



VIN NEW

Expiration Date:

Fixed Wing Minimum Critical Equipment

Agency Information

*Name of Agency:

Sample

Vehicle Requirements

No.	Item	C	NC	NR
1	Air worthiness certificate and registration	C	NC	NR
2	Aircraft is Equipped with a Cargo Door or other Entry that Allows for Loading and Unloading of the Patient without Excessive Maneuvering of the Patient	C	NC	NR
3	Ambient Air Temperature Monitor in Cabin	C	NC	NR
4	Communication-State MEDCOM Compliant-Programable radio	C	NC	NR
5	Cot with straps with means of securing it. Capable of carrying a minimum of 1 patient in a horizontal position.	C	NC	NR
6	Equipment is Secured to the Aircraft, Readily Accessible, and when not in use, Securely Stored	C	NC	NR
7	Fire Extinguisher - per FAA Guidelines	C	NC	NR
8	Interior Affords an Adequate Patient Care and Treatment Area	C	NC	NR
9	Patient Compartment: Climate and Lighting Must Be Maintained Within Vehicle Standards	C	NC	NR

Airway

No.	Item	C	NC	NR
10	Bag Valve Mask: Hand Operated Self-Expanding Bag with Oxygen Reservoir/Accumulator; Valve (Clear & Operable in Cold Weather); and Mask (Adult, Child, Infant, and Neonate Sizes) Child (450-750ml) (1 each) and Adult (= or >1000 ml) (1 each)	C	NC	NR
11	Cricothyrotomy Kit- Surgical, needle, or MCA approved commercial device- Optional MCA protocol	C	NC	NR
12	Endotracheal Tubes and Equipment: Sizes 2.5, 3.0, 3.5, 4.0, 4.5, 5.0, 5.5, 6.0, 7.0, 8.0 Cuffed (2 of each size)	C	NC	NR
13	Gum Elastic Bougie (1)	C	NC	NR

14

Laryngoscope Blades- Curved Sizes #2 and either #3 or #4 required for a total of two blades. Straight Sizes #0, #1, #2, and either #3 or #4 required for a total of four blades.

C	NC	NR
---	----	----

15 Laryngoscope Bulb, Batteries, and Handle (1 set)

C	NC	NR
---	----	----

16 Laryngoscope Handle (1) (Spare)

C	NC	NR
---	----	----

17 Magill Forceps: Adult & Pediatric (1 each)

C	NC	NR
---	----	----

18 Manometer Compatible with BVM System

C	NC	NR
---	----	----

19 Manual Peep Valve - Compatible with BVM System

C	NC	NR
---	----	----

20 Nasal Cannulas: Adult and Pediatric (1 each)

C	NC	NR
---	----	----

21 Nasal Canula Capnography- Adult Size (1)

C	NC	NR
---	----	----

22 Nasopharyngeal Airways: 1 Size between 16-24 fr and 1 Size between 26-34 fr

C	NC	NR
---	----	----

23 Nebulizer (1)

C	NC	NR
---	----	----

24 Non-Rebreather Masks: Adult, Child, and Infant (1 each)

C	NC	NR
---	----	----

25 Oropharyngeal Airway: 0-1, 2-3, 4-5 (1 each)

C	NC	NR
---	----	----

26 Oxygen On-Board w/Regulator Capable of 15 lpm, and Supplies

C	NC	NR
---	----	----

27 Oxygen Portable with Regulator Capable of 15 lpm, and Supplies

C	NC	NR
---	----	----

28 Pulse Oximeter (1)

C	NC	NR
---	----	----

29 Stylettes for Endotracheal Tubes: Adult and Pediatric (1 each)

C	NC	NR
---	----	----

30 Suction On-Board with a Regulator

C	NC	NR
---	----	----

31 Suction Portable (Can be manually powered)

C	NC	NR
---	----	----

32

Suction Tubing: Wide-Bore Tubing, Rigid Pharyngeal Curved Suction Tip and Tonsil and Flexible Suction Catheters 6F-16F (1 between 6F-10F and 1 between 12F-16F). 1 set for each mechanical suction device.

