



MSN 1905 (M+F)

SHIPS' MEDICAL STORES

Application of the Merchant Shipping and Fishing Vessels (Medical Stores) Regulations 1995 (SI 1995/1802) and the Merchant Shipping and Fishing Vessels (Medical Stores) (Amendment) Regulations 1996 (SI 1996/2821)

Notice to all Shipowners, Agents, Masters, Skippers of Fishing Vessels and all Seafarers

This notice replaces MSN 1768 (M+F) and corrigendum. It rescinds MGN 625 (M+F). See MIN 659 (M+F) for transitional arrangements

Summary

This Notice sets out the minimum requirements for medical stores for UK ships under the above Regulations and covers:

- The definitions of categories of vessel for the purposes of the Regulations
- Medical Stores required and recommended additional equipment for workers **Annex 1**
- Additional requirements for passenger vessels
- Doctor's Bag **Annex 2**
- First Aid Kits **Annex 3**
- Advice on medicines to be carried on ships
(including ferries) transporting dangerous substances **Annex 4**
- Medical guides to be carried and
Telemedical Advisory Services **Annex 5**
- Guide to use of medicines **Annex 6**
- Special Requisition form for obtaining controlled drugs **Annex 7**
- Completion of the controlled drugs register **Annex 8**



1. Introduction/ Background

1.1 The United Kingdom implemented the requirements of Council Directive 92/29/EEC which sets out the minimum standards for ships' medical stores, by introducing the Merchant Shipping and Fishing Vessel (Medical Stores) Regulations 1995, as amended by the Merchant Shipping and Fishing vessel (Medical Stores) (Amendment) Regulations 1996 (referred to as "the Regulations"). In 2019, the new Commission Directive (EU) 2019/1834, updating the technical requirements of the earlier directive, was adopted and the UK took an active part in that review. The Regulations become part of UK retained law on the UK's exit after 1 January 2021. This Notice implements the updated requirements for medical stores which reflect developments in medical treatments. It also reflects latest advice on treatment in the 23rd edition of the Ship Captain's Medical Guide (published October 2019).

2. Vessel Categories

2.1 The categories of vessels and the consequent requirements for medical stores and equipment areas are set out in the Regulations. The vessel categories are:

Category A A seagoing ship (including fishing vessels) with no limitation on length of voyage.

Category B Seagoing or sea-fishing vessels making trips of less than 150 nautical miles from the nearest port with adequate medical equipment. This category is extended to seagoing or sea-fishing vessels which make trips of less than 175 nautical miles from the nearest port that has adequate medical equipment, and which remain continuously within range of helicopter rescue services.

Category C Harbour vessels, boats and craft staying very close to shore or with no cabin accommodation other than a wheelhouse.

Lifeboats and life-rafts are also required to carry Category C stores. Category C Stores for liferafts are generally purchased in sealed units, which should be replaced as a unit if unused at the expiry date. Other Category C kits may be replenished as items are used (see MGN 524 (M+F)).

The minimum contents of a Category C kit are designed to provide for immediate care where a minor delay is considered acceptable. For some vessels operating within Category C limits, the machinery on board or the type of operation may give rise to risks which this kit is not adequate to treat. If a risk assessment shows that because of the nature of the work on board, or the type or pattern of operation, the range of stores required in a Category C kit may not be adequate to respond to likely medical requirements on board then the owner or master should consider whether a vessel operating less than 60 miles from a safe haven should carry some or all of the additional items marked "RA" (for risk assessment) in Column 4C in Annex 1.

A copy of the risk assessment should be retained on board to provide evidence that the Category of stores and any variations from the recommended quantities of medicines are justified in accordance with Regulations made under the Merchant Shipping Act 1995.

The UK interprets the phrase "**very close to shore**" as meaning that a vessel operating more than 60 nautical miles from a safe haven would not be operating very close to shore. Notwithstanding this interpretation, it is for owners and skippers, for the purpose of complying with the Regulations, to assess whether, in respect of voyages in which the vessel goes less than 60 nautical miles out to sea, the vessel is "very close to shore".

2.2 The following vessels are **excluded** from the requirements of this Notice:

- **inland navigational vessels** defined in the Regulations as those vessels plying on waters of Categories A to C as defined in Merchant Shipping Notice MSN 1837(M)



Amendment 2. Vessels in Category D waters should carry a Category C medical kit as they operate close to shore.

