



ADVANCED LIFE SUPPORT (ALS) PROVIDER UNIT MINIMUM INVENTORY

I. AUTHORITY: California Health and Safety Code Division 2.5, 1797.200. California Code, Title 22, Div 9, sec 100170.a.2

II. APPLICATION:

This policy describes the standard minimum drug and equipment inventory for an Advanced Life Support (ALS) unit in Orange County.

Title 8 CCR Section 5193, Bloodborne Pathogens, requires sharps injury prevention/needleless products to be utilized when appropriate.

All equipment and supplies must be latex free.

III. DEFINITIONS:

“Optional” means equipment, supplies, or pharmaceuticals that are not required in the minimum inventory, but which ALS providers are authorized to include in unit inventories.

“or” means either equipment, supply, or pharmaceutical is appropriate and effective. It does not imply that both must be stocked in inventory, rather either or both can be stocked.

IV. CRITERIA:

The number or amount of each item listed is at the discretion of the ALS provider based on a specific unit's needs for its service area. Equipment, supplies, and drug inventory that is not part of the authorized Orange County ALS Scope of Practice is not permitted without formal approval of the California EMS Authority upon request of the Orange County EMS Agency. Inventory for special ALS units (tactical, fire line, search and rescue) are defined in other OCEMS policies.

V. EQUIPMENT:

BAG-VALVE DEVICE WITH OXYGEN INLET AND RESERVOIR: Adult and Pediatric

BANDAGE SCISSORS

BACKBOARD: Adult, X-ray transparent. Minimum of three straps

AUTOMATIC CHEST
COMPRESSION DEVICE:
(Refer to Note #1 below) U.S. Food and Drug Administration approved with continuous hands free chest compression, portable, and battery driven.
Compression constriction band design or chest encircling band with plunger design.
Pass through defibrillator capable or design that allows for cardiac defibrillation with device in place.

LARYNGOSCOPE: Blades: Adult - curved/straight #3 and #4 recommended
Pediatric - straight #1 and #2 (for direct laryngoscopy foreign body removal)

MAGILL FORCEPS: Adult and Pediatric; closed tip



**ADVANCED LIFE SUPPORT (ALS) PROVIDER UNIT
MINIMUM INVENTORY**

MONITOR / DEFIBRILLATOR:	Biphasic, adjustable output, defibrillator with oscilloscope (FDA approved) Defibrillator-pacer pads with functional cables and connectors ECG pads with functional cables and connectors Synchronizer: designed to deliver a synchronized defibrillating pulse, timed to avoid the T-wave of the cardiac cycle. 12-lead ECG capability with internal interpretation protocol to identify an acute myocardial infarction and ability for transmission to CVRC. Transcutaneous pacing module End-tidal CO ₂ monitor with either single or continuous wave-form reading output Recorder: Must be able to produce a paper print out of high quality. Batteries/Charge Units as Main Power Source
SPHYGMOMANOMETER:	Assorted cuff sizes, including adult and pediatric
STETHOSCOPE:	Disposable or non-disposable diaphragm type
SUCTION UNIT:	Portable, with disposable canister
TOURNIQUET:	Manufactured, hemostatic, FDA and California EMS Authority approved
TRACTION SPLINTS:	Lightweight, portable: adult, pediatric (BARRIER PROTECTION ACCEPTABLE)

NOTE #1: Automatic Chest Compression Device:

Deployed as determined by ALS provider to be immediately available to maintain continuation of CPR when patient is physically moved and chest compression by hand will be interrupted [such as loading onto gurney (stretcher) or during transport and off-loading].

OPTIONAL APPROVED EQUIPMENT:

AUTOMATIC TRANSPORT VENTILATOR:	Pressure or volume cycled with adjustable tidal volume and rate, audible and visible alarms and alerts with digital monitor screen. Battery powered (not pressure cycled from oxygen cylinder). Must be FDA approved.
BREAKAWAY FLAT:	Vertically stable for full spinal immobilization
BACKBOARDS:	Pediatric
EXTRICATION SPLINT:	Horizontal flexible, vertical rigidity; stabilizes head, neck and back
END-TIDAL CO ₂ NASAL/BVM:	End-tidal CO ₂ nasal cannula and adapter for BVM.
RESUSCITATOR:	40 L/min maximum delivery capability, portable, lightweight, minimum 6' length hose to head, constant flow valve 0-15 L/min demand valve head
SLIDING (TRANSFER) FLAT:	Required for IFT- ALS units.
INFUSION PUMP:	Adjustable rate for Intravenous medication delivery at volume (milliliters) per minute or hour; battery operated with digital delivery readout and visual/audible malfunction alarms. Must be FDA approved. Required for IFT- ALS units.



