

MEDSURGE SCHOOLS AND INSTITUTIONAL First Aid Kit



technics for life



Medsurge Schools and Institutional First Aid Kit

First Aid Kits Tailor-Made for Schools and Education

Schools have a legal obligation to provide first aid to on-site personnel. Bumps, bruises, cuts and grazes are an everyday reality in educational environments due to the active nature of young children and the recreational activities they participate in. It is essential that you have the first aid supplies at hand to deal with these injuries. We have a range of kits that feature a variety of products to ensure that you are equipped to treat common ailments in classrooms, in the playground and even when out and about on school trips.

The First Aid kit can be used e.g. in first aid rooms. It can easily be mounted to a wall. It is secured to the wall simply with hooks and loops. It fits a large selection of bandages, which can be accessed even when it is on the wall. It can also be taken to the scene of an incident.

Bag Content



- Sprint x1
- Betadine Antiseptic Solution x1
- Crepe Bandage (15cm x 4m) x1
- Relieve Burn Gel x1
- Crepe Bandage (7.5cm x 4m) x3
- Drinking Water x1
- Sanitizer x1
- Trauma Shears x1
- Hand Sanitizer x1
- Digital Thermometer x1
- Pulse Oximeter x1
- Insect Repellent x1

- Sterile Gauze Swabs (10cm x 10cm) x2
- Sterile Gauze Swabs (5cm x 5cm) x5
- KN95 Face Masks Pack of 5

- Sterile Burn Dressing x2
- Paraffin Gauze Dressing x2

- Cool Pack x1
- Emergency Blanket x1
- Antibacterial Wet Wipes x1

- Assorted Plasters/Steroplast - 1 Pack
- Clear Bandages - 1 Pack
- Panadol Advanced - 1 Pack

Bag Content



- Combat Cravat x1
- CPR Mask x1
- Nitrile Gloves 5 pairs



Specifications

- Manufacturer: PAX
- Certificates: x
- Size: 37,5 x 18 x 29cm
- Color: Red
- Country of origin: Vietnam
- NATO Stock number: x
- Quantity: 1
- Weight: 1,25kg

ESSENTIALS OF FIRST AID

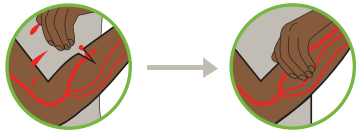
THE ESSENTIAL GUIDE TO FIRST AID

QUESTIONS

BLEEDING

FIRST THINGS FIRST:

- 1 Press on the wound to stop or slow down the bleeding.
- 2 If the bleeding is strong, call an ambulance.
- 3 Press on the wound until help arrives.



A person is pale, dizzy, and has chills. What does this mean?

This means the person is going into shock. You should call an ambulance immediately.

Can I contract an infection if I touch the blood of another person?

It is best to avoid contact with another person's blood. You can use medical gloves or a PE bag, or ask the injured person to press on the wound him/herself.

Should I wash the wound?

You may wash small cuts or bruises, but if the bleeding is significant, do not wash it - you will wash off the caked blood, and the bleeding will get stronger.

What should I do if there is a foreign object inside the wound?

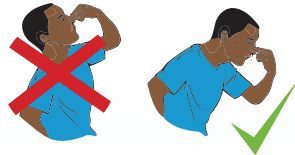
Do not take it out - it can make the bleeding worse. Instead, apply a tight bandage around the object.

WEAK BLEEDING



1. Rinse a small cut or a scratch with water.
2. Don't apply iodine to an open wound; instead, use hydrogen peroxide.
3. Apply a bandage.

NOSEBLEED

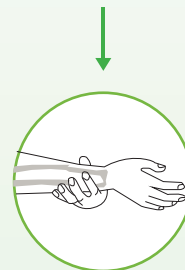


1. Press down the wings of the nose and advise the injured person to bend over and breathe through their mouth.
2. Don't ask him or her to bend backward - blood may flow into the trachea or stomach and provoke vomiting.
3. If the bleeding doesn't stop within 15-20 minutes, call an ambulance.

FRACTURES

HOW TO TELL

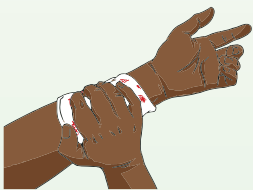
Swelling, bruising, or a sharp pain may appear; the bone might also lie in an unnatural position. In a worst case scenario, the limb may be deformed or have an open wound.



