

**NOTICE
GLENPOOL AREA EMERGENCY MEDICAL SERVICE
DISTRICT
REGULAR MEETING**

A Regular Session of the Glenpool Area Emergency Medical Service District will be held at 6:00 p.m. immediately following the Glenpool Cemetery Trust Authority meeting on November 6, 2023, at Glenpool City Hall, City Council Chambers, 12205 S. Yukon Ave., 3rd Floor, Glenpool, Oklahoma.

NOTE: The Glenpool Area Emergency Medical Service District will be assembled for the meeting at the City Council Chambers, 12205 S. Yukon Ave, Glenpool, Oklahoma. Members of the public are invited to attend the in-person meeting, or join a live broadcast at this link:

Join Zoom Meeting

<https://us02web.zoom.us/j/89753555435?pwd=QzdFVjA1b0lKa1lSUFIKbUNrUUxtdz09>

Meeting ID: 897 5355 5435

Passcode: 974088

One tap mobile

+13462487799, US (Houston)

+14086380968, US (San Jose)

Dial by your location

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

Meeting ID: 897 5355 5435

Passcode: 974088

Find your local number: <https://us02web.zoom.us/j/89753555435?pwd=QzdFVjA1b0lKa1lSUFIKbUNrUUxtdz09>

The GEMS Board welcomes comments from citizens of Glenpool who wish to address any item on the agenda.

- Speakers attending in **PERSON** are required to complete the Request to Speak form located on the agenda table and return to the City Clerk **PRIOR TO THE CALL TO ORDER.**
- Speakers attending via **ZOOM** are required to complete the Request to Speak form located on our website: <https://glenpoolonline.civicweb.net/document/19057/Request%20to%20Speak%20Form.pdf> and email it to the City Clerk: Wknight@cityofglenpool.com **PRIOR TO 6:00 PM, NOVEMBER 6, 2023.**

AGENDA

	Page
A) Call to Order - Joyce G. Calvert, Chair	
B) Roll Call, Declaration of Quorum – Wendy Knight, Clerk; Joyce G. Calvert, Chair	
C) EMS Report - Brian Cook, Director of Operations, Mercy Regional EMS	
1) GEMS EMS REPORT 09272023-10292023	3 - 5
D) District Administrator Report - Susan White, Administrator	
1) Glenpool EMS Report FY21 final Glenpool EMS Report FY22 2023-09-GEMS Monthly Financial Report	6 - 97

[Bag Check Inventory - Engine 1](#)

[Bag Check Inventory - R 1](#)

E) **Trustee Comments**

F) **Public Comments**

G) **Consideration and appropriate action relating to a request for approval of the Consent Agenda. (All matters listed under "Consent" are considered by the GEMS Board to be routine and will be enacted by one motion. Any Trustee may, however, remove an item from the Consent Agenda by request. A motion to adopt the consent Agenda is non-debatable.)**

1) Minutes from October 2, 2023 meeting. 98 - 99

[GEMS - 02 Oct 2023 - Minutes - Html](#)

2) 2024 Meeting Schedule. 100 - 101

[GEMS 2024 Meeting Schedule](#)

3) Purchase Orders totaling \$28,852.93, and Purchase Order Receiving Report and Payment of Claims as of 10/31/2023 totaling \$24,799.53. 102 - 129

[GEMS Invoice 11-6-23c](#)

H) **Consideration and appropriate action relating to items removed from the Consent Agenda**

I) **Scheduled Business**

J) **Adjournment**

This notice and agenda was posted at Glenpool City Hall, 12205 S. Yukon Ave., Glenpool, Oklahoma, on November 3, 2023, by 11:30 am.

Signed: Wendy Knight

Clerk

Mercy Regional



Brian Cook
Chief Operating Officer
PO Box 2398
Owasso, OK 74055
Office: 918.609.5827
Email: bcook@mercy-regional.com

To: Honorable Chair and GEMS Board Members

From: Brian Cook, Chief Operating Officer

Date: October 30, 2023

Ref: EMS Report September 27 – September 29, 2023

We logged 130 calls for service during this period while maintaining a 97% response time compliance.

84 patients treated and transported.
23 patients refused transport.
6 Mutual aid received.
3 mutual aid given.
9 cancelled prior to arrival.
4 No patient found.
1 DOA

We participated in the annual Spooktacular Fest.

I was asked to serve on the Glenpool Chamber of Commerce Board of Directors and I am happy to help the Chamber in supporting area businesses.

Brian Cook,
Chief Operating Officer

CRun	Call Date	Pick Up Location	Destination	Dispatched	En Route	On Scene	Transport	Arrived	Clear	Response Time	Unit
23-16669	9/27/2023 07:42	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	9/27/2023 07:43	9/27/2023 07:45	9/27/2023 07:47	9/27/2023 07:54	9/27/2023 07:54	9/27/2023 07:54	00:05:01	MEDIC 401
23-16675	9/27/2023 09:22	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	9/27/2023 09:23	9/27/2023 09:24	9/27/2023 09:27	9/27/2023 09:54	9/27/2023 09:54	9/27/2023 10:04	00:04:47	MEDIC 401
23-16697	9/27/2023 13:52	EMERGENCY SCENE	ST. FRANCIS TULSA	9/27/2023 13:52	9/27/2023 13:53	9/27/2023 15:00	9/27/2023 14:25	9/27/2023 14:47	9/27/2023 15:10	00:08:02	MEDIC 401
23-16758	9/28/2023 13:07	EMERGENCY SCENE	ST. FRANCIS TULSA	9/28/2023 13:07	9/28/2023 13:09	9/28/2023 13:33	9/28/2023 13:23	9/28/2023 13:49	9/28/2023 14:07	00:05:49	MEDIC 401
23-16796	9/28/2023 23:29	EMERGENCY SCENE	ST. FRANCIS TULSA	9/28/2023 23:31	9/28/2023 23:33	9/28/2023 23:36	9/29/2023 00:06	9/29/2023 00:35	9/29/2023 01:00	00:07:04	MEDIC 401
23-16798	9/29/2023 01:57	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	9/29/2023 02:00	9/29/2023 02:01	9/29/2023 02:05	9/29/2023 02:13	9/29/2023 02:18	9/29/2023 02:29	00:08:09	MEDIC 401
23-16810	9/29/2023 08:20	EMERGENCY SCENE	ST. FRANCIS TULSA	9/29/2023 08:21	9/29/2023 08:24	9/29/2023 08:28	9/29/2023 08:44	9/29/2023 09:10	9/29/2023 09:26	00:08:00	MEDIC 401
23-16847	9/29/2023 16:34	EMERGENCY SCENE	HILLCREST SOUTH	9/29/2023 16:35	9/29/2023 16:36	9/29/2023 16:40	9/29/2023 16:53	9/29/2023 17:14	9/29/2023 17:41	00:06:19	MEDIC 401
23-16867	9/29/2023 21:33	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	9/29/2023 21:34	9/29/2023 21:36	9/29/2023 21:42	9/29/2023 22:12	9/29/2023 22:12	9/29/2023 22:12	00:08:09	MEDIC 401
23-16881	9/30/2023 03:45	EMERGENCY SCENE	ST. FRANCIS TULSA	9/30/2023 03:45	9/30/2023 03:48	9/30/2023 03:53	9/30/2023 04:16	9/30/2023 04:36	9/30/2023 04:51	00:08:02	MEDIC 401
23-16885	9/30/2023 04:40	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	9/30/2023 04:43	9/30/2023 04:44	9/30/2023 04:47	9/30/2023 05:00	9/30/2023 05:00	9/30/2023 05:00	00:05:55	MEDIC 402
23-16890	9/30/2023 09:51	EMERGENCY SCENE	ST. JOHN TULSA	9/30/2023 09:52	9/30/2023 09:54	9/30/2023 09:57	9/30/2023 10:32	9/30/2023 10:54	9/30/2023 11:19	00:06:10	MEDIC 401
23-16897	9/30/2023 13:12	EMERGENCY SCENE	ST. FRANCIS SOUTH	9/30/2023 13:12	9/30/2023 13:14	9/30/2023 13:18	9/30/2023 13:39	9/30/2023 13:54	9/30/2023 14:13	00:05:40	MEDIC 401
23-16906	9/30/2023 15:36	EMERGENCY SCENE	NO PATIENT FOUND	9/30/2023 15:38	9/30/2023 15:38	9/30/2023 15:42	9/30/2023 15:52	9/30/2023 15:52	9/30/2023 15:52	00:05:21	MEDIC 401
23-16911	9/30/2023 19:24	EMERGENCY SCENE	ST. FRANCIS SOUTH	9/30/2023 19:24	9/30/2023 19:27	9/30/2023 19:32	9/30/2023 20:07	9/30/2023 20:21	9/30/2023 20:38	00:08:01	MEDIC 401
23-16928	10/1/2023 00:59	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/1/2023 01:01	10/1/2023 01:02	10/1/2023 01:07	10/1/2023 01:22	10/1/2023 01:26	10/1/2023 02:09	00:07:35	MEDIC 401
23-16940	10/1/2023 06:57	EMERGENCY SCENE	NO PATIENT FOUND	10/1/2023 06:59	10/1/2023 07:01	10/1/2023 07:04	10/1/2023 07:09	10/1/2023 07:09	10/1/2023 07:09	00:06:53	MEDIC 401
23-16944	10/1/2023 11:04	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/1/2023 11:04	10/1/2023 11:06	10/1/2023 11:12	10/1/2023 11:30	10/1/2023 11:30	10/1/2023 11:30	00:08:03	MEDIC 401
23-16945	10/1/2023 11:13	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/1/2023 11:15	10/1/2023 11:17	10/1/2023 11:20	10/1/2023 11:34	10/1/2023 11:39	10/1/2023 11:58	00:06:39	MEDIC 402
23-16953	10/1/2023 13:44	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/1/2023 13:45	10/1/2023 13:45	10/1/2023 13:48	10/1/2023 14:16	10/1/2023 14:35	10/1/2023 14:55	00:04:05	MEDIC 401
23-16955	10/1/2023 14:31	EMERGENCY SCENE	ST. FRANCIS TULSA	10/1/2023 14:32	10/1/2023 14:32	10/1/2023 14:39	10/1/2023 14:51	10/1/2023 15:23	10/1/2023 15:46	00:08:02	MEDIC 402
23-16960	10/1/2023 15:21	EMERGENCY SCENE	ST. FRANCIS TULSA	10/1/2023 15:24	10/1/2023 15:25	10/1/2023 15:28	10/1/2023 15:55	10/1/2023 16:10	10/1/2023 16:23	00:07:14	MEDIC 401
23-16965	10/1/2023 16:45	EMERGENCY SCENE	ST. FRANCIS TULSA	10/1/2023 16:47	10/1/2023 16:47	10/1/2023 16:49	10/1/2023 17:10	10/1/2023 17:31	10/1/2023 17:44	00:03:52	MEDIC 401
23-16971	10/1/2023 20:41	EMERGENCY SCENE	ST. JOHN TULSA	10/1/2023 20:42	10/1/2023 20:44	10/1/2023 20:48	10/1/2023 21:12	10/1/2023 21:52	10/1/2023 21:50	00:06:23	MEDIC 401
23-17128	10/4/2023 11:42	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/4/2023 11:43	10/4/2023 11:44	10/4/2023 11:47	10/4/2023 12:02	10/4/2023 12:07	10/4/2023 12:21	00:04:40	MEDIC 401
23-17139	10/4/2023 14:27	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	10/4/2023 14:28	10/4/2023 14:29	10/4/2023 14:32	10/4/2023 14:32	10/4/2023 14:32	10/4/2023 14:32	00:04:30	MEDIC 401
23-17162	10/4/2023 18:34	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	10/4/2023 18:35	10/4/2023 18:36	10/4/2023 18:38	10/4/2023 18:42	10/4/2023 18:42	10/4/2023 18:42	00:03:49	MEDIC 401
23-17186	10/5/2023 07:21	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/5/2023 07:21	10/5/2023 07:24	10/5/2023 07:28	10/5/2023 07:37	10/5/2023 07:37	10/5/2023 07:37	00:06:57	MEDIC 401
23-17191	10/5/2023 08:52	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	10/5/2023 08:54	10/5/2023 08:54	10/5/2023 08:55	10/5/2023 09:11	10/5/2023 09:11	10/5/2023 09:11	00:03:33	MEDIC 401
23-17195	10/5/2023 09:38	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/5/2023 09:39	10/5/2023 09:41	10/5/2023 09:43	10/5/2023 09:59	10/5/2023 10:03	10/5/2023 10:13	00:04:25	MEDIC 401
23-17251	10/6/2023 04:51	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	10/6/2023 04:52	10/6/2023 04:55	10/6/2023 05:00	10/6/2023 05:18	10/6/2023 05:43	10/6/2023 06:27	00:08:07	MEDIC 401
23-17287	10/6/2023 14:41	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/6/2023 14:42	10/6/2023 14:44	10/6/2023 14:45	10/6/2023 15:42	10/6/2023 15:42	10/6/2023 15:42	00:09:58	MEDIC 401
23-17293	10/6/2023 14:41	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/6/2023 14:42	10/6/2023 14:44	10/6/2023 14:51	10/6/2023 15:42	10/6/2023 15:42	10/6/2023 15:42	00:09:58	MEDIC 401
23-17318	10/7/2023 07:25	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	10/7/2023 07:16	10/7/2023 07:17	10/7/2023 07:22	10/7/2023 07:27	10/7/2023 07:27	10/7/2023 07:27	00:07:47	MEDIC 401
23-17336	10/7/2023 16:52	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/7/2023 16:53	10/7/2023 16:55	10/7/2023 17:00	10/7/2023 17:22	10/7/2023 17:39	10/7/2023 17:54	00:07:15	MEDIC 401
23-17385	10/9/2023 03:13	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/9/2023 03:16	10/9/2023 03:18	10/9/2023 03:22	10/9/2023 03:45	10/9/2023 04:06	10/9/2023 04:24	00:08:01	MEDIC 401
23-17390	10/9/2023 08:18	EMERGENCY SCENE	HILLCREST SOUTH	10/9/2023 08:19	10/9/2023 08:20	10/9/2023 08:24	10/9/2023 08:32	10/9/2023 08:52	10/9/2023 09:02	00:05:46	MEDIC 401
23-17443	10/9/2023 19:25	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/9/2023 19:26	10/9/2023 19:27	10/9/2023 19:32	10/9/2023 19:58	10/9/2023 20:14	10/9/2023 20:34	00:06:39	MEDIC 401
23-17467	10/10/2023 08:12	EMERGENCY SCENE	HILLCREST SOUTH	10/10/2023 08:13	10/10/2023 08:14	10/10/2023 08:18	10/10/2023 08:28	10/10/2023 09:11	10/10/2023 09:28	00:05:47	MEDIC 401
23-17474	10/10/2023 09:58	EMERGENCY SCENE	HILLCREST SOUTH	10/10/2023 10:00	10/10/2023 10:01	10/10/2023 10:04	10/10/2023 10:43	10/10/2023 11:05	10/10/2023 11:49	00:06:15	MEDIC 401
23-17496	10/10/2023 15:39	EMERGENCY SCENE	ST. FRANCIS TULSA	10/10/2023 15:40	10/10/2023 15:44	10/10/2023 15:47	10/10/2023 15:57	10/10/2023 16:24	10/10/2023 16:46	00:08:07	MEDIC 401
23-17506	10/10/2023 16:39	EMERGENCY SCENE	UNK								MUTUAL AID RECEIVED
23-17518	10/10/2023 19:38	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	10/10/2023 19:41	10/10/2023 19:42	10/10/2023 19:45	10/10/2023 20:10	10/10/2023 20:33	10/10/2023 21:19	00:07:10	MEDIC 401
23-17525	10/11/2023 00:22	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/11/2023 00:23	10/11/2023 00:26	10/11/2023 00:28	10/11/2023 00:44	10/11/2023 00:48	10/11/2023 01:22	00:06:40	MEDIC 401
23-17549	10/11/2023 09:39	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/11/2023 09:41	10/11/2023 09:41	10/11/2023 09:44	10/11/2023 10:03	10/11/2023 10:03	10/11/2023 10:03	00:04:55	MEDIC 401
23-17550	10/11/2023 09:58	EMERGENCY SCENE	HILLCREST SOUTH	10/11/2023 09:59	10/11/2023 09:59	10/11/2023 10:09	10/11/2023 10:27	10/11/2023 10:41	10/11/2023 10:53	00:11:06	MEDIC 401
23-17558	10/11/2023 10:28	EMERGENCY SCENE	ST. FRANCIS TULSA	10/11/2023 10:29	10/11/2023 10:31	10/11/2023 10:31	10/11/2023 10:49	10/11/2023 11:09	10/11/2023 11:47	00:03:30	MEDIC 402
23-17577	10/11/2023 13:20	EMERGENCY SCENE	ST. JOHN TULSA	10/11/2023 13:23	10/11/2023 13:24	10/11/2023 13:25	10/11/2023 14:12	10/11/2023 14:12	10/11/2023 14:22	00:04:55	MEDIC 401
23-17580	10/11/2023 13:57	EMERGENCY SCENE	UNK								MUTUAL AID RECEIVED
23-17601	10/11/2023 22:40	EMERGENCY SCENE	ST. JOHN TULSA	10/11/2023 22:41	10/11/2023 22:41	10/11/2023 22:44	10/11/2023 23:04	10/11/2023 23:21	10/11/2023 23:39	00:04:59	MEDIC 401
23-17667	10/13/2023 04:08	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/13/2023 04:09	10/13/2023 04:13	10/13/2023 04:24	10/13/2023 04:41	10/13/2023 04:41	10/13/2023 04:41	00:16:09	MUTUAL AID GIVEN
23-17678	10/13/2023 06:16	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/13/2023 06:16	10/13/2023 06:19	10/13/2023 06:23	10/13/2023 06:44	10/13/2023 06:44	10/13/2023 07:24	00:07:41	MEDIC 401
23-17695	10/13/2023 11:52	EMERGENCY SCENE	ST. FRANCIS TULSA	10/13/2023 11:53	10/13/2023 11:53	10/13/2023 12:00	10/13/2023 12:26	10/13/2023 12:53	10/13/2023 13:33	00:08:02	MEDIC 402
23-17696	10/13/2023 11:53	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/13/2023 11:56	10/13/2023 11:58	10/13/2023 12:20	10/13/2023 12:37	10/13/2023 13:01	10/13/2023 13:01	00:28:56	MEDIC 102
23-17710	10/13/2023 15:22	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/13/2023 15:24	10/13/2023 15:25	10/13/2023 15:28	10/13/2023 15:54	10/13/2023 16:14	10/13/2023 16:42	00:05:24	MEDIC 102
23-17711	10/13/2023 15:52	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	10/13/2023 15:54	10/13/2023 15:55	10/13/2023 15:59	10/13/2023 16:01	10/13/2023 16:01	10/13/2023 16:01	00:06:20	MEDIC 102
23-17717	10/13/2023 16:58	EMERGENCY SCENE	ST. FRANCIS TULSA	10/13/2023 16:59	10/13/2023 16:59	10/13/2023 17:16	10/13/2023 17:35	10/13/2023 17:54	10/13/2023 18:27	00:05:10	MEDIC 401
23-17718	10/13/2023 17:14	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/13/2023 17:15	10/13/2023 17:16	10/13/2023 17:20	10/13/2023 17:37	10/13/2023 17:56	10/13/2023 18:27	00:05:27	MEDIC 402
23-17720	10/13/2023 17:28	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/13/2023 17:29	10/13/2023 17:29	10/13/2023 17:34	10/13/2023 17:49	10/13/2023 17:49	10/13/2023 17:49	00:05:43	610 SETH WATKINS
23-17726	10/13/2023 18:53	EMERGENCY SCENE	HILLCREST MEDICAL CENTER	10/13/2023 18:54	10/13/2023 18:55	10/13/2023 18:58	10/13/2023 19:33	10/13/2023 19:57	10/13/2023 20:14	00:04:56	MEDIC 401
23-17735	10/14/2023 01:00	EMERGENCY SCENE	ST. FRANCIS TULSA	10/14/2023 01:01	10/14/2023 01:05						

