

## Utah Specialized Neonatal Air Ambulance Equipment Checklist

Name of service: \_\_\_\_\_

Service #: \_\_\_\_\_ Permit #: \_\_\_\_\_

Rotary       Fixed Wing      Year \_\_\_\_\_

Annual       Re-license       New vehicle       Original license

### General Equipment

- 1 Isolette with restraints as specified in the Utah State Vehicle Safety Codes and FAA rules. Power source capable of providing all necessary elements for the duration of the transport. Heat source capable of maintaining a core temperature within the range of 36.5 to 37.0 degrees C
- 1 Portable catalytically activated warming mattress
- 1 Insulating blanket
- 1 Thermometer not dependent on an outside power source
- 3 Sets crew biohazard protection, i.e.; goggles, gloves, masks
- 1 Waterless disinfecting hand cleaner
- 2 Orogastric tubes, #5 french, #8 french
- 1 Anderson tube, #10 french
- 1 Replogle tube, #10 french
- 1 each Surgical lubricant & Tube Viscous Lidocaine HCL, 2%.
- 2 Diapers

### Airway Equipment

- 1 Ventilation equipment must have the following: Independent oxygen & air supply, the ability to blend oxygen & air, administer blended oxygen & air by a face mask, resuscitation mask, nasal cannula, or endotracheal tube, all adapters necessary to connect to all ventilation equipment & all standard hospital gas/air/O2 source outlet if needed, capable of providing blended oxygen with continuous positive inspiratory pressure & intermittent ventilation
- 2 Suction apparatus one must be portable capable of providing suction between 20 & 100cm of water & 6 Suction catheters, 6, 8, & 10 french.
- 3 Normal saline bullets for suctioning
- 2 1 simple and 1 non-rebreather masks, Pediatric sizes.
- 2 Nasal cannulas, infant & Pediatric sizes.
- 1 Portable oxygen tank & regulator capable of metered flow delivery at a rate of 2- 15 lpm
- 1 Laryngoscope, curved & straight blades in various sizes for pediatric- neonatal; spare batteries & bulb.
- 10 Endotracheal tubes, 2 each sizes, 2.0, 2.5, 3.0, 3.5, & 4.0, and all skin preparation materials and tape to securing the tube. One Stylet.
- 1 Neonatal size manual ventilating bag, with masks sized for premature & full term neonates
- 1 Neonatal size self-inflating resuscitation bag with reservoir
- 1 End title CO<sub>2</sub> monitoring device & all adapters for infant - pediatric.
- 1 Neonatal stethoscope
- 1 Transilluminator with independent power source
- 2 Needle aspiration kits: all supplies needed to rapidly decompress a pneumothorax
- 1 Surgical tray with all equipment necessary for placement of umbilical line and chest tube
- 4 Surgical gloves in assorted sizes.
- 4 Chest tubes, 10 & 12 french or pigtail catheters
- 2 Heimlich valves or one way valve device

### Cardiac & Vital Sign Equipment

- 1 Monitoring device able to measure heart rate on a continuous basis including ECG leads
- 1 Monitoring device able to measure respiratory rate on a continuous basis
- 1 Monitoring device able to measure non-invasive blood pressure with assorted cuff sizes for neonates
- 1 Monitoring device able to measure invasive blood pressure including a transducer
- 1 Monitoring device able to measure patients. temperature
- 1 Monitoring device able to measure isolette ambient air temperature.

- 1 Portable neonatal glucose monitoring device and all supplies necessary to run blood glucose

### IV Fluids & Supplies

- 20 Alcohol & Providine-iodophor preps.
- 8 Over-the-needle catheters, two each 20g, 22g, 24g and 26g.
- 2 Butterfly IV needles, 23g & 25g
- 2 Interosseous infusion setups
- 6 Umbilical catheters, 2.5, 3.5 & 5.0 french
- 20 Syringes & Needles assorted sizes, 1 cc – 60 cc.
- 2 Tape or clear dressings to secure IV
- 1 Set of blood culture tubes
- 2 each Sterile T connectors, & three way stopcocks
- 3 IV pump capable of providing & regulating constant intravenous infusions accurate to 1 cc/hour & appropriate tubing for the IV pump appropriate IV pump tubing
- 3 100cc mixing solutions for Parenteral Medications
- 1 each 30cc Bacteriostatic Normal Saline. & 30cc Bacteriostatic water.
- 2,000 cc I.V. Fluids

### Drug Requirements

- Albumin 5%
- Alprostadil
- Hypoglycemic Antidote (Ex: D25W)
- Anticonvulsant (Ex: Phenytoin, Diazepam, Lorazepam, Phenobarbital)
- Adrenergic Agonist (Ex: Dopamine)
- sympathomimetic agent (Ex. Dobutamine)
- Sedative Hypnotic for R.S.I.i.e. Benzodiazepam (Ex: Valium, Versed)
- Antihistamine (Ex. diphenhydramine)
- Antibiotics (Ex. Gentamicin, Ampicillin)
- Diuretic (ex. Furosemide, Mannitol)
- Antiarrhythmics to cover ACLS algorithms for tachydysrhythmias, bradydysrhythmias, asystole (Ex : Lidocaine, Magnesium Sulfate, Procainamide, Adenosine, Atropine Sulfate & Epinephrine)
- Anti-clotting agent (Ex. heprin)
- Analgesic (Ex. Morphine, Fentanyl )
- Narcotic Antagonist (Naloxone HCL)
- Alkalinizing Agent (Ex : Sodium Bicarbonate 4.2%)
- Phytonadione
- Neuromuscular Blocker (ex. pancuronium, rocuronium)

### Patient Care Area

- Temperature & ventilation system for the patient treatment area.
- Overhead or dome lighting of at least 40-foot candle at the patient level
- Sufficient patient isolated from the cockpit to minimize in-flight distractions and interference & flight safety
- "No smoking" signs shall be prominently displayed inside
- Survival gear appropriate to service area & number of occupants.
- Controlled Substance lockup system if to be left unattended
- Configured in such a way that medical personnel have access to patient to begin & maintain basic and advanced life support care.
- Configured in such a way that allows patient airway maintenance and adequate ventilatory support from the secured, seat-belted position.

### Acknowledgment of Inspection

The listed equipment, supplies, and drug requirements were inspected, on board the above vehicle, by a representative of the Utah Bureau of EMS. Any items circled were not found at the time of the inspection. Please sign and return the yellow copy when the noted deficiencies have been corrected and within 30 days following the date of the inspection.

\_\_\_\_\_, \_\_\_\_\_  
Agency Representative      Date

\_\_\_\_\_, \_\_\_\_\_  
Bureau Representative      Date

### Circled Deficiencies Have Been Corrected

\_\_\_\_\_, \_\_\_\_\_  
Agency Representative      Date