | 8 - Roll bandages, self-adhering/cling various sizes | | | |
| | | | | 2 - Universal and/or multi-trauma dressings (10"x30") | | | |
| 4. Any medical supplies found to be damaged, yellowed or dirty will be taken out of service. | | | | 2 - Elastic ACE (type) bandages (Optional) | | | |
| | 2 - Triangle bandages | | | | | | |
| 5. EMT's and EMR's while on duty must carry their EMS certification card. | 2 - Arterial Tourniquets (such as C-A-T or M-A-T) Tourniquets must be a minimum of at least one inch wide and | | | | | | |
| Diagnostic Equipment (located on unit or in bag) | YES | NO | N/A | cannot be comprised of stretchable rubber or elastic. | | | |
| 1 - Adult Stethoscope (can be combined with below) | | | | 2 - Packs of Hemostatic clotting impregnated gauze that are X-ray detectable | | | |
| 1 - Pediatric Stethoscope (от combo adult/peds stethoscope) | | | | Camiot be powder. Clotting agent must be in bandage usen. | | | |
| 1 - Penlight | | | | 2 - Chest Seals or Sterile Occlusive Dressing 6 x 6 in either direction. Can go | | | |
| 3 - BP Cuffs with gauge (Adult, Large Adult, Child - May use interchangable gauge) | | | | 1 pack of 2 seals is sufficient) | | | |
| | | | | 2 - Wound Pressure Bandage. (Israeli type dressing) | | | |
| 1 - Pulse Ox (Adult and Pediatric Capable) (Medical Device) or RAD 57 | | | | 2 - Eye Gauze Patch | | | |
| 1 - Glucometer with appropriate supplies (lancets, strips (at least 5, must be in date, 2x2's, alcohol prep pads, bandaids) | | | | 1 - Junctional Tourniquet (Optional) (Must be OEMS approved device) | | | |
| 1 - Carbon Monoxide Monitor (RAD 57) (Optional) | | | | 1 - Box of (Band-aids) | | | |
| 1 - Vital Signs Monitor (Optional) (Must be SFPC Approved) | | | | | | | |
| 1 - Penlight 3 - BP Cuffs with gauge (Adult, Large Adult, Child - May use interchangable gauge) 1 - Pulse Ox (Adult and Pediatric Capable) (Medical Device) or RAD 57 1 - Glucometer with appropriate supplies (lancets, strips (at least 5, must be in date, 2x2's, alcohol prep pads, bandaids) 1 - Carbon Monoxide Monitor (RAD 57) (Optional) | | | | larger, but not smaller. Vented chest seal preferred (if commercial device used, 1 pack of 2 seals is sufficient) 2 - Wound Pressure Bandage. (Israeli type dressing) 2 - Eye Gauze Patch 1 - Junctional Tourniquet (Optional) (Must be OEMS approved device) | | | |