- **warships**
- **pleasure vessels used for non-commercial purposes and not manned by professional crews**, defined as follows:
 - (a) any vessel which at the time it is being used is:
 - (i) in the case of a vessel wholly owned by –
 - (aa) an individual or individuals, used only for the sport or pleasure of the owner or the immediate family or friends of the owner; or
 - (bb) a body corporate, used only for sport or pleasure and on which the persons on board are employees or officers of the body corporate, or their immediate family or friends; and
 - (ii) on a voyage or excursion which is one for which the owner does not receive money for or in connection with operating the vessel or carrying any person, other than as a contribution to the direct expenses of the operation of the vessel incurred during the voyage or excursion; or
 - (b) any vessel wholly owned by or on behalf of a members' club formed for the purpose of sport or pleasure which, at the time it is being used, is used only for the sport or pleasure of members of that club or their immediate family, and for the use of which any charges levied are paid into club funds and applied for the general use of the club, where, in the case of any vessel referred to in paragraphs (a) or (b), no other payments are made by or on behalf of users of the vessel, other than by the owner; and in this definition "immediate family" means, in relation to an individual, the spouse or civil partner of the individual, and a relative of the individual or the individual's spouse or civil partner; and "relative" means brother, sister, ancestor or lineal descendant;
- **tugs operating in harbour areas**, - as defined in the Regulations "tug" means a vessel constructed solely for the purpose of, and normally used for providing external motive power to, floating objects or vessels.

3. Medical Stores Requirements

3.1 The requirements and recommended stores are set out in the attached schedules.

- | | |
|---------|--|
| Annex 1 | Requirements for Categories A, B & C vessels and recommended additional equipment for workers |
| Annex 2 | Additional requirements for passenger ships – Doctor's Bag |
| Annex 3 | First Aid Kits |
| Annex 4 | Advice on medicines to be carried on ships (including ferries) transporting dangerous substances |

3.2 The items in Annex 2 could also be used as a reference tool for a portable emergency medical kit using stores available on board whether or not a Doctor's Bag is required.

3.3 A checklist of all the medicines and equipment required by this MSN should be kept on board and reviewed at least annually by a competent person. The MCA does not specify who



may be competent to carry out the annual inspection of the stores. The purpose of the inspection is to ensure that the medical stores are complete, with no missing items, that all medicines are in good condition and in date. The owner or master may designate a competent person to do this, and it is good practice for this to be someone other than the ship's officer who has responsibility for the medical stores.

4. Medicines for Ships carrying Dangerous Cargoes

4.1 Ships, including ferries, carrying dangerous cargoes or their residues, should comply with the International Maritime Dangerous Goods (IMDG) Code and the guidance in the IMO/WHO/ILO Medical First Aid Guide for use in accidents involving Dangerous Goods (MFAG) (Current Edition) and the guidance in Annex 4.

5. Medical Guides and Telemedical Advisory Services

5.1 The Ship Captain's Medical Guide should be referred to for help with diagnosis and treatment. This Notice should be kept with the current edition of the Guide. Telemedical advice should be sought as appropriate (See Annex 5).

6. Ships' Doctors

6.1 All UK registered ships which carry more than 100 persons on an international voyage of 72 hours duration or more must carry a medical practitioner. See MSN 1841 (M). A ship's doctor may determine their own additional medical supplies, but this does not replace the carriage of the stores listed in this Notice (other than Annex 2).

7. Responsibilities of the Owner, Employer and the Master

7.1 Responsibility of the owner

The owner of the vessel is responsible for the cost of any medicine and medical equipment, including the periodic replacements in order to keep stocks of any required medicines in date and immediately useable.

Under health and safety legislation, seafarers must be trained to carry out their onboard duties. The owner must therefore ensure that the Master and any person in charge of medical treatment have the appropriate level of training to use the medical stores and equipment carried under Annex 1. This includes any additional training required to use RA items (see section 2 above).

