

**NEW YORK STATE DEPARTMENT OF HEALTH
BUREAU OF EMERGENCY MEDICAL SERVICES**

Rotary Wing AMS Equipment Waiver under the Provisions of Part 800.27

*Approved waivers are service specific and must be renewed at re-certification.
The waiver represents the minimum equipment and supplies for all aircraft operated by the service.
This request for waiver **must be accompanied** by a complete equipment and supply inventory*

Agency Name:	EMS Agency Code:
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Mfg.	Model	Year	FAA Id.	Radio Id.
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Part 800 Equipment Item	Part 800 Minimum	AMS Waiver	DOH Inspection
Wheeled ambulance cot	1 each	FAA Equiv.	
Stairchair or equivalent	1 each	WAIVED	
Patient carrying device - Stretcher, scoop, etc	1 each	WAIVED	
Patient restraints - 2 each on each device	All devices	NONE	
Crash resistant securing devices for 2 patient carrying devices - if allowable by aircraft configuration	2 each	FAA Equiv.	
B.V.M., adult, with 2 different sizes of adult clear, air cushion type masks	1 each 2 masks	NONE	
B.V.M., pediatric, with clear face masks in newborn, infant and child sizes	1 each 3 masks	NONE	
Airways, oral sized pediatric through large adult eg. 40, 50, 60, 80, 90, 100, 120 mm	7 sizes	NONE	
Oxygen, portable 2 'D' cylinders minimum, 2000 psi minimum pressure among cylinders, 15 lpm gauge, all gauges intact, valid hydro test date	2 cylinders	Spare Cylinder WAIVED 1500 psi, MIN	1500 psi
Oxygen, on-board, 1200 liter, 50 psi pressure reducer, 2 - 15 lpm flow meters, simultaneous flow, valid hydro inspection date	1 cylinder 2 flow meters	1 flow meter ** O2 for entire flight time	1000 psi in each cylinder
Non-rebreather oxygen masks, adult	4 each	2 WAIVED	2
Non-rebreather oxygen masks, pediatric	2	1 WAIVED	1
Cannulae, oxygen, nasal, adult	4 each	3 WAIVED	1
Cannulae, oxygen, nasal, pediatric	2 each	WAIVED	
Suction, portable, 300 mmhg, (a unit operating from vehicle electrical system or with other 'infinite' power will meet the requirement for installed suction)	1 each	NONE	

Part 800 Equipment Item	Part 800 Minimum	AMS Waiver	DOH Inspection
Suction, installed, adjustable, vacuum or electric, 300 mmHg (absence assumes a portable unit meeting this requirement)	1 each	NONE	
Suction catheter, rigid, plastic, yankauer type	2 each	NONE	
Suction catheters, flexible, sterile, 5,8,10 french	2 each	1 WAIVED	1
Suction device, pediatric, bulb syringe or equiv.	2 each	1 WAIVED	1
Backboard, full sized, 6'x 16", with straps – <i>may be included in a mission specific configuration</i>	1 each	NONE** See exception	(1#)
Short backboard or equivalent device, with straps	1 each	WAIVED	
Traction splint, including ankle hitch	1 each	WAIVED	
Padded board splint, long, 4 1/2' x 3"	2 each	WAIVED	
Padded board splint, medium, 3' x 3" or equiv.	2 each	WAIVED	
Padded board splint, short, 15" x 3"	2 each	WAIVED	
Extrication collar set that includes large, medium, small and pediatric	1 each	NONE	
Head immobilization device - <i>may be included in a mission specific configuration</i>	1 each	NONE**	
Dressing, gauze, sterile, 4" x 4"	24 each	12 WAIVED	12
Tape, adhesive, 2 discrete sizes	3 rolls	1 size, 1 roll WAIVED	2
Bandage, gauze, conforming, 2 discrete sizes	10 rolls	5 rolls, 1 size WAIVED	5
Dressing, trauma, sterile, 10" X 30" minimum	2 each	NONE	
Dressings, sterile, 5" x 9"	10 each	5 WAIVED	5
Scissors, bandage	1 pr	NONE	
Burn sheets, sterile, bed sized	2 each	NONE	
Triangular Bandages	6 each	WAIVED	
Saline, sterile, valid expiration date	1 liter	NONE	
Dressing, occlusive, sterile	1 each	NONE	
Childbirth kit with sterile supplies	1 each	NONE	
Sheets, linen, including on cot	4 each	WAIVED	
Pillow	2 each	WAIVED	
Pillow case	2 each	WAIVED	
Blanket [<i>must be wool, thermal or equivalent</i>]	2 each	1 WAIVED	1
Towel, cloth	4 each	NONE	

Part 800 Equipment Item	Part 800 Minimum	AMS Waiver	DOH Inspection
Facial tissues	1 box	WAIVED	
Emesis container (can be large plastic bag or equiv.)	2 each	1 WAIVED	1
Blood pressure cuff, adult	1 each	NONE	
Blood pressure cuff, child, may be combined with adult	1 each	NONE	
Blood pressure cuff, infant	1 each	NONE	
Stethoscope, adult	1 each	NONE	
Stethoscope, pediatric	1 each	NONE	
Case, carrying (jump kit)	1 each	NONE	
Cold packs	4 each	WAIVED	
Urinal and bed pan	1 each	WAIVED	
Eye protection, goggles <i>[must have 1 for each patient care provider]</i>	2 pr	NONE	1 per provider
Masks, infection control type <i>[must have 1 for each patient care provider]</i>	2 each	NONE	1 per provider
Disposable gloves, rubber or plastic	2 pr	NONE	
Glucose, liquid, or equivalent	1 each	WAIVED	
Sanitary napkins	6 each	WAIVED	
Pen light	1 each	NONE	
Infant swaddler	1 each	NONE	
Humidifier set with sterile water, disposable	1 each	WAIVED **	
Flares or reflective triangles	6/3 each	WAIVED	
Fire extinguisher, 10BC rating	1 each	FAA Equiv.	
Radio, 2 way or equivalent	1 each	NONE	
Battery powered lantern	1 each	WAIVED	

** This equipment item MUST be carried on any response to a patient where its need is indicated.

Rotary Wing AMS Equipment Waiver Request, Approval & Inspection

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Other Required Items:

DMV Registration	Valid	FAA Equiv.	
DMV Inspection	In Date	FAA equiv.	
DOH Inspection <small>(May be maintained with aircraft logbook)</small>	Valid	NONE	
Vehicle - tires, exhaust, glass, lights, mechanical condition, clean and sanitary	In good order	FAA Equiv.	
Agency Name on 3 sides <small>(Primary aircraft only)</small>	Present	Rear Surface WAIVED	
DOH Logo on 3 sides	Present	WAIVED	
Equipment - secured, clean and sanitary and operable	In good order	NONE	
Seat Belts - Driver, Front Passenger, all rear seats and squad bench	Present	FAA Equiv.	
Heater and Air Conditioning	Operable	FAA Equiv.	
Drug Locker, ALS Only	Present	Per DOH approved service policy	

Air Medical Service Suggested Additional Equipment:

An appropriate survival type kit			
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Comments/Recommendations:

Waiver Request:

Service Owner/Operator	Signature	Date
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Approval:

DOH EMS Representative	By: Insp. Affirm	Date:
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