NORTH COAST EMERGENCY MEDICAL SERVICES

POLICIES AND PROCEDURES

Policy #2205 Page 1 of 4

Subject: Administration - Provider – ALS

Minimum Supply and Equipment List

Associated Policies:

I. Authority and Reference (incorporated herein by references)

- A. Division 2.5 of Health and Safety Code
- B. California Code of Regulations, Title 22, Section 100126
- C. North Coast EMS Policies and Procedures
- D. California Emergency Medical Services Authority "Recommended Ambulance Equipment", contained in California Highway Patrol Ambulance Driver's Handbook (#CHP-894)

II. Purpose

To establish the regional minimum supply and equipment standard for any ambulance or emergency vehicle which responds as, or is held out as, an ALS unit. Units may exceed the equipment and supply quantities listed herein for procedures and medications which are within the certificate holder's scope of practice described in North Coast EMS Policy and Procedures. This policy is also intended to develop a mechanism for base hospitals to establish supply and equipment requirements which exceed the minimum standard for ALS providers within the Base Hospital's zone.

A. Minimum Equipment:

Equipment referred to in Section I. C. of this policy. All equipment referred to in this reference, including but not limited to "suggested" equipment, is mandatory.

- 1. One(1) VHF/UHF mobile radio compatible with local base hospitals and allied agencies and/or One (1) portable VHF radio with V-tach channels. One (1) cell phone (optional).
- 2. One (1) portable DC cardiac monitor/defibrillator which is capable of adult and pediatric monitoring, pacing and defibrillation through adult and pediatric-sized electrodes for primary (first out) units.
- 3. One (1) each, laryngoscope with handle, spare batteries, and a spare light bulb.
- 4. One (1) each, #4 straight and curved laryngoscope blade with light.
- 5. One (1) each, #1 and #2 straight laryngoscope blade with light.
- 6. One (1) each, adult and pediatric Magill forceps.
- 7. One (1) adult malleable stylet.
- 8. One thermometer.
- 9. One pulse oximeter
- 10. One end tidal CO2 monitor or Colormetric device (EZ-Cap), adult and pediatric.
- 11. One (1) Commerically made pelvic binder or cotton hospital sheet.

B. Minimum Supplies:

NORTH COAST EMERGENCY MEDICAL SERVICES

POLICIES AND PROCEDURES

Policy #2205 Page 2 of 4

Subject: Administration - Provider – ALS

Minimum Supply and Equipment List

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All supplies referred to in Section I.C. of this policy. All supplies referred to in this reference, including but not limited to "suggested" supplies, are mandatory.

- 1. One (1) each, Esophageal/Tracheal Airway Device (Combitube).(Approved IGEL agencies are exempt from this requirement)
- 2. Electrodes and conductive medium for paddles or Pads, adult and pediatric monitoring and defibrillation.
- 3. Four (4) each, 14 gauge, 16 gauge, 18 gauge, 20 gauge, 22 gauge, and 24 gauge catheter over needle intravenous catheters.
- 4. One (1) venous constricting band with a width of at least one inch.
- 5. Alcohol preps, water resistant tape, and 2" x 2" gauze pads.
- 6. Assorted syringes in varies sizes.
- 7. One (1) each, 18 gauge by 1 1/2 inch, 23 gauge by 1 inch, and 25 gauge by 5/8 inch hypodermic needles.
- 8. One (1) IV cap.
- 9. One (1) each, 5.0 mm through 9.0 mm endotracheal tubes (in 0.5 mm increments).
- 10. One (1) Endotracheal transducer device (ETTI).
- 11. Suction catheters of various sizes.
- C. Medications using prepackaged products when available.
 - 1. One (1) Activated Charcoal 25 gm without Sorbitol.
 - 2. 18mg Adenosine.
 - 3. 100mg Diphenhydramine HCl
 - 4. One (1) Glucagon 1 mg in 1 unit vial.
 - 5. 4 GM Magnesium Sulfate 10%, or equivalent.
 - 6. 5mg Epinephrine 1:1,000
 - 7. 4mg Epinephrine 1:10,000.
 - 8. 12mg Albuterol Sulfate solution for inhalation
 - 9. 6mg Ipratropium Bromide for inhalation.
 - 10. 324 mg, chewable Aspirin.
 - 11. 4mg Atropine.
 - 12. One (1) multi-dose vial Atropine 0.04 mg/ml containing at least 20 ml's.***
 - 13. 1GM Calcium Chloride 10%.
 - 14. Dextrose 50%, or Dextrose 10% 250cc IV solution or equivalent.
 - 15. 16mg Oral Ondansetron and/or 16 IV/IM Ondansetron.
 - 16. 1.6mg Nitroglycerine tablets or meter-dosed spray.
 - 17. One (1) Sodium Bicarbonate 44.6 mEq.

