

Standard Minimum Equipment List & Equipment Checking Policy

The attached minimum list of equipment and drugs has been carefully chosen to cover likely requirements for BASICS responders operating in the SWASFT area whilst keeping to practical size and weight proportions. BASICS South West has an agreed, standard, core equipment list, which all active medical responders in BASICS South West the schemes are expected to carry when responding.

It is vital that equipment and drugs used are fit for use, including being within appropriate use-by dates. The use of out-of-date equipment can result in equipment failure or loss of sterility. Out-of-date drugs may be ineffective. Manufacturers will accept no responsibility for equipment failure if equipment is not stored and maintained appropriately or is out-of-date.

Individual responders are responsible for ensuring that their personal equipment is complete, in good condition and in date. BASICS South West is responsible for providing assurance to SWASFT that an adequate process is in place to achieve this.

Aims

This policy sets out the minimum equipment that responders should carry, and provides a framework for ensuring equipment and consumable items are in date and in good condition.

Procedure

Storage:

Equipment should be kept in appropriate storage bags designed for the purpose. During particularly hot or cold weather conditions it is recommended that equipment is not left in the responder's car for long periods. For guidance, drug expiry dates are based on storage at 25°C although they are tested to ensure that they are stable for "short" periods at up to 40°C.

Where practicable, consumable equipment should be kept in its original sealed packaging, (which will be labelled with expiry dates where applicable). In some cases it may be important for equipment to be immediately available and storage in the original packaging may result in delays in use. Where this is the case, and if clinical consideration dictates that the equipment does not need to be maintained in a sterile state, equipment may be kept unpackaged, as long as it is stored in such a way to keep it appropriately clean. If perishable equipment is removed from its packaging, a record should be kept of its Lot/Batch number and expiry date so that it can be replaced when required.

Equipment Replacement:

Consumable equipment that is routinely stocked by South Western Ambulance Service may be replaced from Trust vehicles or Ambulance Stations.

Equipment not stocked by ambulance stations (highlighted in yellow) may be replaced by contacting the SWASFT responder department (responders@swast.nhs.uk).

Medicines Supply and management

- Any drugs (excluding controlled drugs) within the SWASFT paramedic formulary may be replaced from SWASFT Ambulance stations. Current SWASFT process for signing out medications should be followed. Responders must maintain a list of batches/expiry dates.
- Other drug stocks should be replaced by arrangement with a pharmacy or pharmaceutical wholesaler.
- Controlled Drugs should be replaced according to the schemes' Controlled Drugs policies or by using the SWASFT BASICS CD SOP. Individually numbered L4BASICS order forms are available from the responder department (Katherine.lunk@swast.ns.uk)

Equipment Checking:

SWASFT require responders and officers to complete a monthly equipment check. Following discussion with BASICS SW and completion of a risk assessment the following process has been agreed specifically for BASICS responders:

Equipment will be checked in two ways:

1. **After use:** After use at any incident, kit should be carefully checked by the responder to ensure all is present, clean and correct. Any used consumable or damaged/used equipment must be replaced.
2. **Regular Scheduled Equipment Check:** All BASICS South West responders are expected to undertake a full equipment check (and declaration to that effect) every two months. Equipment should be checked for completeness, condition, serviceability and expiry date. At this check arrangements should be made to replace (as above) any equipment or drugs that will expire before the next bimonthly check is due. BASICS South West responders should also undertake a 'working' equipment check of key items (principally AED, Oxygen, monitoring equipment) on a monthly basis, although a declaration is not required.

Each scheme should have a nominated equipment officer who is responsible for ensuring that all scheme members maintain full functioning equipment and are compliant with this process.

On the first working day of each alternate month the responder department will email all BASICS responders requesting that they complete an equipment check declaration. This will be an electronic form that populates a spreadsheet.

- If not completed within 14 days a reminder will be sent
- If not completed within 28 days the BASICS Responder will be suspended from responding pending completion.

Any member not compliant with regular equipment check should not respond until they can confirm that they have completed the required check.

Any Equipment outside this list requires approval for use by SWASFT. New equipment will require a submission to the SWASFT Vehicle and Equipment Working Group. Schemes should bring any proposals to the BASICS South West Committee via the scheme representative.

The Equipment highlighted in yellow is not available from SWASFT stations but may be ordered from the responder team. The suggested equipment layout (i.e. pouch colour/location on the kit checklist) is to aid consistency, but may be adapted as per the individual responder's needs.

Document details

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AIRWAY		
PAX Airway Module	Quantity	Notes
OP Airways Sizes 2,3,4	1 of each	
NP Airway, Sizes 6.0 & 7.0	1 of each	
KY Jelly	2	
10ml Syringe	1	
50ml Syringe	1	Optional (if using LMA Supreme)
Tube Tie / Holder	2	
Magill Forceps Adult	1	
Magill Forceps Paediatric	1	
Catheter Mount	1	
Size 6.0 ETT Cuffed	1	For Surgical Airway
Endotracheal Tube Cuffed 7,8	1 of each	Optional
Paediatric Endotracheal Tube Cuffed 3,4,5	1 of each	Optional if trained
Laryngoscope Handle	1	Optional
Laryngoscope Blade Macintosh, 2,3,4	1 of each	Optional
Second Generation LMA (eg iGel or LMA Supreme) Size 3,4,5	1 of each	LMA Supreme can be ordered from Responder Team
Main Bag		
Bag Valve Mask Adult	1	
Adult Air Cushion Face Masks for BVM	1 of each size	
Oxygen Therapy Delivery Mask Adult	1	Min: 1 x Non-rebreathe type
Medication Delivery ('nebuliser') Mask Adult	1	
Manual Suction	1	
Bougie	1	