WHAT TO DO IN CASE OF A CLOSED FRACTURE

1. Ask the person to support the injured limb with his/her hand, and place the limb on a cushion or several layers of clothes to prevent excess movement.
2. Apply cold (a pack of ice) to the injured place.
3. If the injured limb is obviously deformed or is extremely painful, call an ambulance.
4. Make sure the injured limb is at rest until help arrives.
5. If there is no way to call an ambulance and you have to transport the injured person by yourself, apply a splint to the broken limb.

STRONG BLEEDING



1. Press on the wound with gauze tissue or bandage, but you can also use your hand, shirt, towel, or any other bandaging.
2. If blood soaks through the bandage, don't take it off and apply another one right above it to keep the pressure.
3. Remember: a tourniquet is applied only to stop strong, arterial bleeding.

ARTERIAL BLEEDING



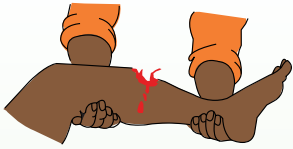
1. Firstly, press directly on the wound, apply a tight bandage, bend the injured limb at the joint as much as you can, and press the artery down with your finger.
2. Only if none of the above helps, apply a tourniquet above the wound and over the clothes. If the victim is not wearing long clothes, put something between the tourniquet and the skin.
3. It's essential to mark the time you applied the tourniquet. You need to tell this information to the doctors.

WHAT TO DO IN CASE OF AN OPEN FRACTURE

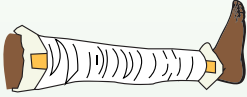
1. First stop the external bleeding.
2. Secure the place of the bone fracture with splints or anything else at hand (a branch or a plank) over the clothes.
3. Call an ambulance.
4. Apply a loose aseptic bandage to the wound.
5. Place something cold (a pack of ice) on the bandage above the wound.
6. Wrap the injured person in a warm blanket or warm clothes



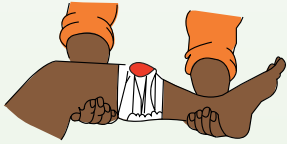
HOW TO APPLY A SPLINT



A splint is applied so that the joints above and below the place of the fracture is secured.



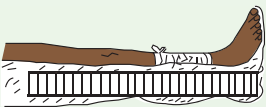
You can use sticks, planks, rulers, bars, cardboard, plywood, etc. as a splint. If the fracture is closed, the splint can be applied over the clothes.



If the fracture is open, you shouldn't apply the splint to places where bone fragments are visible.



The whole length of the splint (except the fractured area itself) should be fixed to the limb with a bandage, but not too tight so as not to hinder the blood flow. In the case of a lower limb fracture, place a splint on both sides.



If there is nothing to use as a splint around, you can secure an injured leg by bandaging it to the other one, and an injured arm can be bandaged to the body.



IMPORTANT!

If the bone lacks unnatural or you see a shift in it do not attempt to set it yourself

SPRAINS AND DISLOCATIONS

HOW TO TELL

A sharp pains, swelling, of a bruise may appear around the joint or along the muscle. It a joint is damaged difficulty moving may occur



WHAT TO DO

1. Ensure a resting position persuade the injured person not to move the limb, and do not by to straighten it
2. Apply & bag of ice wrapped in a towel to the injured area for no more than 20 minutes.
3. Put the injured limb above the body if it doesn't cause addition pain,
4. Give the person a painkiller.
5. Go to an injury care center and take an x-ray or call an ambulance if the Injured person can't walk or the pain is too sharp.

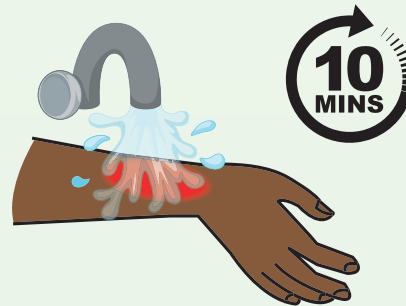
IMPORTANT!

- If you have the slightest suspicion that the injured person has a closed fractures, treat it as so (see 'Fractures')
- Do not try to set the sprain yourself.

BURNS

WHAT TO DO

1. Cool the burned area in cold water for at least ten minutes.
2. Apply a loose sterile bandage to the burned area, or if the burn is large, cover it with a clean cloth for example, a bed sheet.
3. Call an ambulance if necessary. Always call an ambulance if a child has burned him or herself, if the burned area starts to cover with blisters, if there are several body parts damaged, or if you can see the underlying tissue clearly.



IMPORTANT!

- Don't apply oil or butter to the burn as it retains heat and will only do more harm.
- Don't use ice to cool the burn - it may damage the skin.
- Don't apply a band-aid to the burn as it sticks to skin and may add to the injury.