| OXYGEN AND DELIVERY EQUIPMENT | YES | NO | N/A | VENTILATION AND AIRWAY EQUIPMENT | YES | NO | N/A |
|--|-----|----|-----|--|-----|----|--|
| 1 - Fixed oxygen inhalation system (min 500 psi), must have in-line regulator and PSI reading readilly accessible to reading in patient compartment) | | | | 1 - Portable Oxygen Key | | | |
| and 1.51 reading reading accessible to reading in patient compartment) | | | | 1 - Adult BVM with Oxygen inlet and reservoir bag (1000-1200ml) | | | |
| Size H or G O2 bottle must be secured with at least 3 straps per NFPA Standards, must be in hydro date (5 years for aluminum, 10 years for steel | | | | | | | |
| with star next to hydro date, should be painted or identified appropriately) | | | | 1 - Child BVM with Oxygen inlet and reservoir bag (750ml) | | | |
| | | | | 1 - Infant BVM with Oxygen inlet and reservoir bag (450-500ml) | | | |
| 1 - Wall mounted flowmeter capable of at least 15lpm with dial down feature down to 2lpm. Flowmeter should be within 1lpm flowing 2-5lpm, 1,5lpm flowing 5-10lpm, 2lpm flowing 10-15lpm) | | | | 4 - BVM transparent masks (Adult, Child, Infant, Neonate (can be incorporated with BVM's) | | | |
| | | | | 1 - Set of Oropharyngeal airways (seven sizes including adult, child and infant - 50mm-120mm) | | | |
| 2 - size D or E portable oxygen bottles (min 500 psi) (Must be in hydrostatic test date and appropriately marked) Bottles should be sealed or be appropriately tagged as to remaining PSI) (Aluminum bottles are 5 year hydro rating, steel are 5 or 10 years, those bottles with * in date are good for 10 years from hydro date.) ALL BOTTLES SECURED IF IN PT COMPARTMENT | | | | 1 - Set of Nasopharyngeal airways with water soluble lubricant (six sizes - 20fr through 36fr and 2 single use packets of lube) | | | |
| 1 - Portable Oxygen Regulator with inline PSI reading, at least 1 DISS high | | | | 1 - CPAP Circuit (SFPC Approved Device), In-line nebulizer capability (Must be able to deliver CPAP and Neb with 1 portable regulator - may | | | |
| pressure port and capable of flowing at least 15lpm with dial down feature down to 2lpm. Flow should be within 1lpm flowing 2-5lpm, 1.5lpm flowing 5- | | | | require adaptor or add. Equip.) 1 - CPAP Medium Mask | | | |
| 10 and 2lpm flowing 10-15lpm. | | | | 1 - CPAP Large Mask | | | |
| PATIENT MOVING /SECURING DEVICES | YES | NO | N/A | 4 - Adult Non-Rebreathers | | | |
| 1 - Ambulance Cot with proper latching mechanisms (Minimum of 3 Patient straps & 1 set of shoulder straps) | | | | 2 - Child Non-Rebreathers | | | |
| straps & 1 set of shoulder straps) | | | | 2 - Infant Non-Rebreathers | | | |
| 1 Stair Chair with appropriate straps | | | | 4 - Adult Nasal Cannulas | | | |
| 1 Flexible stretcher (Such as reeves, megamover, etc.) | | | | 2 - Child Nasal Cannulas | | | |
| 1 Child Car Seat or Pediatric Straps or Captains Chair W/Seat | | | | 2 - Nebulizers | | | |
| 2 - Sets of patient restraints (enough for 4 point restraints) | | | | 2 - Adult Nebulizer Masks | | | |
| | | | | 2 - Pediatric Nebulizer Masks | | | |
| | | | | | | | |

| Portable Kit or Bag (First-in bag) | YES | NO | N/A | SUCTION DEVICES and EQUIPMENT | YES | NO | N/A |
|---|-----|----|-----|---|-----|----|-----|
| 1 - Bag or kit clean and capable of carrying materials | | | | 1 - Onboard Suction Device. Suction Device must obtain 300mmHg of suction | | | |
| 1 - Carbon Monoxide detector for bag/kit | | | | within 4 seconds and maintain 400mmHg of suction. Suction device must be readily accessible and have adjustment for suction power. Must have gauge | | | |
| 12 - Sterile gauze pads (min. 4"x4") | | | | visible to see for suction power in mmHg. Must have disposable suction canister and suction tubing attached. | | | |
| 4 - Sterile dressings (Min 5"x9") | | | | | | | |
| 6 - Self adhering sterile gauze or Goflex gauze rolls (various sizes 2" - 6") | | | | 1 - Yankauer/rigid suction catheter | | | |
| 2 - Arterial Tourniquets (CAT or MAT style) | | | | 4 - Soft suction catheter (6fr to 18fr) (2 catheters must be 6fr-10fr in size and 2 catheters must be 12fr-18fr in size) | | | |
| 2 - Triangular bandages (Min. 36" x 36") | | | | catheters must be 1211-1611 in size) | | | |
| 2 - Rolls Hypoallergenic Tape (1" - 2" rolls) | | | | 1 - Portable Suction Device. Must be battery operated and operate for 20 | | | |
| 2 - Cold Packs | | | | minutes under battery power only. Suction Device must obtain 300mmHg of suction within 4 seconds and maintain 400mmHg of suction. Suction device | | | |
| 1 - Trauma Shears | | | | must be readilly accessible and have adjustment for suction power. Must have gauge visible to see for suction power in mmHg. Must have disposable suction | | | |
| 1 - Pack of Hemostatic clotting impregnated gauze that are X-ray detectable. Cannot be powder. Clotting agent must be in bandage itself. (Optional) | | | | canister and suction tubing attached. | | | |
| 1 - Israeli Type Compression Dressing (Optional) | | | | 1 - Yankauer/rigid suction catheter (on / in portable suction kit) | | | |
| 1 - Set of Chest Seals (Optional) | | | | 2 - Soft suction catheter (6fr to 18fr) (1 catheter must be 6fr-10fr in size and 1 catheter must be 12fr-18fr in size) | | | |
| 1 - Penlight | | | | , | | | |
| 1 - Adult BP Cuff | | | | | | | |
| 1 - Stethoscope (Adult and Peds capable preferred) | | | | Linen | YES | NO | N/A |
| 1 - Portable sharps container | | | | 4 - Sheets | | | |
| 1 - Adult Non-rebreather | | | | 2 - Blankets | | | |
| 1 - Adult Nasal Cannula | | | | 2 - Towels | | | |
| DEFBRILLATION | YES | NO | N/A | 2 - Pillowcases (Optional) | | | |
| 1 AED (Semi-Automatic External Defibrillator) | | | | 1 - Pillow (disposable or impervious) (Optional) | | | |
| 2 Adult Pads (or Combo pads that can do adult/peds) | | | | | • | | |
| 1 Pediatric Pads or Peds capable (key or button) | | | | | | | |

