

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

Aircraft #

**AIR (Rotorcraft) Inspection Checklist**

**I. GENERAL INFORMATION:**

Name of Air Ambulance Agency:

Address:

(Primary Headquarters)

City

State

Zip

FAA Registration # :

Make:

Serial # :

Model:

Date Inspected:

Affiliate # :

Regional EMS Council:

	YES	NO	N/A
Was a deficiency notification issued for this vehicle?			
Is a copy of the deficiency notification attached to this form?			
Is a reinspection required?			
<b>AIR/EQUIPMENT</b>	<b>PRESENT AND OPERATING</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
Lights:			
Interior for close observation of patient			
Fire Extinguisher (1) (5 B:C, Current Inspection)			
"Air Worthiness Certificate" from FAA			
FAA Form 337 (items specifically needed) Aircraft Registry			
Items Secured			
Patient Litter with manufacture approved straps			
A physical Barrier between the pilot, throttles, flight controls and radios and the patient(s)			
110-volt electrical outlet for each pt.			
Radio Equipment			
for pilots to comm. with Hospitals, PSAPs & grd. amb.			
Installed Oxygen with capacity of 1200L			
(at inspection at least 1650 psi & one 0-25 lpm flow meter)			
Climate Control (60-85) for cabin during flight			
<b>MEDICAL SUPPLIES/EQUIPMENT</b>	<b>PRESENT AND OPERATING</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
Current Version Statewide EMS Protocols			
Portable Suction Unit (1)(300mm/Hg in 4 sec.)			
Suction Catheters: (Sterile)			
Rigid (2)			
French (6 total) (1 each 6 & 8, 2-10 or 12, 2-14 or 16)			
<b>MEDICAL SUPPLIES/EQUIPMENT (CONT)</b>	<b>PRESENT AND OPERATING</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
Airways:			
Oropharyngeal (6 different sizes -			
to include one 0-1, one 2-3, & one 4-5)			
Nasopharyngeal (5 different sizes -			
to include one 16-24 Fr. & one 26-34 Fr.)			
Portable O2 cylinder with flow meter 0-25 lpm (1)			
With 300L & non-sparking wrench/tank opening device			
Secured in ship at all times			

Spare O2 cylinder secured in ship at all times (1)			
Oxygen Delivery Devices:			
Nasal Cannulas (Adult & Pediatric- 1 each)			
High Concentration Masks (Adult, Infant, Pedi - 1 each)			
Bag Valve Mask Devices- (1)Adult & (1) Pedi (450-700cc)			
Masks to include adult, neonatal, infant & child			
Sphygmomanometer			
(Child, Adult & Thigh(Lg)-1 each or interchangeable cuffs)			
Stethoscope (Adult & Pediatric - 1 each)			
Stethoscope Doppler(1)			
Penlight (1)			
Dressings:			
Multi-Trauma (10" x 30" ) (4)			
Occlusive ( 3" x 4" ) (4)			
Sterile Gauze Pads ( 3" x 3" ) (25)			
Soft Self Adhering ( 6 rolls )			
Adhesive Tape ( 4 rolls assort., 1 must be hypoallergenic)			
Bandage Shears (1)			
Commercial "Tactical" Tourniquet (1)			
Immobilization Devices:			
Rigid/Semi Rigid Neck Immobilizers			
(S, M, L, & Pedi.-1 each or Multi -size (3 & 1 Pedi)			
Pediatric Length - Based Drug Dosing Tape (current)- ALS			
Sterile Water/Normal Saline- 2 liters			
Cold Packs, Chemical (4)			
Heat Packs, Chemical (4)			
Sterile OB Kit (1)			
Separate Bulb Syringe (1) Sterile			
Thermal Blanket-Silver Swaddler or roll of Sterile Foil (1)			
Blankets (2)			
Sheets (4)			
Emergency BLS/ALS Jump Kit (1)			
Thermometer (1) elec, dig, non-tympanic			
Lubrication (2cc or Larger tube) sterile water soluble (2)			
CPAP Ventilation - portable equipment			
Pulse Oximetry			
<b>ALS EQUIPMENT/SUPPLIES</b>	<b>PRESENT AND OPERATING</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
Endotracheal Tubes:(must be sterile & indiv. wrapped)			
2.5 mm or 3.0 mm (uncuffed) (2)			
3.5 mm or 4.0 mm (uncuffed) (2)			
4.5 mm or 5.0 mm (2)			
5.5 mm or 6.0 mm (2)			
6.5 mm or 7.0 mm (2)			
7.5 mm or 8.0 mm (2)			
8.5 mm or 9.0 mm (2)			
Laryngoscope:			
Handle with Batteries (1)			
Spare Batteries and Bulbs			
Blades:			
Straight # 1,# 2,# 3- (1 each)			
Curved # 3, # 4- (1 each)			
Stylette - Malleable (2 Pedi, 1 Adult) must be sterile			
Forceps, Magill (Adult/Pediatric- 1 each)			

