

SUBJECT: **BURN RESOURCE CENTER REQUIRED
 EQUIPMENT/SUPPLIES/PHARMACEUTICALS**

REFERENCE NO. 1138.1

PURPOSE: To provide a mechanism for Burn Resource Centers (BRC) to inventory BRC resources.

POLICY: The BRC shall utilize this checklist to inventory and report PAR levels.

EQUIPMENT SPECIFIC TO BURN PATIENT CARE		
EQUIPMENT	REQUIRED MINIMUM QUANTITY*	ACTUAL QUANTITY
Cauterizer	1	
Cautery Disposable Tips	20	
Cautery Grounding Pads	34	
Fluid Infusion Warmer	4 each	
IV Pumps	20 each	
Thermal Blanket/Forced Air Warming Blanket	3 each	
Thermal Mylar Blanket	34	
Video equipment for bronchoscope	1 each	
Video laryngoscope with Pediatric & Adult blades	3 each	

PHARMACEUTICALS		
PHARMACEUTICALS	REQUIRED MINIMUM QUANTITY*	ACTUAL QUANTITY
Bacitracin (28.4 gm tube)	50 each	
Cyanide Antidote Kit or CyanoKit	5 kits	
D5 Lactated Ringers Solution 500 cc bags	140bags	
Lactated Ringers Solution 1 liter bags	350bags	
Midazolam 5mg/ml	504vials/ampules	
Morphine Sulfate 10mg/ml	1008vials/ampules	
Naloxone 0.4mg/ml	504vials/ampules	
Silver Sulfadiazine 1%- Any Size	20,160grams	

BURN WOUND CARE SUPPLIES		
SUPPLIES	REQUIRED MINIMUM QUANTITY*	ACTUAL QUANTITY
Burn Debridement/ Escharotomy Tray	40trays	
Dry Burn Dressing (32X36)	840each	
Gauze Bandage 4" Rolls	560each	
Tubular Elastic Net Bandage (Size #1, 5, 6, 7, 10, 22)	50 each size	

Statement of Verification

I hereby verify that an inventory of all Grant funded items listed above has been completed and all items are up to PAR.

Verified By: _____ Date: _____
(Printed Name and Signature)

Should any item on the above list fall below PAR levels, notify the EMS Agency immediately.

Notification to EMS Agency by: _____ Date: _____