23-17875	10/16/2023 17:07	EMERGENCY SCENE	DOA - DEAD ON ARRIVAL	10/16/2023 17:09	10/16/2023 17:09	10/16/2023 17:28	10/16/2023 17:46	10/16/2023 17:46	10/16/2023 17:46	00:20:33	MEDIC 402	RESP FROM SFS
23-17914	10/17/2023 09:44	EMERGENCY SCENE	ST. FRANCIS TULSA	10/17/2023 09:46	10/17/2023 09:47	10/17/2023 09:49	10/17/2023 10:17	10/17/2023 10:40	10/17/2023 11:13	00:05:19	MEDIC 401	
23-17920	10/17/2023 10:18	EMERGENCY SCENE	UNK								MUTUAL AID RECEIVED	
23-17926	10/17/2023 11:13	EMERGENCY SCENE	ST. FRANCIS TULSA	10/17/2023 11:14	10/17/2023 11:16	10/17/2023 11:21	10/17/2023 11:34	10/17/2023 12:07	10/17/2023 12:07	00:08:04	MEDIC 402	
23-17928	10/17/2023 11:29	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/17/2023 11:30	10/17/2023 11:31	10/17/2023 11:33	10/17/2023 11:50	10/17/2023 11:50	10/17/2023 11:50	00:03:54	MEDIC 401	
23-17947	10/17/2023 15:41	EMERGENCY SCENE	HILLCREST SOUTH	10/17/2023 15:42	10/17/2023 15:42	10/17/2023 15:47	10/17/2023 16:27	10/17/2023 16:47	10/17/2023 17:14	00:05:14	MEDIC 401	
23-17953	10/17/2023 17:25	EMERGENCY SCENE	ST. JOHN SAPULPA	10/17/2023 17:26	10/17/2023 17:27	10/17/2023 17:34	10/17/2023 18:05	10/17/2023 18:28	10/17/2023 19:00	00:08:03	MEDIC 401	
23-17967	10/18/2023 00:51	EMERGENCY SCENE	ST. FRANCIS TULSA	10/18/2023 00:55	10/18/2023 00:56	10/18/2023 01:09	10/18/2023 01:20	10/18/2023 01:51	10/18/2023 02:25	00:18:19	MUTUAL AID GIVEN	
23-17985	10/18/2023 07:21	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/18/2023 07:23	10/18/2023 07:24	10/18/2023 07:24	10/18/2023 07:29	10/18/2023 07:29	10/18/2023 07:29	00:02:40	MEDIC 401	
23-17987	10/18/2023 08:22	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/18/2023 08:24	10/18/2023 08:25	10/18/2023 08:30	10/18/2023 08:42	10/18/2023 09:02	10/18/2023 09:33	00:07:08	MEDIC 401	
23-18046	10/19/2023 00:58	EMERGENCY SCENE	PATIENT REFUSED TO SIGN	10/19/2023 00:59	10/19/2023 01:01	10/19/2023 01:07	10/19/2023 01:22	10/19/2023 01:22	10/19/2023 01:28	00:08:03	MEDIC 401	
23-19059	10/19/2023 08:02	EMERGENCY SCENE	ST. FRANCIS TULSA	10/19/2023 08:03	10/19/2023 08:05	10/19/2023 08:11	10/19/2023 08:28	10/19/2023 08:53	10/19/2023 09:14	00:08:00	MEDIC 401	
23-18060	10/19/2023 08:07	EMERGENCY SCENE	ST. FRANCIS TULSA	10/19/2023 08:08	10/19/2023 08:10	10/19/2023 08:11	10/19/2023 08:31	10/19/2023 08:53	10/19/2023 09:38	00:03:58	MEDIC 402	
23-18079	10/19/2023 11:58	EMERGENCY SCENE	HILLCREST SOUTH	10/19/2023 11:58	10/19/2023 12:00	10/19/2023 12:06	10/19/2023 12:46	10/19/2023 13:07	10/19/2023 14:08	00:08:00	MEDIC 401	
23-18109	10/19/2023 19:13	EMERGENCY SCENE	NO PATIENT FOUND	10/19/2023 19:14	10/19/2023 19:15	10/19/2023 19:18	10/19/2023 19:22	10/19/2023 19:22	10/19/2023 19:22	00:05:13	MEDIC 401	
23-18124	10/20/2023 03:35	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/20/2023 03:36	10/20/2023 03:38	10/20/2023 03:43	10/20/2023 04:03	10/20/2023 04:03	10/20/2023 04:03	00:08:08	MEDIC 401	
23-18129	10/20/2023 06:36	EMERGENCY SCENE	ST. JOHN SAPULPA	10/20/2023 06:37	10/20/2023 06:40	10/20/2023 06:43	10/20/2023 06:48	10/20/2023 07:02	10/20/2023 07:13	00:06:10	MEDIC 401	
23-18134	10/20/2023 09:14	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/20/2023 09:16	10/20/2023 09:17	10/20/2023 09:20	10/20/2023 09:42	10/20/2023 10:03	10/20/2023 10:32	00:06:01	MEDIC 401	
23-18135	10/20/2023 09:15	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/20/2023 09:16	10/20/2023 09:17	10/20/2023 09:20	10/20/2023 09:42	10/20/2023 10:03	10/20/2023 10:29	00:04:58	MEDIC 402	
23-18211	10/21/2023 13:24	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/21/2023 13:24	10/21/2023 13:27	10/21/2023 13:30	10/21/2023 14:02	10/21/2023 14:20	10/21/2023 14:41	00:06:41	MEDIC 401	
23-18246	10/22/2023 14:12	EMERGENCY SCENE	ST. FRANCIS TULSA	10/22/2023 14:13	10/22/2023 14:13	10/22/2023 14:19	10/22/2023 14:36	10/22/2023 15:01	10/22/2023 15:19	00:07:21	MEDIC 401	
23-18262	10/22/2023 20:41	EMERGENCY SCENE	ST. FRANCIS TULSA	10/22/2023 20:42	10/22/2023 20:45	10/22/2023 20:46	10/22/2023 21:03	10/22/2023 21:21	10/22/2023 21:37	00:05:09	MEDIC 401	
23-18268	10/22/2023 22:49	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/22/2023 22:54	10/22/2023 22:54	10/22/2023 22:57	10/22/2023 23:14	10/22/2023 23:21	10/22/2023 23:30	00:07:34	MEDIC 401	
23-18273	10/23/2023 01:04	EMERGENCY SCENE	ST. FRANCIS TULSA	10/23/2023 01:06	10/23/2023 01:08	10/23/2023 01:11	10/23/2023 01:34	10/23/2023 01:57	10/23/2023 02:08	00:07:05	MEDIC 401	
23-18275	10/23/2023 01:47	EMERGENCY SCENE	ST. JOHN TULSA	10/23/2023 01:50	10/23/2023 01:50	10/23/2023 01:53	10/23/2023 02:09	10/23/2023 02:31	10/23/2023 02:48	00:06:33	MEDIC 402	
23-18279	10/23/2023 08:15	EMERGENCY SCENE	HILLCREST SOUTH	10/23/2023 08:15	10/23/2023 08:17	10/23/2023 08:20	10/23/2023 08:32	10/23/2023 08:52	10/23/2023 09:02	00:05:26	MEDIC 401	
23-18296	10/23/2023 11:25	EMERGENCY SCENE	HILLCREST SOUTH	10/23/2023 11:26	10/23/2023 11:27	10/23/2023 11:32	10/23/2023 11:56	10/23/2023 12:11	10/23/2023 12:32	00:06:26	MEDIC 401	
23-18312	10/23/2023 15:39	EMERGENCY SCENE	ST. FRANCIS SOUTH	10/23/2023 15:39	10/23/2023 15:42	10/23/2023 15:45	10/23/2023 16:20	10/23/2023 16:37	10/23/2023 16:54	00:06:45	MEDIC 401	
23-18328	10/23/2023 21:36	EMERGENCY SCENE	ST. JOHN TULSA	10/23/2023 21:37	10/23/2023 21:39	10/23/2023 21:42	10/23/2023 22:04	10/23/2023 22:22	10/23/2023 22:39	00:05:52	MEDIC 401	
23-18329	10/23/2023 22:10	EMERGENCY SCENE	ST. FRANCIS TULSA	10/23/2023 22:11	10/23/2023 22:13	10/23/2023 22:16	10/23/2023 22:33	10/23/2023 22:57	10/23/2023 23:12	00:05:31	MEDIC 402	
23-18356	10/24/2023 10:08	EMERGENCY SCENE	ST. JOHN SAPULPA	10/24/2023 10:09	10/24/2023 10:12	10/24/2023 10:13	10/24/2023 10:44	10/24/2023 10:59	10/24/2023 11:34	00:04:48	MEDIC 401	
23-18364	10/24/2023 11:47	EMERGENCY SCENE	ST. FRANCIS TULSA	10/24/2023 11:49	10/24/2023 11:50	10/24/2023 11:56	10/24/2023 12:18	10/24/2023 12:34	10/24/2023 13:29	00:08:09	MEDIC 401	
23-18376	10/24/2023 14:51	EMERGENCY SCENE	ST. FRANCIS TULSA	10/24/2023 14:52	10/24/2023 14:53	10/24/2023 15:05	10/24/2023 15:24	10/24/2023 15:43	10/24/2023 16:19	00:13:27	MEDIC 401	S. of 181
23-18377	10/24/2023 15:05	EMERGENCY SCENE	ST. FRANCIS TULSA	10/24/2023 15:05	10/24/2023 15:06	10/24/2023 15:13	10/24/2023 15:33	10/24/2023 15:55	10/24/2023 16:13	00:07:22	MEDIC 402	
23-18384	10/24/2023 15:51	EMERGENCY SCENE	UNK								MUTUAL AID RECEIVED	
23-18396	10/24/2023 19:40	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/24/2023 19:40	10/24/2023 19:41	10/24/2023 19:46	10/24/2023 20:05	10/24/2023 20:05	10/24/2023 20:05	00:06:19	MEDIC 401	
23-18418	10/25/2023 07:44	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/25/2023 07:45	10/25/2023 07:48	10/25/2023 07:51	10/25/2023 08:13	10/25/2023 08:13	10/25/2023 08:13	00:06:20	MEDIC 401	
23-18421	10/25/2023 08:16	EMERGENCY SCENE	ST. FRANCIS TULSA	10/25/2023 08:17	10/25/2023 08:17	10/25/2023 08:23	10/25/2023 08:43	10/25/2023 09:13	10/25/2023 09:34	00:07:05	MEDIC 401	
23-18429	10/25/2023 10:10	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	10/25/2023 10:10	10/25/2023 10:12	10/25/2023 10:13	10/25/2023 10:13	10/25/2023 10:13	10/25/2023 10:13	00:03:30	MEDIC 401	
23-18437	10/25/2023 11:57	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/25/2023 11:57	10/25/2023 11:59	10/25/2023 12:00	10/25/2023 12:13	10/25/2023 12:13	10/25/2023 12:13	00:03:37	MUTUAL AID GIVEN	
23-18448	10/25/2023 14:24	EMERGENCY SCENE	ST. FRANCIS TULSA	10/25/2023 14:25	10/25/2023 14:27	10/25/2023 14:34	10/25/2023 14:49	10/25/2023 15:09	10/25/2023 15:10	00:01:12	MEDIC 401	
23-18459	10/25/2023 17:15	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/25/2023 17:16	10/25/2023 17:16	10/25/2023 17:19	10/25/2023 18:02	10/25/2023 18:02	10/25/2023 18:02	00:03:51	MEDIC 401	
23-18477	10/25/2023 22:48	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/25/2023 22:51	10/25/2023 22:51	10/25/2023 22:52	10/25/2023 23:01	10/25/2023 23:05	10/25/2023 23:26	00:04:17	MEDIC 401	
23-18486	10/26/2023 02:56	EMERGENCY SCENE	CANCELLED BY PD OR OTHER SERVICE	10/26/2023 02:59	10/26/2023 02:59	10/26/2023 02:59	10/26/2023 02:59	10/26/2023 02:59	10/26/2023 02:59	00:03:00	MEDIC 401	
23-18488	10/26/2023 05:41	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/26/2023 05:43	10/26/2023 05:44	10/26/2023 05:48	10/26/2023 05:48	10/26/2023 05:48	10/26/2023 05:48	00:07:49	MEDIC 401	
23-18541	10/26/2023 16:07	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/26/2023 16:07	10/26/2023 16:10	10/26/2023 16:15	10/26/2023 16:29	10/26/2023 16:29	10/26/2023 16:29	00:08:07	MEDIC 401	
23-18545	10/26/2023 17:09	EMERGENCY SCENE	ST. FRANCIS GLENPOOL	10/26/2023 17:10	10/26/2023 17:13	10/26/2023 17:25	10/26/2023 17:37	10/26/2023 18:04	10/26/2023 18:24	00:16:17	MEDIC 401	
23-18546	10/26/2023 17:16	EMERGENCY SCENE	ST. JOHN TULSA	10/26/2023 17:26	10/26/2023 17:26	10/26/2023 17:52	10/26/2023 18:05	10/26/2023 18:27	10/26/2023 18:52	00:35:58	MEDIC 102	3RD UNIT CLOSEST AVAIL
23-18555	10/26/2023 20:22	EMERGENCY SCENE	ST. FRANCIS TULSA	10/26/2023 20:24	10/26/2023 20:25	10/26/2023 20:44	10/26/2023 20:49	10/26/2023 21:15	10/26/2023 21:36	00:21:26	MEDIC 401	STAGED FOR SUICIDAL
23-18564	10/26/2023 22:19	EMERGENCY SCENE	HILLCREST SOUTH	10/26/2023 22:22	10/26/2023 22:22	10/26/2023 22:25	10/26/2023 22:43	10/26/2023 22:58	10/26/2023 23:11	00:06:43	MEDIC 401	
23-18578	10/27/2023 05:32	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/27/2023 05:33	10/27/2023 05:35	10/27/2023 05:41	10/27/2023 06:06	10/27/2023 06:06	10/27/2023 06:06	00:08:05	MEDIC 401	
23-18623	10/27/2023 15:55	EMERGENCY SCENE	ST. JOHN TULSA	10/27/2023 15:56	10/27/2023 15:57	10/27/2023 16:03	10/27/2023 16:20	10/27/2023 16:41	10/27/2023 17:01	00:08:09	MEDIC 401	
23-18636	10/27/2023 19:06	EMERGENCY SCENE	ST. FRANCIS TULSA	10/27/2023 19:07	10/27/2023 19:11	10/27/2023 19:11	10/27/2023 19:44	10/27/2023 20:05	10/27/2023 20:39	00:04:37	MEDIC 401	
23-18645	10/27/2023 22:51	EMERGENCY SCENE	ST. FRANCIS TULSA	10/27/2023 22:53	10/27/2023 22:53	10/27/2023 22:56	10/27/2023 23:27	10/27/2023 23:47	10/28/2023 00:11	00:05:03	MEDIC 401	
23-18647	10/27/2023 23:02	EMERGENCY SCENE	UNK								MUTUAL AID RECEIVED	
23-18679	10/28/2023 13:19	EMERGENCY SCENE	ST. FRANCIS TULSA	10/28/2023 13:20	10/28/2023 13:20	10/28/2023 13:28	10/28/2023 13:53	10/28/2023 14:10	10/28/2023 15:01	00:08:07	MEDIC 401	
23-18691	10/28/2023 19:59	EMERGENCY SCENE	ST. FRANCIS TULSA	10/28/2023 20:02	10/28/2023 20:02	10/28/2023 20:08	10/28/2023 21:18	10/28/2023 21:34	10/28/2023 22:19	00:08:05	MEDIC 401	
23-18702	10/29/2023 07:04	EMERGENCY SCENE	ST. FRANCIS TULSA	10/29/2023 07:05	10/29/2023 07:08	10/29/2023 07:11	10/29/2023 07:33	10/29/2023 07:51	10/29/2023 08:03	00:06:56	MEDIC 401	
23-18710	10/29/2023 13:26	EMERGENCY SCENE	SIGNED PATIENT REFUSAL	10/29/2023 13:27	10/29/2023 13:27	10/29/2023 13:28	10/29/2023 13:41	10/29/2023 13:41	10/29/2023 13:41	00:02:17		



GLENPOOL EMERGENCY MEDICAL SERVICE DISTRICT

Statutory Report

For the fiscal year ended June 30, 2021

Cindy Byrd, CPA
State Auditor & Inspector

**GLENPOOL EMERGENCY MEDICAL SERVICE DISTRICT
STATUTORY REPORT
FOR THE FISCAL YEAR ENDED JUNE 30, 2021**

This publication, issued by the Oklahoma State Auditor and Inspector's Office as authorized by 19 O.S. § 1706.1, has not been printed, but is available on the agency's website (www.sai.ok.gov) and in the Oklahoma Department of Libraries Publications Clearinghouse Digital Prairie Collection (<http://digitalprairie.ok.gov/cdm/search/collection/audits/>) pursuant to 65 O.S. § 3-114.



OKLAHOMA
Office of the State Auditor & Inspector

Cindy Byrd, CPA | State Auditor & Inspector

2300 N. Lincoln Blvd., Room 123, Oklahoma City, OK 73105 | 405.521.3495 | www.sai.ok.gov

October 30, 2023

**TO THE BOARD OF DIRECTORS OF THE
GLENPOOL EMERGENCY MEDICAL SERVICE DISTRICT**

Transmitted herewith is the audit report of Glenpool Emergency Medical Service District for the fiscal year ended June 30, 2021.

The goal of the State Auditor and Inspector is to promote accountability and fiscal integrity in state and local government. Maintaining our independence as we provide this service to the taxpayers of Oklahoma is of utmost importance.

We wish to take this opportunity to express our appreciation for the assistance and cooperation extended to our office during our engagement.

Sincerely,

A handwritten signature in blue ink that reads "Cindy Byrd".

CINDY BYRD, CPA
OKLAHOMA STATE AUDITOR & INSPECTOR

**GLENPOOL EMERGENCY MEDICAL SERVICE DISTRICT
STATUTORY REPORT
FOR THE FISCAL YEAR ENDED JUNE 30, 2021**

Presentation of Collections, Disbursements, and Cash Balances of District Funds for FY 2021

	<u>General Fund</u>
Beginning Cash Balance, July 1	<u>\$ 318,389</u>
Collections	
Ad Valorem Tax	<u>317,001</u>
Total Collections	<u>317,001</u>
Disbursements	
Service Provider Contract	180,000
Maintenance and Operations	117,117
Audit Expense	<u>6,312</u>
Total Disbursements	<u>303,429</u>
Ending Cash Balance, June 30	<u><u>\$ 331,961</u></u>

Presented for informational purposes.



Glenpool Emergency Medical Service District
12205 S. Yukon Ave.
Glenpool, Oklahoma 74033

**TO THE BOARD OF DIRECTORS OF THE
GLENPOOL EMERGENCY MEDICAL SERVICE DISTRICT**

For the purpose of complying with 19 O.S. § 1706.1, we have performed the following procedures:

- Determined cash balances were accurately reported in the accounting records.
- Determined whether deposits and invested funds for the fiscal year ended June 30, 2021 were secured by pledged collateral.
- Determined disbursements were properly supported, were made for purposes outlined in 19 O.S. § 1710.1, and were accurately reported in the accounting records.
- Determined all purchases requiring bids complied with 19 O.S. § 1723 and 61 O.S. § 101-139.
- Determined payroll expenditures were accurately reported in the accounting records and supporting documentation of leave records was maintained.
- Determined fixed assets records were properly maintained.
- Determined compliance with contract service providers.
- Determined whether the District's collections, disbursements, and cash balances for the fiscal year ended June 30, 2021 were accurately presented on the estimate of needs.

All information included in the records of the District is the representation of the Glenpool Emergency Medical Service District.

Our emergency medical service district statutory engagement was limited to the procedures performed above and was less in scope than an audit performed in accordance with generally accepted auditing standards. Accordingly, we do not express an opinion on any basic financial statement of the Glenpool Emergency Medical Service District.

Based on our procedures performed, there were no exceptions noted.

This report is intended for the information and use of the management of the Glenpool Emergency Medical Service District. This restriction is not intended to limit the distribution of this report, which is a matter of public record.



CINDY BYRD, CPA
OKLAHOMA STATE AUDITOR & INSPECTOR

August 21, 2023



Cindy Byrd, CPA | State Auditor & Inspector

2300 N. Lincoln Blvd., Room 123, Oklahoma City, OK 73105 | 405.521.3495 | www.sai.ok.gov



GLENPOOL EMERGENCY MEDICAL SERVICE DISTRICT

Statutory Report

For the fiscal year ended June 30, 2022

Cindy Byrd, CPA
State Auditor & Inspector

**GLENPOOL EMERGENCY MEDICAL SERVICE DISTRICT
STATUTORY REPORT
FOR THE FISCAL YEAR ENDED JUNE 30, 2022**

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OKLAHOMA
Office of the State Auditor & Inspector

Cindy Byrd, CPA | State Auditor & Inspector

2300 N. Lincoln Blvd., Room 123, Oklahoma City, OK 73105 | 405.521.3495 | www.sai.ok.gov

October 30, 2023

**TO THE BOARD OF DIRECTORS OF THE
GLENPOOL EMERGENCY MEDICAL SERVICE DISTRICT**

Transmitted herewith is the audit report of Glenpool Emergency Medical Service District for the fiscal year ended June 30, 2022.

The goal of the State Auditor and Inspector is to promote accountability and fiscal integrity in state and local government. Maintaining our independence as we provide this service to the taxpayers of Oklahoma is of utmost importance.

We wish to take this opportunity to express our appreciation for the assistance and cooperation extended to our office during our engagement.

Sincerely,

A handwritten signature in blue ink that reads "Cindy Byrd".

CINDY BYRD, CPA
OKLAHOMA STATE AUDITOR & INSPECTOR

**GLENPOOL EMERGENCY MEDICAL SERVICE DISTRICT
STATUTORY REPORT
FOR THE FISCAL YEAR ENDED JUNE 30, 2022**

Presentation of Collections, Disbursements, and Cash Balances of District Funds for FY 2022

	<u>General Fund</u>
Beginning Cash Balance, July 1	\$ 331,961
Collections	
Ad Valorem Tax	331,039
Total Collections	<u>331,039</u>
Disbursements	
Service Provider Contract	180,000
Maintenance and Operations	223,141
Audit Expense	6,328
Total Disbursements	<u>409,469</u>
Ending Cash Balance, June 30	<u>\$ 253,531</u>

Presented for informational purposes.



Glenpool Emergency Medical Service District
12205 S. Yukon Ave.
Glenpool, Oklahoma 74033

**TO THE BOARD OF DIRECTORS OF THE
GLENPOOL EMERGENCY MEDICAL SERVICE DISTRICT**

For the purpose of complying with 19 O.S. § 1706.1, we have performed the following procedures:

- Determined cash balances were accurately reported in the accounting records.
- Determined whether deposits and invested funds for the fiscal year ended June 30, 2022 were secured by pledged collateral.
- Determined disbursements were properly supported, were made for purposes outlined in 19 O.S. § 1710.1, and were accurately reported in the accounting records.
- Determined all purchases requiring bids complied with 19 O.S. § 1723 and 61 O.S. § 101-139.
- Determined payroll expenditures were accurately reported in the accounting records and supporting documentation of leave records was maintained.
- Determined fixed assets records were properly maintained.
- Determined compliance with contract service providers.
- Determined whether the District's collections, disbursements, and cash balances for the fiscal year ended June 30, 2022 were accurately presented on the estimate of needs.

All information included in the records of the District is the representation of the Glenpool Emergency Medical Service District.

Our emergency medical service district statutory engagement was limited to the procedures performed above and was less in scope than an audit performed in accordance with generally accepted auditing standards. Accordingly, we do not express an opinion on any basic financial statement of the Glenpool Emergency Medical Service District.

Based on our procedures performed, there were no exceptions noted.

This report is intended for the information and use of the management of the Glenpool Emergency Medical Service District. This restriction is not intended to limit the distribution of this report, which is a matter of public record.



CINDY BYRD, CPA
OKLAHOMA STATE AUDITOR & INSPECTOR

August 21, 2023



Cindy Byrd, CPA | State Auditor & Inspector

2300 N. Lincoln Blvd., Room 123, Oklahoma City, OK 73105 | 405.521.3495 | www.sai.ok.gov

10/03/23 5:02 PM

BANK RECONCILIATION

PAGE: 1

PERIOD: 9/01/2023 - 9/30/2023

ACCOUNT: 31-1001 GEMS CASH IN BANK

Julie Casteen 10/03/23
MKM.gx

RECONCILIATION SUMMARY

BEGINNING STATEMENT BALANCE:	253,914.09	GL ACCOUNT BALANCE:	221,640.01
DEPOSITS:	+ 1,082.91	OUTSTANDING DEPOSITS:	- 0.00
WITHDRAWALS:	+ 33,356.99CR	OUTSTANDING CHECKS:	- 0.00
ADJUSTMENTS:	+ 0.00	ADJUSTMENTS:	+ 0.00
ENDING STATEMENT BALANCE:	221,640.01	ADJUSTED GL ACCOUNT BALANCE:	221,640.01

STATEMENT BALANCE: 221,640.01
BANK DIFFERENCE: 0.00
G/L DIFFERENCE: 0.00

CLEARED DEPOSITS:

9/14/2023	Tulsa Tax Deposit 9.2023	1,082.91
TOTAL CLEARED DEPOSITS:		1,082.91

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CLEARED CHECKS:

9/05/2023	002143	CENTURION HEALTH SYSTEMS, DBA M	15,000.00CR
9/05/2023	002144	CITY OF GLENPOOL - GEMS	16,307.00CR
9/05/2023	002145	CRAWFORD & ASSOCIATES, PC	1,110.00CR
9/05/2023	002146	JULIE CASTEEN	208.33CR
9/05/2023	002147	OMAG	315.00CR
9/05/2023	002148	SUSAN WHITE	208.33CR
9/05/2023	002149	WENDY KNIGHT	208.33CR
TOTAL CLEARED CHECKS:			33,356.99CR

=====

CLEARED OTHER:

No Items.

10/03/23 5:02 PM

BANK RECONCILIATION

PAGE: 2

PERIOD: 9/01/2023 - 9/30/2023

ACCOUNT: 31-1001 GEMS CASH IN BANK

OUTSTANDING DEPOSITS:

No Items.

OUTSTANDING CHECKS:

No Items.

OUTSTANDING OTHER:

No Items.

10/03/23 5:02 PM

BANK RECONCILIATION

PAGE: 3

PERIOD: 9/01/2023 - 9/30/2023

ACCOUNT: 31-1001 GEMS CASH IN BANK

VOIDED CHECKS:

No Items.

10/03/23 5:02 PM

BANK RECONCILIATION

PAGE: 4

PERIOD: 9/01/2023 - 9/30/2023

ACCOUNT: 31-1001 GEMS CASH IN BANK

ADJUSTMENTS:

No Items.

10/03/23 5:02 PM

BANK RECONCILIATION

PAGE: 5

PERIOD: 9/01/2023 - 9/30/2023

ACCOUNT: 31-1001 GEMS CASH IN BANK

ERROR LISTING

TOTAL ERRORS: 0

** END OF REPORT **

PO BOX 1089
GLENPOOL, OK 74033-1089
(918) 322-9015



To Oklahoma & You.™

Dir 1 251 7

9020X0C.004 BNCF:0008587



24-Hour
Automated
Account Information

1-877-602-2262

*Mini Custom
Wm. & H*

2 *0008587
GLENPOOL AREA EMERGENCY MEDICAL
SERVICE DISTRICT
12205 S YUKON AVE
GLENPOOL OK 74033-6635



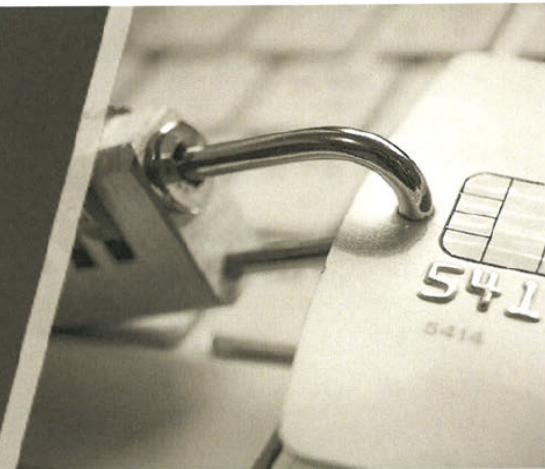
PAGE 1

ACCOUNT NUMBER

STATEMENT DATE

9/29/23

GUARD YOUR CARD
Scan for tips on protecting
your financial information.



We have made certain updates to your Account Agreement and our Electronic Funds and Funds Availability Disclosures. The updates to these documents relate to matters associated with accounts with multiple owners, the designation of authorized signers for accounts, issues concerning ATM deposits, a reduction in the number of circumstances in which we may charge you a fee (the amount of which has not been changed) in connection with items presented to us for payment that are returned for insufficient funds, and overdrafts. All of these updates and their corresponding effects on the relationships between us and you will become effective on November 1, 2023. You may, at any time either before or after this effective date, access and/or receive copies of these updated documents by visiting (<https://www.bancfirst.bank/depositagreement.pdf>) or requesting paper copies of the same from your local banking office.