Non-surgical Alternative/Rescue Airways - Either (3) Kings			
(size 3,4,5) or (2) Combitubes (small & adult- 1 each)			
Cricothyrotomy Set Sterile (Surgical or Needle)			
Flutter Valve Sterile (1)			
Meconium Aspirator (1)			
Nebulizer System (1)			
Sponges/Preps/Wipes-Alcohol (10)			
Electronic Glucose Meter (1)			
IV Therapy Supplies:			
Catheters Over the Needle:			
14 gauge (4)			
16 gauge (4)			
18 gauge (4)			
20 gauge (4)			
22 gauge (4)			
24 gauge (2)			
IV Administration Supplies:			
Microdrip (50-60 drops/ml) (2)			
Macro drip (10-20 drops/ml) (2)			
IV Solutions (2,000ml total)			
Tourniquets for IV Use (2)			
Medications and Supplies:			
Adenosine			
Aspirin (81 mg)			
Atropine sulfate			
Benzodiazepines (at least one):			
Diazepam			
Lorazepam			
Midazolam			
Bronchodilators (Albuterol or Albuterol Ipratropium Bromide)			
Dextrose			
Diphenhydramine HCl			
Epinephrine (1:1,000)			
Epinephrine (1:10,000)			
Glucagon			
Lidocaine HCl			
<b>ALS EQUIPMENT/SUPPLIES (CONT)</b>	<b>PRESENT AND OPERATING</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
Narcotic Analgesics (at least one):			
Fentanyl			
Morphine Sulfate			
Nitroglycerine, Sublingual			
Normal Saline Solution			
Sodium Bicarbonate			
Emergency Drugs - Current Dates - Yes / No			
Hypodermic Needles:(must be sterile & indiv. wrapped)			
16-18 gauge (4)			
20-22 gauge (4)			
23-25 gauge (4)			
Intraosseous (14-18 gauge ) (2)			
Syringes (2 with at least one being 1 ml volume)			
Defibrillator/Monitor			
12 Lead Cables & Pacing and Transmitting capabilities (Adult & Pedi)			

(1) Adult and (1) Pediatric Defibrillator Pads			
Spare Paper (1)			
Electrodes, ECG (Adult/Pedi.) (12 each)			
Electronic Waveform Capnography			
<b>PERSONAL PROTECTIVE EQUIPMENT</b>	<b>PRESENT AND OPERATING</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
Hand light (2)			
Survival Bag (1)			
Flight Helmet with built in communications (1 per crew member)			
<b>PERSONAL INFECTION PROTECTION EQ.</b>	<b>PRESENT</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
Eye Protection - clear & disposable*			
Face Mask*			
Gown/Coat*			
Surgical Cap/Foot Coverings*			
Exam Gloves*			
Red Bags			
Sharps container-secured			
N-95 Respirator*			
Hand Disinfectant - Non-water (1 container)			
* Disposable -one set/pair per responding crewmember			
Electronic Deficiency Form Completed	Yes	N/A	
Digital Images Captured	Yes	N/A	
Vehicle Placed Out of Service (Per I.B. 2013-001)	Yes	N/A	
	Inspected By:		(Printed Name)
	Signature:		
	Date Forwarded to BEMS:		