



CONVALESCENT VEHICLE INSPECTION REPORT

Date: _____
Location: _____



Office of Emergency Medical Services
2707 Mail Service Center
Raleigh, NC 27699-2707

PROVIDER INFORMATION

Provider Name: _____
System Affiliation: _____

VEHICLE INFORMATION

Current Permit #: _____ VIN: _____
Assigned Vehicle Number: _____ Model Year: _____ Patient Capacity: _____
Manufacturer: _____ Fuel Type: _____ Gas _____ Diesel _____ 4 X 4
New Only: Height: _____ Length: _____

Ramp Inspections require mandatory items; Spot Inspections require a full inspection

Convalescent Vehicle Inspection

Mandatory Items:

- Vehicle Body & Function
Appropriate Restraints for Crew & Non-patient Passenger
Two-way Radio or Cellular Phone (provider owned)
Interior Dimensions (min. 48" x 102")
Wheeled Cot with Securing Straps
O2 Cylinder with Regulators (2 sources)
Suction Apparatus (2 sources)
Bag Valve Mask (adult & child size bags with adult, child, infant, & neonatal masks)
Defibrillator with adult & PED Pads
Sphygmomanometer (cuffs & devices) for PED, normal adult, & large adult
Stethoscope
Heating & Cooling Source
Patient Compartment Lighting

Fifteen (15) Point Deductions:

- CPR Board
Oropharyngeal Airways (3 adult & 3 PED sizes)
Nasopharyngeal Airways (3 adult & 3 PED sizes)
Nasal Cannula (adult)
Nasal Cannula (PED)
Non-rebreather with Tubing (adult)
Non-rebreather with Tubing (PED)
Rigid Pharyngeal Suction Device
Wide Bore Suction Tubing
Gloves (latex free)
Gloves (non-sterile)
Mounted Fire Extinguisher
Flashlight with Extra Batteries
Infectious Control Kit (masks, gowns, jumpsuits, eye protection, shoe covers)
Disposable Biohazard Trash Bags
N-95 or HEPA Masks
Disinfectant Hand Wash
Disinfectant Solution for Cleaning Equipment
Emesis Collection Device
Urinal
Bedpan
Sheets, Pillows, Pillow Cases, & Towels
Thermal Blanket (or other heat conserving device)
Length/Weight-based Pediatric Tape
Dressings, Bandages, Roll Gauze
Triangular Bandages (at least 2)
Adhesive Tape
Heavy Duty Scissors
Provider Name Displayed on Each Side
Reflective Tape on all Sides
"Convalescent Ambulance" Indicated on Both Sides & Rear
Equipment Secured in Patient Compartment
Copy of Protocols
Exterior Cleanliness
Interior Cleanliness

Comments:

Blank lines for handwritten comments.

TOTAL INSPECTION SCORING

A three (3) point deduction should be given for each size missing, or fifteen (15) points for entire item, unless mandatory.

Missing an entire mandatory item may result in Summary Suspension or refusal of a permit.

Convalescent Vehicle Inspection Scoring

_____ x 3 pts = _____
_____ x 15 pts = _____
Total Points: _____

PASSED

≤ 30 points = Satisfactory
> 30 points = Unsatisfactory

Inspection Results

- PASSED FAILED
Deficiencies corrected during inspection Refusal of a Permit
Approved Failed - Temporary
Not Approved Failed - Suspension Issued

Permit #: _____ Expiration: _____

Provider Representative: _____

Table with columns PERSONNEL - P# and LEVEL. Rows for #1 and #2 with MR, B, I, P options.

For NCOEMS Use Only:

Inspector: _____
Date Entered in CIS: _____