

**PENNSYLVANIA DEPARTMENT OF HEALTH
BUREAU OF EMERGENCY MEDICAL SERVICES**

QUICK RESPONSE SERVICE INSPECTION CHECKLIST

I. GENERAL INFORMATION: Date Stickers: Yes _____ No _____
Decals: Yes _____ No _____

Name of Quick Response Service: _____

Address: _____

City _____ State _____ Zip _____

License Plate # : _____ Year: _____ Make: _____ Model: _____

Vehicle Identification # (VIN): _____ Mileage: _____

Date Inspected: _____ Affiliate # : _____

Regional EMS Council: _____

II. DOCUMENTS AND VEHICLE	PRESENT	DEFICIENT	CORRECTED
Personnel Roster			
Patient Care Reports			
Infection Control Plan			
Vehicle Meets Current PENNDOT Requirements			
III. SUPPLIES AND EQUIPMENT	PRESENT AND OPERATING	DEFICIENT	CORRECTED
Portable or Manual Suction Unit (1)			
Suction Catheters, Flexible (6)/Rigid (1)			
Airways, Oropharyngeal (6 different sizes)			
Airways, Nasopharyngeal (5 different sizes)			
Sphygmomanometer (S,M,L) (1 each)			
Stethoscope (1)			
Penlight (1)			
Portable Oxygen Unit (1)			
Oxygen Delivery Devices:			
Pocket Mask (1)			
Nasal Cannula (Adult/Pediatric-1 each)			
High Concentration Masks (Adult/infant and Pediatric- 1 each)			
Dressings:			
Occlusive (3" x 4") (4)			
Soft Self-Adhering (6 rolls)			
Sterile Gauze Pads (3" x 3") (25)			
Multi-Trauma (10" x 30") (4)			
Adhesive Tape (4 rolls of at least 2 different sizes)			
Immobilization Devices:			
Rigid/Semi Rigid Neck Immobilizers (SM., Med., Lg., Ped) (1 of each)			
Bag-Valve Devices:			
(Adult Infant and Pediatric) (1 each)			
Sterile Burn Sheets (4" x 4") (2)			
Cold Packs, Chemical (4)			
Sterile Water/Normal Saline (2 liters)			
AED (Optional for Authorized Services)			
Epinephrine Auto Injector-Adult/Ped (2ea-Optional for Authorized Services)			

III. SUPPLIES AND EQUIPMENT (Cont.)	PRESENT AND OPERATING	DEFICIENT	CORRECTED
Triangular Bandages (8)			
Sterile OB Kit (1)			
Separate Bulb Syringe (1)			
Bandage Shears (1)			
Regional approved Triage Tags (25)			
Blankets (2)			
Instant Glucose (45 grams)			
Emergency Jump Kit			
Splinting Materials- (6 sizes)			
Hard Hat (1 per crew member)			
Radio Communications Equipment			
Emergency Response Guidebook (Current Edition)			
Gloves, Leather (1 pair per crew member)			
V. PERSONAL PROTECTION EQUIPMENT	PRESENT AND OPERATING	DEFICIENT	CORRECTED
Clear Eye Protection*			
Face Mask*			
Gown/Coat*			
Surgical Cap/Foot Coverings*			
Double Barrier Gloves*			
Biological Waste Container			
* 1 set/pair per responding crew member			
<p style="text-align: right;">Inspected By: _____ (Printed Name)</p> <p style="text-align: right;">Signature: _____</p> <p style="text-align: right;">Date forwarded to EMS Office: _____</p>			

Jan-09