ACCOUNT ANALYSIS

Beginning Balance	9/01/23	253,914.09
Deposits / Misc Credits	1	1,082.91
Withdrawals / Misc Debits	7	33,356.99
** Ending Balance	9/30/23	221,640.01 **

Service Charge	.00
Enclosures	7

Date	Deposits	Withdrawals	Activity Description
9/14	1,082.91		TULSA COUNTY/REMIT

Continued on Reverse



MSI REV 7/17

www.bancfirst.bank

5727-STMT

Member
FDIC



Dir 1 251 7

9020X0C.004 BNCF:0008587

ACCOUNT NUMBER

STATEMENT DATE

9/29/23

PAGE 2

CHECKS

* indicates skip in check numbers

Date	Check No.	Amount
9/14	2143	15,000.00
9/07	2144	16,307.00
9/12	2145	1,110.00

Date	Check No.	Amount
9/08	2146	208.33
9/12	2147	315.00

Date	Check No.	Amount
9/07	2148	208.33
9/13	2149	208.33

DAILY BALANCE SUMMARY

Date	Balance
9/07	237,398.76
9/08	237,190.43

Date	Balance
9/12	235,765.43
9/13	235,557.10

Date	Balance
9/14	221,640.01



MSI REV 7/17

www.bancfirst.bank

5727-STMT

Member
FDIC

Dir 1 251 7

9021X0C.004 BNCf:0008587

0070041624

Statement Date: 9/29/23

PAGE 3

GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BankFirst
Glenpool, Oklahoma
39-363/1030

002143

PAY TO THE ORDER OF

DATE 09/05/2023

CHECK AMOUNT \$*****15,000.00

** CENTURION HEALTH SYSTEMS, DBA MERCY REGIONAL **
MERCY REGIONAL OKLAHOMA
9106 N GARNET RD
OWASSO, OK 74055

BY Julie A. Coston
BY Wendy Knight
AUTHORIZED SIGNATURES

#002143#

Number: 2143 Date: 9/14/2023 Amount: \$15000.00

GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BankFirst
Glenpool, Oklahoma
39-363/1030

002144

PAY TO THE ORDER OF

DATE 09/05/2023

CHECK AMOUNT \$*****16,307.00

** CITY OF GLENPOOL - GEMS **
12205 S. YUKON AVE.
GLENPOOL, OK 74033

BY Julie A. Coston
BY Wendy Knight
AUTHORIZED SIGNATURES

#002144#

Number: 2144 Date: 9/7/2023 Amount: \$16307.00

GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BankFirst
Glenpool, Oklahoma
39-363/1030

002145

PAY TO THE ORDER OF

DATE 09/05/2023

CHECK AMOUNT \$*****1,110.00

** CRAWFORD & ASSOCIATES, PC **
10309 N GREENBRIAR PL
OKLAHOMA CITY, OK 73159

BY Julie A. Coston
BY Wendy Knight
AUTHORIZED SIGNATURES

#002145#

Number: 2145 Date: 9/12/2023 Amount: \$1110.00

GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BankFirst
Glenpool, Oklahoma
39-363/1030

002146

PAY TO THE ORDER OF

DATE 09/13/2023

CHECK AMOUNT \$*****208.33

** JULIE CASTEN **
26928 E 142ND PL S
CONETA, OK 74429

BY Julie A. Coston
BY Wendy Knight
AUTHORIZED SIGNATURES

#002146#

Number: 2146 Date: 9/8/2023 Amount: \$208.33

GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BankFirst
Glenpool, Oklahoma
39-363/1030

002147

PAY TO THE ORDER OF

DATE 09/05/2023

CHECK AMOUNT \$*****310.00

** ONAG **
P.O. BOX 3091
EDMOND, OK 73083

BY Julie A. Coston
BY Wendy Knight
AUTHORIZED SIGNATURES

#002147#

Number: 2147 Date: 9/12/2023 Amount: \$315.00

GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BankFirst
Glenpool, Oklahoma
39-363/1030

002148

PAY TO THE ORDER OF

DATE 09/13/2023

CHECK AMOUNT \$*****208.33

** SUSAN WHITE **
210 SOUTH OAK GROVE ROAD
CUSHING, OK 74023

BY Julie A. Coston
BY Wendy Knight
AUTHORIZED SIGNATURES

#002148#

Number: 2148 Date: 9/7/2023 Amount: \$208.33

GLENPOOL AREA EMERGENCY 01/93
MEDICAL SERVICE DISTRICT
12205 S. YUKON AVE. PH. 918-322-5409
GLENPOOL, OK 74033-6635

BankFirst
Glenpool, Oklahoma
39-363/1030

002149

PAY TO THE ORDER OF

DATE 09/05/2023

CHECK AMOUNT \$*****210.33

** WENDY KNIGHT **
P.O. BOX 2434
CLAREMORE, OK 74018

BY Julie A. Coston
BY Wendy Knight
AUTHORIZED SIGNATURES

#002149#

Number: 2149 Date: 9/13/2023 Amount: \$208.33

4022-00000



10-27-2023 08:26 AM

CITY OF GLENPOOL
YEAR TO DATE BALANCE SHEET
AS OF: SEPTEMBER 30TH, 2023

PAGE: 1

31 -GEMS

ACCT NO#	ACCOUNT NAME	BEGINNING BALANCE	M-T-D ACTIVITY	Y-T-D ACTIVITY	CURRENT BALANCE
<u>ASSETS</u>					
31-1001	GEMS CASH IN BANK	283,627.22	32,274.08CR	61,987.21CR	221,640.01
31-1353	EQUIPMENT	71,085.14	0.00	0.00	71,085.14
31-1354	ACCUM DEPREC - EQUIPMENT	<u>42,651.08CR</u>	<u>0.00</u>	<u>0.00</u>	<u>42,651.08CR</u>
	TOTAL ASSETS	312,061.28	32,274.08CR	61,987.21CR	250,074.07
		=====	=====	=====	=====
<u>LIABILITIES</u>					
<u>FUND EQUITY</u>					
31-3001	FUND BALANCE	312,061.28CR	0.00	0.00	312,061.28CR
	TOTAL REVENUES	0.00	1,082.91CR	2,117.27CR	2,117.27CR
	TOTAL EXPENSES	<u>0.00</u>	<u>33,356.99</u>	<u>64,104.48</u>	<u>64,104.48</u>
	TOTAL FUND EQUITY	312,061.28CR	32,274.08	61,987.21	250,074.07CR
	TOTAL LIABILITIES & EQUITY	312,061.28CR	32,274.08	61,987.21	250,074.07CR
		=====	=====	=====	=====

10-27-2023 08:28 AM

CITY OF GLENPOOL
REVENUE & EXPENSE REPORT (UNAUDITED)
AS OF: SEPTEMBER 30TH, 2023

PAGE: 1

31 -GEMS

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 25.00

	CURRENT BUDGET	CURRENT PERIOD	YEAR TO DATE ACTUAL	TOTAL ENCUMBERED	BUDGET BALANCE	% YTD BUDGET
REVENUE SUMMARY						
NON-DEPARTMENTAL	409,981	1,082.91	2,117.27	0.00	407,863.73	0.52
TOTAL REVENUES	409,981	1,082.91	2,117.27	0.00	407,863.73	0.52

10-27-2023 08:28 AM

CITY OF GLENPOOL
REVENUE & EXPENSE REPORT (UNAUDITED)
AS OF: SEPTEMBER 30TH, 2023

PAGE: 2

31 -GEMS

FINANCIAL SUMMARY

% OF YEAR COMPLETED: 25.00

	CURRENT BUDGET	CURRENT PERIOD	YEAR TO DATE ACTUAL	TOTAL ENCUMBERED	BUDGET BALANCE	% YTD BUDGET
<u>EXPENDITURE SUMMARY</u>						
<u>GEMS</u>						
SUPPLIES	7,000	1,425.00	1,547.50	1,288.22	4,164.28	40.51
OTHER CHARGES & SERVICES	396,481	31,931.99	62,556.98	32,573.27	301,350.75	23.99
TRAVEL & TRAINING	<u>6,500</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>6,500.00</u>	<u>0.00</u>
TOTAL GEMS	409,981	33,356.99	64,104.48	33,861.49	312,015.03	23.90
TOTAL EXPENDITURES	409,981	33,356.99	64,104.48	33,861.49	312,015.03	23.90
REVENUE OVER/(UNDER) EXPENDITURES	0 (	32,274.08) (	61,987.21) (	33,861.49)	95,848.70	0.00

10-27-2023 08:28 AM

CITY OF GLENPOOL
REVENUE & EXPENSE REPORT (UNAUDITED)
AS OF: SEPTEMBER 30TH, 2023

PAGE: 3

31 -GEMS

% OF YEAR COMPLETED: 25.00

REVENUES	CURRENT BUDGET	CURRENT PERIOD	YEAR TO DATE ACTUAL	TOTAL ENCUMBERED	BUDGET BALANCE	% YTD BUDGET
NON-DEPARTMENTAL =====						
<u>TAXES</u>						
31-5-00-5006 TAXES	<u>350,000</u>	<u>1,082.91</u>	<u>2,117.27</u>	<u>0.00</u>	<u>347,882.73</u>	<u>0.60</u>
TOTAL TAXES	350,000	1,082.91	2,117.27	0.00	347,882.73	0.60
<u>INVESTMENT INCOME</u>						
<u>OTHER FINANCING SOURCES</u>						
31-5-00-5409 USE OF FUND BALANCE	<u>59,981</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>59,981.00</u>	<u>0.00</u>
TOTAL OTHER FINANCING SOURCES	59,981	0.00	0.00	0.00	59,981.00	0.00
TOTAL NON-DEPARTMENTAL	409,981	1,082.91	2,117.27	0.00	407,863.73	0.52
TOTAL REVENUE	409,981	1,082.91	2,117.27	0.00	407,863.73	0.52

10-27-2023 08:28 AM

CITY OF GLENPOOL
REVENUE & EXPENSE REPORT (UNAUDITED)
AS OF: SEPTEMBER 30TH, 2023

PAGE: 4

31 -GEMS

% OF YEAR COMPLETED: 25.00

DEPARTMENTAL EXPENDITURES	CURRENT BUDGET	CURRENT PERIOD	YEAR TO DATE ACTUAL	TOTAL ENCUMBERED	BUDGET BALANCE	% YTD BUDGET
GEMS						
=====						
<u>PERSONAL SERVICES</u>						
<u>SUPPLIES</u>						
31-6-01-6202 OPERATING SUPPLIES	4,500	1,425.00	1,547.50	1,288.22	1,664.28	63.02
31-6-01-6206 MINOR EQUIPMENT	<u>2,500</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>2,500.00</u>	<u>0.00</u>
TOTAL SUPPLIES	7,000	1,425.00	1,547.50	1,288.22	4,164.28	40.51
<u>OTHER CHARGES & SERVICES</u>						
31-6-01-6210 AMBULANCE CONTRACT	180,000	15,000.00	45,000.00	15,000.00	120,000.00	33.33
31-6-01-6225 FIRST RESPONDER/ADMIN FEES	166,505	16,307.00	16,307.00	16,948.28	133,249.72	19.97
31-6-01-6235 CONTRACT SERVICES	13,800	624.99	1,249.98	624.99	11,925.03	13.59
31-6-01-6236 AUDIT FEES	<u>36,176</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>36,176.00</u>	<u>0.00</u>
TOTAL OTHER CHARGES & SERVICES	396,481	31,931.99	62,556.98	32,573.27	301,350.75	23.99
<u>TRAVEL & TRAINING</u>						
31-6-01-6262 TRAVEL AND TRAINING	<u>6,500</u>	<u>0.00</u>	<u>0.00</u>	<u>0.00</u>	<u>6,500.00</u>	<u>0.00</u>
TOTAL TRAVEL & TRAINING	6,500	0.00	0.00	0.00	6,500.00	0.00
<u>MISCELLANEOUS</u>						
<u>CAPITAL EXPENDITURES</u>						
<u>OTHER FINANCING USES</u>						
TOTAL GEMS	409,981	33,356.99	64,104.48	33,861.49	312,015.03	23.90
TOTAL EXPENDITURES	409,981	33,356.99	64,104.48	33,861.49	312,015.03	23.90
REVENUE OVER/(UNDER) EXPENDITURES	0 (	32,274.08) (	61,987.21) (	33,861.49)	95,848.70	0.00

Five-Year History of GEMS Cumulative Tax Revenue Received as a Percent of Tax Revenue Budgeted

Month	FY2024	FY2023	FY2022	FY2021	FY2020	FY2019
July	0.1%	0.3%	0.4%	0.5%	0.3%	0.3%
August	0.3%	0.4%	0.6%	0.6%	0.7%	0.5%
September	0.6%	0.5%	0.8%	0.8%	0.7%	1.0%
October		1.4%	1.2%	1.0%	1.1%	1.3%
November		1.5%	1.3%	1.2%	1.2%	1.4%
December		5.4%	4.6%	5.9%	4.6%	9.2%
January		91.3%	85.8%	80.3%	80.8%	82.7%
February		100.7%	92.1%	90.7%	85.6%	91.0%
March		103.2%	94.0%	92.4%	87.6%	93.3%
April		110.9%	101.8%	101.7%	93.3%	100.7%
May		114.2%	104.9%	105.2%	97.9%	104.4%
June		115.0%	105.3%	105.7%	99.1%	105.2%

As of September 30, 2023 GEMS has received 0.6% of tax revenue budgeted.

In other words, \$2,117.27 has been received of the \$350,000 tax revenue budgeted.



GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit: Engine 1

Date: July 3, 2023

FRONT ZIPPER POCKET ☒ 1 B/P Cuff ☒ 1 Stethoscope ☒ 1 Pulse Oximeter
☒ 1 - Ped. Cannula ☒ 1 - Infant Cannula ☒ 2 - Infant NRB
☒ 1 - Rusch Laryngoscope Kit

RIGHT ZIPPER POCKET ☒ 1 - Airtraq Camera Blue Exp. Date: November 30, 2022
☒ 1 - Thomas Tube Holder Pink Exp. Date: April 1, 2023
☒ 1 - Airtraq Blade Grey Exp. Date: December 31, 2022

O2 LEFT SIDE POCKET ☒ 1-O2 Cylinder psi 1600
☒ 2-Adult NRB
☒ 2-Adult NC
☒ 1-Adult BVM

INSIDE POCKET ☒ 1-Blood Glucose Kit/Test Strips Exp. Date: April 22, 2024
☒ 1-Tube Glucose 31g Exp. Date: February 20, 2025
☒ Lancettes ☒ Adhesive Bandages
☒ Alcohol Swabs ☒ 1-Tactical Tourniquet
☒ 1-Thermometer ☒ 1-Samsplint

FIRST AID BAG ☒ Medical Tape ☒ Flush
☒ Conban ☒ Band-aids
☒ Tri-Angle Bandage ☒ 4X4s
☒ Bandage Roll ☒ 3X3s

INSIDE CLEAR LID ☒ Sharps Shuttle ☒ Pen Light ☒ Hand Sanitizer
☒ Trauma Sheers ☒ Ring Cutter
☒ Convenience Bags ☒ Bio Bag

IV COMPARTMENT☒ Sharps Shuttle☒ IV 10 Drop Administration Sets☒ 1-Roll Medical Tape☒ 1-Arrow IO Drill

2-14g IV	Exp. Date:	July 27, 2025	Exp. Date:	July 27, 2025
2-18g IV	Exp. Date:	December 16, 2024	Exp. Date:	November 1, 2026
2-20g IV	Exp. Date:	March 29, 2025	Exp. Date:	June 30, 2027
2-22g IV	Exp. Date:	February 24, 2025	Exp. Date:	February 25, 2025
2-24g IV	Exp. Date:	July 17, 2025	Exp. Date:	July 17, 2025
4-Saline Flushes	{ Exp. Date:	February 28, 2025	Exp. Date:	February 28, 2025
	{ Exp. Date:	February 28, 2025	Exp. Date:	February 28, 2025

2-IV Start Kits ☒

2-EZ Stabilizers Exp. Date: December 16, 2024 Exp. Date: September 30, 2025

2-45mm 15g IO Needle Set Exp. Date: March 31, 2024 Exp. Date: September 30, 2024

2-25mm 15g IO Needle Set Exp. Date: June 30, 2023 Exp. Date: June 30, 2025

1-IV Bag Exp. Date: January 28, 2024

1 Pressure Bag ☒**AIRWAY COMPARTMENT**

1-2.5 ET Tube	Exp. Date:	May 31, 2023	1-7.0 ET Tube	Exp. Date:	March 14, 2024
1-3.0 ET Tube	Exp. Date:	May 31, 2023	1-7.5 ET Tube	Exp. Date:	October 17, 2024
1-3.5 ET Tube	Exp. Date:	June 6, 2024	1-8.0 ET Tube	Exp. Date:	June 30, 2024
1-4.0 ET Tube	Exp. Date:	April 14, 2027	1-8.5 ET Tube	Exp. Date:	May 31, 2023
1-4.5 ET Tube	Exp. Date:	May 24, 2027	1-9.0 ET Tube	Exp. Date:	November 14, 2024
1-5.0 ET Tube	Exp. Date:	April 19, 2023	1-OPA Kit		☒
1-5.5 ET Tube	Exp. Date:	October 24, 2024	K-Y Lube Gel	Exp. Date:	February 29, 2024
1-6.0 ET Tube	Exp. Date:	March 14, 2024			
1-6.5 ET Tube	Exp. Date:	November 1, 2023			

AIRWAY COMPARTMENT CONT.

1-NPA Kit (Sizes 8.7/9.3/10.0/10.7/11.3mm)

Size 8.7	Exp. Date:	February 10, 2025	4 KAD	
Size 9.3	Exp. Date:	January 22, 2024	Green	Exp. Date: October 12, 2023
Size 10	Exp. Date:	December 9, 2024	Purple	Exp. Date:
Size 10.7	Exp. Date:	November 30, 2024	Yellow	Exp. Date: July 30, 2024
Size 11.3	Exp. Date:	February 10, 2026	Red	Exp. Date: November 1, 2023

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg	Exp. Date:	October 31, 2023	
1-50% Dextrose	Exp. Date:	March 1, 2024	
2 - Epinephrine Injection 1mg/mL	Exp. Date:	February 29, 2024	Exp. Date: February 29, 2024
2 - 18g Filter Needles	Exp. Date:	May 1, 2025	Exp. Date: December 15, 2024
2 - 23g Eclipse Needle	Exp. Date:	March 31, 2025	Exp. Date: March 31, 2025
2 - 1mL Syringe	Exp. Date:	December 31, 2026	Exp. Date: December 31, 2026
2 - 4x4 Gauze	☒		
2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit)	Exp. Date:	September 30, 2024	Exp. Date: September 30, 2024
1 - 2% Lidocaine Hcl	Exp. Date:	April 30, 2024	
1 - Nebulizer Kit	☒		
3 - Albuterol 2.5mg	Exp:	March 30, 2024	Exp: March 30, 2024 Exp: March 30, 2024
1 - Levalbuterol 1.25	Exp. Date:	February 29, 2024	
1 - Levalbuterol 0.31	Exp. Date:	February 29, 2024	
2 - Ipratropium Bromide 0.5mg (Atrovent)	Exp. Date:	February 29, 2024	Exp. Date: February 29, 2024
1 - Low Dose Aspirin (81 mg)	Exp. Date:	May 31, 2023	
1 - Roll Med Tape	☒		

LIFEPAK MONITOR

Child/ Adult AED Pads Exp. Date:

Capno ☒

PEDI Pulse OX Exp. Date:

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist

This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No: Location: DATE

1. Inspect physical condition for:

Foreign substances ☒ Pass ☐ Fail

Damage or cracks ☒ Pass ☐ Fail

2. Inspect power source for:

Broken, loose or worn battery pins. ☒ Pass ☐ Fail

Damaged or leaking battery. ☒ Pass ☐ Fail

Spare battery available ☒ Pass ☐ Fail

Damage to power adapters or cable. ☒ Pass ☐ Fail

3. Inspect ECG cable and cable port for:

Cracking, damaged, broke or bent parts or pins ☒ Pass ☐ Fail

4. Check ECG electrodes and therapy electrodes for:

Use by date ☒ Pass ☐ Fail

Spare electrodes available ☒ Pass ☐ Fail

Damaged, open package ☒ Pass ☐ Fail

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

- | | | |
|--|--|-------------------------------|
| Momentary illumination of self test messages and LED's and speaker beep. | ☒ Pass | ☐ Fail |
| Two fully charged batteries | ☒ Pass | ☐ Fail |
| Service indicator | ☒ Pass | ☐ Fail |

6. With batteries installed, reconnect power adapter to device and check for:
(If not using a power adapter, goto step 7.)

- | | | |
|---|--|-------------------------------|
| Power adapter LED stripes illuminated | ☒ Pass | ☐ Fail |
| Auxiliary power LED on device is illuminated | ☒ Pass | ☐ Fail |
| Battery charging LED on device is illuminating or flashing. | ☒ Pass | ☐ Fail |

7. Perform QUICK-COMBO therapy cable check in manual mode.
(If this cable is not used with defibrillator, go to step 8).

- | | | |
|--|--|-------------------------------|
| Disconnect and examine cable for cracking, damaged, broken or bent parts and pins. | ☒ Pass | ☐ Fail |
| Connect therapy cable to defibrillator and test load. | ☒ Pass | ☐ Fail |
| Select LEAD then PADDLES | ☒ Pass | ☐ Fail |
| Select 200 JOULES and press CHARGE. | ☒ Pass | ☐ Fail |
| Press SHOCK button | ☒ Pass | ☐ Fail |
| Confirm ENERGY DELIVERED message appears. | ☒ Pass | ☐ Fail |
| Remove test load from cable and verify PADDLES LEAD OFF appears. | ☒ Pass | ☐ Fail |

8. Energy

- | | | |
|--|--|-------------------------------|
| Press only one (shock) button and release. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press the other (shock) button. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | ☒ Pass | ☐ Fail |

8. Cont.

Remove paddles from wells, and confirm artifact on screen.

☒ Pass ☐ Fail

Place paddle surfaces together, and confirm flat line on screen.

☒ Pass ☐ Fail

Return paddles securely to paddle wells.

☒ Pass ☐ Fail

9. Perform user test if 3:00 AM auto test results not available.

Press OPTIONS.

Select USER TEST in menu.

☒ Pass ☐ Fail

Confirm test results printed.

10. Check ECG printer for:

Adequate paper supply.

☒ Pass ☐ Fail

Ability to print.

☒ Pass ☐ Fail

11. If using wireless data transmission, test transmission method

Establish Bluetooth connection.

☒ N/A ☐ Pass ☐ Fail

Send a test transmission.

☒ N/A ☐ Pass ☐ Fail

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds)

13. Confirm that the device is stowed, mounted and positioned securely.

☒ Pass ☐ Fail

The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

Failure to remove the test load may result in delay of therapy during patient use.

Discharging >10 joules in the paddle wells may damage the defibrillator.

Glucose Monitor

Clean monitor

☒ Pass ☐ Fail

Laerdal Scope

- | | | |
|--|--|-------------------------------|
| Clean suction unit. | ☒ Pass | ☐ Fail |
| Check for occlusions. | ☒ Pass | ☐ Fail |
| Check vacuum build-up efficiency within 3 seconds. | ☒ Pass | ☐ Fail |
| Check maximum achievable vacuum within 10 seconds. | ☒ Pass | ☐ Fail |
| Check for air leaks. | ☒ Pass | ☐ Fail |
-

AirTraQ Videoscope

- | | | |
|---|--|-------------------------------|
| Clean videoscope | ☒ Pass | ☐ Fail |
| Verify that the battery % is above 50%. | ☒ Pass | ☐ Fail |
-

2% Bag

Top Left Pocket (IV Fluids)

- | | | |
|-------------------------|-------------------------------------|------------------------|
| 2 IV bags | Seal: 568893 | New Seal: 568831 |
| | Exp.: October 31, 2023 | Exp.: October 31, 2023 |
| 2 IV/IO drop admin sets | ☒ | |
-

Center Pocket

- | | | |
|------------------------|-------------------------------------|------------------------|
| 2-Asherman chest seals | Seal: 593303 | New Seal: 568813 |
| | Exp.: January 31, 2025 | Exp.: January 31, 2025 |
| 2- 4X4 Gauze | ☒ | |
| 1-Roll white duct tape | ☒ | |
| 1-Tactical Tourniquet | ☒ | |
| 3- 5X9 Gauze | ☒ | |
| 2-Rolls Coban | ☒ | |
| 2- Ice packs | ☒ | |
| 2- Stretch Gauze | ☒ | |

Center Pocket Cont.