7.2 Responsibility of the seafarer's employer

The Merchant Shipping (Maritime Labour Convention) (Minimum Requirements for Seafarers, etc.) Regulations 2014 (S.I. 2014/1613) Part 9, and the Merchant Shipping (Work in Fishing Convention) Regulations 2018 (S.I. 2018/1106) Part 6 specify, among other things, that if a person, while employed in a UK ship receives any surgical, medical, dental or optical treatment (including repair or replacement of any appliance) any costs of this treatment must be paid by the shipowner/fishing vessel owner. See MGN 482(M) and MGN 586(F).

7.3 Responsibility of the Master

Where a United Kingdom ship does not carry a doctor among the seafarers employed in it, Section 53 of the Merchant Shipping Act 1995 holds the Master responsible for ensuring that any necessary medical attention given on board ship is given either by him, or under his supervision, by a person appointed by him for that purpose. The Master is also responsible for the management of the medical supplies and ensuring that they are maintained in good condition, although the function may be delegated to a trained member of the crew.



7.4 Health & Safety Responsibility

Ship operators, employers and the Master all have a duty of care to protect the health and safety of workers, so far as reasonably practicable. This responsibility includes taking steps to minimise the risk of infection and ensuring appropriate preventative measures such as immunisation are taken.

More Information

Seafarer Safety & Health
Maritime and Coastguard Agency
Bay 2/17
Spring Place
105 Commercial Road
Southampton
SO15 1EG

Tel: 020381 72835
e-mail: medical@mcga.gov.uk

Website Address: www.gov.uk/government/organisations/maritime-and-coastguard-agency

General Enquiries: infoline@mcga.gov.uk

Published: March 2021
Please note that all addresses and
telephone numbers are correct at time of publishing

© Crown Copyright 2021

Safer Lives, Safer Ships, Cleaner Seas



MEDICAL STORES FOR VESSEL CATEGORIES A, B & C

(see definitions on Page 2 & 3 of the Notice)

For any items marked the specified quantity is considered sufficient regardless of crew size.*

Owners and operators may, on the advice of a qualified medical practitioner or pharmacist, determine whether any additional or different quantities, products or equipment are required, taking into account the factors identified below and any other relevant consideration: the nature of the voyage and in particular ports of call, nature of the cargo, destination, number of crew, duration of voyage and type of work to be carried out during the voyage. For example, anti-malarial drugs may be appropriate if a ship is operating in tropical areas (see MGN 652 (M+F) for guidance on Prevention of Infectious Disease at Sea).

In this Annex columns are as follows:

- Column 1** Is the reference number in the Annexes to the EC Directive 92/29 as amended by 2019/1834. This is included for identification of treatments when seeking or receiving telemedical advice from any European Community Member State.
- Column 2** The list of treatments in column 2 of the tables in Annex 1 is mandatory.
- Column 3** Is the recommended medicine and dosage strength which MCA considers best complies with the mandatory treatment. As these are not statutory, equivalents may be substituted on the advice of a qualified medical practitioner or pharmacist, provided they are satisfied that an equivalent level of treatment is assured.
- Column 4** Is the recommended quantity of medicine / equipment which MCA considers sufficient to provide treatment for 10 workers. A higher or lower quantity may be carried based on a risk assessment, in consultation with a pharmacist. The risk assessment may consider (for example) the operating area and pattern of the vessel, including distance from shore, and the likelihood of more than one crew member requiring the same treatment. A reduced quantity should only be carried where the risk assessment demonstrates that there is no reduction in protection for the crew as a result. Recommended quantities (Column 4) will not always reflect standard packs. In this case the recommendation is for the nearest available dispensing sales pack above the minimum recommended quantity. This will ensure the patient information leaflet is enclosed. Category C kits in lifeboats and liferafts are supplied as sealed kits, items in other Category C kits may be replenished as and when necessary.



Here below is an example of how to read the Annex:

So, for example, (ref no 3 (a) of the table):

1	2	3	4		
Ref. no.	Statutory Treatment Requirements	Recommended medicine and dosage representing best practice	Recommended quantity for 10 workers		
			A	B	C
3 (a)	Anti-pyrexia, analgesics, and anti-inflammatories	i) Paracetamol 500mg tablets	100	50	50
		ii) Ibuprofen 400mg tablets or Naproxen 250mg tab	100	50	50
		iii) Diclofenac sodium 100mg supp	56	28	28
	MANDATORY	RECOMMENDED	RECOMMENDED		

All vessels of Category A, Category B or Category C **must** carry analgesics, anti-pyretics and anti-inflammatory treatments (column 2).