**ADVANCED LIFE SUPPORT (ALS) PROVIDER UNIT
MINIMUM INVENTORY**

VIDEO LARYNGOSCOPE: Battery powered portable. (internal memory card optional).

VI. SUPPLIES:

Airway adapters: standard 15mm ID X 22mm OD both ends
Airway, nasopharyngeal: 4.5mm - 9.0mm or adult and pediatric sizes
Airway, oral: Adult and pediatric sizes
Alcohol wipes
Arm board: short, with rigid insert, padded (BARRIER PROTECTION ACCEPTABLE)
Arm board: long, with rigid insert, padded (BARRIER PROTECTION ACCEPTABLE)
Atomizer for nasal administration of medications

Bags (for trash)
Basin, emesis (BARRIER PROTECTION ACCEPTABLE)
Blanket, disposable
Burn dressing: Clean sheet or commercial burn covering sheet

Cannulas, nasal oxygen: Adult and pediatric
Catheter, suction: sizes #6, #10, #14
Cold packs, chemical (BARRIER PROTECTION ACCEPTABLE)

Combitubes® or equivalent: Regular and Small Adult
AND/OR
King® Airway or equivalent: Sizes 4, 5 (size 3 optional)
AND/OR
Supraglottic Airway (Laryngeal Mask Airway): Sizes 4, 5 (size 3 optional)

Dressings: Kerlix or equivalent
Gauze 4 in. x 4 in. /2 in. X 2 in.
OP Site® or equivalent, approx. 2" x 3" (for IV sites)

ET tubes: soft cuff, assorted adult sizes with stylets

Flexible intubation guide

Gloves: Assorted sizes, including clean and sterile packaged
Glucometer with non-expired test strips and lancets

Intraosseous (IO) needles with or without introducer device
IV catheters, over needle type: assorted sizes and saline lock chambers (fittings)
IV tubing: Macro drip, with flow rate regulator and two medication injection sites and a "Y" adapter.

Masks, disposable ventilation: sizes Neonate, infant, and child
Mask, oxygen non-rebreather: adult and pediatric

Nebulizer, Acorn type, with mouth piece and mask attachments
Needle-ARS type for chest decompression OR Needle chest decompression kit
Needles for IM injection, assorted sizes
Needle (sharps) disposal unit

OB kit with bulb syringe



ADVANCED LIFE SUPPORT (ALS) PROVIDER UNIT MINIMUM INVENTORY

Pediatric length-based resuscitation tape
Personal protective equipment (OSHA compliant masks, gowns, gloves, eye shields)
Pulse oximetry device, may be incorporated within defibrillator

Razors, disposable
Restraints: Soft

Solution, sterile; NS 1000 ml (for irrigation)
Suction, tonsil tip; semi rigid or rigid, large bore (Yankauer suction tip)
Syringes, assorted sizes

Tape (paper, plastic hypoallergenic): assorted sizes and types
Tourniquets, for facilitating IV placement

Petroleum (such as Vaseline®) gauze

Underpads (such as CHUX®)/protective pads)

OPTIONAL APPROVED SUPPLIES:

Band-Aids

CO₂ detector – End tidal CO₂ detector attachable to endotracheal tube (colorimetric)

Dressings: Abdominal gauze
Eye pads
Hemostatic gauze

ET tube holders

Impedance Threshold Device

Infant Transport Mattress, heated, consistent temperature not to exceed 42 degrees centigrade
IV tubing: Micro drip, 60 drops/mL

One-way 'flutter' valve

Penlight/flashlight

Restraints: Hard restraints padded and quick release per Policy 330.57.