- 2- Bandage roll ☒
- 1- Sterile burn sheet 60X90. ☒
- 1- Head block ☒
- 1- Blood stopper ☒
- 1- Multi-trauma dressing 12X30 ☒
- 1-RAD 57 Pulse Ox ☒

Bottom Right Pocket

Seal:

568830

New Seal:

568802

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bottom Left Pocket

Seal:

593373

New Seal:

568836

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bop Right Pocket: (Ped/Infant)

Seal:

568876

New Seal:

593316

- 1- Ped/Infant NRB ☒
- 1- Ped NRB mask ☒
- 2- Infant NRB mask ☒

GDF STAFF





GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit: Engine 1

Date: August 5, 2023

FRONT ZIPPER POCKET

☒ 1 B/P Cuff	☒ 1 Stethoscope	☒ 1 Pulse Oximeter
☒ 1 - Ped. Cannula	☒ 1 - Infant Cannula	☒ 2 - Infant NRB
☒ 1 - Rusch Laryngoscope Kit		

RIGHT ZIPPER POCKET

☒ 1 - Airtraq Camera	Blue	Exp. Date:	November 30, 2022
☒ 1 - Thomas Tube Holder	Pink	Exp. Date:	April 1, 2023
☒ 1 - Airtraq Blade	Grey	Exp. Date:	December 31, 2022

O2 LEFT SIDE POCKET

☒ 1-O2 Cylinder	psi	1500
☒ 2-Adult NRB		
☒ 2-Adult NC		
☒ 1-Adult BVM		

INSIDE POCKET

☒ 1-Blood Glucose Kit/Test Strips	Exp. Date:	April 22, 2024
☒ 1-Tube Glucose 31g	Exp. Date:	February 20, 2025
☒ Lancettes	☒ Adhesive Bandages	
☒ Alcohol Swabs	☒ 1-Tactical Tourniquet	
☒ 1-Thermometer	☒ 1-Samsplint	

FIRST AID BAG

☒ Medical Tape	☒ Flush
☒ Conban	☒ Band-aids
☒ Tri-Angle Bandage	☒ 4X4s
☒ Bandage Roll	☒ 3X3s

INSIDE CLEAR LID

☒ Sharps Shuttle	☒ Pen Light	☒ Hand Sanitizer
☒ Trauma Sheers	☒ Ring Cutter	
☒ Convenience Bags	☒ Bio Bag	

IV COMPARTMENT☒ Sharps Shuttle☒ IV 10 Drop Administration Sets☒ 1-Roll Medical Tape☒ 1-Arrow IO Drill

2-14g IV	Exp. Date:	July 27, 2025	Exp. Date:	July 27, 2025
2-18g IV	Exp. Date:	December 16, 2024	Exp. Date:	November 1, 2026
2-20g IV	Exp. Date:	March 29, 2025	Exp. Date:	June 30, 2027
2-22g IV	Exp. Date:	February 24, 2025	Exp. Date:	February 25, 2025
2-24g IV	Exp. Date:	July 17, 2025	Exp. Date:	July 17, 2025
4-Saline Flushes	{ Exp. Date:	February 28, 2025	Exp. Date:	February 28, 2025
	{ Exp. Date:	February 28, 2025	Exp. Date:	February 28, 2025

2-IV Start Kits ☒

2-EZ Stabilizers Exp. Date: December 16, 2024 Exp. Date: September 30, 2025

2-45mm 15g IO Needle Set Exp. Date: March 31, 2024 Exp. Date: September 30, 2024

2-25mm 15g IO Needle Set Exp. Date: June 30, 2023 Exp. Date: June 30, 2025

1-IV Bag Exp. Date: January 28, 2024

1 Pressure Bag ☒**AIRWAY COMPARTMENT**

1-2.5 ET Tube	Exp. Date:	May 31, 2023	1-7.0 ET Tube	Exp. Date:	March 14, 2024
1-3.0 ET Tube	Exp. Date:	May 31, 2023	1-7.5 ET Tube	Exp. Date:	October 17, 2024
1-3.5 ET Tube	Exp. Date:	June 6, 2024	1-8.0 ET Tube	Exp. Date:	June 30, 2024
1-4.0 ET Tube	Exp. Date:	April 14, 2027	1-8.5 ET Tube	Exp. Date:	May 31, 2023
1-4.5 ET Tube	Exp. Date:	May 24, 2027	1-9.0 ET Tube	Exp. Date:	November 14, 2024
1-5.0 ET Tube	Exp. Date:	April 19, 2023	1-OPA Kit		☒
1-5.5 ET Tube	Exp. Date:	October 24, 2024	K-Y Lube Gel	Exp. Date:	February 29, 2024
1-6.0 ET Tube	Exp. Date:	March 14, 2024			
1-6.5 ET Tube	Exp. Date:	November 1, 2023			

AIRWAY COMPARTMENT CONT.

1-NPA Kit (Sizes 8.7/9.3/10.0/10.7/11.3mm)

Size 8.7 Exp. Date: February 10, 2025

Size 9.3 Exp. Date: January 22, 2024

Size 10 Exp. Date: December 9, 2024

Size 10.7 Exp. Date: November 30, 2024

Size 11.3 Exp. Date: February 10, 2026

4 KAD

Green Exp. Date: October 12, 2023

Purple Exp. Date:

Yellow Exp. Date: July 30, 2024

Red Exp. Date: November 1, 2023

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg Exp. Date: October 31, 2023

1-50% Dextrose Exp. Date: March 1, 2024

2 - Epinephrine Injection 1mg/mL Exp. Date: February 29, 2024 Exp. Date: February 29, 2024

2 - 18g Filter Needles Exp. Date: May 1, 2025 Exp. Date: December 15, 2024

2 - 23g Eclipse Needle Exp. Date: March 31, 2025 Exp. Date: March 31, 2025

2 - 1mL Syringe Exp. Date: December 31, 2026 Exp. Date: December 31, 2026

2 - 4x4 Gauze ☒

2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit) Exp. Date: September 30, 2024 Exp. Date: September 30, 2024

1 - 2% Lidocaine Hcl Exp. Date: April 30, 2024

1 - Nebulizer Kit ☒

3 - Albuterol 2.5mg Exp: March 30, 2024 Exp: March 30, 2024 Exp: March 30, 2024

1 - Levalbuterol 1.25 Exp. Date: February 29, 2024

1 - Levalbuterol 0.31 Exp. Date: February 29, 2024

2 - Ipratropium Bromide 0.5mg (Atrovent) Exp. Date: February 29, 2024 Exp. Date: February 29, 2024

1 - Low Dose Aspirin (81 mg) Exp. Date: May 31, 2023

1 - Roll Med Tape ☒

LIFEPAK MONITOR

Child/ Adult AED Pads Exp. Date:

Capno ☒

PEDI Pulse OX Exp. Date:

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist

This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No: Location: DATE

1. Inspect physical condition for:

Foreign substances ☒ Pass ☐ Fail

Damage or cracks ☒ Pass ☐ Fail

2. Inspect power source for:

Broken, loose or worn battery pins. ☒ Pass ☐ Fail

Damaged or leaking battery. ☒ Pass ☐ Fail

Spare battery available ☒ Pass ☐ Fail

Damage to power adapters or cable. ☒ Pass ☐ Fail

3. Inspect ECG cable and cable port for:

Cracking, damaged, broke or bent parts or pins ☒ Pass ☐ Fail

4. Check ECG electrodes and therapy electrodes for:

Use by date ☒ Pass ☐ Fail

Spare electrodes available ☒ Pass ☐ Fail

Damaged, open package ☒ Pass ☐ Fail

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

- | | | |
|--|--|-------------------------------|
| Momentary illumination of self test messages and LED's and speaker beep. | ☒ Pass | ☐ Fail |
| Two fully charged batteries | ☒ Pass | ☐ Fail |
| Service indicator | ☒ Pass | ☐ Fail |

6. With batteries installed, reconnect power adapter to device and check for:
(If not using a power adapter, goto step 7.)

- | | | |
|---|--|-------------------------------|
| Power adapter LED stripes illuminated | ☒ Pass | ☐ Fail |
| Auxiliary power LED on device is illuminated | ☒ Pass | ☐ Fail |
| Battery charging LED on device is illuminating or flashing. | ☒ Pass | ☐ Fail |

7. Perform QUICK-COMBO therapy cable check in manual mode.
(If this cable is not used with defibrillator, go to step 8).

- | | | |
|--|--|-------------------------------|
| Disconnect and examine cable for cracking, damaged, broken or bent parts and pins. | ☒ Pass | ☐ Fail |
| Connect therapy cable to defibrillator and test load. | ☒ Pass | ☐ Fail |
| Select LEAD then PADDLES | ☒ Pass | ☐ Fail |
| Select 200 JOULES and press CHARGE. | ☒ Pass | ☐ Fail |
| Press SHOCK button | ☒ Pass | ☐ Fail |
| Confirm ENERGY DELIVERED message appears. | ☒ Pass | ☐ Fail |
| Remove test load from cable and verify PADDLES LEAD OFF appears. | ☒ Pass | ☐ Fail |

8. Energy

- | | | |
|--|--|-------------------------------|
| Press only one (shock) button and release. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press the other (shock) button. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | ☒ Pass | ☐ Fail |

8. Cont.

Remove paddles from wells, and confirm artifact on screen.

☒ Pass ☐ Fail

Place paddle surfaces together, and confirm flat line on screen.

☒ Pass ☐ Fail

Return paddles securely to paddle wells.

☒ Pass ☐ Fail

9. Perform user test if 3:00 AM auto test results not available.

Press OPTIONS.

Select USER TEST in menu.

☒ Pass ☐ Fail

Confirm test results printed.

10. Check ECG printer for:

Adequate paper supply.

☒ Pass ☐ Fail

Ability to print.

☒ Pass ☐ Fail

11. If using wireless data transmission, test transmission method

Establish Bluetooth connection.

☒ N/A ☐ Pass ☐ Fail

Send a test transmission.

☒ N/A ☐ Pass ☐ Fail

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds)

13. Confirm that the device is stowed, mounted and positioned securely.

☒ Pass ☐ Fail

The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

Failure to remove the test load may result in delay of therapy during patient use.

Discharging >10 joules in the paddle wells may damage the defibrillator.

Glucose Monitor

Clean monitor

☒ Pass ☐ Fail

Laerdal Scope

- | | | |
|--|--|-------------------------------|
| Clean suction unit. | ☒ Pass | ☐ Fail |
| Check for occlusions. | ☒ Pass | ☐ Fail |
| Check vacuum build-up efficiency within 3 seconds. | ☒ Pass | ☐ Fail |
| Check maximum achievable vacuum within 10 seconds. | ☒ Pass | ☐ Fail |
| Check for air leaks. | ☒ Pass | ☐ Fail |
-

AirTraq Videoscope

- | | | |
|---|--|-------------------------------|
| Clean videoscope | ☒ Pass | ☐ Fail |
| Verify that the battery % is above 50%. | ☒ Pass | ☐ Fail |
-

2% Bag

Top Left Pocket (IV Fluids)

- | | | |
|-------------------------|-------------------------------------|------------------------|
| 2 IV bags | Seal: 568893 | New Seal: 568831 |
| | Exp.: October 31, 2023 | Exp.: October 31, 2023 |
| 2 IV/IO drop admin sets | ☒ | |
-

Center Pocket

- | | | |
|------------------------|-------------------------------------|------------------------|
| 2-Asherman chest seals | Seal: 593303 | New Seal: 568813 |
| | Exp.: January 31, 2025 | Exp.: January 31, 2025 |
| 2- 4X4 Gauze | ☒ | |
| 1-Roll white duct tape | ☒ | |
| 1-Tactical Tourniquet | ☒ | |
| 3- 5X9 Gauze | ☒ | |
| 2-Rolls Coban | ☒ | |
| 2- Ice packs | ☒ | |
| 2- Stretch Gauze | ☒ | |

Center Pocket Cont.

- 2- Bandage roll ☒
- 1- Sterile burn sheet 60X90. ☒
- 1- Head block ☒
- 1- Blood stopper ☒
- 1- Multi-trauma dressing 12X30 ☒
- 1-RAD 57 Pulse Ox ☒

Bottom Right Pocket

Seal:

568830

New Seal:

568802

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bottom Left Pocket

Seal:

593373

New Seal:

568836

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bop Right Pocket: (Ped/Infant)

Seal:

568876

New Seal:

593316

- 1- Ped/Infant NRB ☒
- 1- Ped NRB mask ☒
- 2- Infant NRB mask ☒

GDF STAFF





GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit: Engine 1

Date: September 3, 2023

FRONT ZIPPER POCKET ☒ 1 B/P Cuff ☒ 1 Stethoscope ☒ 1 Pulse Oximeter
☒ 1 - Ped. Cannula ☒ 1 - Infant Cannula ☒ 2 - Infant NRB
☒ 1 - Rusch Laryngoscope Kit

RIGHT ZIPPER POCKET ☒ 1 - Airtraq Camera Blue Exp. Date: November 30, 2022
☒ 1 - Thomas Tube Holder Pink Exp. Date: April 1, 2023
☒ 1 - Airtraq Blade Grey Exp. Date: December 31, 2022

O2 LEFT SIDE POCKET ☒ 1-O2 Cylinder psi 1500
☒ 2-Adult NRB
☒ 2-Adult NC
☒ 1-Adult BVM

INSIDE POCKET ☒ 1-Blood Glucose Kit/Test Strips Exp. Date: April 22, 2024
☒ 1-Tube Glucose 31g Exp. Date: February 20, 2025
☒ Lancettes ☒ Adhesive Bandages
☒ Alcohol Swabs ☒ 1-Tactical Tourniquet
☒ 1-Thermometer ☒ 1-Samsplint

FIRST AID BAG ☒ Medical Tape ☒ Flush
☒ Conban ☒ Band-aids
☒ Tri-Angle Bandage ☒ 4X4s
☒ Bandage Roll ☒ 3X3s

INSIDE CLEAR LID ☒ Sharps Shuttle ☒ Pen Light ☒ Hand Sanitizer
☒ Trauma Sheers ☒ Ring Cutter
☒ Convenience Bags ☒ Bio Bag

IV COMPARTMENT☒ Sharps Shuttle☒ IV 10 Drop Administration Sets☒ 1-Roll Medical Tape☒ 1-Arrow IO Drill

2-14g IV	Exp. Date:	July 27, 2025	Exp. Date:	July 27, 2025
2-18g IV	Exp. Date:	December 16, 2024	Exp. Date:	November 1, 2026
2-20g IV	Exp. Date:	March 29, 2025	Exp. Date:	June 30, 2027
2-22g IV	Exp. Date:	February 24, 2025	Exp. Date:	February 25, 2025
2-24g IV	Exp. Date:	July 17, 2025	Exp. Date:	July 17, 2025
4-Saline Flushes	{ Exp. Date:	February 28, 2025	Exp. Date:	February 28, 2025
	{ Exp. Date:	February 28, 2025	Exp. Date:	February 28, 2025

2-IV Start Kits ☒

2-EZ Stabilizers Exp. Date: December 16, 2024 Exp. Date: September 30, 2025

2-45mm 15g IO Needle Set Exp. Date: March 31, 2024 Exp. Date: September 30, 2024

2-25mm 15g IO Needle Set Exp. Date: June 30, 2023 Exp. Date: June 30, 2025

1-IV Bag Exp. Date: January 28, 2024

1 Pressure Bag ☒**AIRWAY COMPARTMENT**

1-2.5 ET Tube	Exp. Date:	May 31, 2023	1-7.0 ET Tube	Exp. Date:	March 14, 2024
1-3.0 ET Tube	Exp. Date:	May 31, 2023	1-7.5 ET Tube	Exp. Date:	October 17, 2024
1-3.5 ET Tube	Exp. Date:	June 6, 2024	1-8.0 ET Tube	Exp. Date:	June 30, 2024
1-4.0 ET Tube	Exp. Date:	April 14, 2027	1-8.5 ET Tube	Exp. Date:	May 31, 2023
1-4.5 ET Tube	Exp. Date:	May 24, 2027	1-9.0 ET Tube	Exp. Date:	November 14, 2024
1-5.0 ET Tube	Exp. Date:	April 19, 2023	1-OPA Kit		☒
1-5.5 ET Tube	Exp. Date:	October 24, 2024	K-Y Lube Gel	Exp. Date:	February 29, 2024
1-6.0 ET Tube	Exp. Date:	March 14, 2024			
1-6.5 ET Tube	Exp. Date:	November 1, 2023			

AIRWAY COMPARTMENT CONT.

1-NPA Kit (Sizes 8.7/9.3/10.0/10.7/11.3mm)

Size 8.7 Exp. Date: February 10, 2025

Size 9.3 Exp. Date: January 22, 2024

Size 10 Exp. Date: December 9, 2024

Size 10.7 Exp. Date: November 30, 2024

Size 11.3 Exp. Date: February 10, 2026

4 KAD

Green Exp. Date: October 12, 2023

Purple Exp. Date:

Yellow Exp. Date: July 30, 2024

Red Exp. Date: November 1, 2023

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg Exp. Date: October 31, 2023

1-50% Dextrose Exp. Date: March 1, 2024

2 - Epinephrine Injection 1mg/mL Exp. Date: February 29, 2024 Exp. Date: February 29, 2024

2 - 18g Filter Needles Exp. Date: May 1, 2025 Exp. Date: December 15, 2024

2 - 23g Eclipse Needle Exp. Date: March 31, 2025 Exp. Date: March 31, 2025

2 - 1mL Syringe Exp. Date: December 31, 2026 Exp. Date: December 31, 2026

2 - 4x4 Gauze ☒

2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit) Exp. Date: September 30, 2024 Exp. Date: September 30, 2024

1 - 2% Lidocaine Hcl Exp. Date: April 30, 2024

1 - Nebulizer Kit ☒

3 - Albuterol 2.5mg Exp: March 30, 2024 Exp: March 30, 2024 Exp: March 30, 2024

1 - Levalbuterol 1.25 Exp. Date: February 29, 2024

1 - Levalbuterol 0.31 Exp. Date: February 29, 2024

2 - Ipratropium Bromide 0.5mg (Atrovent) Exp. Date: February 29, 2024 Exp. Date: February 29, 2024

1 - Low Dose Aspirin (81 mg) Exp. Date: May 31, 2023

1 - Roll Med Tape ☒

LIFEPAK MONITOR

Child/ Adult AED Pads Exp. Date:

Capno ☒

PEDI Pulse OX Exp. Date:

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist

This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No: Location: DATE

1. Inspect physical condition for:

Foreign substances ☒ Pass ☐ Fail

Damage or cracks ☒ Pass ☐ Fail

2. Inspect power source for:

Broken, loose or worn battery pins. ☒ Pass ☐ Fail

Damaged or leaking battery. ☒ Pass ☐ Fail

Spare battery available ☒ Pass ☐ Fail

Damage to power adapters or cable. ☒ Pass ☐ Fail

3. Inspect ECG cable and cable port for:

Cracking, damaged, broke or bent parts or pins ☒ Pass ☐ Fail

4. Check ECG electrodes and therapy electrodes for:

Use by date ☒ Pass ☐ Fail

Spare electrodes available ☒ Pass ☐ Fail

Damaged, open package ☒ Pass ☐ Fail

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

- | | | |
|--|--|-------------------------------|
| Momentary illumination of self test messages and LED's and speaker beep. | ☒ Pass | ☐ Fail |
| Two fully charged batteries | ☒ Pass | ☐ Fail |
| Service indicator | ☒ Pass | ☐ Fail |

6. With batteries installed, reconnect power adapter to device and check for:
(If not using a power adapter, goto step 7.)

- | | | |
|---|--|-------------------------------|
| Power adapter LED stripes illuminated | ☒ Pass | ☐ Fail |
| Auxiliary power LED on device is illuminated | ☒ Pass | ☐ Fail |
| Battery charging LED on device is illuminating or flashing. | ☒ Pass | ☐ Fail |

7. Perform QUICK-COMBO therapy cable check in manual mode.
(If this cable is not used with defibrillator, go to step 8).

- | | | |
|--|--|-------------------------------|
| Disconnect and examine cable for cracking, damaged, broken or bent parts and pins. | ☒ Pass | ☐ Fail |
| Connect therapy cable to defibrillator and test load. | ☒ Pass | ☐ Fail |
| Select LEAD then PADDLES | ☒ Pass | ☐ Fail |
| Select 200 JOULES and press CHARGE. | ☒ Pass | ☐ Fail |
| Press SHOCK button | ☒ Pass | ☐ Fail |
| Confirm ENERGY DELIVERED message appears. | ☒ Pass | ☐ Fail |
| Remove test load from cable and verify PADDLES LEAD OFF appears. | ☒ Pass | ☐ Fail |

8. Energy

- | | | |
|--|--|-------------------------------|
| Press only one (shock) button and release. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press the other (shock) button. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | ☒ Pass | ☐ Fail |

8. Cont.

Remove paddles from wells, and confirm artifact on screen.

☒ Pass ☐ Fail

Place paddle surfaces together, and confirm flat line on screen.

☒ Pass ☐ Fail

Return paddles securely to paddle wells.

☒ Pass ☐ Fail

9. Perform user test if 3:00 AM auto test results not available.

Press OPTIONS.

Select USER TEST in menu.

☒ Pass ☐ Fail

Confirm test results printed.

10. Check ECG printer for:

Adequate paper supply.

☒ Pass ☐ Fail

Ability to print.

☒ Pass ☐ Fail

11. If using wireless data transmission, test transmission method

Establish Bluetooth connection.

☒ N/A ☐ Pass ☐ Fail

Send a test transmission.

☒ N/A ☐ Pass ☐ Fail

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds)

13. Confirm that the device is stowed, mounted and positioned securely.

☒ Pass ☐ Fail

The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

Failure to remove the test load may result in delay of therapy during patient use.

Discharging >10 joules in the paddle wells may damage the defibrillator.

Glucose Monitor

Clean monitor

☒ Pass ☐ Fail

Laerdal Scope

- | | | |
|--|--|-------------------------------|
| Clean suction unit. | ☒ Pass | ☐ Fail |
| Check for occlusions. | ☒ Pass | ☐ Fail |
| Check vacuum build-up efficiency within 3 seconds. | ☒ Pass | ☐ Fail |
| Check maximum achievable vacuum within 10 seconds. | ☒ Pass | ☐ Fail |
| Check for air leaks. | ☒ Pass | ☐ Fail |
-

AirTraq Videoscope

- | | | |
|---|--|-------------------------------|
| Clean videoscope | ☒ Pass | ☐ Fail |
| Verify that the battery % is above 50%. | ☒ Pass | ☐ Fail |
-

2% Bag

Top Left Pocket (IV Fluids)

- | | | |
|-------------------------|-------------------------------------|------------------------|
| 2 IV bags | Seal: 568831 | New Seal: 568851 |
| | Exp.: October 31, 2023 | Exp.: October 31, 2023 |
| 2 IV/IO drop admin sets | ☒ | |
-

Center Pocket

- | | | |
|------------------------|-------------------------------------|------------------------|
| 2-Asherman chest seals | Seal: 568813 | New Seal: 568888 |
| | Exp.: January 31, 2025 | Exp.: January 31, 2025 |
| 2- 4X4 Gauze | ☒ | |
| 1-Roll white duct tape | ☒ | |
| 1-Tactical Tourniquet | ☒ | |
| 3- 5X9 Gauze | ☒ | |
| 2-Rolls Coban | ☒ | |
| 2- Ice packs | ☒ | |
| 2- Stretch Gauze | ☒ | |

Center Pocket Cont.