Best practice for Category C vessels is to carry two types of medicine (column 3) to meet this requirement; paracetamol and ibuprofen or Naproxen tablets are **recommended**.

On a Category A and B vessel, a third type (Diclofenac sodium suppositories) is also recommended.

The dosages are recommended.



1	2	3	4			
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers			
			A	B	C	
1. Cardiovascular						
(a)	Cardiovascular Sympathomimetics	i) Adrenaline / Epinephrine injection BP 1.0mg/1ml inj ii) (Optional) Adrenaline auto-injector (0.3mg or 0.5mg)	10*	10*	-	
(b)	Anti-angina preparations	i) Glyceryl Trinitrate 400mcg/dose 200 dose sublingual spray	1	1	1*	
		ii) Metoprolol 50mg tab or Atenolol 25mg tab	56* 56*	28* 28*	- -	
(c)	Diuretics	i) Furosemide 40mg tab	28*	28*	-	
		ii) Furosemide 20mg/2ml inj	10*	-	-	
(d)	Anti-haemorrhagic medicines, including uterotonics if there are women onboard.	i) Tranexamic Acid 500mg tab	60*	60*	-	
		ii) Tranexamic Acid 500mg/5ml inj	5*	-	-	
		If there are women on board:				
		iii) Phytomenadione (Vitamin K) 2mg/0.2ml inj (paediatric)	5*	5*	-	
		iv) Ergometrine 500mcg and Oxytocin 5 units 1ml inj	5*	5*	-	



1	2	3	4		
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers		
			A	B	C
(e)	Antihypertensive	i) Amlodipine 5mg tab ii) Atenolol 25mg tab or Metoprolol 50mg tab	56* Use 1b(ii)*	28* Use 1b(ii)*	- -
(f)	Antiplatelet drugs	i) Aspirin 300mg tab ii) (Optional) Clopidogrel 75mg tab	32* 28*	32* -	RA 32* -
2. Gastro intestinal system					
(a)	Medicines for indigestion, reflux, gastric/duodenal ulceration Antacids	i) Lansoprazole 30mg tab or Ranitidine 150mg tab (availability issues) ii) Proprietary alginate antacid of choice	28 60 As required	28 60 As required	- - -
(b)	Anti-emetics	i) Ondansetron 4mg tab or Domperidone 10mg tab ii) Prochlorperazine maleate 3mg buccal tab iii) Cyclizine 50mg/1ml inj or Promethazine hydrochloride 25mg/1ml inj	60* 60* 50* 10* 10*	30* 30* 50* 5* 10*	- - - - -



1	2	3	4		
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers		
			A	B	C
(c)	Laxatives	i) Lactulose 10g/15ml or Magnesium hydroxide 79mg/1ml	500ml*	300ml*	-
		ii) Bisacodyl 5mg tab	500ml *	200ml*	-
		iii) Glycerol 4mg suppository	60*	20*	-
			12*	-	-
(d)	Anti-diarrhoeal treatment	i) Loperamide 2mg cap	30	30	30
(e)	Haemorrhoid treatment	i) Proprietary preparation	As required	As required	-
3. Analgesics Anti-Spasmodics					
(a)	Antipyrexia, analgesics, anti-inflammatories	i) Paracetamol 500mg tab	100	50	50
		ii) Ibuprofen 400mg tab	100	50	50
		or Naproxen 250mg tab	56	28	28
		iii) Diclofenac sodium 100mg supp	10*	10*	-



1	2	3	4		
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers		
			A	B	C
(b)	Strong analgesics	i) Codeine Phosphate 30mg tab or Tramadol 50mg tab	28 60	28 30	- -
		ii) a) Morphine Sulphate 10mg/1ml inj and b) Naloxone 400mcg/1ml inj (Naloxone must be carried if Morphine Sulphate is carried) or Tramadol 100mg/2ml inj	10 10	10 10	RA 10 RA 10
		iii) (Optional) Methoxyflurane 3ml inh	1	1	RA 1
(c)	Antispasmodics	i) Hyoscine butylbromide 10mg tab	56*	56*	-
4. Nervous System					
(a)	Anxiolytics	i) Diazepam 5mg tab	28*	28*	-
		ii) Diazepam 10mg/2ml inj	10*	-	-
(b)	Neuroleptics	i) Chlorpromazine hydrochloride 25mg tab or Haloperidol 5mg tab	28* 28*	28* 28*	- -
		ii) Chlorpromazine hydrochloride 25mg/1ml inj or Haloperidol 5mg/1ml inj	10* 10*	- -	- -



