

Appendix F: Stop the Bleed Kits Campus Assessment Form

Stop the Bleed Department Request Form

Date of Request:	
Department Name:	
Stop the Bleed Department Designee:	
Stop the Bleed Department Designee Phone Number	
Stop the Bleed Department Designee Email Address	
The number of Stop the Bleed Kit(s) requested:	
Location of Stop the Bleed Kit(s)(Building/Room):	
Department Manager:	
Checking Stop the Bleed Kits	<input type="checkbox"/> Stop the Bleed Department Designee <input type="checkbox"/> EH&S Stop the Bleed Coordinator
Department COA:	

Acquiring Stop the Bleed kits is a significant investment, **requiring 5-10 years of commitment**. Departments wishing to acquire Stop the Bleed kits must arrange funding for the initial setup and ongoing maintenance, including replacement of the Stop the Bleed kits when expired, installation of Stop the Bleed cabinet, and monthly unit checks. The costs for all specific work areas and vehicle units requested, unless mandated by a specific regulation, will be the **requesting department's responsibility**.

The Department or Administrative Unit agrees to the above responsibilities.

Signature: _____ Date: _____



For any inquiries or to submit this form, please contact the EH&S Occupational Health Coordinator at ehsochealth@ucr.edu

A detailed cost breakdown has been provided for departments looking to determine the expenses of acquiring trauma kits that require housing units for 4-6 kits. A partnership with CPR1, the current vendor for the AED program, has been established. The cost breakdown

for each kit case is outlined below, with installation costs for specific work areas being the responsibility of the requesting department.

Unit Price * is based on price data collected for 2024-2025; unit price can vary based on the time of purchase.

Renewal cost ** This can vary based on the unit price, sales tax, and shipping cost at the time of purchase.

CPR1 Bleeding Control Kit Case				
Product Number	Product Description	Unit Price	Quantity	Total
KC-S (Can house up to 4 Bleeding Control Kits) 	Dimensions: 14 3/4"L x 5 7/8"H x 6 3/4"W	\$75.65	1	\$75.65
CB2-BC-S (Can house up to 6 Bleeding Control Kits) 	Dimensions: 14 3/4"L x 11 5/8"H x 6 3/4"W	\$126.65	1	\$126.65

Campus Installations

One Time Cost for Installation Through Facilities Services				
Product Number	Product Description	Unit Price	Quantity	Total
UCR Campus Installation	Installation of the unit through facility services requires a maintenance work order. Additionally, in the event of relocation to a new location, an extra fee will be applied, along with a new work order.	\$105.75	2 hours minimum	\$211.50