BLOCKED AIRWAYS

HOW TO TELL

The injured person is suffocating (panting and wheezing), is unable to speak, his or her skin suddenly turns red, and they may collapse.

WHAT TO DO

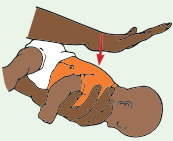
If the person suffocating is an adult or a child of more than one year of age

1. Stand behind the person and embrace him/her just above the midsection with both hands.
2. Bend the person forward.
3. Clench one hand into a fist and place it between the belly button and the sternum.
4. Wrap your fist with the other hand and abruptly push it into the stomach and upwards.
5. Repeat this move five times.
6. If the person is unconscious, sit on his/her thighs, and abruptly push both palms on the arch of the ribs.
7. Retrieve the foreign object with your fingers wrapped in a tissue or a bandage. Before taking out the object, you should turn the person's head to the side.



If the person suffocating is a child less than a year old

1. Place the child so that his/her head is lower than the body, holding the head and neck.
2. Hit with your fingers five times between the child's shoulder blades and push five more times in the center of the ribcage.
3. The center of the ribcage of a child under one year is between the nipples.
4. Repeat these actions until the stuck object falls out or the child begins to cry.



HEART ATTACK

HOW TO TELL

Pressing pain behind the breastbone, a spotty, unpleasant feeling in the arms, neck, jaws, back, or stomach, shallow breathing, rapid and arrhythmic heartbeat, weak and rapid pulse as measured in the limbs, cold, sticky, and abundant sweating, nausea, and sometimes vomiting.

HOW TO TELL

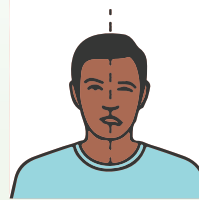
1. Call an ambulance immediately.
2. Measure the blood pressure if you can, as well as heart rate and pulse.
3. Advise the person to take an aspirin tablet if they are not allergic, and point out that he/she must chew on it.
4. Find out if the person has any medications prescribed by his/her doctor.
5. Make sure the person is sitting comfortably in an armchair or a bed with a raised headrest.
6. Calm the person down and encourage him/her while waiting for the ambulance to arrive.

STROKE

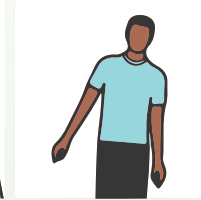
HOW TO TELL

A sudden fit of weakness or numbness in an arm or leg, speech disorder and hampered speech understanding, dizziness, movement coordination disorder, sharp pain in the head, fainting, and face distortion.

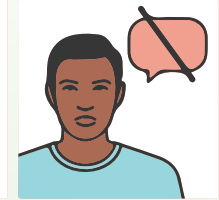
A simple test for a stroke



Can they smile? Is a corner of their mouth pointing downward?



Can they raise both arms at once? Is one arm is weak?



Can they articulate their own name?

WHAT TO DO

1. Call an ambulance.
2. Lay the person on high pillows, putting them under his/her shoulders, shoulder blades, and head.
3. Open a window to give the person enough fresh air.
4. Unbutton a tight shirt collar, unbuckle the belt, strip the person of any tight-fitting clothes.
5. Measure the person's blood pressure.
6. If you suspect the person may vomit, turn his/her head to the side.
7. Talk to the person calmly and try to encourage him/her.

HEAT STROKE

HOW TO TELL

Sweating stops, increased body temperature (up to 104°F or 40°C), the skin is pale and hot, lowered blood pressure, weak and rapid pulse, convulsions, vomiting, diarrhea, and fainting.

WHAT TO DO

1. Call an ambulance.
2. Carry the person to a cooler place.
3. Ensure there is enough fresh air.
4. Strip the person or unbutton tight-fitting clothes.
5. Wrap the person in a cool, moist cloth or put cool, wet towels onto his/her head, neck, and crotch.
6. Let the person drink some cool mineral or slightly salted water.
7. Cool down the person further if necessary, applying ice or a cold object wrapped in a cloth to his/her wrists, elbows, crotch, neck, and armpits.



HYPOTHERMIA

HOW TO TELL

The skin is pale and cold to the touch. The person may not shiver, but breathing is slow, and his/her body temperature is below 95°F or 35°C.

WHAT TO DO

1. Call an ambulance.
2. Carry the person to a warmer place and wrap him/her in a blanket.
3. Give the person something hot to drink, but no caffeine or alcohol. Offer them some high-calorie food.