1	2	3	4		
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers		
			A	B	C
(c)	Seasickness	i) Cinnarizine 15mg tab or Promethazine teoclate 25mg tab	84	84	60
		ii) Prochlorperazine maleate 3mg buccal tab or Promethazine hydrochloride 25mg/1ml inj or Cyclizine 50mg/1ml inj	28	28	-
			Use 2b (ii)	Use 2b (ii)	-
			Use 2b (iii)	Use 2b (iii)	-
(d)	Anti-epileptics	i) Diazepam 5mg tab	Use 4a(i)	Use 4a(i)	-
		ii) Diazepam 10mg/2ml inj	Use 4a(ii)	-	-
		iii) Diazepam 10mg/2.5ml rectal solution tube	5*	5*	-
5. Allergy and Anaphylaxis					
(a)	Anti-histamines	i) Cetirizine 10mg tab or Loratadine 10mg tab	60*	30*	-
		ii) Chlorphenamine 10mg/1ml inj or Promethazine hydrochloride 25mg/1ml inj	60*	30*	-
			10*	5*	-
			Use 2b(iii)	Use 2b(iii)	-
(b)	Steroids	i) Prednisolone 5mg tab	56	56	-
		ii) Hydrocortisone 100mg inj (with diluent if required)	5*	1*	-



1	2	3	4		
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers		
			A	B	C
6. Respiratory System					
(a)	Asthma	i) Salbutamol 100mcg/dose 200 dose inh ii) Beclometasone 100mcg/dose 200 dose inh iii) Spacer compatible with both Salbutamol and Beclometasone	1 1 1*	1 1 1*	RA 1 - RA 1*
(b)	Anti-tussives	i) Proprietary cough mixture	As required	As required	-
	Row left blank intentionally				



1	2	3	4		
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers		
			A	B	C
7. Anti-infection					
(a)	Antibiotics, Antivirals, Antifungals	i) Co-Amoxiclav 500mg/125mg tab or Amoxicillin 500mg cap	42	21	-
		ii) Ciprofloxacin 500mg tab	42	21	-
		iii) Ciprofloxacin 500mg tab	20	10	-
		iii) Azithromycin 500mg tab or Erythromycin 500mg tab	3	3	-
		iv) Flucloxacillin tablets 500mg tab	28	28	-
		v) Doxycycline 100mg cap	28	28	-
		vi) Doxycycline 100mg cap	16	8	-
		vii) Metronidazole 400mg tab	21	21	-
		viii) Metronidazole suppositories 1g	10*	-	-
		ix) Co-Amoxiclav 1.2g inj	10*	-	-
		x) Ceftriaxone injection 1g inj	10*	-	-
		x) Aciclovir 400mg tab	56*	-	-
		xi) Fluconazole 50mg tab or Terbinafine 250mg tab	14*	7*	-
			14*	7*	-
(b)	Anti-parasitics	i) Mebendazole 100mg tab	6*	6*	-



1	2	3	4		
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers		
			A	B	C
(c)	Anti-tetanus vaccines and immunoglobulin	i) Tetanus vaccine (DTP or other combinations are acceptable) 0.5ml inj ii) Tetanus immunoglobulin 250iu inj	5* 1*	1* -	- -
(d)	Anti-malaria medicines – requirement for inclusion in the medical stores is dependent upon operational area	For prophylaxis, and for treatment of active disease. Dependent upon operational area and expert advice (See MGN 399).	As required	As required	-
8. Compounds promoting rehydration, caloric intake and plasma expansion					
	WHO Generic Formula	i) Oral Rehydration Salts, as per current WHO formula sachet or Proprietary equivalent-sachet	20 20	20 20	- -
9. Medicines for external use					
(a)	Skin Medicines				
	Antiseptic solution	i) Proprietary solution of choice 250ml Chlorhexidine-based preparation or Proprietary sterile wipes - pack of choice Chlorhexidine-based preparation	1* 1*	1* 1*	1* 1*
	Antibiotic ointments	i) Aciclovir 5% cream 2g ii) Fusidic acid 2% cream/ointment 15g or Mupirocin 2% cream/ointment 15g	1 1 1	1 1 1	- - -