- 2- Bandage roll ☒
- 1- Sterile burn sheet 60X90. ☒
- 1- Head block ☒
- 1- Blood stopper ☒
- 1- Multi-trauma dressing 12X30 ☒
- 1-RAD 57 Pulse Ox ☒

Bottom Right Pocket

Seal:

568802

New Seal:

568815

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bottom Left Pocket

Seal:

568836

New Seal:

568820

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bop Right Pocket: (Ped/Infant)

Seal:

593316

New Seal:

568814

- 1- Ped/Infant NRB ☒
- 1- Ped NRB mask ☒
- 2- Infant NRB mask ☒

GDF STAFF

TH



GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit: Engine 1

Date: November 1, 2023

FRONT ZIPPER POCKET ☒ 1 B/P Cuff ☒ 1 Stethoscope ☒ 1 Pulse Oximeter
☒ 1 - Ped. Cannula ☒ 1 - Infant Cannula ☒ 2 - Infant NRB
☒ 1 - Rusch Laryngoscope Kit

RIGHT ZIPPER POCKET ☒ 1 - Airtraq Camera Blue Exp. Date: November 30, 2022
☒ 1 - Thomas Tube Holder Pink Exp. Date: April 1, 2023
☒ 1 - Airtraq Blade Grey Exp. Date: December 31, 2022

O2 LEFT SIDE POCKET ☒ 1-O2 Cylinder psi 1250
☒ 2-Adult NRB
☒ 2-Adult NC
☒ 1-Adult BVM

INSIDE POCKET ☒ 1-Blood Glucose Kit/Test Strips Exp. Date: April 22, 2024
☒ 1-Tube Glucose 31g Exp. Date: February 20, 2025
☒ Lancettes ☒ Adhesive Bandages
☒ Alcohol Swabs ☒ 1-Tactical Tourniquet
☒ 1-Thermometer ☒ 1-Samsplint

FIRST AID BAG ☒ Medical Tape ☒ Flush
☒ Conban ☒ Band-aids
☒ Tri-Angle Bandage ☒ 4X4s
☒ Bandage Roll ☒ 3X3s

INSIDE CLEAR LID ☒ Sharps Shuttle ☒ Pen Light ☒ Hand Sanitizer
☒ Trauma Sheers ☒ Ring Cutter
☒ Convenience Bags ☒ Bio Bag

IV COMPARTMENT☒ Sharps Shuttle☒ IV 10 Drop Administration Sets☒ 1-Roll Medical Tape☒ 1-Arrow IO Drill

2-14g IV	Exp. Date:	July 27, 2025	Exp. Date:	July 27, 2025
2-18g IV	Exp. Date:	December 16, 2024	Exp. Date:	November 1, 2026
2-20g IV	Exp. Date:	March 29, 2025	Exp. Date:	June 30, 2027
2-22g IV	Exp. Date:	February 24, 2025	Exp. Date:	February 25, 2025
2-24g IV	Exp. Date:	July 17, 2025	Exp. Date:	July 17, 2025
4-Saline Flushes	{ Exp. Date:	February 28, 2025	Exp. Date:	February 28, 2025
	{ Exp. Date:	February 28, 2025	Exp. Date:	February 28, 2025

2-IV Start Kits ☒

2-EZ Stabilizers Exp. Date: December 16, 2024 Exp. Date: September 30, 2025

2-45mm 15g IO Needle Set Exp. Date: March 31, 2024 Exp. Date: September 30, 2024

2-25mm 15g IO Needle Set Exp. Date: June 30, 2023 Exp. Date: June 30, 2025

1-IV Bag Exp. Date: January 28, 2024

1 Pressure Bag ☒**AIRWAY COMPARTMENT**

1-2.5 ET Tube	Exp. Date:	May 31, 2023	1-7.0 ET Tube	Exp. Date:	March 14, 2024
1-3.0 ET Tube	Exp. Date:	May 31, 2023	1-7.5 ET Tube	Exp. Date:	October 17, 2024
1-3.5 ET Tube	Exp. Date:	June 6, 2024	1-8.0 ET Tube	Exp. Date:	June 30, 2024
1-4.0 ET Tube	Exp. Date:	April 14, 2027	1-8.5 ET Tube	Exp. Date:	May 31, 2023
1-4.5 ET Tube	Exp. Date:	May 24, 2027	1-9.0 ET Tube	Exp. Date:	November 14, 2024
1-5.0 ET Tube	Exp. Date:	April 19, 2023	1-OPA Kit		☒
1-5.5 ET Tube	Exp. Date:	October 24, 2024	K-Y Lube Gel	Exp. Date:	February 29, 2024
1-6.0 ET Tube	Exp. Date:	March 14, 2024			
1-6.5 ET Tube	Exp. Date:	November 1, 2023			

AIRWAY COMPARTMENT CONT.

1-NPA Kit (Sizes 8.7/9.3/10.0/10.7/11.3mm)

Size 8.7 Exp. Date: February 10, 2025

Size 9.3 Exp. Date: January 22, 2024

Size 10 Exp. Date: December 9, 2024

Size 10.7 Exp. Date: November 30, 2024

Size 11.3 Exp. Date: February 10, 2026

4 KAD

Green Exp. Date: October 12, 2023

Purple Exp. Date:

Yellow Exp. Date: July 30, 2024

Red Exp. Date: November 1, 2023

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg Exp. Date: October 31, 2023

1-50% Dextrose Exp. Date: March 1, 2024

2 - Epinephrine Injection 1mg/mL Exp. Date: February 29, 2024 Exp. Date: February 29, 2024

2 - 18g Filter Needles Exp. Date: May 1, 2025 Exp. Date: December 15, 2024

2 - 23g Eclipse Needle Exp. Date: March 31, 2025 Exp. Date: March 31, 2025

2 - 1mL Syringe Exp. Date: December 31, 2026 Exp. Date: December 31, 2026

2 - 4x4 Gauze ☒

2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit) Exp. Date: September 30, 2024 Exp. Date: September 30, 2024

1 - 2% Lidocaine Hcl Exp. Date: April 30, 2024

1 - Nebulizer Kit ☒

3 - Albuterol 2.5mg Exp: March 30, 2024 Exp: March 30, 2024 Exp: March 30, 2024

1 - Levalbuterol 1.25 Exp. Date: February 29, 2024

1 - Levalbuterol 0.31 Exp. Date: February 29, 2024

2 - Ipratropium Bromide 0.5mg (Atrovent) Exp. Date: February 29, 2024 Exp. Date: February 29, 2024

1 - Low Dose Aspirin (81 mg) Exp. Date: May 31, 2023

1 - Roll Med Tape ☒

LIFEPAK MONITOR

Child/ Adult AED Pads Exp. Date:

Capno ☒

PEDI Pulse OX Exp. Date:

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist

This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No: Location: DATE

1. Inspect physical condition for:

Foreign substances ☒ Pass ☐ Fail

Damage or cracks ☒ Pass ☐ Fail

2. Inspect power source for:

Broken, loose or worn battery pins. ☒ Pass ☐ Fail

Damaged or leaking battery. ☒ Pass ☐ Fail

Spare battery available ☒ Pass ☐ Fail

Damage to power adapters or cable. ☒ Pass ☐ Fail

3. Inspect ECG cable and cable port for:

Cracking, damaged, broke or bent parts or pins ☒ Pass ☐ Fail

4. Check ECG electrodes and therapy electrodes for:

Use by date ☒ Pass ☐ Fail

Spare electrodes available ☒ Pass ☐ Fail

Damaged, open package ☒ Pass ☐ Fail

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

- | | | |
|--|--|-------------------------------|
| Momentary illumination of self test messages and LED's and speaker beep. | ☒ Pass | ☐ Fail |
| Two fully charged batteries | ☒ Pass | ☐ Fail |
| Service indicator | ☒ Pass | ☐ Fail |

6. With batteries installed, reconnect power adapter to device and check for:
(If not using a power adapter, goto step 7.)

- | | | |
|---|--|-------------------------------|
| Power adapter LED stripes illuminated | ☒ Pass | ☐ Fail |
| Auxiliary power LED on device is illuminated | ☒ Pass | ☐ Fail |
| Battery charging LED on device is illuminating or flashing. | ☒ Pass | ☐ Fail |

7. Perform QUICK-COMBO therapy cable check in manual mode.
(If this cable is not used with defibrillator, go to step 8).

- | | | |
|--|--|-------------------------------|
| Disconnect and examine cable for cracking, damaged, broken or bent parts and pins. | ☒ Pass | ☐ Fail |
| Connect therapy cable to defibrillator and test load. | ☒ Pass | ☐ Fail |
| Select LEAD then PADDLES | ☒ Pass | ☐ Fail |
| Select 200 JOULES and press CHARGE. | ☒ Pass | ☐ Fail |
| Press SHOCK button | ☒ Pass | ☐ Fail |
| Confirm ENERGY DELIVERED message appears. | ☒ Pass | ☐ Fail |
| Remove test load from cable and verify PADDLES LEAD OFF appears. | ☒ Pass | ☐ Fail |

8. Energy

- | | | |
|--|--|-------------------------------|
| Press only one (shock) button and release. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press the other (shock) button. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | ☒ Pass | ☐ Fail |

8. Cont.

Remove paddles from wells, and confirm artifact on screen.

☒ Pass ☐ Fail

Place paddle surfaces together, and confirm flat line on screen.

☒ Pass ☐ Fail

Return paddles securely to paddle wells.

☒ Pass ☐ Fail

9. Perform user test if 3:00 AM auto test results not available.

Press OPTIONS.

Select USER TEST in menu.

☒ Pass ☐ Fail

Confirm test results printed.

10. Check ECG printer for:

Adequate paper supply.

☒ Pass ☐ Fail

Ability to print.

☒ Pass ☐ Fail

11. If using wireless data transmission, test transmission method

Establish Bluetooth connection.

☒ N/A ☐ Pass ☐ Fail

Send a test transmission.

☒ N/A ☐ Pass ☐ Fail

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds)

13. Confirm that the device is stowed, mounted and positioned securely.

☒ Pass ☐ Fail

The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

Failure to remove the test load may result in delay of therapy during patient use.

Discharging >10 joules in the paddle wells may damage the defibrillator.

Glucose Monitor

Clean monitor

☒ Pass ☐ Fail

Laerdal Scope

- | | | |
|--|--|-------------------------------|
| Clean suction unit. | ☒ Pass | ☐ Fail |
| Check for occlusions. | ☒ Pass | ☐ Fail |
| Check vacuum build-up efficiency within 3 seconds. | ☒ Pass | ☐ Fail |
| Check maximum achievable vacuum within 10 seconds. | ☒ Pass | ☐ Fail |
| Check for air leaks. | ☒ Pass | ☐ Fail |
-

AirTraq Videoscope

- | | | |
|---|--|-------------------------------|
| Clean videoscope | ☒ Pass | ☐ Fail |
| Verify that the battery % is above 50%. | ☒ Pass | ☐ Fail |
-

2% Bag

Top Left Pocket (IV Fluids)

- | | | |
|-------------------------|-------------------------------------|------------------------|
| 2 IV bags | Seal: 568831 | New Seal: 568851 |
| | Exp.: October 31, 2023 | Exp.: October 31, 2023 |
| 2 IV/IO drop admin sets | ☒ | |
-

Center Pocket

- | | | |
|------------------------|-------------------------------------|------------------------|
| 2-Asherman chest seals | Seal: 568813 | New Seal: 568888 |
| | Exp.: January 31, 2025 | Exp.: January 31, 2025 |
| 2- 4X4 Gauze | ☒ | |
| 1-Roll white duct tape | ☒ | |
| 1-Tactical Tourniquet | ☒ | |
| 3- 5X9 Gauze | ☒ | |
| 2-Rolls Coban | ☒ | |
| 2- Ice packs | ☒ | |
| 2- Stretch Gauze | ☒ | |

Center Pocket Cont.

- 2- Bandage roll ☒
- 1- Sterile burn sheet 60X90. ☒
- 1- Head block ☒
- 1- Blood stopper ☒
- 1- Multi-trauma dressing 12X30 ☒
- 1-RAD 57 Pulse Ox ☒

Bottom Right Pocket

Seal:

568802

New Seal:

568815

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bottom Left Pocket

Seal:

568836

New Seal:

568820

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bop Right Pocket: (Ped/Infant)

Seal:

593316

New Seal:

568814

- 1- Ped/Infant NRB ☒
- 1- Ped NRB mask ☒
- 2- Infant NRB mask ☒

GDF STAFF





GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit: R-1

Date: July 3, 2023

FRONT ZIPPER POCKET ☒ 1 B/P Cuff ☒ 1 Stethoscope ☒ 1 Pulse Oximeter
☒ 1 - Ped. Cannula ☒ 1 - Infant Cannula ☒ 2 - Infant NRB
☒ 1 - Rusch Laryngoscope Kit

RIGHT ZIPPER POCKET ☒ 1 - Airtraq Camera Blue Exp. Date: January 31, 2022
☒ 1 - Thomas Tube Holder Pink Exp. Date: April 30, 2023
☒ 1 - Airtraq Blade Grey Exp. Date: January 29, 2023

O2 LEFT SIDE POCKET ☒ 1-O2 Cylinder psi 2200
☒ 2-Adult NRB
☒ 2-Adult NC
☒ 1-Adult BVM

INSIDE POCKET ☒ 1-Blood Glucose Kit/Test Strips Exp. Date: April 30, 2024
☒ 1-Tube Glucose 31g Exp. Date: July 31, 2024
☒ Lancettes ☒ Adhesive Bandages
☒ Alcohol Swabs ☒ 1-Tactical Tourniquet
☒ 1-Thermometer ☒ 1-Samsplint

FIRST AID BAG ☒ Medical Tape ☒ Flush
☒ Conban ☒ Band-aids
☒ Tri-Angle Bandage ☒ 4X4s
☒ Bandage Roll ☐ 3X3s

INSIDE CLEAR LID ☒ Sharps Shuttle ☒ Pen Light ☒ Hand Sanitizer
☒ Trauma Sheers ☒ Ring Cutter
☒ Convenience Bags ☒ Bio Bag

IV COMPARTMENT☒ Sharps Shuttle☒ IV 10 Drop Administration Sets☒ 1-Roll Medical Tape☒ 1-Arrow IO Drill

2-14g IV	Exp. Date:	July 31, 2025	Exp. Date:	July 31, 2025
2-18g IV	Exp. Date:	July 1, 2024	Exp. Date:	September 30, 2024
2-20g IV	Exp. Date:	December 3, 2024	Exp. Date:	January 19, 2024
2-22g IV	Exp. Date:	February 25, 2025	Exp. Date:	February 25, 2025
2-24g IV	Exp. Date:	July 27, 2025	Exp. Date:	July 27, 2025
4-Saline Flushes	{ Exp. Date:	August 31, 2023	Exp. Date:	August 31, 2023
	{ Exp. Date:	May 31, 2024	Exp. Date:	August 31, 2023

2-IV Start Kits ☒

2-EZ Stabilizers Exp. Date: September 24, 2024 Exp. Date: September 30, 2024

2-45mm 15g IO Needle Set Exp. Date: June 30, 2025 Exp. Date: March 31, 2024

2-25mm 15g IO Needle Set Exp. Date: February 29, 2024 Exp. Date: February 29, 2024

1-IV Bag Exp. Date: December 31, 2023

1 Pressure Bag ☒**AIRWAY COMPARTMENT**

1-2.5 ET Tube	Exp. Date:	January 19, 2024	1-7.0 ET Tube	Exp. Date:	February 19, 2025
1-3.0 ET Tube	Exp. Date:	December 31, 2024	1-7.5 ET Tube	Exp. Date:	May 31, 2024
1-3.5 ET Tube	Exp. Date:	July 18, 2024	1-8.0 ET Tube	Exp. Date:	June 30, 2024
1-4.0 ET Tube	Exp. Date:	April 19, 2023	1-8.5 ET Tube	Exp. Date:	January 22, 2024
1-4.5 ET Tube	Exp. Date:	November 17, 2022	1-9.0 ET Tube	Exp. Date:	September 29, 2022
1-5.0 ET Tube	Exp. Date:	March 8, 2023	1-OPA Kit		☒
1-5.5 ET Tube	Exp. Date:	September 13, 2023	K-Y Lube Gel	Exp. Date:	February 29, 2024
1-6.0 ET Tube	Exp. Date:	March 30, 2024			
1-6.5 ET Tube	Exp. Date:	March 29, 2024			

AIRWAY COMPARTMENT CONT.

1-NPA Kit (Sizes 8.7/9.3/10.0/10.7/11.3mm)

Size 8.7	Exp. Date:	April 30, 2024	4 KAD	
Size 9.3	Exp. Date:	November 30, 2024	Green	Exp. Date: October 12, 2023
Size 10	Exp. Date:	April 30, 2024	Purple	Exp. Date: October 6, 2023
Size 10.7	Exp. Date:	June 30, 2024	Yellow	Exp. Date: July 1, 2026
Size 11.3	Exp. Date:	February 28, 2026	Red	Exp. Date: April 1, 2024

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg	Exp. Date:	February 28, 2023	
1-50% Dextrose	Exp. Date:	March 31, 2024	
2 - Epinephrine Injection 1mg/mL	Exp. Date:	February 28, 2024	Exp. Date: February 28, 2024
2 - 18g Filter Needles	Exp. Date:	May 31, 2025	Exp. Date: May 31, 2025
2 - 23g Eclipse Needle	Exp. Date:	March 31, 2025	Exp. Date: March 31, 2025
2 - 1mL Syringe	Exp. Date:	December 28, 2026	Exp. Date: December 28, 2026
2 - 4x4 Gauze	☒		
2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit)	Exp. Date:	January 31, 2024	Exp. Date: September 30, 2023
1 - 2% Lidocaine Hcl	Exp. Date:	March 28, 2023	
1 - Nebulizer Kit	☒		
3 - Albuterol 2.5mg	Exp:	November 30,	Exp: November 30, Exp: June 30, 2023
1 - Levalbuterol 1.25mg	Exp. Date:	February 28, 2024	
1 - Levalbuterol 0.31mg	Exp. Date:	February 28, 2024	
2 - Ipratropium Bromide 0.5mg (Atrovent)	Exp. Date:	February 28, 2024	Exp. Date: February 28, 2024
1 - Low Dose Aspirin (81 mg)	Exp. Date:	May 31, 2023	
1 - Roll Med Tape	☒		

LIFEPAK MONITOR

Pedi AED Pads	Exp. Date:	February 7, 2023
Child/ Adult AED Pads	Exp. Date:	January 4, 2024
Capno	☒	
PEDI Pulse OX	Exp. Date:	April 1, 2025

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist

This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No:	45886339	Location:	Rescue-1	DATE	July 1, 2023
-----------------	----------	-----------	----------	------	--------------

1. Inspect physical condition for:

Foreign substances	☒ Pass	☐ Fail
Damage or cracks	☒ Pass	☐ Fail

2. Inspect power source for:

Broken, loose or worn battery pins.	☒ Pass	☐ Fail
Damaged or leaking battery.	☒ Pass	☐ Fail
Spare battery available	☒ Pass	☐ Fail
Damage to power adapters or cable.	☒ Pass	☐ Fail

3. Inspect ECG cable and cable port for:

Cracking, damaged, broke or bent parts or pins	☒ Pass	☐ Fail
--	--	-------------------------------

4. Check ECG electrodes and therapy electrodes for:

Use by date	☒ Pass	☐ Fail
Spare electrodes available	☒ Pass	☐ Fail
Damaged, open package	☒ Pass	☐ Fail

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

- | | | |
|--|--|-------------------------------|
| Momentary illumination of self test messages and LED's and speaker beep. | ☒ Pass | ☐ Fail |
| Two fully charged batteries | ☒ Pass | ☐ Fail |
| Service indicator | ☒ Pass | ☐ Fail |

6. With batteries installed, reconnect power adapter to device and check for:
(If not using a power adapter, goto step 7.)

- | | | |
|---|--|-------------------------------|
| Power adapter LED stripes illuminated | ☒ Pass | ☐ Fail |
| Auxiliary power LED on device is illuminated | ☒ Pass | ☐ Fail |
| Battery charging LED on device is illuminating or flashing. | ☒ Pass | ☐ Fail |

7. Perform QUICK-COMBO therapy cable check in manual mode.
(If this cable is not used with defibrillator, go to step 8).

- | | | |
|--|--|-------------------------------|
| Disconnect and examine cable for cracking, damaged, broken or bent parts and pins. | ☒ Pass | ☐ Fail |
| Connect therapy cable to defibrillator and test load. | ☒ Pass | ☐ Fail |
| Select LEAD then PADDLES | ☒ Pass | ☐ Fail |
| Select 200 JOULES and press CHARGE. | ☒ Pass | ☐ Fail |
| Press SHOCK button | ☒ Pass | ☐ Fail |
| Confirm ENERGY DELIVERED message appears. | ☒ Pass | ☐ Fail |
| Remove test load from cable and verify PADDLES LEAD OFF appears. | ☒ Pass | ☐ Fail |

8. Energy

- | | | |
|--|--|-------------------------------|
| Press only one (shock) button and release. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press the other (shock) button. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | ☒ Pass | ☐ Fail |

8. Cont.

Remove paddles from wells, and confirm artifact on screen.

☒ Pass ☐ Fail

Place paddle surfaces together, and confirm flat line on screen.

☒ Pass ☐ Fail

Return paddles securely to paddle wells.

☒ Pass ☐ Fail

9. Perform user test if 3:00 AM auto test results not available.

Press OPTIONS.

Select USER TEST in menu.

☒ Pass ☐ Fail

Confirm test results printed.

10. Check ECG printer for:

Adequate paper supply.

☒ Pass ☐ Fail

Ability to print.

☒ Pass ☐ Fail

11. If using wireless data transmission, test transmission method

Establish Bluetooth connection.

☒ N/A ☐ Pass ☐ Fail

Send a test transmission.

☒ N/A ☐ Pass ☐ Fail

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds)

13. Confirm that the device is stowed, mounted and positioned securely.

☒ Pass ☐ Fail

The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

Failure to remove the test load may result in delay of therapy during patient use.

Discharging >10 joules in the paddle wells may damage the defibrillator.

Glucose Monitor

Clean monitor

☒ Pass ☐ Fail

Laerdal Scope

- | | | |
|--|--|-------------------------------|
| Clean suction unit. | ☒ Pass | ☐ Fail |
| Check for occlusions. | ☒ Pass | ☐ Fail |
| Check vacuum build-up efficiency within 3 seconds. | ☒ Pass | ☐ Fail |
| Check maximum achievable vacuum within 10 seconds. | ☒ Pass | ☐ Fail |
| Check for air leaks. | ☒ Pass | ☐ Fail |
-

AirTraQ Videoscope

- | | | |
|---|--|-------------------------------|
| Clean videoscope | ☒ Pass | ☐ Fail |
| Verify that the battery % is above 50%. | ☒ Pass | ☐ Fail |
-

2% Bag

Top Left Pocket (IV Fluids)

- | | | |
|-------------------------|--|---|
| 2 IV bags | Seal: <input type="text" value="873"/> | New Seal: <input type="text" value="301"/> |
| 2 IV/IO drop admin sets | Exp.: <input type="text" value="November 30, 2023"/> | Exp.: <input type="text" value="June 1, 2023"/> |
| | ☒ | |
-

Center Pocket

- | | | |
|------------------------|---|---|
| 2-Asherman chest seals | Seal: <input type="text" value="304"/> | New Seal: <input type="text" value="338"/> |
| | Exp.: <input type="text" value="January 31, 2025"/> | Exp.: <input type="text" value="January 31, 2025"/> |
| 2- 4X4 Gauze | ☒ | |
| 1-Roll white duct tape | ☒ | |
| 1-Tactical Tourniquet | ☒ | |
| 3- 5X9 Gauze | ☒ | |
| 2-Rolls Coban | ☒ | |
| 2- Ice packs | ☒ | |
| 2- Stretch Gauze | ☒ | |

Center Pocket Cont.

- 2- Bandage roll ☒
- 1- Sterile burn sheet 60X90. ☒
- 1- Head block ☒
- 1- Blood stopper ☒
- 1- Multi-trauma dressing 12X30 ☒
- 1-RAD 57 Pulse Ox ☒

Bottom Right Pocket

Seal:

318

New Seal:

362

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bottom Left Pocket

Seal:

823

New Seal:

324

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bop Right Pocket: (Ped/Infant)

Seal:

857

New Seal:

356

- 1- Ped/Infant NRB ☒
- 1- Ped NRB mask ☒
- 2- Infant NRB mask ☒

GDF STAFF





GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit: R-1

Date: August 5, 2023

FRONT ZIPPER POCKET ☒ 1 B/P Cuff ☒ 1 Stethoscope ☒ 1 Pulse Oximeter
☒ 1 - Ped. Cannula ☒ 1 - Infant Cannula ☒ 2 - Infant NRB
☒ 1 - Rusch Laryngoscope Kit

RIGHT ZIPPER POCKET ☒ 1 - Airtraq Camera Blue Exp. Date: January 31, 2022
☒ 1 - Thomas Tube Holder Pink Exp. Date: April 30, 2023
☒ 1 - Airtraq Blade Grey Exp. Date: January 29, 2023

O2 LEFT SIDE POCKET ☒ 1-O2 Cylinder psi 2200
☒ 2-Adult NRB
☒ 2-Adult NC
☒ 1-Adult BVM

INSIDE POCKET ☒ 1-Blood Glucose Kit/Test Strips Exp. Date: April 30, 2024
☒ 1-Tube Glucose 31g Exp. Date: July 31, 2024
☒ Lancettes ☒ Adhesive Bandages
☒ Alcohol Swabs ☒ 1-Tactical Tourniquet
☒ 1-Thermometer ☒ 1-Samsplint

FIRST AID BAG ☒ Medical Tape ☒ Flush
☒ Conban ☒ Band-aids
☒ Tri-Angle Bandage ☒ 4X4s
☒ Bandage Roll ☐ 3X3s

INSIDE CLEAR LID ☒ Sharps Shuttle ☒ Pen Light ☒ Hand Sanitizer
☒ Trauma Sheers ☒ Ring Cutter
☒ Convenience Bags ☒ Bio Bag

IV COMPARTMENT☒ Sharps Shuttle☒ IV 10 Drop Administration Sets☒ 1-Roll Medical Tape☒ 1-Arrow IO Drill

2-14g IV	Exp. Date:	July 31, 2025	Exp. Date:	July 31, 2025
2-18g IV	Exp. Date:	July 1, 2024	Exp. Date:	September 30, 2024
2-20g IV	Exp. Date:	December 3, 2024	Exp. Date:	January 19, 2024
2-22g IV	Exp. Date:	February 25, 2025	Exp. Date:	February 25, 2025
2-24g IV	Exp. Date:	July 27, 2025	Exp. Date:	July 27, 2025
4-Saline Flushes {	Exp. Date:	August 31, 2023	Exp. Date:	August 31, 2023
	{ Exp. Date:	May 31, 2024	Exp. Date:	August 31, 2023

2-IV Start Kits ☒

2-EZ Stabilizers Exp. Date: September 24, 2024 Exp. Date: September 30, 2024

2-45mm 15g IO Needle Set Exp. Date: June 30, 2025 Exp. Date: March 31, 2024

2-25mm 15g IO Needle Set Exp. Date: February 29, 2024 Exp. Date: February 29, 2024

1-IV Bag Exp. Date: December 31, 2023

1 Pressure Bag ☒**AIRWAY COMPARTMENT**

1-2.5 ET Tube	Exp. Date:	January 19, 2024	1-7.0 ET Tube	Exp. Date:	February 19, 2025
1-3.0 ET Tube	Exp. Date:	December 31, 2024	1-7.5 ET Tube	Exp. Date:	May 31, 2024
1-3.5 ET Tube	Exp. Date:	July 18, 2024	1-8.0 ET Tube	Exp. Date:	June 30, 2024
1-4.0 ET Tube	Exp. Date:	April 19, 2023	1-8.5 ET Tube	Exp. Date:	January 22, 2024
1-4.5 ET Tube	Exp. Date:	November 17, 2022	1-9.0 ET Tube	Exp. Date:	September 29, 2022
1-5.0 ET Tube	Exp. Date:	March 8, 2023	1-OPA Kit		☒
1-5.5 ET Tube	Exp. Date:	September 13, 2023	K-Y Lube Gel	Exp. Date:	February 29, 2024
1-6.0 ET Tube	Exp. Date:	March 30, 2024			
1-6.5 ET Tube	Exp. Date:	March 29, 2024			

AIRWAY COMPARTMENT CONT.

