

Department of Pharmaceutical Care
Genesis Medical Center – Davenport, Iowa

ADULT EMERGENCY MEDICATION TRANSPORT KIT CHARGE FORM

Quantity Used	SIM#	Description	Par Level
	715013	Atropine 1 mg/ 10 ml Syringe	1
	715090	Epinephrine 1 mg/ 10 ml Syringe	1
	715201	Lidocaine 100 mg/ 5 ml Syringe	1
	715658	Sodium Chloride 0.9% 10 ml Syringe	3
	N/C	Alcohol pads	6
		Resuscitation Mask	1

H;/Pharmacy/Management/4 Forms

Filled By: _____

Date: _____

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