

**Edward Hospital
Emergency Medical Services Drug Exchange**

Quantity:	Drug:	NDC:
	Adenosine 6mg/2ml Prefilled	
	Adenosine 12mg/4ml Prefilled	
	Albuterol 2.5mg/3ml 0.83% neb	
	Amiodarone 50mg/ml, 3ml vial*	
	Amyl Nitrate amps	
	Aspirin 81mg chewable	
	Atropine Sulfate 1mg/10ml syr	
	Ammonia inhalants	
	Diphenhydramine 50mg/ml	
	Hurricane Spray	
	Dextrose 5%, 100ml BBraun PAB bag*	
	0.2 micron IV Filter*	
	Dextrose 25% 10ml Prefilled	
	Dextrose 50% 50ml Prefilled	
	Dopamine 800mg/500ml (1600mcg/ml)	
	Epinephrine 1:1,000 injection, 1ml	
	Epinephrine 1:1000 injection, 30ml vial	
	Epinephrine 1:10,000 1mg/10ml Syr	
	Etomidate 40mg/20ml Prefilled	
	Fentanyl 50mcg/ml, 2ml	
	Glucagon 1mg Kit	
	Glucose gel, 37.5gm tube	
	Lidocaine 100mg/5ml Prefilled	
	Midazolam 10mg/2ml vial	
	Narcan 2mg/2ml Prefilled	
	Nitroglycerin 0.4mg/spray, 4.9gm spray	
	Ondansetron 4mg/2mL Vial	
	Ondansetron 4mg ODT tab	
	Sodium Bicarb 1mEq/ml, 50ml Prefilled	
	Tetracaine HCl 0.5% Opth, 2ml UD	

*One vial of amiodarone, one bag of D5W 100ml (in the hard plastic, NOT a hospira bag) and one 0.2micron filter make up an “Amiodarone Kit. Pharmacy does not supply these kits pre-made, but we do supply all of the individual components.

EMS Provider Name (printed): _____

EMS Provider Signature: _____

EMS Vehicle ID: _____ **(Circle one) Transport Non-Transport**

EMS Dept: Bolingbrook Lisle/Woodridge Naperville Warrenville Romeoville

Providers from departments not listed above must fill out an Out of System Provider sheet for med restock.

Pharmacy Tech Initials: _____ **Pharmacist Initials** _____ **Date:** _____