1-NPA Kit (Sizes 8.7/9.3/10.0/10.7/11.3mm)

Size 8.7	Exp. Date:	April 30, 2024	4 KAD	
Size 9.3	Exp. Date:	November 30, 2024	Green	Exp. Date: October 12, 2023
Size 10	Exp. Date:	April 30, 2024	Purple	Exp. Date: October 6, 2023
Size 10.7	Exp. Date:	June 30, 2024	Yellow	Exp. Date: July 1, 2026
Size 11.3	Exp. Date:	February 28, 2026	Red	Exp. Date: April 1, 2024

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg	Exp. Date:	February 28, 2023	
1-50% Dextrose	Exp. Date:	March 31, 2024	
2 - Epinephrine Injection 1mg/mL	Exp. Date:	February 28, 2024	Exp. Date: February 28, 2024
2 - 18g Filter Needles	Exp. Date:	May 31, 2025	Exp. Date: May 31, 2025
2 - 23g Eclipse Needle	Exp. Date:	March 31, 2025	Exp. Date: March 31, 2025
2 - 1mL Syringe	Exp. Date:	December 28, 2026	Exp. Date: December 28, 2026
2 - 4x4 Gauze	☒		
2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit)	Exp. Date:	January 31, 2024	Exp. Date: September 30, 2023
1 - 2% Lidocaine Hcl	Exp. Date:	March 28, 2023	
1 - Nebulizer Kit	☒		
3 - Albuterol 2.5mg	Exp:	November 30,	Exp: November 30, Exp: June 30, 2023
1 - Levalbuterol 1.25mg	Exp. Date:	February 28, 2024	
1 - Levalbuterol 0.31mg	Exp. Date:	February 28, 2024	
2 - Ipratropium Bromide 0.5mg (Atrovent)	Exp. Date:	February 28, 2024	Exp. Date: February 28, 2024
1 - Low Dose Aspirin (81 mg)	Exp. Date:	May 31, 2023	
1 - Roll Med Tape	☒		

LIFEPAK MONITOR

Pedi AED Pads	Exp. Date:	February 7, 2023
Child/ Adult AED Pads	Exp. Date:	January 4, 2024
Capno	☒	
PEDI Pulse OX	Exp. Date:	April 1, 2025

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist

This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No:	45886339	Location:	Rescue-1	DATE	August 5, 2023
-----------------	----------	-----------	----------	------	----------------

1. Inspect physical condition for:

Foreign substances	☒ Pass	☐ Fail
Damage or cracks	☒ Pass	☐ Fail

2. Inspect power source for:

Broken, loose or worn battery pins.	☒ Pass	☐ Fail
Damaged or leaking battery.	☒ Pass	☐ Fail
Spare battery available	☒ Pass	☐ Fail
Damage to power adapters or cable.	☒ Pass	☐ Fail

3. Inspect ECG cable and cable port for:

Cracking, damaged, broke or bent parts or pins	☒ Pass	☐ Fail
--	--	-------------------------------

4. Check ECG electrodes and therapy electrodes for:

Use by date	☒ Pass	☐ Fail
Spare electrodes available	☒ Pass	☐ Fail
Damaged, open package	☒ Pass	☐ Fail

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

- | | | |
|--|--|-------------------------------|
| Momentary illumination of self test messages and LED's and speaker beep. | ☒ Pass | ☐ Fail |
| Two fully charged batteries | ☒ Pass | ☐ Fail |
| Service indicator | ☒ Pass | ☐ Fail |

6. With batteries installed, reconnect power adapter to device and check for:
(If not using a power adapter, goto step 7.)

- | | | |
|---|--|-------------------------------|
| Power adapter LED stripes illuminated | ☒ Pass | ☐ Fail |
| Auxiliary power LED on device is illuminated | ☒ Pass | ☐ Fail |
| Battery charging LED on device is illuminating or flashing. | ☒ Pass | ☐ Fail |

7. Perform QUICK-COMBO therapy cable check in manual mode.
(If this cable is not used with defibrillator, go to step 8).

- | | | |
|--|--|-------------------------------|
| Disconnect and examine cable for cracking, damaged, broken or bent parts and pins. | ☒ Pass | ☐ Fail |
| Connect therapy cable to defibrillator and test load. | ☒ Pass | ☐ Fail |
| Select LEAD then PADDLES | ☒ Pass | ☐ Fail |
| Select 200 JOULES and press CHARGE. | ☒ Pass | ☐ Fail |
| Press SHOCK button | ☒ Pass | ☐ Fail |
| Confirm ENERGY DELIVERED message appears. | ☒ Pass | ☐ Fail |
| Remove test load from cable and verify PADDLES LEAD OFF appears. | ☒ Pass | ☐ Fail |

8. Energy

- | | | |
|--|--|-------------------------------|
| Press only one (shock) button and release. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press the other (shock) button. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | ☒ Pass | ☐ Fail |

8. Cont.

Remove paddles from wells, and confirm artifact on screen.

☒ Pass ☐ Fail

Place paddle surfaces together, and confirm flat line on screen.

☒ Pass ☐ Fail

Return paddles securely to paddle wells.

☒ Pass ☐ Fail

9. Perform user test if 3:00 AM auto test results not available.

Press OPTIONS.

Select USER TEST in menu.

☒ Pass ☐ Fail

Confirm test results printed.

10. Check ECG printer for:

Adequate paper supply.

☒ Pass ☐ Fail

Ability to print.

☒ Pass ☐ Fail

11. If using wireless data transmission, test transmission method

Establish Bluetooth connection.

☒ N/A ☐ Pass ☐ Fail

Send a test transmission.

☒ N/A ☐ Pass ☐ Fail

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds)

13. Confirm that the device is stowed, mounted and positioned securely.

☒ Pass ☐ Fail

The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

Failure to remove the test load may result in delay of therapy during patient use.

Discharging >10 joules in the paddle wells may damage the defibrillator.

Glucose Monitor

Clean monitor

☒ Pass ☐ Fail

Laerdal Scope

- | | | |
|--|--|-------------------------------|
| Clean suction unit. | ☒ Pass | ☐ Fail |
| Check for occlusions. | ☒ Pass | ☐ Fail |
| Check vacuum build-up efficiency within 3 seconds. | ☒ Pass | ☐ Fail |
| Check maximum achievable vacuum within 10 seconds. | ☒ Pass | ☐ Fail |
| Check for air leaks. | ☒ Pass | ☐ Fail |
-

AirTraQ Videoscope

- | | | |
|---|--|-------------------------------|
| Clean videoscope | ☒ Pass | ☐ Fail |
| Verify that the battery % is above 50%. | ☒ Pass | ☐ Fail |
-

2% Bag

Top Left Pocket (IV Fluids)

- | | | |
|-------------------------|--|---|
| 2 IV bags | Seal: <input type="text" value="873"/> | New Seal: <input type="text" value="301"/> |
| 2 IV/IO drop admin sets | Exp.: <input type="text" value="November 30, 2023"/> | Exp.: <input type="text" value="June 1, 2023"/> |
| | ☒ | |
-

Center Pocket

- | | | |
|------------------------|---|---|
| 2-Asherman chest seals | Seal: <input type="text" value="304"/> | New Seal: <input type="text" value="338"/> |
| | Exp.: <input type="text" value="January 31, 2025"/> | Exp.: <input type="text" value="January 31, 2025"/> |
| 2- 4X4 Gauze | ☒ | |
| 1-Roll white duct tape | ☒ | |
| 1-Tactical Tourniquet | ☒ | |
| 3- 5X9 Gauze | ☒ | |
| 2-Rolls Coban | ☒ | |
| 2- Ice packs | ☒ | |
| 2- Stretch Gauze | ☒ | |

Center Pocket Cont.

- 2- Bandage roll ☒
- 1- Sterile burn sheet 60X90. ☒
- 1- Head block ☒
- 1- Blood stopper ☒
- 1- Multi-trauma dressing 12X30 ☒
- 1-RAD 57 Pulse Ox ☒

Bottom Right Pocket

Seal:

318

New Seal:

362

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bottom Left Pocket

Seal:

823

New Seal:

324

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bop Right Pocket: (Ped/Infant)

Seal:

857

New Seal:

356

- 1- Ped/Infant NRB ☒
- 1- Ped NRB mask ☒
- 2- Infant NRB mask ☒

GDF STAFF





GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit:

R-1

Date:

September 3, 2023

FRONT ZIPPER POCKET

- | | | |
|--|--|--|
| ☒ 1 B/P Cuff | ☒ 1 Stethoscope | ☒ 1 Pulse Oximeter |
| ☒ 1 - Ped. Cannula | ☒ 1 - Infant Cannula | ☒ 2 - Infant NRB |
| ☒ 1 - Rusch Laryngoscope Kit | | |

RIGHT ZIPPER POCKET

- | | | | |
|--|------|------------|------------------|
| ☒ 1 - Airtraq Camera | Blue | Exp. Date: | January 31, 2022 |
| ☒ 1 - Thomas Tube Holder | Pink | Exp. Date: | April 30, 2023 |
| ☒ 1 - Airtraq Blade | Grey | Exp. Date: | January 29, 2023 |

O2 LEFT SIDE POCKET

- | | | |
|---|-----|------|
| ☒ 1-O2 Cylinder | psi | 2200 |
| ☒ 2-Adult NRB | | |
| ☒ 2-Adult NC | | |
| ☒ 1-Adult BVM | | |

INSIDE POCKET

- | | | |
|---|---|----------------|
| ☒ 1-Blood Glucose Kit/Test Strips | Exp. Date: | April 30, 2024 |
| ☒ 1-Tube Glucose 31g | Exp. Date: | July 31, 2024 |
| ☒ Lancettes | ☒ Adhesive Bandages | |
| ☒ Alcohol Swabs | ☒ 1-Tactical Tourniquet | |
| ☒ 1-Thermometer | ☒ 1-Samsplint | |

FIRST AID BAG

- | | |
|---|---|
| ☒ Medical Tape | ☒ Flush |
| ☒ Conban | ☒ Band-aids |
| ☒ Tri-Angle Bandage | ☒ 4X4s |
| ☒ Bandage Roll | ☐ 3X3s |

INSIDE CLEAR LID

- | | | |
|--|---|--|
| ☒ Sharps Shuttle | ☒ Pen Light | ☒ Hand Sanitizer |
| ☒ Trauma Sheers | ☒ Ring Cutter | |
| ☒ Convenience Bags | ☒ Bio Bag | |

IV COMPARTMENT☒ Sharps Shuttle☒ IV 10 Drop Administration Sets☒ 1-Roll Medical Tape☒ 1-Arrow IO Drill

2-14g IV	Exp. Date:	July 31, 2025	Exp. Date:	July 31, 2025
2-18g IV	Exp. Date:	July 1, 2024	Exp. Date:	September 30, 2024
2-20g IV	Exp. Date:	December 3, 2024	Exp. Date:	January 19, 2024
2-22g IV	Exp. Date:	February 25, 2025	Exp. Date:	February 25, 2025
2-24g IV	Exp. Date:	July 27, 2025	Exp. Date:	July 27, 2025
4-Saline Flushes {	Exp. Date:	August 31, 2023	Exp. Date:	August 31, 2023
	{ Exp. Date:	May 31, 2024	Exp. Date:	August 31, 2023

2-IV Start Kits ☒

2-EZ Stabilizers Exp. Date: September 24, 2024 Exp. Date: September 30, 2024

2-45mm 15g IO Needle Set Exp. Date: June 30, 2025 Exp. Date: March 31, 2024

2-25mm 15g IO Needle Set Exp. Date: February 29, 2024 Exp. Date: February 29, 2024

1-IV Bag Exp. Date: December 31, 2023

1 Pressure Bag ☒**AIRWAY COMPARTMENT**

1-2.5 ET Tube	Exp. Date:	January 19, 2024	1-7.0 ET Tube	Exp. Date:	February 19, 2025
1-3.0 ET Tube	Exp. Date:	December 31, 2024	1-7.5 ET Tube	Exp. Date:	May 31, 2024
1-3.5 ET Tube	Exp. Date:	July 18, 2024	1-8.0 ET Tube	Exp. Date:	June 30, 2024
1-4.0 ET Tube	Exp. Date:	April 19, 2023	1-8.5 ET Tube	Exp. Date:	January 22, 2024
1-4.5 ET Tube	Exp. Date:	November 17, 2022	1-9.0 ET Tube	Exp. Date:	September 29, 2022
1-5.0 ET Tube	Exp. Date:	March 8, 2023	1-OPA Kit		☒
1-5.5 ET Tube	Exp. Date:	September 13, 2023	K-Y Lube Gel	Exp. Date:	February 29, 2024
1-6.0 ET Tube	Exp. Date:	March 30, 2024			
1-6.5 ET Tube	Exp. Date:	March 29, 2024			

AIRWAY COMPARTMENT CONT.

1-NPA Kit (Sizes 8.7/9.3/10.0/10.7/11.3mm)

Size 8.7	Exp. Date:	April 30, 2024	4 KAD	
Size 9.3	Exp. Date:	November 30, 2024	Green	Exp. Date: October 12, 2023
Size 10	Exp. Date:	April 30, 2024	Purple	Exp. Date: October 6, 2023
Size 10.7	Exp. Date:	June 30, 2024	Yellow	Exp. Date: July 1, 2026
Size 11.3	Exp. Date:	February 28, 2026	Red	Exp. Date: April 1, 2024

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg	Exp. Date:	February 28, 2023	
1-50% Dextrose	Exp. Date:	March 31, 2024	
2 - Epinephrine Injection 1mg/mL	Exp. Date:	February 28, 2024	Exp. Date: February 28, 2024
2 - 18g Filter Needles	Exp. Date:	May 31, 2025	Exp. Date: May 31, 2025
2 - 23g Eclipse Needle	Exp. Date:	March 31, 2025	Exp. Date: March 31, 2025
2 - 1mL Syringe	Exp. Date:	December 28, 2026	Exp. Date: December 28, 2026
2 - 4x4 Gauze	☒		
2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit)	Exp. Date:	January 31, 2024	Exp. Date: September 30, 2023
1 - 2% Lidocaine Hcl	Exp. Date:	March 28, 2023	
1 - Nebulizer Kit	☒		
3 - Albuterol 2.5mg	Exp:	November 30,	Exp: November 30, Exp: June 30, 2023
1 - Levalbuterol 1.25mg	Exp. Date:	February 28, 2024	
1 - Levalbuterol 0.31mg	Exp. Date:	February 28, 2024	
2 - Ipratropium Bromide 0.5mg (Atrovent)	Exp. Date:	February 28, 2024	Exp. Date: February 28, 2024
1 - Low Dose Aspirin (81 mg)	Exp. Date:	May 31, 2023	
1 - Roll Med Tape	☒		

LIFEPAK MONITOR

Pedi AED Pads	Exp. Date:	February 7, 2023
Child/ Adult AED Pads	Exp. Date:	January 4, 2024
Capno	☒	
PEDI Pulse OX	Exp. Date:	April 1, 2025

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist

This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No:	45886339	Location:	Rescue-1	DATE	September 2, 2023
-----------------	----------	-----------	----------	------	-------------------

1. Inspect physical condition for:

Foreign substances	☒ Pass	☐ Fail
Damage or cracks	☒ Pass	☐ Fail

2. Inspect power source for:

Broken, loose or worn battery pins.	☒ Pass	☐ Fail
Damaged or leaking battery.	☒ Pass	☐ Fail
Spare battery available	☒ Pass	☐ Fail
Damage to power adapters or cable.	☒ Pass	☐ Fail

3. Inspect ECG cable and cable port for:

Cracking, damaged, broke or bent parts or pins	☒ Pass	☐ Fail
--	--	-------------------------------

4. Check ECG electrodes and therapy electrodes for:

Use by date	☒ Pass	☐ Fail
Spare electrodes available	☒ Pass	☐ Fail
Damaged, open package	☒ Pass	☐ Fail

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

- | | | |
|--|--|-------------------------------|
| Momentary illumination of self test messages and LED's and speaker beep. | ☒ Pass | ☐ Fail |
| Two fully charged batteries | ☒ Pass | ☐ Fail |
| Service indicator | ☒ Pass | ☐ Fail |

6. With batteries installed, reconnect power adapter to device and check for:
(If not using a power adapter, goto step 7.)

- | | | |
|---|--|-------------------------------|
| Power adapter LED stripes illuminated | ☒ Pass | ☐ Fail |
| Auxiliary power LED on device is illuminated | ☒ Pass | ☐ Fail |
| Battery charging LED on device is illuminating or flashing. | ☒ Pass | ☐ Fail |

7. Perform QUICK-COMBO therapy cable check in manual mode.
(If this cable is not used with defibrillator, go to step 8).

- | | | |
|--|--|-------------------------------|
| Disconnect and examine cable for cracking, damaged, broken or bent parts and pins. | ☒ Pass | ☐ Fail |
| Connect therapy cable to defibrillator and test load. | ☒ Pass | ☐ Fail |
| Select LEAD then PADDLES | ☒ Pass | ☐ Fail |
| Select 200 JOULES and press CHARGE. | ☒ Pass | ☐ Fail |
| Press SHOCK button | ☒ Pass | ☐ Fail |
| Confirm ENERGY DELIVERED message appears. | ☒ Pass | ☐ Fail |
| Remove test load from cable and verify PADDLES LEAD OFF appears. | ☒ Pass | ☐ Fail |

8. Energy

- | | | |
|--|--|-------------------------------|
| Press only one (shock) button and release. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press the other (shock) button. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | ☒ Pass | ☐ Fail |

8. Cont.

Remove paddles from wells, and confirm artifact on screen.

☒ Pass ☐ Fail

Place paddle surfaces together, and confirm flat line on screen.

☒ Pass ☐ Fail

Return paddles securely to paddle wells.

☒ Pass ☐ Fail

9. Perform user test if 3:00 AM auto test results not available.

Press OPTIONS.

Select USER TEST in menu.

☒ Pass ☐ Fail

Confirm test results printed.

10. Check ECG printer for:

Adequate paper supply.

☒ Pass ☐ Fail

Ability to print.

☒ Pass ☐ Fail

11. If using wireless data transmission, test transmission method

Establish Bluetooth connection.

☒ N/A ☐ Pass ☐ Fail

Send a test transmission.

☒ N/A ☐ Pass ☐ Fail

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds)

13. Confirm that the device is stowed, mounted and positioned securely.

☒ Pass ☐ Fail

The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

Failure to remove the test load may result in delay of therapy during patient use.

Discharging >10 joules in the paddle wells may damage the defibrillator.

Glucose Monitor

Clean monitor

☒ Pass ☐ Fail

Laerdal Scope

- | | | |
|--|--|-------------------------------|
| Clean suction unit. | ☒ Pass | ☐ Fail |
| Check for occlusions. | ☒ Pass | ☐ Fail |
| Check vacuum build-up efficiency within 3 seconds. | ☒ Pass | ☐ Fail |
| Check maximum achievable vacuum within 10 seconds. | ☒ Pass | ☐ Fail |
| Check for air leaks. | ☒ Pass | ☐ Fail |
-

AirTraQ Videoscope

- | | | |
|---|--|-------------------------------|
| Clean videoscope | ☒ Pass | ☐ Fail |
| Verify that the battery % is above 50%. | ☒ Pass | ☐ Fail |
-

2% Bag

Top Left Pocket (IV Fluids)

- | | | |
|-------------------------|--|--|
| 2 IV bags | Seal: <input type="text" value="873"/> | New Seal: <input type="text" value="875"/> |
| 2 IV/IO drop admin sets | Exp.: <input type="text" value="November 30, 2023"/> | Exp.: <input type="text" value="January 1, 2024"/> |
| | ☒ | |
-

Center Pocket

- | | | |
|------------------------|---|---|
| 2-Asherman chest seals | Seal: <input type="text" value="338"/> | New Seal: <input type="text" value="833"/> |
| | Exp.: <input type="text" value="January 31, 2025"/> | Exp.: <input type="text" value="January 31, 2025"/> |
| 2- 4X4 Gauze | ☒ | |
| 1-Roll white duct tape | ☒ | |
| 1-Tactical Tourniquet | ☒ | |
| 3- 5X9 Gauze | ☒ | |
| 2-Rolls Coban | ☒ | |
| 2- Ice packs | ☒ | |
| 2- Stretch Gauze | ☒ | |

Center Pocket Cont.

- 2- Bandage roll ☒
- 1- Sterile burn sheet 60X90. ☒
- 1- Head block ☒
- 1- Blood stopper ☒
- 1- Multi-trauma dressing 12X30 ☒
- 1-RAD 57 Pulse Ox ☒

Bottom Right Pocket

Seal:

362

New Seal:

899

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bottom Left Pocket

Seal:

324

New Seal:

812

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bop Right Pocket: (Ped/Infant)

Seal:

317

New Seal:

827

- 1- Ped/Infant NRB ☒
- 1- Ped NRB mask ☒
- 2- Infant NRB mask ☒

GDF STAFF





GLENPOOL FIRE DEPARTMENT
MED BAG CHECKLIST

Unit: R-1

Date: November 1, 2023

FRONT ZIPPER POCKET ☒ 1 B/P Cuff ☒ 1 Stethoscope ☒ 1 Pulse Oximeter
☒ 1 - Ped. Cannula ☒ 1 - Infant Cannula ☒ 2 - Infant NRB
☒ 1 - Rusch Laryngoscope Kit

RIGHT ZIPPER POCKET ☒ 1 - Airtraq Camera Blue Exp. Date: January 31, 2022
☒ 1 - Thomas Tube Holder Pink Exp. Date: April 30, 2023
☒ 1 - Airtraq Blade Grey Exp. Date: January 29, 2023

O2 LEFT SIDE POCKET ☒ 1-O2 Cylinder psi 2000
☒ 2-Adult NRB
☒ 2-Adult NC
☒ 1-Adult BVM

INSIDE POCKET ☒ 1-Blood Glucose Kit/Test Strips Exp. Date: April 30, 2024
☒ 1-Tube Glucose 31g Exp. Date: July 31, 2024
☒ Lancettes ☒ Adhesive Bandages
☒ Alcohol Swabs ☒ 1-Tactical Tourniquet
☒ 1-Thermometer ☒ 1-Samsplint

FIRST AID BAG ☒ Medical Tape ☒ Flush
☒ Conban ☒ Band-aids
☒ Tri-Angle Bandage ☒ 4X4s
☒ Bandage Roll ☐ 3X3s

INSIDE CLEAR LID ☒ Sharps Shuttle ☒ Pen Light ☒ Hand Sanitizer
☒ Trauma Sheers ☒ Ring Cutter
☒ Convenience Bags ☒ Bio Bag

IV COMPARTMENT☒ Sharps Shuttle☒ IV 10 Drop Administration Sets☒ 1-Roll Medical Tape☒ 1-Arrow IO Drill

2-14g IV	Exp. Date:	July 31, 2025	Exp. Date:	July 31, 2025
2-18g IV	Exp. Date:	July 1, 2024	Exp. Date:	September 30, 2024
2-20g IV	Exp. Date:	December 3, 2024	Exp. Date:	January 19, 2024
2-22g IV	Exp. Date:	February 25, 2025	Exp. Date:	February 25, 2025
2-24g IV	Exp. Date:	July 27, 2025	Exp. Date:	July 27, 2025
4-Saline Flushes {	Exp. Date:	August 31, 2023	Exp. Date:	August 31, 2023
	{ Exp. Date:	May 31, 2024	Exp. Date:	August 31, 2023

2-IV Start Kits ☒

2-EZ Stabilizers Exp. Date: September 24, 2024 Exp. Date: September 30, 2024

2-45mm 15g IO Needle Set Exp. Date: June 30, 2025 Exp. Date: March 31, 2024

2-25mm 15g IO Needle Set Exp. Date: February 29, 2024 Exp. Date: February 29, 2024

1-IV Bag Exp. Date: December 31, 2023

1 Pressure Bag ☒**AIRWAY COMPARTMENT**

1-2.5 ET Tube	Exp. Date:	January 19, 2024	1-7.0 ET Tube	Exp. Date:	February 19, 2025
1-3.0 ET Tube	Exp. Date:	December 31, 2024	1-7.5 ET Tube	Exp. Date:	May 31, 2024
1-3.5 ET Tube	Exp. Date:	July 18, 2024	1-8.0 ET Tube	Exp. Date:	June 30, 2024
1-4.0 ET Tube	Exp. Date:	April 19, 2023	1-8.5 ET Tube	Exp. Date:	January 22, 2024
1-4.5 ET Tube	Exp. Date:	November 17, 2022	1-9.0 ET Tube	Exp. Date:	September 29, 2022
1-5.0 ET Tube	Exp. Date:	March 8, 2023	1-OPA Kit		☒
1-5.5 ET Tube	Exp. Date:	September 13, 2023	K-Y Lube Gel	Exp. Date:	February 29, 2024
1-6.0 ET Tube	Exp. Date:	March 30, 2024			
1-6.5 ET Tube	Exp. Date:	March 29, 2024			

AIRWAY COMPARTMENT CONT.

