

**State of New Hampshire**  
**Department of Safety**  
 Division of Fire Standards and Training & Emergency Medical Services

**BLS – EQUIPMENT TRACKING & REQUEST FORM**

EMS I/C Name: (PRINT) \_\_\_\_\_ Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Location of Class: \_\_\_\_\_ Date of Program: \_\_\_\_\_

Date Borrowed: \_\_\_\_\_ Date to be Returned: \_\_\_\_\_

Special Arrangements: \_\_\_\_\_

*I have read the EMS Equipment Lending Policy \_\_\_\_\_ initial*

TRAINING KIT	INVENTORY #	TRAINING KIT	INVENTORY #
Patient Assessment		Spinal Immobilization Kit	
Patient Assessment		Spinal Immobilization Kit	
Patient Assessment		Spinal Immobilization Kit	
Cardiac Arrest Mgmt.		Splinting Kit	
Cardiac Arrest Mgmt.		Splinting Kit	
Cardiac Arrest Mgmt.		Splinting Kit	
Airway Materials		Shock Management Kit	
Airway Materials		Shock Management Kit	
Airway Materials		Shock Management Kit	
Airway Management		<b>Separate Equipment</b>	
Airway Management		Long Board	
Airway Management		Long Board	
Oxygen Management Set		Long Board	
Oxygen Management Set			
Oxygen Management Set			

ADDITIONAL EQUIPMENT	INVENTORY #	ADDITIONAL EQUIPMENT	INVENTORY #
Scoop Stretcher		MAST Pants	
Stair Chair		MAST Pants	
Little Annie Manikins (4)		AED	
Jr's – CPR Manikins (4)		AED	
Infant CPR Manikins (4)		OB Manikin	
Infant Intubation Head		Transition Kit	
Infant Intubation Head		Transition Kit	
		Trach Manikin	
		Trach Manikin	

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~~~~~ EMS Equipment Kit Return Inventory ~~~~~

Name of Person Returning Kit: \_\_\_\_\_ Date of Return: \_\_\_\_\_

Is Kit Complete? (See attached list)  YES  NO Has equipment been cleaned?  YES  NO

If NO, what is missing? \_\_\_\_\_  
\_\_\_\_\_

Document "Problems" with Kit noted by I/C (use back of form if necessary): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Staff Member Signature: \_\_\_\_\_

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THE ABOVE PORTION MUST BE FILLED OUT AT TIME OF RETURN.  
KIT(S) MAY NOT BE DROPPED OFF WITHOUT BEING CHECKED IN BY A STAFF MEMBER.

|                                                                                                                                                      |                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| <p style="text-align: center;">New Hampshire Department of Safety<br/>Division of Fire Standards and Training and<br/>Emergency Medical Services</p> | <p style="text-align: center;">● <b>POLICY 3-6-8</b><br/>○ <b>PROCEDURE</b><br/>○ <b>INFORMATION</b></p> |
| <p style="text-align: center;"><b>NAME:</b><br/>EMS Basic Life Support (BLS) Equipment Lending Policy</p>                                            | <p style="text-align: center;"><b>EFFECTIVE DATE:</b><br/>03/03/2003</p>                                 |

**INTRODUCTION:**

This policy outlines the process to be followed to borrow EMS BLS Equipment.

**POLICY:**

1. The EMS BLS Equipment stored at the Field Office sites shall only be borrowed by Division of Fire Standards and Training and Emergency Medical Services (FST&EMS) licensed EMS Instructor/Coordinators (EMS I/C). These EMS I/Cs shall be solely responsible for the condition of all equipment borrowed while in his/her possession.
2. Requests for equipment shall be made, at minimum, 15 working days prior to the date needed and no more than 60 working days prior to the date needed, by the EMS I/C. These requests must be made by completing a “BLS – Equipment Tracking form” via e-mail, fax or in person by the EMS I/C. The request(s) are not “locked-in” and approved until confirmed by the Division of FST&EMS Education Specialist in your area.
3. The equipment shall be borrowed for no longer than a two-week period of time and shall be returned no more than three days after the conclusion of the program session. If extended time is needed because of extenuating circumstances, and whenever possible, a “special arrangement” agreement shall be created between the Field Office Staff and the EMS I/C. This arrangement will be made at the time of borrowing.
4. Only that equipment pertinent to the topic(s) being taught shall be borrowed by the EMS I/C at any one time. This policy ensures better equipment availability for all licensed EMS I/Cs.
5. All equipment will be picked up and returned by the EMS I/C during regular Field Office work hours, unless other arrangements are agreed to in advance. At no time will returns be made without a Field Office Staff member present. Inventory and sign-off for the return of equipment shall take place at the time of return with the Field Office Staff.

6. The EMS I/C is responsible for the equipment condition including cleaning. Any and all equipment problems (breakage, wear and tear, missing parts) shall be reported by the EMS I/C at the time of return. If cleaning of the equipment or reporting of a “problem” are not reported, this type of a situation may preclude the EMS I/C from future equipment borrowing privileges.
7. The Field Office to which the equipment is assigned will have final say over all equipment distribution and borrowing approval. All reasonable requests for equipment and accommodations for “borrowing” will be taken into consideration by the Division.
8. If equipment policies are ignored or equipment returned broken, borrowing privileges shall be revoked until a review of the situation is complete and updated agreements are drafted for that EMS I/C. The revocation of rights shall not exceed twenty-four months.
9. If the situation outlined in “8” above is repeated by the same EMS I/C, the Division retains the rights to permanently revoke the EMS I/C’s equipment borrowing privileges.