| IMMOBILIZATION DEVICES | YES | NO | N/A | MISCELLANEOUS EQUIPMENT | YES | NO | N/A |
|---|----------|----|-----|---|-----|----|-----|
| Adult & Pediatric splints for 2 arms & 2 legs (inflatable splints, vacuum splints, SAM Splints, or wooden padded boards) (Board Splints should include 2 - 15", 2 - 36", 2 - 54") | | | | 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. | | | |
| 1 - Adult femur traction splint with all straps (can be combined) | | | | 1 - Bulb Syringe (separate from OB Kit) | | | |
| 1 - Pediatric femur traction splint with all straps (can be combined) | | | | 12 Triage Tags and triage ribbons (red, yellow, green, black) | | | |
| 1 - KED or equivalent extraction device with all straps | <u> </u> | | | 1 - Ring Cutter | | | |
| 1 - Adult x-ray translucent back board with appropriate straps - should be free of gouges and cracks, OSHA approved for Blood borne pathogens | | | | 2 Liters of sterile normal saline solution or distilled water for irrigation (any size bottles-totaling 2 liters) | | | |
| 1 - Pediatric x-ray translucent back board or immobilizer with appropriate straps - should be free of gouges and cracks, OSHA approved for Blood borne | | | | 4 Ice Packs | | | |
| pathogens | | | | 4 Hot Packs | | | |
| 1 - Orthopedic or scoop type stretcher with straps (Optional) | | | | 1 - Burn Kit. The kit can be commercially purchased or self-made and must contain the following items: 2 – 60 x 90 Sterile Burn Sheets, 1 Liter Saline, 2 – | | | |
| 1 - Complete head immobilization devices per back board. | | | | Sterile Roll Self-Adhering Gauze Bandages, 2 – 5"x 9", 4 – 4"x4", 4 – 2x2" | | | |
| 2 Adult & 2 Pediatric sized cervical stabilization | | | | Gauze Pads and Cloth Tape. No water gel dressing is allowed. Dry dressings only. | | | |
| devices/extrication collars (should be adjustable) | | | | 2 Emesis pans or basin | | | |
| 1 - Pelvic Stabilization Device suitable to fit any adult size patient (may | | | | 1 - Pediatric Reference Guide (SFPC Approved) (Must be in date) | | | |
| require up to 3 sizes depending on manufacturer) | | | | Delaware BLS Protocols (current edition) (print or electronic) | | | |
| INJURY PREVENTION EQUIPMENT | YES | NO | N/A | INFECTION CONTROL | YES | NO | N/A |
| 1 Flashlight (Cannot be penlight, may be rechargable) | | | | 2 Biohazard bags | | | |
| 1 Fire Extinguisher (minimum 5lb ABC dry chemical) Inspected within last 2 | | | | 3 Hepa masks (N-95 or greater) | | | |
| years | | | | 12 - Surgical style face masks | | | |
| 1 Set of DOT triangle reflectors (3) | | | | 12 face shields (disposable) | | | |
| 1 Sharps Container (can be mounted) | | | | 3 disposable gowns (must be fluid resistant) | | | |
| 20 Copies - Fire Ground Incident Rehab Form | † | | | 4 - boxes of latex free gloves (Small, Medium, Large, Xlarge) | 1 | | |
| Emergency Response Guidebook (current) (print or electronic) | 1 | | | Disinfectant hand wash or hand sanitizer (towelette, spray or liquid) | | | |
| 1 - Traffic Safety ANSI Reflective Vest PER CREWMEMBER | † | | | Disinfectant solution or wipes for cleaning equipment. | | | |