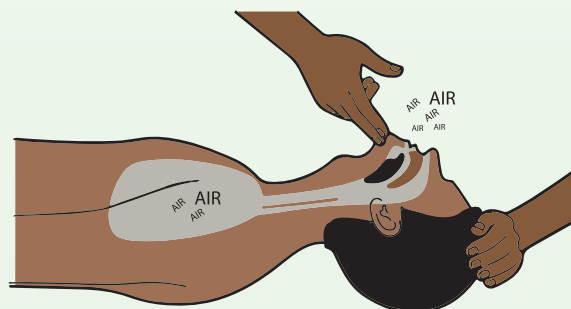
IMPORTANT!

If there are signs of a freeze burn (loss of sensitivity, skin whitening, or a tingling sensation), do not rub the frozen area with snow, oil, or petroleum jelly as this can damage the skin. It is best to wrap such an area in additional layers.

HEAT STROKE

WHAT TO DO

1. Turn the person on their side so that he/she doesn't choke if they vomit.
2. Throw back the person's head so the tongue can move forward and unblock the air passage, as shown in the picture.
3. Call an ambulance.
4. Listen closely for the person's breath.
5. If he/she doesn't breathe, start CPR.



Traumatic brain injury often occurs as a result of a severe sports injury or car accident. Immediate or delayed symptoms may include confusion, blurry vision and difficulty concentrating. Infants may cry persistently or be irritable.

Cardiopulmonary resuscitation (CPR)

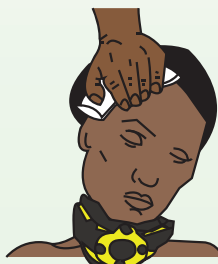
CPR is an emergency procedure that combines chest compressions often with artificial ventilation in an effort to manually preserve intact brain function until further measures are taken to restore spontaneous blood circulation and breathing in a person who is in cardiac arrest. It is recommended in those who are unresponsive with no breathing or abnormal breathing.

HEAD INJURY



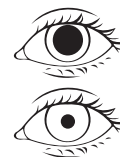
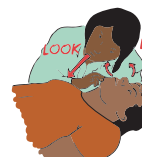
WHAT TO DO

1. Stop the bleeding, press a sterile tissue firmly to the wound, and hold it there until the head.
2. Call an ambulance
3. Monitor the pulse, no pulse, breath, the bleeding stops. Then apply a cold pack or ask someone else to do it. breathing, and reaction of pupils to light.
4. If there is or pupil reaction, start doing CPR.
5. When the breathing and heartbeat have restored, steady the person on the side, wrap him/her up, and make him/her warm.



DOING CPR

HOW TO KNOW WHEN TO DO ASSISTED BREATHING



1. Check the pulse in the carotid artery. If there is a pulse, the person is alive.

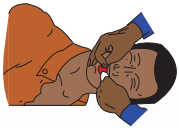
2. Listen to the person's breath, and see if the breastbone moves or not. If there is movement, the person is alive.

3. Check the reaction of their pupils to light by lifting both eyelids. If the pupils contract, the person is alive.

IMPORTANT!

You should begin resuscitation only if all three of the above signs are missing.

ASSISTED BREATHING PROCEDURE



1. Wrap your fingers in a cloth or gauze and remove blood, mucus, and any other foreign matter from the person's mouth with a circular motion.

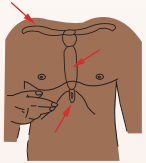


2. Throw back the injured person's head by lifting his/her chin and holding the back of his/her neck. Do not throw back the head if a broken neck is suspected!

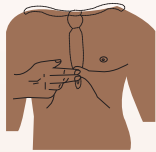


3. Press on the person's nose with your index finger and a thumb and breathe out slowly to the full capacity of your lungs into the person's mouth, then wait two or three seconds for a passive breath out.

HOW TO DO CARDIAC COMPRESSIONS



1. Locate the xiphoid process as shown in the picture.



2. Place the point of compression at two horizontal fingers above the xiphoid process and at the center of the vertical axis.



3. Put the butt of your hand on the point of compression.



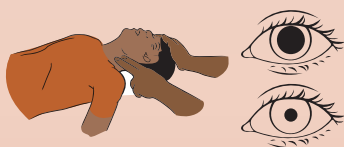
4. Do the compressions along the vertical line that connects the breastbone with the spine. Make the movements fluid, do not hurry, and press with your whole upper body. The compressing depth of the breastbone should be no less than 1-2 inches (3-4 cm) with the frequency of compressions at 100-110 pushes per minute.