Paediatric Airway – BLUE Pouch	Quantity	Notes
Bag Valve Mask – Paediatric	1	
Paediatric Air Cushion Face Masks for BVM	1 of each size	
Oxygen Therapy Delivery Mask Paediatric	1	Min: 1 x Non-rebreathe type
Medication Delivery Mask ('nebuliser') Paediatric	1	
OP Airways Sizes 0,1	1 of each	
I-gel Sizes 1.5, 2, 2.5	1 of each	

Chest / LMA – YELLOW Pouch	Quantity	Notes
Russell Chest Seal	1	
PneumoDart Needle	1	Replaces Thoraquick/ARS needle

Surgical Airway - BLACK Pouch	Quantity	Notes
Curved Artery Forceps	1	
Scalpel Size 11 with blade protector	2	
14g Cannula and tubing for jet insufflation	1	For use in <8's
Gauze	1	

ETCO2 / SpO2 - GREEN Pouch	Quantity	Notes
Waveform ETCO2 + SpO2 monitor	1	Can be substituted with separate units. ETCO2 must be capable of waveform display.
SpO2 probes	1 adult & 1 child	
Nasal Sample lines	2 of each	

Haemorrhage - Outside lower Pocket		
IV Access (canulation) - RED Pouch	Quantity	Notes
Cannula 14g, 18g, 20g, 22g, 24g	2 of each	
Cannula Dressing	2	
Crepe Bandage	2	
Gauze	2	
Disposable Tourniquet	2	
NaCl Flush 5mls	2	
IO Access - YELLOW Pouch		
IO Driver	1	
Needles 15mm 25mm 45mm	1 of each	
3 way tap	1	
50ml Syringe	1	
Dressing	1	
Haemorrhage Control -		
CAT Tourniquet	1	
Haemostatic Gauze	1	
OLAS Bandage	1	
BLAST Bandage	1	
Dressing Pack – ORANGE Pouch	1	
Gauze	2	
Triangular Bandage	1	
Crepe Bandage	2	

Surgical Pack – BLACK Pouch	Quantity	Notes
ChloroPrep applicator (2/70% chlorhex/alco)	2	
Scalpel 22 blade with blade protector	2	
Gigli Saw	1	
Mersilk Suture Size 0	1	
Artery Forceps (6" Spencer Wells)	3	

Additional Items	Quantity	Notes
Sharps Bin	1	
CD Oxygen Cylinder	1	Replace when \leq half full
Tough Cut Shears	1	
Gloves Appropriate Size	1	
Manual BP cuff	1	
Stethoscope	1	
Thermometer	1	
Blood Glucose Machine	1	
Femoral Traction Splint	1	
IV Giving Set	1	
Pelvic Splint	1	
Defibrillator Adult / Paed Pads / Tough Cuts / 3 Lead ECG connector	1	

PPE	Quantity	Notes
Protective Boots	1 pair	
Helmet (Doctor)	1	
High visibility Motorway compliant Jacket	1	
Protective Suit	1	

CORE DRUGS – MINIMUM			
Cardiac Arrest Drugs	Strength	Volume	Quantity
Adrenaline	1:10,000	10mls PFS	2
Amiodarone	300mg	10mls PFS	1
Atropine	1mg	Per SWASFT Stock	1
Other			
Co-Amoxiclav	1.2g	Powder vial	1
Aspirin	300mg	Tablets	1 packet
GTN	S/L Spray	1	1
Adrenaline	1:1,000	1ml	5
Naloxone	400mcg	1ml amp	2
Tranexamic Acid	500mg	5mls	2
Salbutamol (Short exp date when opened)	2.5mg	Nebules sealed	1 packet
NaCl	0.9%	10ml amp (flush)	4
Glucose Gel	Tube		1
Fluids			
Sodium Chloride	0.9%	500mls	1

CD's and specialist Drugs (Optional and Only Where Competent)	Strength	Volume	Quantity
Controlled Drugs			
Morphine Sulphate	10mg/ml	1ml ampoule	2
Ketamine	10mg/ml	20ml Vial	2
Diamorphine	10mg	ampoule	2
Midazolam	1mg/ml	5ml ampoule	2
Fentanyl	50mcg/ml	2ml or 5ml ampoule	2
Other			
Rocuronium MUST BE REFRIGERATED – ONCE LEAVES COLD CHAIN, SHELF LIFE IS 12 WEEKS	10mg/ml	5ml vial	Max 5
Metaraminol (2.5mg in 5ml)	0.5mg/ml	2.5ml PFS	1
Flumazenil (if benzodiazepines carried)	100mcg/ml	5ml	1

Additional	Quantity	Notes
Needles for Injection	2	
Water for Injection	2	Ampoules or PFS
Drawing up needle	4	
Coloured Drug Labels	2 of each	Ketamine, Midazolam, Morphine, Fentanyl, Diamorphine – if these medicines carried.
Syringe 1ml	2	
Syringe 10ml	2	
Syringe 20ml	2	
Mucosal Atomisation Device	2	

Optional Drugs	Strength	Volume	Quantity
BASICS Responders may carry any standard SWAST paramedic formulary drugs at their own discretion. Any additional medication should be approved by the BASICS SW committee and listed below			
Penthrox (methoxyflurane)	Inhaler	Inhaler	1