C	NC	NR
---	----	----

33 Supraglottic Airway- Per MCA Selections in Airway Management Protocol 7-9 (1 each adult size required)

C	NC	NR
---	----	----

34 Syringes (1, 3, 5, 10, and 20 ML) - Multiple of each size

C	NC	NR
---	----	----

35 Transport Ventilator with Volume/Pressure/NIVPPV Capabilities

C	NC	NR
---	----	----

36 Tube Holder (1)

C	NC	NR
---	----	----

37 Video Laryngoscope with Blades for Adult and Pediatric Capabilities

C	NC	NR
---	----	----

IV Requirements

No.	Item	C	NC	NR
-----	------	---	----	----

38	14 Gauge Needle at Least Three and a Half Inches or Commercial Device for Pleural Decompression	C	NC	NR
----	---	---	----	----

39	Alcohol Wipes (12)	C	NC	NR
----	--------------------	---	----	----

40	Extension Set (2)	C	NC	NR
----	-------------------	---	----	----

41	Filter Needles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42	Fluid Warmer	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43	IM Needles - Sizes Suitable for Pediatric and Adult Patients	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44	Injection Supplies - Sizes Suitable for Pediatrics and Adults	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45	IO Drill Device	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
46	IO Supplies: Adult and Pediatric (1 each)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47	IV Fluids: NS (1) and Crystalloid Solution (2) Total of three liters	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>*IV Fluids Filled by:</p> <p><input checked="" type="radio"/> Hospital <input type="radio"/> Wholesale</p> <p>*Hospital or Wholesaler Name:</p> <p><input type="text" value="Sample"/></p> <p>*If Obtained through Wholesaler - Tracking Log?</p> <p><input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Wholesale</p> <p>*First Expiration Date of Fluids:</p> <p><input type="text" value="Sample"/></p>				
48	IV Solution and Supplies Secured	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49	IV Administration Set: Macro Drip (4)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50	IV Catheters - Size 24-18 Gauge (4 each)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51	IV Infusion Pumps Sufficient to Maintain a Minimum of 3 Simultaneous Infusions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
52	Needles - Various Sizes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53	Pressure bags	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54	Tourniquets (2)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drug Package

No.	Item	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55	A method to determine weight based pediatric dosages	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56	Drug Package in Climate Controlled Area	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57	Drug Package Secured	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58	Drug Package Sealed	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<p>*Hospital Filled By:</p> <p><input type="text" value="Sample"/></p> <p>*Date Filled:</p> <p><input type="text" value="Sample"/></p> <p>*Expiration Date:</p> <p><input type="text" value="Sample"/></p>				
59	Drug Package: Proof of Acquisition for additional Non-Sealed Medication	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

***Physician Filled By:**

*Date Filled:

Sample

*Expiration Date:

Sample

60

Drug Package that is not Expired

C

NC

NR

Cardiac Monitor/Defibrillator

No. **Item**

61

*12 Lead EKG

C

NC

NR

62

Cardiac Monitor that is Portable, Battery Operated and Operational. Includes Patient Cable, Electrodes, and ECG Paper.

C

NC

NR

*Type:

Sample

*Serial Number:

Sample

63

Means to appropriately defibrillate pediatric and infant patients (device, pads and product indications must support defibrillation of all pediatric patients).

C

NC

NR

64

Defibrillation Pads- 2 sets of adult pads (or combination pads when applicable to the device) and 1 set of pediatric pads (when required by device for pediatric use).

C

NC

NR

65

Invasive Line Capability (2)

C

NC

NR

66

Transcutaneous Cardiac Pacemaker that includes Pediatric Capability (may integrate with Monitor/Defibrillator)

C

NC

NR

67

Transvenous Pacer

C

NC

NR

Miscellaneous - PPE & Other

No. **Item**

68

Alcohol-Based Hand Cleanser (Towlette, Spray, or Liquid) (1)

C

NC

NR

69

Disinfectant Cleaner for Bloodborne Pathogens EPA Registered (for vehicle cleaning) (1)

C

NC

NR

70

Documentation Tools (Pens, Tablet, Run Forms)

C

NC

NR

71

Gloves Non-Latex (1 Box or Pouch of three different Sizes)

C

NC

NR

72

HEPA Respirator or N-95 Masks (One for each crew member)

C

NC

NR

73

Personal Protection Equipment: Impervious Gown, Eye Protection (Full Peripheral Glasses, Goggles, or Face Shield), and Mask (One for each caregiver)

C

NC

NR

74

Sharps Container (Portable or fixed)

C

NC

NR

75

Survival Kit - Signaling Mirror, Aerial Pyrotechnic or other Aerial Signaling Device, Fire Starting Device, Flashlight with Spare Batteries, and 4 Survival Blankets