5. Alternate two assisted breaths with every 15 compressions.



6. Compressions to infants are done with the front of the index and middle fingers; to adolescents with an open palm of one hand; in adults, the hands are propped on the base, the thumb turned in the direction of the head or the feet of the injured person, fingers lifted and not touching the breastbone.



7. Monitor the pulse in the carotid and the pupil reaction to light to check if your resuscitation was successful.

DROWNING

WHAT TO DO

1. Make sure there is no threat around and drag the drowned person out of the water.
2. Lay the person on your knee and let the water flow from their airway.
3. Clear the person's mouth from any foreign matter, e.g. mucus, vomit, etc., and call an ambulance immediately.
4. Check the pulse of the carotid arteries, their pupil's reaction to light, and breathing.

5. If there is no pulse, pupil reaction, or breath, then start doing CPR and continue until the ambulance arrives or the person starts breathing and his/her heart is beating.



6. When the breathing and heartbeat are restored, turn the person on his/her side, wrap him/her up and make him/her warm.

IMPORTANT!

- If you suspect a broken spine, drag the drowned person out of the water on a plank or shield.
- Don't waste your time emptying the lungs and stomach from water if the carotid artery shows no pulse.
- The resuscitation should be done even if the person has spent more than 5-20 minutes underwater.

BITES

INSECT BITES

1. Look closely at the place of the bite, and carefully remove the sting if you find it.
2. Apply a cold pack to the place of the bite or sting.
3. Call an ambulance if the person has an allergy or anaphylaxis.

SNAKE BITES

1. If the person has been bitten by a venomous snake, immediately call an ambulance.
2. Inspect the place of the bite.
3. Apply some cold or ice to the bite.
4. Secure the bitten limb below the heart level.
5. Calm the person down and do not let him/her walk unless absolutely necessary.

IMPORTANT!

- Never attempt to incise the place of the bite and suck out the venom.
- Symptoms of a snake bite: nausea, vomiting, tingling sensation in the body - moderate severity, shock, coma, paralysis - severe poisoning.

EMERGENCY CONTACTS

Hospital Emergency Contacts

The Nairobi Hospital

Argwings Kodhek Road
P. O Box 30026 00100
020 2845000, 020 2714400, 0722 204 114/5/6/7,
020 2713662, 020 2728003
inquiry@nbihosp.org, admissions@nbihosp.org

The Aga Khan University Hospital

3rd Parklands Avenue/ Limuru
P. O Box 30270 00100 Nairobi
020 3740000, 020 374 2531, 0711092000,
0722204146 020 3741749
akhn@akhskenya.org

The MP Shah Hospital

Shiva Chi Road Parklands
P. O Box 14497-00800
020 3742763-7
020 3746177
info@mpshahhosp.org

The Mater Hospital

South B Dunga Road
P. O Box 30325-00200
020 531197/9, 020 536572/7, 0724531199,
0722828629

The Kenyatta National Hospital

Hospital Road Off Ngong Road
P. O Box 20723-00202
020 2726300, 2726450/1-5, 2726550, 0738606409,
020 272 5272
cpro@knh.or.ke, knhadmin@knh.or.ke

The Mathare Hospital

Thika Road
P. O Box 40663
020 3763315/7, 3763922, 07176943399, 0731649846

The Gertrude Garden Children's Hospital

Muthaiga Road
P.O Box 42325-00100
3763477, 020 720 6000, 020 244530/1, 0722898949,
info@gerties.org

Kenya Police Contacts

Kenya Police Headquarters (Vigilance House) -
2240000/0726-035455/020341411

Anti-terrorist Police Unit - 020-2724406

Highway Patrol Unit - 020-8074602

Nairobi County HQ - 999(20)/2724154

Ambulance Contacts

General - 112/999

AMREF Flying Doctors Ambulance Service in Kenya -
020-3315454/5

AAR Emergency Ambulance in Kenya - 020-2717374

Avenue Rescue Services in Kenya - 020-3743858

Kenya Red Cross Society Ambulance in Kenya -
020-3950000

Emergency Plus Medical Services in Kenya -
0700395395

Phoenix Aviation Limited Ambulance Service in Kenya-
020-6005837

Intensive Care Air Ambulance Limited in Kenya -
020-6004945

Road Safety Network Ambulance Service in Kenya -
020-2212699

St John Ambulance in Kenya - 020-2210000

Fire Station Contacts

Nairobi Fire Service, Headquarters

Tom Mboya Street
020-2234559/0771637161
Info@nairobi.go.ke

NOTES

Packed by: _____

Date of Use _____

ITEM USED: _____

REMARKS:

REMARKS:



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