



# FIRST AID KITS

Having the appropriate supplies to respond to an injury while waiting for emergency responders can mean the difference between permanent damage and a minor injury. Most districts have first aid kits on-site, but may not know which items are critical to have within them or what items should be restocked when used.

Although OR-OSHA does not require specific first aid kit contents, there is an American National Standards Institute (ANSI) standard that outlines recommended components of kits. This standard has not been adopted by OSHA but is referenced by 1910.150 Appendix A. Below are the items which are recommended according to ANSI and OSHA:

Absorbent compress, 32 sq. in.	1	Adhesive bandages, 1" x 3"	16
Adhesive tape, 5 yd. total	1	Antiseptic, 0.5 g applications	10
Burn treatment, 0.5 g applications	6	Medical exam gloves	2 pair
Sterile pads, 3" x 3"	4	Triangular bandage, 40" x 40" x 56"	1

In addition, several items can be added to the basic first aid kit to augment any known hazard in your specific district. Such hazards might include specific chemicals, liquid substances, gases or insects. Additional kit contents as suggested by ANSI, American Red Cross and various state OSHA programs include:

Bandage compress 2" x 2"	4	Bandage compress 3" x 3"	2
Bandage compress 4" x 4"	1	Eye covering/patch	1
Eye wash, 1 fl. oz.	1	Cold pack, 4" x 5"	1
Roller bandage, 2"	2	Roller bandage, 1"	1
CPR breathing barrier	1	Antiseptic wipes	5
Antibiotic ointment packets, 1 g	5	Hydrocortisone ointment packets	1
Bloodborne contaminant clean-up kit	1		

Keep in mind that if your district has hazards which require a full eye wash station, a small single ounce bottle will not meet OR-OSHA requirements. One of the most proactive steps a district can take to help mitigate any accident or injury is to have staff members who are trained in first aid and CPR. Basic training does not replace the need for emergency responders' assistance and immediate medical treatment of injuries. Remember: employees should never administer drugs to another employee. If aspirin or ibuprofen is available, only coherent adults can make the decision for themselves to consume the drug. This is important to keep in mind due to potential allergies to drugs as well as topical ointments.



Another proactive step districts can take is to have safety committee members check inventory of the first aid kit contents and look for any expired products that need to be replaced. This should be done on a quarterly basis. This will help determine if any contents have been consumed and must be replaced. It is better to have supplies on-hand than to realize in the midst of an emergency that the needed emergency supplies were never restocked.

All first aid kits should be clearly marked as well as have signs indicating their location if they are stored within a cupboard or cabinet.