C

NC

NR

Miscellaneous - Patient

No.	Item	C	NC	NR
76	Blankets (2) with 1 being a Thermal Absorbent Blanket, or Appropriate Heat-Reflective Material (adult size)	C	NC	NR
77	Blood Pressure Cuff and Sphygmomanometer : Infant, Child, Adult, and Large Adult (Manual) (1 each)	C	NC	NR
78	Ambulance Child Restraint System (1)	C	NC	NR
79	Cold Packs (2)	C	NC	NR
80	Emesis Container (1)	C	NC	NR
81	Glucometer or Blood Glucose Measuring Device with Reagent Strips	C	NC	NR
*Expiration Date: Sample <input type="text"/>				
82	Heat Packs (2)	C	NC	NR
83	Infant Thermal Cap (1)	C	NC	NR
84	NG Tubes	C	NC	NR
85	OB Kit: Sterile Contents (1) - (4 x 4 Dressing, Sterile Scissors or other Cutting Utensil, Bulb Suction, Clamps for Cord, Sterile Gloves, Blanket)	C	NC	NR
*Expiration Date: Sample <input type="text"/>				
86	Stethoscope (1)	C	NC	NR
87	Thermometer with Low Temperature Capability down to 86 Degrees (i.e. hypothermia) (1)	C	NC	NR

Miscellaneous - Other Health & Safety Concerns

Other Health and Safety Concerns: _____

Inspection Instructions

The findings from this inspection will be submitted to the Michigan Department of Health and Human Services (MDHHS) to determine compliance with requirements for licensure. This inspection form does not indicate licensure status. The MDHHS upon determination of compliance with applicable statutory and regulatory requirements and standards, will issue the license in accordance with Part 209 of the Public Health Code (PA368 of 1978), as amended.

Items on this inspection form checked "NC" indicates that the item was not clean, was missing, or non-functional at the time of this inspection, causing MDHHS to consider each applicable vehicle to be in violation of Part 209 of the Public Health Code (PA 368 of 1978), as amended. Non-sterile items must be clean and functional. Sterile items must be intact in their package, usable, integrity of package must not be compromised, and must not be expired.

Instructions for Required Corrections

Non-Compliant (NC)

- If MDHHS makes the determination that a vehicle is non-compliant with equipment items, the agency has 24 hours to bring the vehicle into compliance and notify MDHHS in writing, that the corrections were made. The vehicle may return to service with approval of MDHHS, provided MDHHS was notified in writing within 24 hours that corrections were made. A re-inspection may occur within 15 calendar days of MDHHS receiving such notification.
- A vehicle that is not brought into compliance within 24 hours from the time it was determined to be out of compliance due to missing equipment items, shall be removed from service immediately. A vehicle taken out of service due to non-compliance shall not respond or provide emergency assistance, or conduct inter-facility transfers. The vehicle may return to service with approval of MDHHS, provided MDHHS was notified in writing that corrections were made. A re-inspection may occur within 15 calendar days of MDHHS receiving such notification.
- If a life support vehicle remains out of compliance for more than 15 calendar days from the date of inspection, then the vehicle license shall be automatically revoked.

Other Licensure Issues

- MDHHS may order a life support vehicle out of immediate service if it determines that the health, safety, and welfare of a patient may be in jeopardy due to non-compliance with equipment items, defective and non-functional equipment, or other applicable reasons. A notice of such action shall be issued to the life support agency by MDHHS based upon the deficiencies identified in the inspection report.

- A life support agency may immediately address potential violations during the inspection. The inspection report will reflect the action taken and MDHHS will consider that the indicator was met.

Documentation of completed corrections may be emailed to MDHHS

Email: floryd@michigan.gov

Fax: 517-335-9434

Attestation & Signatures

By signing below, I confirm the following:

I, the undersigned representative of the above service, acknowledge receipt of a copy of this inspection report, supplemental notes and corrective action statement (if applicable). I am aware of the deficiencies listed (if any) and understand that failure to correct the deficiencies within the established time frames will subject the service to administrative action and penalties as outlined in Sections 201 and 209 of the Michigan Public Health Code and the Administrative Rules thereunder.

Virtual Inspections for Transporting Agencies ONLY: I further understand the following two items on the MDHHS-Bureau of Emergency Preparedness, EMS and Systems of Care Vehicle Inspection Form, were not able to be visually inspected, and I attest that the items were fully functional at the time of the vehicle inspection:

- Patient Compartment: Climate and lighting must be maintained within vehicle standards;
- Drug package in climate-controlled area;
- Communication-State MEDCOM Compliant (HERN required for all vehicle except MFR);
- Suction portable and on-board

I, the undersigned MDHHS representative, acknowledge that I have conducted a full inspection of this vehicle in accordance with the equipment requirements set forth above and that all statements I have made on this inspection report are true and accurate to the best of my knowledge.

Comments:

Passed

Total: 0 deficiencies of 87 items

*Signature Type: Virtual

In Person

Responsible Party Signoff

*



*First Name:

Sample

*Last Name:

Sample

Certification Number:
