

SECTION OF EMS AND TRAUMA SYSTEMS

REQUIRED

MEDICATION LIST FOR ADVANCED RESPONSE, AIR, AND PARAMEDIC
VEHICLE REGISTRATION

SERVICE I.D. _____ INSPECTION DATE _____ BODY TYPE (T1) (T2) (T3) RESCUE
VIN _____ MODEL YEAR _____ FD CH DD INT OTH
DECAL _____ - PA VEHICLE LICENSE NUMBER _____ INSPECTOR'S INITIALS _____

Injectable Meds:

- _____ Antiarrhythmic
- _____ Atropine- minimum 4 mg
- _____ Epinephrine 1:1000- minimum 5 mg
- _____ Epinephrine 1:10,000- minimum 10 mg
- _____ Dextrose 50%- minimum 100 ml
- _____ Diuretic
- _____ Lidocaine (Bolus) minimum 600 mg
- _____ Narcotic Antagonist

Oral Meds:

- _____ Aspirin 81-325mg
- _____ Nitroglycerine (0.4 mg): 1btl. or 1 sprayer

Intravenous Infusions:

- _____ 0.9% NaCL or LR
- _____ Lidocaine
- _____ Dopamine

Inhaled Meds:

- _____ Inhaled Beta Agonist

REQUIRED CONTROLLED DRUGS

Must follow Ambulance Service's Controlled Drug Policy for storage as
on file with the Section of EMS & Trauma Systems

- _____ *Injectable Narcotic analgesic
Completed by Section: Type: _____ Amount: _____
Completed by Section: Type: _____ Amount: _____
- _____ *Injectable Benzodiazepine
Completed by Section: Type: _____ Amount: _____
Completed by Section: Type: _____ Amount: _____

* Not required for Advanced Response if paramedic service responds.