1-NPA Kit (Sizes 8.7/9.3/10.0/10.7/11.3mm)

Size 8.7	Exp. Date:	April 30, 2024
Size 9.3	Exp. Date:	November 30, 2024
Size 10	Exp. Date:	April 30, 2024
Size 10.7	Exp. Date:	June 30, 2024
Size 11.3	Exp. Date:	February 28, 2026

4 KAD

Green	Exp. Date:	October 12, 2023
Purple	Exp. Date:	October 6, 2023
Yellow	Exp. Date:	July 1, 2026
Red	Exp. Date:	April 1, 2024

MEDICINE COMPARTMENT

1-Glucagon Kit 1mg	Exp. Date:	February 28, 2023	
1-50% Dextrose	Exp. Date:	March 31, 2024	
2 - Epinephrine Injection 1mg/mL	Exp. Date:	February 28, 2024	Exp. Date: February 28, 2024
2 - 18g Filter Needles	Exp. Date:	May 31, 2025	Exp. Date: May 31, 2025
2 - 23g Eclipse Needle	Exp. Date:	March 31, 2025	Exp. Date: March 31, 2025
2 - 1mL Syringe	Exp. Date:	December 28, 2026	Exp. Date: December 28, 2026
2 - 4x4 Gauze	☒		
2 - Naloxone Hydrochloride 2mg per 2mL (1 Kit)	Exp. Date:	January 31, 2024	Exp. Date: September 30, 2023
1 - 2% Lidocaine Hcl	Exp. Date:	March 28, 2023	
1 - Nebulizer Kit	☒		
3 - Albuterol 2.5mg	Exp:	November 30,	Exp: November 30, Exp: June 30, 2023
1 - Levalbuterol 1.25mg	Exp. Date:	February 28, 2024	
1 - Levalbuterol 0.31mg	Exp. Date:	February 28, 2024	
2 - Ipratropium Bromide 0.5mg (Atrovent)	Exp. Date:	February 28, 2024	Exp. Date: February 28, 2024
1 - Low Dose Aspirin (81 mg)	Exp. Date:	May 31, 2023	
1 - Roll Med Tape	☒		

LIFEPAK MONITOR

Pedi AED Pads	Exp. Date:	February 7, 2023
Child/ Adult AED Pads	Exp. Date:	January 4, 2024
Capno	☒	
PEDI Pulse OX	Exp. Date:	April 1, 2025

LIFEPAK®15 Monitor/Defibrillator Operator's Checklist

This is a recommended checklist to use to inspect and test this monitor/defibrillator. Daily inspection and test is recommended. This form may be reproduced.

Unit Serial No:	45886339	Location:	Rescue-1	DATE	October 29, 2023
-----------------	----------	-----------	----------	------	------------------

1. Inspect physical condition for:

Foreign substances	☒ Pass	☐ Fail
Damage or cracks	☒ Pass	☐ Fail

2. Inspect power source for:

Broken, loose or worn battery pins.	☒ Pass	☐ Fail
Damaged or leaking battery.	☒ Pass	☐ Fail
Spare battery available	☒ Pass	☐ Fail
Damage to power adapters or cable.	☒ Pass	☐ Fail

3. Inspect ECG cable and cable port for:

Cracking, damaged, broke or bent parts or pins	☒ Pass	☐ Fail
--	--	-------------------------------

4. Check ECG electrodes and therapy electrodes for:

Use by date	☒ Pass	☐ Fail
Spare electrodes available	☒ Pass	☐ Fail
Damaged, open package	☒ Pass	☐ Fail

5. With batteries installed, disconnect from power adapter (if using), press ON and observe for:

- | | | |
|--|--|-------------------------------|
| Momentary illumination of self test messages and LED's and speaker beep. | ☒ Pass | ☐ Fail |
| Two fully charged batteries | ☒ Pass | ☐ Fail |
| Service indicator | ☒ Pass | ☐ Fail |

6. With batteries installed, reconnect power adapter to device and check for:
(If not using a power adapter, goto step 7.)

- | | | |
|---|--|-------------------------------|
| Power adapter LED stripes illuminated | ☒ Pass | ☐ Fail |
| Auxiliary power LED on device is illuminated | ☒ Pass | ☐ Fail |
| Battery charging LED on device is illuminating or flashing. | ☒ Pass | ☐ Fail |

7. Perform QUICK-COMBO therapy cable check in manual mode.
(If this cable is not used with defibrillator, go to step 8).

- | | | |
|--|--|-------------------------------|
| Disconnect and examine cable for cracking, damaged, broken or bent parts and pins. | ☒ Pass | ☐ Fail |
| Connect therapy cable to defibrillator and test load. | ☒ Pass | ☐ Fail |
| Select LEAD then PADDLES | ☒ Pass | ☐ Fail |
| Select 200 JOULES and press CHARGE. | ☒ Pass | ☐ Fail |
| Press SHOCK button | ☒ Pass | ☐ Fail |
| Confirm ENERGY DELIVERED message appears. | ☒ Pass | ☐ Fail |
| Remove test load from cable and verify PADDLES LEAD OFF appears. | ☒ Pass | ☐ Fail |

8. Energy

- | | | |
|--|--|-------------------------------|
| Press only one (shock) button and release. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press the other (shock) button. Confirm that energy was not discharged. | ☒ Pass | ☐ Fail |
| Press both (shock) buttons and confirm ABNORMAL ENERGY DELIVERY message appears. | ☒ Pass | ☐ Fail |

8. Cont.

Remove paddles from wells, and confirm artifact on screen.

☒ Pass ☐ Fail

Place paddle surfaces together, and confirm flat line on screen.

☒ Pass ☐ Fail

Return paddles securely to paddle wells.

☒ Pass ☐ Fail

9. Perform user test if 3:00 AM auto test results not available.

Press OPTIONS.

Select USER TEST in menu.

☒ Pass ☐ Fail

Confirm test results printed.

10. Check ECG printer for:

Adequate paper supply.

☒ Pass ☐ Fail

Ability to print.

☒ Pass ☐ Fail

11. If using wireless data transmission, test transmission method

Establish Bluetooth connection.

☒ N/A ☐ Pass ☐ Fail

Send a test transmission.

☒ N/A ☐ Pass ☐ Fail

12. Turn off defibrillator.

(Press and hold ON for up to 2 seconds)

13. Confirm that the device is stowed, mounted and positioned securely.

☒ Pass ☐ Fail

The defibrillator delivers up to 360 joules of electrical energy. Unless discharged properly, this electrical energy may cause serious personal injury or death. Do not attempt to perform this test unless you are qualified by training and experience.

Failure to remove the test load may result in delay of therapy during patient use.

Discharging >10 joules in the paddle wells may damage the defibrillator.

Glucose Monitor

Clean monitor

☒ Pass ☐ Fail

Laerdal Scope

- | | | |
|--|--|-------------------------------|
| Clean suction unit. | ☒ Pass | ☐ Fail |
| Check for occlusions. | ☒ Pass | ☐ Fail |
| Check vacuum build-up efficiency within 3 seconds. | ☒ Pass | ☐ Fail |
| Check maximum achievable vacuum within 10 seconds. | ☒ Pass | ☐ Fail |
| Check for air leaks. | ☒ Pass | ☐ Fail |
-

AirTraQ Videoscope

- | | | |
|---|--|-------------------------------|
| Clean videoscope | ☒ Pass | ☐ Fail |
| Verify that the battery % is above 50%. | ☒ Pass | ☐ Fail |
-

2% Bag

Top Left Pocket (IV Fluids)

- | | | |
|-------------------------|--|--|
| 2 IV bags | Seal: <input type="text" value="873"/> | New Seal: <input type="text" value="875"/> |
| 2 IV/IO drop admin sets | Exp.: <input type="text" value="November 30, 2023"/> | Exp.: <input type="text" value="January 1, 2024"/> |
| | ☒ | |
-

Center Pocket

- | | | |
|------------------------|---|---|
| 2-Asherman chest seals | Seal: <input type="text" value="338"/> | New Seal: <input type="text" value="833"/> |
| | Exp.: <input type="text" value="January 31, 2025"/> | Exp.: <input type="text" value="January 31, 2025"/> |
| 2- 4X4 Gauze | ☒ | |
| 1-Roll white duct tape | ☒ | |
| 1-Tactical Tourniquet | ☒ | |
| 3- 5X9 Gauze | ☒ | |
| 2-Rolls Coban | ☒ | |
| 2- Ice packs | ☒ | |
| 2- Stretch Gauze | ☒ | |

Center Pocket Cont.

- 2- Bandage roll ☒
- 1- Sterile burn sheet 60X90. ☒
- 1- Head block ☒
- 1- Blood stopper ☒
- 1- Multi-trauma dressing 12X30 ☒
- 1-RAD 57 Pulse Ox ☒

Bottom Right Pocket

Seal:

362

New Seal:

899

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bottom Left Pocket

Seal:

324

New Seal:

812

- 1- SAM splint ☒
- 1- Triangular bandage ☒
- 1- Roll coban ☒

Bop Right Pocket: (Ped/Infant)

Seal:

317

New Seal:

827

- 1- Ped/Infant NRB ☒
- 1- Ped NRB mask ☒
- 2- Infant NRB mask ☒

GDF STAFF





MINUTES
GEMS Meeting
Monday, October 2, 2023 Council Chambers 6:00 PM

TRUSTEES PRESENT: Joyce Calvert
Brandon Kearns
Tim Fox
Chris Brobst
Jacqueline Triplett-Lund

STAFF PRESENT: Susan White
Julie Casteen

STAFF ABSENT: Wendy Knight

- A) Call to Order - Joyce G. Calvert, Chair**
Chair Calvert called the meeting to order at 6:06 p.m.
- B) Roll Call, Declaration of Quorum – Wendy Knight, Clerk; Joyce G. Calvert, Chair**
Adminstrator White called the roll, Chair Calvert declared a quorum present.
Scott Major of Rosenstein, Fist & Ringold were also in attendance.
- C) EMS Report - Brian Cook, Director of Operations, Mercy Regional EMS**
[GEMS EMS REPORT 08302023-09262023](#)
- D) District Administrator Report - Susan White, Administrator**
[2023-08-GEMS Monthly Financial Report](#)
- E) Trustee Comments**
There were no Trustee comments.
- F) Public Comments**
There were no public comments.
- G) Consideration and appropriate action relating to a request for approval of the Consent Agenda. (All matters listed under "Consent" are considered by the GEMS Board to be routine and will be enacted by one motion. Any**

Trustee may, however, remove an item from the Consent Agenda by request. A motion to adopt the consent Agenda is non-debatable.)

- 1) Minutes from September 5, 2023 meeting.
[GEMS - 05 Sep 2023 - Minutes - Html](#)
- 2) Purchase order(s) and receipts register totaling \$33,861.49.

Moved by Jacqueline Triplett-Lund, seconded by Chris Brobst

To approve the Consent Agenda.

	For	Against	Abstained	Absent
Joyce Calvert	x			
Brandon Kearns	x			
Tim Fox	x			
Chris Brobst	x			
Jacqueline Triplett-Lund	x			
	5	0	0	0

CARRIED.

[GEMS Invoice 10-2-2023](#)

- H) **Consideration and appropriate action relating to items removed from the Consent Agenda**
- I) **Scheduled Business**
- J) **Adjournment**
Chair Calvert declared the meeting adjourned at 6:09 p.m.



Date: November 6, 2023

To: Honorable Mayor/Chairman and City Council/Trustees

From: Wendy Knight, City Clerk/GEMS District Clerk

Re: 2024 Meeting Schedule

Background

Per Oklahoma Open Meetings Act O.S.25 § 311(A)(1), all public bodies shall give notice in writing by December 15 of each calendar year of the schedule of the regularly scheduled meetings for the following year.

Meeting schedules have been prepared separately for City Council meetings, each Trust Authority and GEMS. They are similar to 2023 in frequency and convening time for each public body.

Attached

- 2024 Meeting Schedule

12205 S. Yukon, Glenpool, OK 74033 OFFICE: 918-322-5409 FAX: 918-209-4641

Mayor Joyce Calvert, Ward 3; Vice-Mayor Brandon Kearns, At-Large;

Tim Fox, Ward 1; Chris Brobst, Ward 2; Jacqueline Lund, Ward 4

City Manager David Tillotson, Assistant City Manager Susan White, City Clerk Wendy Knight

www.glenpoolonline.com

**2024 CALENDAR YEAR
SCHEDULE OF REGULAR MEETINGS
GLENPOOL AREA EMERGENCY MEDICAL SERVICE DISTRICT
GLENPOOL, OKLAHOMA**

DATE	TIME	PLACE
JANUARY 2, 2024*	6:00 P.M.	GLENPOOL CITY HALL
FEBRUARY 5, 2024	6:00 P.M.	GLENPOOL CITY HALL
MARCH 4, 2024	6:00 P.M.	GLENPOOL CITY HALL
APRIL 1, 2024	6:00 P.M.	GLENPOOL CITY HALL
MAY 6, 2024	6:00 P.M.	GLENPOOL CITY HALL
JUNE 3, 2024	6:00 P.M.	GLENPOOL CITY HALL
JULY 1, 2024	6:00 P.M.	GLENPOOL CITY HALL
AUGUST 5, 2024	6:00 P.M.	GLENPOOL CITY HALL
SEPTEMBER 3, 2024*	6:00 P.M.	GLENPOOL CITY HALL
OCTOBER 7, 2024	6:00 P.M.	GLENPOOL CITY HALL
NOVEMBER 4, 2024	6:00 P.M.	GLENPOOL CITY HALL
DECEMBER 2, 2024	6:00 P.M.	GLENPOOL CITY HALL

* Denotes Tuesday Meeting

GLENPOOL CITY HALL, City Council Chambers, 12205 S Yukon Ave., Glenpool Oklahoma

APPROVED BY:

MEMBERS OF GLENPOOL AREA EMERGENCY MEDICAL SERVICE DISTRICT

12205 S. YUKON

GLENPOOL, OK 74033

918-322-5409

Filed in the office of the City Clerk on the ____ day of November 2023

Signed: _____



GEMS

Glenpool Area Medical Service District
Glenpool, Oklahoma

To: HONORABLE CHAIR AND GEMS DISTRICT BOARD MEMBERS

From: Julie Casteen, DISTRICT TREASURER

Date: November 1, 2023

Subject: Approval of Purchase Orders totaling \$28,852.93, and Purchase Order Receiving Report and Payment of Claims as of 10/31/2023 totaling \$24,799.53.

Background:

A Requisition report for the approval of issued purchase orders, a purchase order receiving report and a list of claims to be paid is presented to the Board for approval.

Staff Recommendation:

Staff recommends a motion to accept the Requisition Report, the PO Receipt Register report dated 11/01/2023, and approval of the following payments:

P.O. #	ACCOUNT	VENDOR	DESCRIPTION	INV #	AMOUNT
24-17605	31-6-01-6235	Susan White	District Administration	SW112023	\$208.33
24-17606	31-6-01-6235	Wendy Knight	District Clerk	WK112023	\$208.33
24-17607	31-6-01-6210	Centurion Health System	Ambulance Service Nov 23	3054	\$15,000.00
24-17608	31-6-01-6225	City of Glenpool	1 st Responder SEPT 2023	SEP2023	\$9,146.04
24-17611	31-6-01-6235	Rosenstein, Fist & Ringold	GEMS Legal Services Aug 23	160517	\$28.50
24-17612	31-6-01-6235	Julie Casteen	District Treasurer	JC112023	\$208.33
Total					\$24,799.53

Attachments:

1. Requisition Register of Purchase Orders issued totaling \$28,852.93.
2. Purchase Order Claims Register dated 11/01/2023 totaling \$24,799.53.
3. PO Receipt Register dated 11/01/2023 totaling \$24,799.53.
4. Invoices for payment totaling \$24,799.53.

12205 S. Yukon, Glenpool, OK 74033 • OFFICE: 918-209-4630 FAX: 918-209-4626

11/01/2023 8:52 AM

REQUISITION REPORT
SUMMARY

PAGE: 1

REQUISITION	DESCRIPTION	DEPARTMENT	NAME	DATE ISSUED	ON HOLD	AMOUNT
00033897	LIFEPAC DEFIB MAINTENANCE	31-00	NON-DEPARTMENTAL	10/24/2023	NO	3,094.20
00033898	GEMS PROFESSIONAL SVC AUG 2023	31-00	NON-DEPARTMENTAL	10/24/2023	NO	28.50
00033899	LG & XLG NITRILE GLOVES	31-00	NON-DEPARTMENTAL	10/24/2023	NO	959.20
00033900	AMBULANCE SUBSIDY NOV 2023	31-00	NON-DEPARTMENTAL	10/24/2023	NO	15,000.00
00033901	1ST RESPONDER REIMBURSE-SEPT	31-00	NON-DEPARTMENTAL	10/24/2023	NO	9,146.04
00033902	GEMS CONTRACT SVC OCT 2023	31-00	NON-DEPARTMENTAL	10/24/2023	NO	208.33
00033903	GEMS CONTRACT SVC OCT 2023	31-00	NON-DEPARTMENTAL	10/24/2023	NO	208.33
00033904	GEMS CONTRACT SVC OCT 2023	31-00	NON-DEPARTMENTAL	10/24/2023	NO	208.33

11/01/2023 8:52 AM

REQUISITION REPORT

PAGE: 2

REQUISITION TOTALS BY G/L ACCOUNT

					=====LINE ITEM=====		=====GROUP BUDGET=====	
YEAR	ACCOUNT	NAME	ITEMS	AMOUNT	ANNUAL BUDGET	BUDGET OVER AVAILABLE BUDG	ANNUAL BUDGET	BUDGET OVER AVAILABLE BUDG
2023-2024	31-6-01-6202	OPERATING SUPPLIES	1	959.20	4,500	705.08		
	31-6-01-6210	AMBULANCE CONTRACT	1	15,000.00	180,000	105,000.00		
	31-6-01-6225	FIRST RESPONDER/ADMIN F	1	9,146.04	166,505	124,103.68		
	31-6-01-6235	CONTRACT SERVICES	5	3,747.69	13,800	8,177.34		
** 23-24 YEAR TOTALS **				28,852.93				

NO ERRORS

NO WARNINGS

APPROVED

BY

Joyce Calvert, Chair
November 6, 2023

33899

IMS, Inc.

112311 S 74th E Ave
Tulsa, OK 74008
(800) 476-9657

Quote

Date	Estimate #
9/26/2023	1318

Name / Address
Glenpool Fire Dept Max Wilson 12205 S Yukon Ave Glenpool, OK 74033

Ship To
14536 S Elwood Ave Glenpool, OK 74033

Item	Description	Qty	Price	Total
NPFT2640	NPFT2640 Case Surecare Powder Free Black Nitrile Gloves, Large	2	119.90	239.80
NPFT2650	NPFT2650 Case Surecare Powder Free Black Nitrile Gloves, X-Large	6	119.90	719.40
	Sales Tax		0.00	0.00
			Total	\$959.20



#33897

Prevent Ship In

Quote Number: 10787773

Version: 1

Prepared For: GLENPOOL FIRE DEPT

Attn:

Rep: Blake Slavonick

Email:

Phone Number:

GPO: CUSTOMER CONTRACT

Service Rep: Tim King

Quote Date: 09/25/2023

Email:

Expiration Date: 10/25/2023

Contract Start: 09/10/2023

Contract End: 09/09/2024

Delivery Address

Name: GLENPOOL FIRE DEPT

Account #: 20039302

Address: 14536 S ELWOOD AVE

GLENPOOL

Oklahoma 74033

Bill To Account

Name: GLENPOOL FIRE DEPT

Account #: 20039302

Address: 14536 S ELWOOD AVE

GLENPOOL

Oklahoma 74033

ProCare Products:

#	Product	Description	Months	Qty	List Price	Discount %	Sell Price	Total
1.0	LIFEPAK-DEP-PROCARE	PROCARE-SVC-LIFEPAK-DEPOT-REPAIR Parts Labor Travel Preventative Maintenance Batteries Service	12	2	\$1,719.00	10.0%	\$1,547.10	\$3,094.20
ProCare Total:								\$3,094.20

Price Totals:



Prevent Ship In

Quote Number: 10787773

Version: 1

Prepared For: GLENPOOL FIRE DEPT
Attn:

Rep: Blake Slavonick

Email:

Phone Number:

GPO: CUSTOMER CONTRACT

Service Rep: Tim King

Quote Date: 09/25/2023

Email:

Expiration Date: 10/25/2023

Contract Start: 09/10/2023

Contract End: 09/09/2024

Authorized Customer Signer (Printed) Date

Stryker Authorized Signature (Printed) Date

Authorized Customer Signature Date

Stryker Authorized Signature Date

Purchase Order Number

Service Terms and Conditions:

The Terms and Conditions of this quote and any subsequent purchase order of the Customer are governed by the Terms and Conditions located at www.stryker.com/stnc. The terms and conditions referenced in the immediately preceding sentence do not apply where Customer and Stryker are parties to a Master Service Agreement.

Equipment Service Plan

Line Item #	Model	Serial #
1.0	PROCARE-SVC-LIFEPAK-DEPOT-REPAIR	45886339
1.0	PROCARE-SVC-LIFEPAK-DEPOT-REPAIR	45886287

Purchase Order Form

stryker[®]

Account Manager _____
Cell Phone _____

Purchase Order Date _____
Expected Delivery Date _____
Stryker Quote Number _____

Check box if Billing same as Shipping ☐

BILL TO	CUSTOMER #
Billing Account Num	
Company Name	
Contact or Department	
Street Address	
Add'l Address Line	
City, ST ZIP	
Phone	

SHIP TO	CUSTOMER #
Shipping Account Num	
Company Name	
Contact or Department	
Street Address	
Add'l Address Line	
City, ST ZIP	
Phone	

Authorized Customer Initials _____

Authorized Customer Initials _____

DESCRIPTION	QTY	TOTAL
REFERENCE QUOTE		

Accounts Payable Contact Information

Name _____
Email _____
Phone _____

Stryker Terms and Conditions
www.stryker.com/stnc

Authorized Customer Signature

Printed Name _____
Title _____
Signature _____
Date _____

Attachment _____ Stryker Quote Number

*Sales or use taxes on domestic (USA) deliveries will be invoiced in addition to the price of the goods and services on the Stryker Quote.

Purchase Order Form

stryker[®]

Account Manager _____
Cell Phone _____

Purchase Order Date _____
Expected Delivery Date _____
Stryker Quote Number _____

Check box if Billing same as Shipping ☐

BILL TO		CUSTOMER #
Billing Account Num		
Company Name		
Contact or Department		
Street Address		
Add'l Address Line		
City, ST ZIP		
Phone		

SHIP TO		CUSTOMER #
Shipping Account Num		
Company Name		
Contact or Department		
Street Address		
Add'l Address Line		
City, ST ZIP		
Phone		

Authorized Customer Initials _____

Authorized Customer Initials _____

DESCRIPTION	QTY	TOTAL
REFERENCE QUOTE		

Accounts Payable Contact Information

Name _____
Email _____
Phone _____

Stryker Terms and Conditions
www.stryker.com/stnc

Authorized Customer Signature

Printed Name _____
Title _____
Signature _____
Date _____

Attachment _____ Stryker Quote Number

*Sales or use taxes on domestic (USA) deliveries will be invoiced in addition to the price of the goods and services on the Stryker Quote.

