

**NORTH EGYPT EMS SYSTEM  
MT. VERNON, ILLINOIS  
EMS PLAN**

**ALS VEHICLE MEDICATION INSPECTION FORM**

<b>Adenocard (Adenosine) 6 mg unit dose</b>	<b>3 Unit dose</b>	_____
<b>Amiodarone 150mg Ampule</b>	<b>3 Ampules</b>	_____
<b>Albuterol (Ventolin) 2.5mg in 3ml</b>	<b>2 Unit dose</b>	_____
<b>Atropine 1 mg/10 ml</b>	<b>6 Syringes</b>	_____
<b>Baby Aspirin 81 mg tablets (chewable)</b>	<b>1 Bottle</b>	_____
<b>Calcium Chloride 10% 1 Gm./10ml</b>	<b>2 Syringes</b>	_____
<b>Diphenhydramine (Benadryl) 50 mg/ml</b>	<b>1 Ampule/Vial</b>	_____
<b>Dextrose 50% 25 Gm/50 ml</b>	<b>2 Syringes</b>	_____
<b>Dopamine (Intropin) 200mg/250mg premix</b>	<b>1 Pre-mixed</b>	_____
<b>Epinephrine 1:10,000 - 1 mg/10ml</b>	<b>10 Syringes</b>	_____
<b>Epinephrine 1:1000 -1ml</b>	<b>2 Ampules.</b>	_____
<b>Lasix (Furosemide) 100mg/10cc</b>	<b>1 Ampule./Vial</b>	_____
<b>Glucagon 1 mg unit dose</b>	<b>1 Ampule./Vial</b>	_____
<b>Lidocaine 2% 100 mg/5ml</b>	<b>3 Syringes</b>	_____
<b>Lidocaine 1 Gm./250 ml D5W premix</b>	<b>1 Premix bag</b>	_____
<b>Morphine 10 mg -1 ml</b>	<b>1 Tubex</b>	_____
<b>Naloxone (Narcan) 2mg preload syringe</b>	<b>1 Syringe</b>	_____
<b>Nitroglycerin 0.4 mg (1/150 gr) tabs</b>	<b>1 Bottle</b>	_____
<b>Sodium Bicarbonate 8.4% 50 mEq/50 ml</b>	<b>2 Syringes</b>	_____
<b>Valium (Diazepam) 10 mg/2 ml</b>	<b>2 Ampules/vials</b>	_____
<b>Vasopressin 40 units (20 units/vial)</b>	<b>2 Vials</b>	_____
<b>Zofran (Ondansetron HCL) 4mg/2ml</b>	<b>2 Vials</b>	_____
<b>D5W (Dextrose 5% in water) 500 ml</b>	<b>1- 500 ml bag</b>	_____
<b>D5W (Dextrose 5% in water) 250 ml bag</b>	<b>1- 250 ml bag</b>	_____
<b>NS (Normal Saline) 500 ml</b>	<b>1- 500 ml bag</b>	_____
<b>Continuous-flow Primary IV sets</b>	<b>2 Sets</b>	_____
<b>Mini drip/ Micro drip IV sets</b>	<b>2 Sets</b>	_____

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DATE

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BOX #

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SIGNATURE

\_\_\_\_\_  
MEDIC #1

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MEDIC #2