

Apparatus Medical Supply Inventory

Monthly Inventory For:

(Date)

M 131	M 132	
M 133	Engine 131	
Engine 132	Truck 131	
Station 1 Closet	Rescue 131	
Cumulative		

Inventory Prepared By: _____

METHOD: Remove any medications that have expired and return to the EMS office. Do <u>NOT</u> list the expired medications on this form.

Only write down the medications that <u>will be</u> expiring in the next 3 months. If the expiration on the medication only lists a month and year, it means that the medication is good until the last day of the month. Ex: 4/04 is good until 4-30-04. If the medication lists the expiration as 1March04, it expires on March 1, 2004.

ITEM	ITEM	QUANTITY ON HAND/
NUMBER	DESCRIPTION	EXPIRATION DATES
109-002-1	Adenosine, 6 mg/ 2ml	
109-003-1	Adenosine, 12 mg/ 4 ml	
109-005-1	Albuterol	
109-007-1	Alcaine	
109-009-1	Amiodarone	
109-010-1	Aspirin, Chewable	
109-012-1	Atropine	
109-013-1	Atrovent (Ipratropium Bromide)	
109-015-1	Benadryl	
109-023-1	Calcium Chloride	