NORTH COAST EMERGENCY MEDICAL SERVICES

POLICIES AND PROCEDURES

Policy #2205 Page 3 of 4

Subject: Administration - Provider – ALS

Minimum Supply and Equipment List

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- 18. 4mg Naloxone
- 19. Dopamine 400mg***
- 20. Tranexamic Acid 1 Gram***
- D. In addition Agencies must carry a minimum of one each from each section:
 - 1. Analgestic:
 - a. 20mg Morphine
 - b. 300mcg Fentanyl
 - c. 100mg Ketamine
 - 2. Antiarrythemic:
 - a. 300mg Lidocaine HCl
 - b. 450mg Amiodarone
 - 3. Benzodiazepine:
 - a. 20mg Diazepam
 - b. 20mg Lorazepam
 - c. 20mg Midazolam
- E. Minimum Number of IV Solutions:
 - 1. 1(one) 50cc parcial fill NS/D5W bag or Volutrol.
 - 2. 4,000ml Isotonic IV Solution.
 - 3. Two (2) each, 60 gtt/ml, and 10 gtt/ml intravenous infusion sets or equivalent.
- F. Other Equipment:
 - 1. One (1) small volume nebulizer.
 - 2. Fifteen (15) triage tags.
 - 3. One (1) each, nasogastric tube, 12, 14, 16, and 18 French or equivalent.
 - 4. One (1) infant feeding tube, 8 French or equivalent.
 - 5. One (1) 60 ml irrigation (catheter tip) syringe.
 - 6. One (1) infusion pump, drip or volumetric.
 - 7. One (1) transtracheal over the needle catheter (13 gauge) or equivalent or NuTrach device for adults.
 - 8. Two (2) 12 14 gauge angiocatheters minimum 3 inch in length, or equivalent or prepackaged needle decompression kit.
 - 9. Two (2) intraosseous needles, one each adult and pediatric or IO device with pediatric and adult needles.
 - 10. Two (2) Intranasal (MADD) devices.

NORTH COAST EMERGENCY MEDICAL SERVICES POLICIES AND PROCEDURES

Policy #2205 Page 4 of 4

Subject: Administration - Provider – ALS

Minimum Supply and Equipment List

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11. Chlorhexidine pads for invasive interventions. (needle decompression, needle cricothyrodomy, and access of pre-existing vascular device.)

- G. Agencies with prior NCEMS approval may carry:
 - 1. 80mg Furosemide.
 - 2. 20 USP units Oxytocin.
 - 3. I-Gel airway device pediatric and adult one (1) each, 1, 1.5, 2, 2.5, 3, 4 and 5.

III. Additional Base Hospital Requirement

A Base Hospital may require an ALS provider within the base hospital's zone to maintain supplies and equipment which exceed these minimum requirements. If a base hospital seeks to require any additional inventory requirements, the base hospital shall:

- 1. Propose the additional requirements in writing with reasons and justification to the North Coast EMS Medical Director; and,
- 2. Copy the proposal to the affected ALS provider(s).
- 3. The North Coast EMS Medical Director will return a decision within forty-five (45) days unless additional time is required to receive comments regarding the base hospital proposal. All decisions will be made within ninety days (90) of receipt of proposal.
- III. No agency without prior approval from NCEMS will carry equipment or medications section (II,G).

Approved By		Revision
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EMS Director	(Signature on File at EMS Agency)	
		11/15/2021
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EMS Medical Director	(Signature on File at EMS Agency)	