Solution, sterile; NS 1000 mL (for irrigation)

Thermometer; temporal, otic, or oral; electronic with disposable patient contact probes
Tubing, oxygen connecting

**ADVANCED LIFE SUPPORT (ALS) PROVIDER UNIT
MINIMUM INVENTORY****VII. PHARMACEUTICAL INVENTORY:**

<u>PHARMACEUTICAL</u>	<u>PREPARATION</u>
Adenosine	12 mg/ 4mL vial or prefilled syringe or 6 mg/2 mL vial or prefilled syringe
Albuterol (for nebulizer inhalation)	3.0 mL (2.5 mg) of a 0.083% solution
Amiodarone	50 mg/mL, vial or prefilled syringe
Aspirin, chewable	81 mg tablet individually packaged or 325 mg tablet individually packaged
Atropine	1 mg ampule, vial or prefilled syringe
Dextrose 10%	250 mL IV bag, 10% solution
Diphenhydramine (Benadryl™)	50 mg/mL, 1 mL single dose vial or carpupject
Epinephrine 0.1 mg/mL	1 mg/10 mL prefilled syringe
Epinephrine 1.0 mg/mL	1 mg/1 mL ampule, 1 mg/1 mL vial, or 30 mL vial
Glucose, oral solutions	Various formulations
Glucagon	1 mg ampule with diluent
Lidocaine 2% solution	100 mg / 5 mL, 5 mL prefilled syringe
Midazolam	5 mg/1 mL vial or carpupject, 10 mg/2 mL vial
Morphine sulfate (may carry or replace with optional fentanyl)	10 mg/10 mL, prefilled syringe or 4 mg/ 1 mL, carpupject; or 10 mg/1 mL, 1 mL vial
Naloxone (Narcan®)	Various IV/IM formulations ampules, vials, prefilled syringe, or carpupjects; or 4mg/0.1 mL preloaded nasal spray
Nitroglycerin	0.4 mg/metered dose spray, 0.4 mg/tabs or 0.4 mg powder (single dose packets)
Normal saline for nebulized inhalation	10 mL prefilled syringe or vial without preservative
Normal saline	1000 mL or 500 mL or 250 mL sterile IV bag
Ondansetron (Zofran®)	4 mg oral dissolving tablet (ODT) or 4 mg/2 mL prefilled syringe or 4 mg/2 mL single dose vial
Sodium bicarbonate	1mEq/mL, 50 mL prefilled syringe (8.4%) or 44.6 mEq/50 mL prefilled syringe (7.5%)

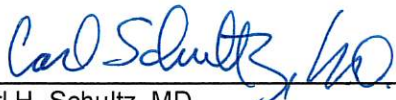


**ADVANCED LIFE SUPPORT (ALS) PROVIDER UNIT
MINIMUM INVENTORY**

OPTIONAL APPROVED PHARMACEUTICALS

<u>PHARMACEUTICAL</u>	<u>PREPARATION</u>
Albuterol metered dose inhaler	18 gram canister (200 inhalation doses) (SINGLE PATIENT USE ONLY)
Atropine	0.4 mg/mL, 20 mL vial
Duodote Autoinjector	Prepackaged kit containing Atropine and 2-PAM
Epi Pen Auto Injector	0.3 mg Auto injector
Epi Pen Auto Injector Junior	0.15 mg Auto injector
Fentanyl (may carry in addition to morphine or as primary opioid in place of morphine)	100 mcg/2 mL vial or carpuject
Hydroxocobalamin	5 gm in 200 mL 0.9% normal saline, 25 mg/mL

Approved:



Carl H. Schultz, MD
OCEMS Medical Director



Tammi McConnell, MSN, RN
OCEMS Administrator

Original Date: 1/31/1989
Reviewed Date(s): 9/02/2014, 10/03/2014, 8/21/2015, 6/20/2016, 9/01/2016; 4/1/2017; 02/6/18,
01/10/2019, 02/10/2020; 05/21/2021, 06/1/2022; 10/24/2023
Revised Date(s): 8/21/2015, 6/20/2016, 11/1/2016; 4/1/2017; 02/6/18; 11/2/2018; 01/10/2019,
02/10/2020; 06/07/2021; 09/06/2022; 10/24/2023
Effective Date: 4/01/2020; 07/07/2021; 10/01/2022; 11/01/2023