

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

**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: \_\_\_\_\_

<b>II. DOCUMENTS/POLICIES/ETC.</b>	<b>PRESENT</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
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Personnel Roster			
Staffing Plan			
Policy Statements - posted			
Documentation Requirements			
Patient Records Secured			
Medical Director's Agreement -			
License Displayed			
Infection Control Plan -			

<b>III. AIR/EQUIPMENT</b>	<b>PRESENT AND OPERATING</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
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Exterior Markings			
Emergency Lights:			
Exterior - illuminates Tail rotor			
& Pilot controlled search/spot/landing Light			
Interior for close observation			
Fire Extinguisher (1) (5 B:C,reachable by pilot or crew)			
"Air Worthiness Certificate" from FAA			
FAA Form 337 (items specifically needed)			
#1 - identifies aircraft			
#2 - identifies aircraft owner			
#7 - shows aircraft approved to "Return to Service"			
Interior Requirements:			
Patient/Pilot Partition			
Items Secured			
Patient Litter which is secured by FAA requirements			
Barrier or FAA Approved Mechanism for securing			
pts chest, pelvis, legs, wrist & ankles			
110-volt electrical outlet for each pt.			
Radio Equipment			
for pilots to comm. with Hospitals,PSAPs & grd. amb.			
3 headsets at least for crew comm.			
Installed Oxygen with capacity of 1200L			
(at inspection at least 1650 psi & one 0-25 lpm flow meter)			

	PRESENT AND OPERATING	DEFICIENT	CORRECTED
<b>III. AIR/EQUIPMENT (Cont)</b>			
Installed Suction (300mm/Hg in 4 sec.)			
Climate Control (60-85) for cabin during flight			
<b>IV. 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)			
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 and Pediatric- 1 each)			
Pocket Mask with One-Way Valve & O2 port (1)			
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:			
Lateral Cervical Spine Device (1)			
Long Spine Board (1)			
Rigid/Semi Rigid Neck Immobilizers (S, M, L, & Pedi.-1 each or Multi -size (3 & 1 Pedi)			
Straps 9' (5)(May sub spider straps or speed clips for 3)			
Pediatric Length - Based Drug Dosing Tape (current)- ALS			

<b>IV. MEDICAL SUPPLIES/EQUIPMENT (Cont)</b>	<b>PRESENT AND OPERATING</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
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>V. 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)			

<b>V. ALS EQUIPMENT/SUPPLIES (Cont)</b>	<b>PRESENT AND OPERATING</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
IV Administration Supplies:			
Microdrip (50-60 drops/ml) (2)			
Macro drip (10-20 drops/ml) (2)			
IV Solutions (2250 ml total)			
Tourniquets for IV Use (2)			
Medications and Supplies:			
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			
With 3 Lead Cables & Pacing capabilities (Adult & Pedi)			
Paddle Pads (4) or gel ( 2 tubes)			
Electrodes, ECG (Adult/Pedi.) (6 each)			
Electronic Waveform Capnography			
<b>VI. PERSONAL PROTECTIVE EQUIPMENT</b>	<b>PRESENT AND OPERATING</b>	<b>DEFICIENT</b>	<b>CORRECTED</b>
Hand light ( 6 volts or more ) (2)			
Survival Bag (1)			
Flight Helmet (1 per crew member)			
<b>VII. 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*			
Double Barrier Gloves*			
Red Bags**			
Sharps containers-secured**			
Fit tested disposable N-95 Respirator*			
Hand Disinfectant/cleaner - Non-water (1 container)			
* Disposable -one set/pair per responding crewmember			
**Per Infection Control Plan			
Inspected By: _____ (Printed Name) Signature: _____ Date Forwarded to BEMS: _____			