LIFEPAK® 15 service

Stryker has been notified by our global parts providers that some components used on certain LIFEPAK 15 monitor/defibrillator models (Part Numbers beginning with V15-2) are no longer available in the market. Service on the LIFEPAK 15 with Part Number beginning with v15-5 or v15-7 is unaffected.

Stryker will continue to offer service support for this subset of the LIFEPAK 15 as follows:

- All service parts with available inventory can be purchased by our end users
- Transactional service (time and material) is available for non-contract customers
 - If a component has failed on your device, your local Sales Representative should be contacted for support
- Contractual service
 - Stryker will continue to offer contractual service on a yearly basis only
 - Preventive maintenance will continue to be done on devices less than eight (8) years old. After this point, we will cease to conduct preventative maintenance and shift to device inspections
 - If a component fails on your device, please contact your local Sales Representative for support. A pro-rated credit for any pre-paid service will be provided should a unit become non-serviceable due to part availability

It is important to note that the LIFEPAK 15 has an expected life of eight (8) years from the date of manufacture. If you are uncertain of the manufacture date of your products, please contact your local Sales Representative for a full fleet assessment.

We want to ensure the highest quality products and services for our customers. As such, it is important to know that Stryker is the only FDA-approved service provider for our products. We do not contract with third party service providers, nor will we be providing them with any additional parts for these repairs. As such, we cannot guarantee the safety and efficacy of any device that is repaired by a third-party service agency.

11/01/2023 11:44 AM
SEQUENCE: VENDOR NAME (ALPHA)

P O R E C E I P T R E G I S T E R
AUDIT REPORT

PAGE: 1
DETAIL LEVEL: INVOICE

VENDOR	NAME	INVOICE	POST DATE	BANK	INVOICE AMOUNT	VENDOR TOTAL
31-000004	CENTURION HEALTH SYSTEMS, DBA M	3054	11/06/2023	31	15,000.00	15,000.00
31-000005	CITY OF GLENPOOL - GEMS	SEP2023	11/06/2023	31	9,146.04	9,146.04
31-000031	JULIE CASTEEN	JC112023	11/06/2023	31	208.33	208.33
31-000027	ROSENSTEIN, FIST & RINGOLD, INC	160517	11/06/2023	31	28.50	28.50
31-000000	SUSAN WHITE	SW112023	11/06/2023	31	208.33	208.33
31-000002	WENDY KNIGHT	WK112023	11/06/2023	31	208.33	208.33
TOTALS					24,799.53	24,799.53

APPROVED

BY

Joyce Calvert, Chair
November 6, 2023

11/01/2023 11:46 AM
FUND: 31 - GEMS

PURCHASE ORDER CLAIM REGISTER
SUMMARY REPORT

PAGE: 1

PURCHASE ORDER	DESCRIPTION	VENDOR #	VENDOR NAME	DATE INVOICE	AMOUNT
DEPARTMENT: 01 - NON-DEPARTMENTAL					
24-17605	GEMS CONTRACT SVC OCT 202	31-000000	SUSAN WHITE	11/2023 SW112023	208.33
24-17606	GEMS CONTRACT SVC OCT 202	31-000002	WENDY KNIGHT	11/2023 WK112023	208.33
24-17607	AMBULANCE SUBSIDY NOV 202	31-000004	CENTURION HEALTH SYSTEMS, DBA	11/2023 3054	15,000.00
24-17608	1ST RESPONDER REIMBURSE-S	31-000005	CITY OF GLENPOOL - GEMS	11/2023 SEP2023	9,146.04
24-17611	GEMS PROFESSIONAL SVC AUG	31-000027	ROSENSTEIN, FIST & RINGOLD, IN	11/2023 160517	28.50
24-17612	GEMS CONTRACT SVC OCT 202	31-000031	JULIE CASTEEN	11/2023 JC112023	208.33
DEPARTMENT TOTAL:					24,799.53
FUND TOTAL:					24,799.53
GRAND TOTAL:					24,799.53

P U R C H A S E O R D E R

CITY OF GLENPOOL, OK

Email invoices: AP@cityofglenpool.com

Subject line must include PO and Vendor name or emails will be rejected

PURCHASE ORDER # 24-17607

10/25/2023

ISSUED TO: VENDOR #: 31-0000004
CENTURION HEALTH SYSTEMS, D
MERCY REGIONAL OKLAHOMA
9106 N GARNET RD
OWASSO, OK 74055

SHIP TO:
GEMS
14566 S. ELWOOD
GLENPOOL, OK 74033

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

10/25/2023

I HEREBY CERTIFY THAT THE AMOUNT OF THIS ENCUMBRANCE HAS BEEN
ENTERED AGAINST THE DESIGNATED APPROPRIATION ACCOUNTS AND THAT
THIS ENCUMBRANCE IS WITHIN THE AUTHORIZED AVAILABLE BALANCE OF
SAID APPROPRIATION.

10/25/2023

PURCHASING OFFICER

DATE

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	AMBULANCE SUBSIDY NOV 2023 AMBULANCE SUBSIDY NOV 2023		00033900	31 -6-01-6210		0.00	15,000.00 *

** TOTAL ** 15,000.00

*** APPROVAL FOR PURCHASE ***

I HEREBY CERTIFY THAT THE MERCHANDISE AND/OR SERVICES DESCRIBED ABOVE HAVE BEEN SATISFACTORILY RECEIVED AND THAT THIS PURCHASE
ORDER IS NOW A TRUE AND JUST DEBT OF THIS CITY. THIS PURCHASE ORDER IS APPROVED FOR PAYMENT IN THE AMOUNT INDICATED ABOVE.

OFFICER OR DEPARTMENT HEAD IN CHARGE

DATE

62 O.S. SECTION 310.9 AND 74 O.S. SECTION 3109, PROVIDES THAT THE VENDOR'S SUBMISSION OF AN INVOICE OR ACCEPTANCE OF PAYMENT PURSUANT TO THIS PURCHASE CONSTITUTES
A STATEMENT BY THE VENDOR THAT THE INVOICE OR CLAIM IS TRUE AND CORRECT. THE WORK, SERVICES OR MATERIALS AS SHOWN BY THE INVOICE OR CLAIM HAVE BEEN COMPLETED OR
SUPPLIED IN ACCORDANCE WITH THE PLANS, SPECIFICATIONS, ORDERS OR REQUESTS FURNISHED THE VENDOR, AND THE VENDOR HAS MADE NO PAYMENT, DIRECTLY OR INDIRECTLY, TO
ANY ELECTED OFFICIAL, OFFICER OR EMPLOYEE OF THIS STATE OR ANY COUNTY OR POLITICAL SUBDIVISION OF THE STATE OF MONEY OR ANY OTHER THING OF VALUE TO OBTAIN PAYMENT.
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VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

Mercy Regional Oklahoma
Owasso, OK 74055

#33900

Invoice

Date	Invoice #
10/10/2023	3054

Bill To
Glenpool City Accounts Payable 12205 S Yukon Ave Glenpool, Ok 74033

P.O. No.	Terms	Project

Quantity	Description	Rate	Amount
1	ALS Ambulance Subsidy for November 2023	15,000.00	15,000.00
		Total	\$15,000.00

Phone #	Fax #
9186095829	918-609-5799

P U R C H A S E O R D E R

CITY OF GLENPOOL, OK

Email invoices: AP@cityofglenpool.com

Subject line must include PO and Vendor name or emails will be rejected
PURCHASE ORDER # 24-17608 10/25/2023

ISSUED TO: VEND #: 31-000005
CITY OF GLENPOOL - GEMS
12205 S YUKON AVE.
GLENPOOL, OK 74033

SHIP TO:
GEMS
14566 S. ELWOOD
GLENPOOL, OK 74033

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

10/25/2023

PURCHASING OFFICER

DATE

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SAID APPROPRIATION. 10/25/2023

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	1ST RESPONDER REIMBURSE-SEPT 1ST RESPONDER REIMBURSE-SEPT		00033901	31 -6-01-6225		0.00	9,146.04 *

** TOTAL ** 9,146.04

*** APPROVAL FOR PURCHASE ***

I HEREBY CERTIFY THAT THE MERCHANDISE AND/OR SERVICES DESCRIBED ABOVE HAVE BEEN SATISFACTORILY RECEIVED AND THAT THIS PURCHASE
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VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.



INVOICE

CITY OF GLENPOOL
12205 S. YUKON AVE..
GLENPOOL, OK 74033
PHONE (918)322-5409

TREASURER
GEMS-
12205 S YUKON AVE
GLENPOOL OK 74033

Customer Number: 01-0172

Invoice Number: SEP2023

Invoice Date: 10/24/2023

Due Date: 11/23/2023

P.O. # :

ITEM DESCRIPTION	UNITS	TYPE	PRICE	AMOUNT
GEMS REIMBURSEMENT SEPT 2023	N/A	MONTH	N/A	9,146.04
SEPTEMBER 2023				
*****THANK YOU*****			TOTAL DUE	\$9,146.04

FY 23/24 GEMS Admin/First Responder Reimbursements

	Sept
Total Runs	113
Fire runs	30
EMR runs	83
EMR Ratio	73%
Run Rate	\$ 106.88
Admin	\$ 275.00
Overtime	<u>\$ -</u>
Total	\$ 9,146.04

Glenpool Fire Department Operations September 2023

Complete Month

Run Type	# of Calls	Totals Calls
EMS Runs	83	113
Fire Runs	30	
Overlapping	22	13.50%

Average Time on Scene
20:55

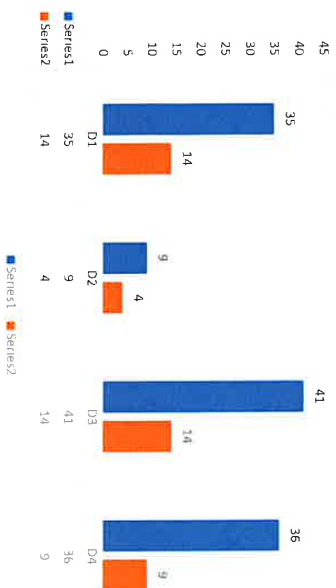
EMS Response
3:35

Fire Response
6:57

By District:

District	EMS	Fire	District Totals
D1	35	14	49
D2	9	4	13
D3	41	14	55
D4	36	9	45
M/A		1	1
Totals			163

Given: Jenks Structure Fire



District 1 Northwest of 141st & Elwood

- 130 - Mobile property (vehicle) fire, other
- 311 - Medical assist, assist EMS crew
- 321 - EMS call, excluding vehicle accident with injuries
- 322 - Motor vehicle accident with injuries
- 323 - Motor vehicle/pedestrian accident (MV Ped)
- 324 - Motor vehicle accident with no injuries
- 412 - Gas leak (natural gas or LPG)
- 510 - Person in distress, other
- 511 - Lock-out
- 531 - Smoke or odor removal
- 540 - Animal problem, other
- 600 - Good intent call, other
- 611 - Dispatched & cancelled en route
- 622 - No incident found on arrival at dispatch address
- 735 - Alarm system sounded due to malfunction

Incidents

130 - Mobile property (vehicle) fire, other	1
311 - Medical assist, assist EMS crew	18
321 - EMS call, excluding vehicle accident with injuries	1
322 - Motor vehicle accident with injuries	4
323 - Motor vehicle/pedestrian accident (MV Ped)	4
324 - Motor vehicle accident with no injuries	11
412 - Gas leak (natural gas or LPG)	2
510 - Person in distress, other	1
511 - Lock-out	1
531 - Smoke or odor removal	3
540 - Animal problem, other	1
600 - Good intent call, other	1
611 - Dispatched & cancelled en route	2
622 - No incident found on arrival at dispatch address	1
735 - Alarm system sounded due to malfunction	1
Totals	49

30.06%

District 2 Northeast of 141st & Elwood

- 100 - Fire, other
- 311 - Medical assist, assist EMS crew
- 350 - Extrication, rescue, other
- 561 - Unauthorized burning
- 651 - Smoke scare, odor of smoke 1
- 733 - Smoke detector activation due to malfunction

7.98%

District 3 Southwest of 141st & Elwood

- 113 - Cooking fire, confined to container
- 311 - Medical assist, assist EMS crew
- 322 - Motor vehicle accident with injuries
- 324 - Motor vehicle accident with no injuries
- 412 - Gas leak (natural gas or LPG)
- 444 - Power line down
- 554 - Assist invalid
- 611 - Dispatched & cancelled en route
- 731 - Sprinkler activation due to malfunction
- 733 - Smoke detector activation due to malfunction
- 741 - Sprinkler activation, no fire - unintentional
- 743 - Smoke detector activation, no fire - unintentional

33.74%

District 4 Southeast of 141st & Elwood

- 311 - Medical assist, assist EMS crew
- 322 - Motor vehicle accident with injuries
- 323 - Motor vehicle/pedestrian accident (MV Ped)
- 324 - Motor vehicle accident with no injuries
- 360 - Water & ice-related rescue, other
- 551 - Assist police or other governmental agency
- 600 - Good intent call, other
- 611 - Dispatched & cancelled en route
- 651 - Smoke scare, odor of smoke

700 - False alarm or false call, other	1	
733 - Smoke detector activation due to malfunction	1	
743 - Smoke detector activation, no fire - unintentional	1	
	45	27.61%
Mutual Aid		
111 - Building fire (assisted Jenks)	1	0.61%

P U R C H A S E O R D E R

CITY OF GLENPOOL, OK

Email invoices: AP@cityofglenpool.com

Subject line must include PO and Vendor name or emails will be rejected
PURCHASE ORDER # 24-17612 10/25/2023

ISSUED TO: VEND #: 31-000031
JULIE CASTEEN
26928 E 142ND PL S
COWETA, OK 74429

SHIP TO:
GEMS
14566 S. ELWOOD
GLENPOOL, OK 74033

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

10/25/2023

PURCHASING OFFICER

DATE

I HEREBY CERTIFY THAT THE AMOUNT OF THIS ENCUMBRANCE HAS BEEN
ENTERED AGAINST THE DESIGNATED APPROPRIATION ACCOUNTS AND THAT
THIS ENCUMBRANCE IS WITHIN THE AUTHORIZED AVAILABLE BALANCE OF
SAID APPROPRIATION. 10/25/2023

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMS CONTRACT SVC OCT 2023 GEMS CONTRACT SVC OCT 2023		00033902	31 -6-01-6235		0.00	208.33 *

** TOTAL ** 208.33

*** APPROVAL FOR PURCHASE ***

I HEREBY CERTIFY THAT THE MERCHANDISE AND/OR SERVICES DESCRIBED ABOVE HAVE BEEN SATISFACTORILY RECEIVED AND THAT THIS PURCHASE
ORDER IS NOW A TRUE AND JUST DEBT OF THIS CITY. THIS PURCHASE ORDER IS APPROVED FOR PAYMENT IN THE AMOUNT INDICATED ABOVE.

OFFICER OR DEPARTMENT HEAD IN CHARGE

DATE

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VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

#33902

INVOICE

Julie Casteen
12205 S. Yukon Ave.
Glenpool, OK 74033
Phone: 918-322-3403
Email:

INVOICE #: JC112023

DATE: 11/1/2023

BILL TO:

Glenpool Emergency Medical Service
12205 S. Yukon Ave.
Glenpool, OK 74033
Phone: 918-209-4633 | Email: AP@cityofglenpool.com

Description	Amount
Contract Fees & Services	
OCTOBER 2023	\$208.33

Total	\$208.33
--------------	-----------------

If you have any questions concerning this invoice, Darrell Colbert / 918-209-4633 / Email:
dcolbert@cityofglenpool.com

P U R C H A S E O R D E R

CITY OF GLENPOOL, OK

Email invoices: AP@cityofglenpool.com

Subject line must include PO and Vendor name or emails will be rejected
PURCHASE ORDER # 24-17611 10/25/2023

ISSUED TO: VEND #: 31-000027
ROSENSTEIN, FIST & RINGOLD,
SUITE 700
525 SOUTH MAIN STREET
TULSA, OK 74103-4508

SHIP TO:
GEMS
14566 S. ELWOOD
GLENPOOL, OK 74033

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10/25/2023

PURCHASING OFFICER

DATE

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SAID APPROPRIATION. 10/25/2023

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMS PROFESSIONAL SVC AUG 2023 GEMS PROFESSIONAL SVC AUG 2023		00033898	31 -6-01-6235		0.00	28.50 *

** TOTAL ** 28.50

*** APPROVAL FOR PURCHASE ***

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VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

Rosenstein, Fist & Ringold
525 S. Main, Suite 700
Tulsa, OK 74103-4508
Telephone No. (918) 585-9211
Facsimile No. (918) 583-5617
Internet Web Site - www.rfllaw.com

#33898

* Glenpool Emergency Medical Svc
12205 S. Yukon Ave.
Glenpool, OK 74033

September 29, 2023
Invoice No.: 160517

Regarding: General

Our File No.: 301908 - 0001

Total fees for professional services rendered through:
August 31, 2023 \$28.50

Total expense advances made to your account through:
August 31, 2023 \$0.00

Total Amount Due This Invoice \$28.50

To ensure proper credit to your account, please include this invoice
number on your check.

Federal Tax ID: 73-0787744

Rosenstein, Fist & Ringold
525 S. Main, Suite 700
Tulsa, OK 74103-4508

Telephone No. (918) 585-9211
Facsimile No. (918) 583-5617
Internet Web Site - www.rfirlaw.com

Invoice Number: 160517
Invoice Date: 09/29/2023
Activity Billed Through: 08/31/2023
Billing Attorney Initials: EDW

Glenpool Emergency Medical Svc
12205 S. Yukon Ave.
Glenpool, OK 74033

Regarding: General

Our File No.: 301908 - 0001

For professional services rendered:

08/17/2023 EDW 238 Review agenda for special meeting and emails with
W. Knight regarding same.

<u>Hours</u>	<u>Fees</u>
0.10	28.50

Total professional services: \$28.50

For expenses advanced or incurred:

Total expenses advanced: \$0.00

Total billed this invoice: \$28.50

Account Summary:

Unpaid balance forward as of invoice date: \$0.00

Total billed this invoice: 28.50

Please pay this amount: \$28.50

OK
B

P U R C H A S E O R D E R

CITY OF GLENPOOL, OK

Email invoices: AP@cityofglenpool.com

Subject line must include PO and Vendor name or emails will be rejected
PURCHASE ORDER # 24-17605 10/25/2023

ISSUED TO: VENDOR #: 31-000000
SUSAN WHITE
210 SOUTH OAK GROVE ROAD
CUSHING, OK 74023

SHIP TO:
GEMS
14566 S. ELWOOD
GLENPOOL, OK 74033

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

10/25/2023

PURCHASING OFFICER

DATE

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10/25/2023

ENCUMBERING OFFICER

DATE

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0.00	GEMS CONTRACT SVC OCT 2023 GEMS CONTRACT SVC OCT 2023		00033903	31 -6-01-6235		0.00	208.33 *

** TOTAL **

208.33

*** APPROVAL FOR PURCHASE ***

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THEIR INTEREST MAY APPEAR, MAY RECOVER FROM THE VENDOR THE FULL AMOUNT PAID PURSUANT TO THE PURCHASE ORDER IF THE STATEMENT ADOPTED AND AFFIRMED BY THE
VENDOR IS FALSE.

THE VENDOR SHALL FURNISH ITEMIZED INVOICE WHICH STATES THE VENDOR'S NAME AND ADDRESS. A CLEAR DESCRIPTION OF EACH ITEM PURCHASED ITS PRICE, THE NUMBER OR
VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

#33903

INVOICE

Susan White
12205 S. Yukon Ave.
Glenpool, OK 74033
Phone: 918-322-3403
Email:

INVOICE #: SW112023

DATE: 11/1/2023

BILL TO:

Glenpool Emergency Medical Service
12205 S. Yukon Ave.
Glenpool, OK 74033
Phone: 918-209-4633 | Email: AP@cityofglenpool.com

Description	Amount
Contract Fees & Services	
OCTOBER 2023	\$208.33

Total **\$208.33**

If you have any questions concerning this invoice, Darrell Colbert / 918-209-4633 / Email:
dcolbert@cityofglenpool.com

P U R C H A S E O R D E R

CITY OF GLENPOOL, OK

Email invoices: AP@cityofglenpool.com

Subject line must include PO and Vendor name or emails will be rejected
PURCHASE ORDER # 24-17606 10/25/2023

ISSUED TO: VEND #: 31-000002
 WENDY KNIGHT
 P.O. BOX 2434
 CLAREMORE, OK 74018

SHIP TO:
 GEMS
 14566 S. ELWOOD
 GLENPOOL, OK 74033

I HEREBY APPROVE THE ISSUANCE OF THIS PURCHASE ORDER.

10/25/2023

PURCHASING OFFICER

DATE

I HEREBY CERTIFY THAT THE AMOUNT OF THIS ENCUMBRANCE HAS BEEN
ENTERED AGAINST THE DESIGNATED APPROPRIATION ACCOUNTS AND THAT
THIS ENCUMBRANCE IS WITHIN THE AUTHORIZED AVAILABLE BALANCE OF
SAID APPROPRIATION. 10/25/2023

ENCUMBERING OFFICER

DATE

UNITS	DESCRIPTION	INV PART NUMBER	REQUEST	G/L ACCOUNT	PROJ	PRICE	AMOUNT
0.00	GEMS CONTRACT SVC OCT 2023 GEMS CONTRACT SVC OCT 2023		00033904	31 -6-01-6235		0.00	208.33 *

** TOTAL ** 208.33

*** APPROVAL FOR PURCHASE ***

I HEREBY CERTIFY THAT THE MERCHANDISE AND/OR SERVICES DESCRIBED ABOVE HAVE BEEN SATISFACTORILY RECEIVED AND THAT THIS PURCHASE
ORDER IS NOW A TRUE AND JUST DEBT OF THIS CITY. THIS PURCHASE ORDER IS APPROVED FOR PAYMENT IN THE AMOUNT INDICATED ABOVE.

OFFICER OR DEPARTMENT HEAD IN CHARGE

DATE

62 O.S. SECTION 310.9 AND 74 O.S. SECTION 3109, PROVIDES THAT THE VENDOR'S SUBMISSION OF AN INVOICE OR ACCEPTANCE OF PAYMENT PURSUANT TO THIS PURCHASE CONSTITUTES
A STATEMENT BY THE VENDOR THAT THE INVOICE OR CLAIM IS TRUE AND CORRECT. THE WORK, SERVICES OR MATERIALS AS SHOWN BY THE INVOICE OR CLAIM HAVE BEEN COMPLETED OR
SUPPLIED IN ACCORDANCE WITH THE PLANS, SPECIFICATIONS, ORDERS OR REQUESTS FURNISHED THE VENDOR, AND THE VENDOR HAS MADE NO PAYMENT, DIRECTLY OR INDIRECTLY, TO
ANY ELECTED OFFICIAL, OFFICER OR EMPLOYEE OF THIS STATE OR ANY COUNTY OR POLITICAL SUBDIVISION OF THE STATE OF MONEY OR ANY OTHER THING OF VALUE TO OBTAIN PAYMENT.
ANY VENDOR WHO SUBMITS AND INVOICE OR ACCEPTS PAYMENT PURSUANT TO THIS PURCHASE ORDER SHALL BE DEEMED TO ADOPT AND AFFIRM THE STATEMENT CONTAINED IN THIS
PURCHASE ORDER UNLESS THE VENDOR STATES ON THE INVOICE THAT THE STATEMENT IS INCORRECT IN WHOLE OR IN PART; AND THE CITY OF GLENPOOL OR ITS RELATED ENTITIES AS
THEIR INTEREST MAY APPEAR, MAY RECOVER FROM THE VENDOR THE FULL AMOUNT PAID PURSUANT TO THE PURCHASE ORDER IF THE STATEMENT ADOPTED AND AFFIRMED BY THE
VENDOR IS FALSE.

THE VENDOR SHALL FURNISH ITEMIZED INVOICE WHICH STATES THE VENDOR'S NAME AND ADDRESS. A CLEAR DESCRIPTION OF EACH ITEM PURCHASED IT'S PRICE, THE NUMBER OR
VOLUME OF EACH ITEM, ITS TOTAL PRICE, THE TOTAL OF THE PURCHASE, AND DATE OF THE PURCHASE.

33904

INVOICE

Wendy Knight
12205 S. Yukon Ave.
Glenpool, OK 74033
Phone: 918-322-3403
Email:

INVOICE #: WK112023

DATE: 11/1/2023

BILL TO:
Glenpool Emergency Medical Service
12205 S. Yukon Ave.
Glenpool, OK 74033
Phone: 918-209-4633 | Email: AP@cityofglenpool.com

Description	Amount
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OCTOBER 2023	\$208.33

Total

\$208.33

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dcolbert@cityofglenpool.com