

DEPARTMENT OF HEALTH SERVICES
 COUNTY OF LOS ANGELES

SUBJECT: **RESPIRATORY CARE PRACTITIONER STAFFED
 SPECIALTY CARE TRANSPORT UNIT INVENTORY** REFERENCE NO. 713

PURPOSE: To provide a standardized minimum inventory on all Respiratory Care Practitioner (RCP) Specialty Care Transport (SCT) Units.

PRINCIPLE:

Any equipment or supplies carried for use in providing emergency medical care must be maintained in good working order.

POLICY:

- I. RCP staffed SCT vehicles shall carry the following equipment. Reasonable variations may occur; however, any exceptions must have prior approval of the EMS Agency. Transport vehicles shall also be equipped and supplied according to Ref. No. 710, Basic Life Support Ambulance Equipment.
- II. All sharps must comply with CCR, Title 8, Section 5193, Bloodborne Pathogens.

MEDICATIONS			
Albuterol (pre-mixed w/ NS)	30mgs	Atrovent	2mgs

SUPPLIES			
Airways – Nasopharyngeal:		Bag-Mask-Ventilation (BMV) device w/ O ₂ inlet & reservoir:	
Large (34-36)	1	Bag Volume 200-450 mL ³	1
Medium (26-28)	1	Bag Volume 400-700 mL ³	1
Small (20-22)	1	Bag Volume >900 mL ³	1
Airways – Oropharyngeal:		Bag-Mask-Ventilation (BMV) Masks:	
Large	1	Large	1
Medium	1	Medium	1
Small Adult/Child	1	Small Adult/Child	1
Infant	1	Toddler	1
Neonate	1	Infant	1
Airway guard (bite blocker)	2	Neonate	1

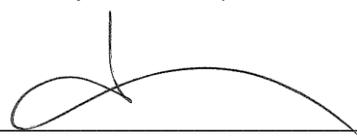
EFFECTIVE: 02-01-12

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REVISED: 12-01-23 (or effective upon completion of EMS Update 2023)

SUPERSEDES: 07-01-23

APPROVED: 
 Director, EMS Agency


 Medical Director, EMS Agency

SUPPLIES (continued)				
Cell phone (personal or company)		1	Manometer 2	
Color Code Drug Doses, Ref. No. 1309		1	Oxygen masks (non-rebreather):	
Coupler/Quick Connect (oxygen connection)		2	Adult 3	
End tidal CO ₂ detector:			Pediatric 3	
Adult		2	Infant 3	
Pediatric		2		
ETCO ₂ filter line		6	Oxygen:	
Filter, viral HEPA		2	Hose 1	
Gloves, sterile		2	Key 2	
Gloves, non-sterile		1 box	Regulator 2	
Nebulizer kit (including hand-held and mask)		2 each	Tree 2	
Heat / Moisture Exchange (HME) Ventilator Filters:			Standardized Pediatric Length-Based Resuscitation Tape, approved by the EMS Agency (e.g., Broselow 2011A or newer) 1	
Adult		4		
Pediatric		2		
Disposable Supraglottic Airway Device (and/or) ^{2,4}			PEEP valve:	
i-gel	King LTS-D w/ 60mL syringe			
Neonate (size 1)	Pediatrics (size 0)	1	Adult 1	
Infant (size 1.5)	Pediatrics (size 1)	1	Pediatric 1	
Small Pediatrics (size 2)	Pediatrics (size 2)	1	Personal Protective Equipment:	
Large Pediatrics (size 2.5)	Pediatrics (size 2.5)	1		Mask 1 per provider
Small Adult (size 3)	Adult (size 3)	1		Gown 1 per provider
Med Adult (size 4)	Adult (size 4)	1		Eye Protection 1 per provider
Large Adult (size 5)	Adult (size 5)	1		Portable suction (battery operated) 1
Laryngoscope handle:				Pulse oximeter 1
Adult (compatible w/ pediatric blades)		1		Pulse oximeter probes:
Laryngoscope blades:			Adult 2	
Adult, Curved & Straight		1 each	Pediatric 2	
Pediatric, Miller 0, 1, & Miller 2		1 each	Sphygmomanometer:	
Magill forceps:			Thigh 1	
Adult		1	Adult 1	
Pediatric		1	Pediatric 1	
Normal saline pillows (ampoules/inhalant)		10	Infant 1	
Penlight		1	Scissors 1	
Oxygen Cannulas:			Stethoscope 1	
Adult		3	Syringes 10mL 2	
Pediatric		3		

SUPPLIES (continued)			
Suction Catheters:		Ventilator filters	4
Size 8 Fr.	1	Ventilator (non-pneumatic or pneumatic)	1
Size 10 Fr.	1	Continuous Positive Airway Pressure (CPAP) device (May utilize ventilator to fulfill non-invasive CPAP device requirement. 1 of each of the following is required for either device.:	
Size 12 Fr.	2		
Size 14 Fr.	1	Circuit ⁵	1
Tape (various types, must include cloth)	1	Mask	
Thermometer (Oral or axillary)	1	Small	1
Ventilator circuits (disposable):		Medium	1
Adult	4	Large	1
Pediatric	2	Waveform capnography	1
APPROVED OPTIONAL EQUIPMENT			
Albuterol Meter Dose Inhaler (MDI)	2	Levalbuterol	7.5mgs
Endotracheal tubes w/ stylets Sizes 2.0-8.0	2 each	Metered-Dose-Inhaler (MDI) Mask	2
		Metered-Dose-Inhaler (MDI) Spacer	2
High velocity oxygen delivery system (e.g. Airvo) range 2-60 L/min and associated nasal cannulas:	1	Tracheostomy mask:	
		Adult	2
		Pediatric	2
Adult	2	Venturi mask	1
Pediatric	2		
Laryngeal mask airway (sizes 0-6) ²	1 each	Airflow Meter Device with rate and volume capability ¹	

This policy is intended as a RCP Inventory only.

¹ An airflow meter device or monitor/defibrillator with rate and volume feedback capability may be substituted for or in addition to a manometer

² i-gel, King LTS-D, and/or laryngeal mask airway

³ Device volume, not delivered volume.

⁴ Requires EMS Agency approved training and quality improvement program.

⁵ Required if utilizing ventilator as CPAP or a mandatory component of the CPAP device.

CROSS REFERENCES:

Prehospital Care Manual:

Ref. No. 414, **Specialty Care Transport Provider**

Ref. No. 710, **Basic Life Support Ambulance Equipment**

Ref. No. 712, **Nurse Staffed Specialty Care Transport Unit Inventory**