

COASTAL MEDICAL KIT TWO		Overnight coastal races or where medical evacuation is more difficult includes Inshore & Coastal Kits 1	
DATE OF INSPECTION / /	SAIL NO:	BOAT NAME:	
Inspection form valid until / / (one year from date of inspection).			
OWNER DETAILS			
Owner(s) Name(s):			
Owner(s) Club(s):			
DECLARATION BY PERSON IN CHARGE			
I have read and understand my obligations as set out in the current AS Special Regulations (https://www.sailingresources.org.au/safety/specialregs/), in particular SRs 1.02.1, 1.02.2, 1.02.3 (Responsibility of the person in charge), SR 2.03.1 (Function of equipment) and Appendix D (AS Medical Kits). I understand that this audit is carried out only as a guide to person in charge and race organising authorities and it does not limit or reduce my complete and unlimited responsibility. I undertake that I will maintain the boat's medical kit as specified in the current AS Special Regulations and ensure it will be on board for each race.			
Signed by Person in Charge:		Date:	
OUTSTANDING ITEMS - This audit is not valid until the outstanding items have been re-inspected.			
Outstanding item numbers	Re-inspected by	AS auditor no.	Date
Inshore Medical Kit:			
Coastal Kit One:			
Coastal Kit Two:			
EQUIPMENT AUDITOR DECLARATION			
I have checked the abovementioned boat in accordance with SR 2.02.1, as summarised in the following list, and the items listed were compliant as per the AS Special Regulations at the time and date of this audit.			
Audited by AS NEA:(print name)		Signed by AS NEA:	
AS Number:		Date:	

This section to be completed and **ticked** or **initialled** by person in charge (P) and auditor(A).

Item	Day Kit (Inshore Medical Kit)	P	A
1	Iodine based cleaning solution – 100 ml		
2	Band-Aids x 20		
3	Elastoplast fabric dressing – 1 m		
4	'Israeli Emergency bandage' or equivalent – 100 mm x 1		
5	Paracetamol 500 mg x 20		
6	Aspirin 300 mg x 20		
7	Sea sickness tablets x 10		
	Kept in a watertight container in a position well known to all crew		

Item	Coastal Kit One	P	A
1	Panadeine Forte (Paracetamol 500 mg + Codeine 30 mg) x 20 tablets		
2	Adrenaline 1:1000 injection x 5 ampules		
3	Syringe 5 ml x 2		
4	Needle 22 g x 2		
5	Alcohol skin prep x 2		
	'EpiPen' may be substituted for Adrenaline, needles & syringes (circle)		
	5 items above kept in a separate watertight container		

Item	Coastal Kit One (continued)	P	A
6	Paracetamol (500 mg) tablets x 20		
7	Non-steroidal anti-inflammatory tablets x 10		
8	Non-sterile gloves x 4 pair		
9	'Israeli Emergency bandage' or equivalent 150 mm x 1		
10	Skin stapler x 1		
11	SAM splints (or equivalent) – 450 x 110 mm x 1		
12	SAM finger splints (or equivalent) x 2		
13	Crepe bandage 100 mm x 2		
14	Paraffin gauze dressing 50 x 50 mm x 5		
15	Sea sickness tablets x 30		
16	Chloromycetin eye ointment x 1 tube		
17	Mupirocin (Bactroban) ointment x 15 g		
18	Gladwrap strips – 1 small roll (for burns)		
19	Silver sulfadiazine burn cream x 50 g		
20	Nitro lingual spray x 1		

Item	Coastal Kit Two	P	A
21	Penthrane 'Green Whistle' 1 x 3 ml bottle		
22	Oxycodone tablets (Oxycodone hydrochloride) 10 mg or equivalent x 20 tablets		
	Above 2 items kept in the same watertight container for the 5 separate items in Coastal Kit One		
23	Cephalexin 250 mg tablets x 20		
24	Loperamide tablets x 10 tablets		
25	Laxative tablets (e.g. Dulcolax 5 mg) x 10 tablets		

Items required outside the First Aid Kit	P	A
Sunscreen lotion		
Insect repellent		
Duct tape		
Electrical tape		
Batten material or similar, which may be cut to use as a splint		