| YES | NO | N/A | VEHICLE INSPECTION | YES | NO | N/A |
|-----|----|--------|--|--|---|--|
| | | | Tires (acceptable tread) | | | |
| | | | RF | | | |
| | | | 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. | | | |
| | | | Mirror-operable (adjustable to offer unobstructed view) | | | <u> </u> |
| | | | Wipers – operable (do they clear windshield) | | | <u>† </u> |
| | | | Horn – Operable (manufacture installed) | | | + |
| | | | License plate (Visible) | | | |
| | | | Reflectors and Lenses (Not Cracked) | | | + |
| | | | Lights operable: turn signals, brake lights, head lights, taillights, | | | 1 |
| | | | | | | |
| | | | Hood and latch, door latches (do they operate as designed) | | | |
| | | | Body Condition (holes, rust, major damage) | | | |
| YES | NO | N/A | Warning devices – operable: Emergency lights and sirens | | | |
| | | | Vehicle Registration and Insurance Card | | | |
| | | | Shock absorbers (excessive bouncing of unit) | | | |
| | | | Exhaust System (leaks under vehicle or high CO reading in patient compartment) | | | |
| | | | "Unit Identification Number" shall match identification number on unit permit | | | |
| | | | | | | |
| | | YES NO | | Tires (acceptable tread) RF RR RIR LIF LIR LIR 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. Mirror-operable (adjustable to offer unobstructed view) Wipers – operable (do they clear windshield) Horn – Operable (manufacture installed) License plate (Visible) Reflectors and Lenses (Not Cracked) Lights operable: turn signals, brake lights, head lights, taillights, parking lights, clearance lights. Hood and latch, door latches (do they operate as designed) Body Condition (holes, rust, major damage) YES NO N/A Warning devices – operable: Emergency lights and sirens Vehicle Registration and Insurance Card Shock absorbers (excessive bouncing of unit) Exhaust System (leaks under vehicle or high CO reading in patient compartment) | Tires (acceptable tread) RF RR RIR LIR LIR 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. Mirror-operable (adjustable to offer unobstructed view) Wipers – operable (do they clear windshield) Horn – Operable (manufacture installed) License plate (Visible) Reflectors and Lenses (Not Cracked) Lights operable: turn signals, brake lights, head lights, taillights, parking lights, clearance lights. Hood and latch, door latches (do they operate as designed) Body Condition (holes, rust, major damage) YES NO N/A Warning devices – operable: Emergency lights and sirens Vehicle Registration and Insurance Card Shock absorbers (excessive bouncing of unit) Exhaust System (leaks under vehicle or high CO reading in patient | Tires (acceptable tread) RF RR RIR LF LR LIR 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. Mirror-operable (adjustable to offer unobstructed view) Wipers - operable (do they clear windshield) Horn - Operable (manufacture installed) License plate (Visible) Reflectors and Lenses (Not Cracked) Lights operable: turn signals, brake lights, head lights, taillights, parking lights, clearance lights. Hood and latch, door latches (do they operate as designed) Body Condition (holes, rust, major damage) YES NO N/A Warning devices - operable: Emergency lights and sirens Vehicle Registration and Insurance Card Shock absorbers (excessive bouncing of unit) Exhaust System (leaks under vehicle or high CO reading in patient compartment) |

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

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

**REQUIRED CHILD RESTRAINT GUIDELINES:

Provider must have one of the following child restraints;

Convertible child safety seat with weight limits up to at least 65 pounds and a 5-point harness. The child safety seat must meet all Federal Motor Vehicle Safety Seat Standard 213 requirements. The child safety seat must not exceed the disposal date recommended by the manufacturer. If the manufacturer does not specify, the car seat must not be older than 6 years old, as determined by the date of the manufacture sticker located on the restraint; or Captains chair with internal child seat, or Pediatric Ambulance Cot Restraint System capable of securing a pediatric patient to the cot. No Inflatable car seats are accepted. If a commercial EMS intended child securing device is used, it must be in good working order, able to be cleaned/disinfected and intended for use with the services transport stretcher. Devices that are approved can be found on the approved devices page published by the State Fire Prevention Commission.

Car Seat Expires on

| Member with unit at time of inspection: | |
|---|----------------------|
| | |
| | |
| Inspector Printed Name: | Inspector Signature: |

Last Updated 4-14-2025

All items in the patient compartment MUST be properly secured to prevent object from becoming projectile in event of vehicle collision. This includes O2, portable bags/equipment, and items stored within the cab. Small items such as items weighing less than 1 pound (i.e. - box of gloves) do NOT need to be secured in the patient care compartment. Items listed in portable kit/bag are in addition to items carried on unit. Items that are on checklist MAY be carried in portable bag (i.e. pulse oximeter or BVM). In addition, multiple bags may be used to satisfy this requirement (i.e. medical bag, trauma bag, oxygen bag). ALS equipment bag stocked and maintained by ALS agency service provider is permitted with permission.

Items identified on the checklist in red must be devices or supplies/equipment that is approved by the State Fire Prevention Commission. Items provided on the approved list have been reviewed by the SFPC and the BLS medical director and approved for use on BLS units within the state. Any agency wishing to have a supply/equipment approved that is not on the approved list must meet requirements as outlined on the approved list and submit it to the SFPC for review and approval.