1	2	3	4		
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers		
			A	B	C
	Anti-inflammatory (NSAID) and analgesic ointments	i) Hydrocortisone 1% cream 15g ii) Proprietary NSAID gel/ointment 30g	2 As required	- As required	- As required
	Anti-fungal skin treatments	i) Miconazole nitrate 2% cream 30g or Terbinafine 1% cream 30g If there are women on board: ii) Clotrimazole 500mg pessary	2 2	1 1	- -
	Burn treatments	i) Silver sulfadiazine 1% cream 50g ii) Proprietary antiseptic cream	2 -	1 -	- 1
	Miscellaneous skin treatments	i) a) Permethrin 5% cream 30g and b) Permethrin 1% Cream Rinse or Malathion 0.5% 200ml ii) Proprietary barrier cream ii) Magnesium sulphate paste 50g	2* 2* 2* 1* 1*	- - - - -	- - - - -
	Row left blank intentionally				



1	2	3	4		
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers		
			A	B	C
(b)	Eye Medicines				
	Antibiotic and anti-inflammatory treatments	i) Chloramphenicol 1% ointment 4g The following eye drops are recommended in single dose form:	4	1	-
	Steroid drops	ii) Dexamethasone 0.1% 0.5ml	20*	20*	-
	Anaesthetic drops	iii) Tetracaine 0.5% 0.5ml	20*	20*	-
	Hypotonic miotic drops	iv) Pilocarpine 2% 0.5ml	20*	20*	-
	Diagnostic drops	v) Fluorescein Sodium 1% 0.5ml or Fluorescein strips	20* 20*	20* 20*	- -
	Sterile saline solution for eyewash	vi) Sterile saline solution for eyewash 20ml	20	20	-
(c)	Ear/Nasal Medicines				
	Antibiotic and anti-inflammatory treatments	i) Combined antibiotic and steroid ear drops 10ml	2*	1*	-
	Nasal drops or spray	i) Xylometazoline 0.1% 10ml or Oxymetazoline 0.05% 15ml	1* 1*	1* 1*	- -
(d)	Medicines for oral and throat infections				
	Antiseptic mouthwash	i) Proprietary antiseptic mouthwash 250ml	1	1	-
(e)	Local anaesthetics				
	Local anaesthetic for subcutaneous injection	i) Lidocaine hydrochloride 1% 5ml inj	10*	10*	-



1	2	3	4		
Ref. No.	Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers		
			A	B	C
	Local anaesthetic-for topical application	ii) Lidocaine 2% and chlorhexidine 0.25% in lubricant gel (in applicator)	1	-	-
	Dental anaesthetics and antiseptic mixtures	i) Proprietary anaesthetic gel	1	1	-
		ii) Oil of Cloves 10ml	1*	1*	-
(f)	Water for injection	i) Water for injection 10ml inj	40	-	-



MEDICAL EQUIPMENT

(For any items marked* the specified quantity is considered sufficient regardless of crew size)

<i>Statutory treatment requirements</i>	<i>Recommended medicine and dosage, representing best practice</i>	<i>Recommended quantity for 10 workers (unless*)</i>		
		A	B	C
1. Resuscitation Equipment				
Equipment for mouth-to-mouth resuscitation and airway equipment	i) Bag/valve/mask (BVM); supplied with large, medium and small masks	1*	1*	-
	ii) Pocket face mask with valve and oxygen inlet	1*	1*	1*
	iii) Oropharyngeal airway sizes 3 and 4	1 of each*	1 of each*	-
	iv) (Optional) Nasopharyngeal airways 6mm and 7mm internal diameter	1 of each*	1 of each*	-



Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers (unless*)		
		A	B	C
Appliance for the administration of oxygen	<p>Oxygen giving set comprising the following:</p> <p>i) Oxygen reservoir minimum 400 litres including: 1 pressure regulator 1 flow meter unit 1-15 litres/min</p> <p>And (optional)</p> <p>Oxygen concentrator with flow capacity of 8-10 litres/min</p> <p>ii) 1 set of oxygen tubing</p> <p>iii) 5 x medium concentration disposable oxygen masks</p> <p>iv) 5 x high concentration disposable non-rebreather oxygen masks with reservoir</p> <p>Each part constructed so that it can only be assembled in the correct manner</p>	1	1	-
Mechanical aspirator to clear upper airway	Manual aspirator and two suction catheters	1*	1*	-
2. Dressing and suturing equipment				
Tourniquets	Trauma tourniquet	1*	1*	RA 1*



Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers (unless*)		
		A	B	C
Skin wound repair	Skin stapler disposable with 15 staples and Staple remover	1	1	-
	or	1	1	-
	Non-absorbable sutures swaged to a half circle needle sterile size 3.0 and	2	1	-
	Absorbable sutures swaged to a half circle needle sterile size 3.0	2	1	-
Wound skin adhesive	Skin adhesive 0.5ml single use	1	1	-
Adhesive elastic bandage	Adhesive elastic bandage 7.5cm x 4m	2	1	1
Elasticated bandage	Crepe bandage 7.5cm x 4m	4	2	-
Tubular gauze bandage for finger dressings	20m length with applicator	1*	1*	-
Disposable gloves – non sterile	Latex-free, small, medium, large	10 prs of each	10 prs of each	5 prs of each
Disposable gloves - sterile	Latex-free Sizes 6, 7, 8	4 prs of each	2 prs of each	-
Adhesive dressings	Assorted sterile	40	20	10
Sterile compression bandages with unmedicated dressing pads (Ambulance dressings)	i) Medium, No.1 12 x 10cm	3	2	2
	ii) Large, No.2 20 x 15cm	3	2	2
	iii) Extra large, No.3 28 x 20cm	2	1	1
Adhesive sutures	Adhesive wound closure strips 100mm x 12mm 6 pack	4	4	2



<i>Statutory treatment requirements</i>	<i>Recommended medicine and dosage, representing best practice</i>	<i>Recommended quantity for 10 workers (unless*)</i>		
		A	B	C
Sterile gauze swabs	Sterile gauze swabs size 7.5cm x 7.5cm 5 pack	6	4	2
Sterile sheet for procedures	Sterile sheet for procedures 50cm x 50cm	1	1	-
Burn dressings	i) Plastic wrap roll 30cm x 80m	1*	1*	-
	ii) Burns bag dressings for hands and feet	2	2	-
Triangular bandage	Triangular bandage	2*	2*	-
Paraffin gauze dressings	Paraffin gauze dressing 10cm x 10cm	10	10	-
	Or Hydrogel dressing 10cm x 10cm	10	10	-
3. Instruments				
Disposable scalpels	e.g. 10 blade	2*	-	-
Instrument box (made of suitable material)		1*	1*	-
Scissors	i) Dressing scissors blunt/sharp	1*	1*	-
	ii) Dressing scissors sharp/sharp	1*	1*	-
	iii) Tough cut scissors	1*	1*	-
Dissecting forceps	Toothed forceps	1*	1*	-
Haemostatic clamp	Haemostatic clamp/Needle holder	1*	1*	-
Splinter/needle forceps	Splinter forceps	1*	-	-



<i>Statutory treatment requirements</i>	<i>Recommended medicine and dosage, representing best practice</i>	<i>Recommended quantity for 10 workers (unless*)</i>		
		A	B	C
Disposable razors	Disposable razors	5*	-	-
4. Examination and monitoring equipment				
Pen torch	Pen torch with blue filter for eye exam	1*	1*	-
Disposable tongue depressors	Disposable tongue depressors	10*	10*	-
Urine analysis testing strips	Urine analysis testing strips 25 strips/pack To test for: Leukocytes Nitrites Protein Glucose Specific gravity Ketones Blood pH	1 pack*	-	-
Patient vital signs monitoring chart	Patient vital signs monitoring chart 25 sheets as per Ship Captain's Medical Guide	1 pad*	1 pad*	-
Medical incident report forms	Medical incident report forms 25 sheets as per Ship Captain's Medical Guide	1 pad*	-	-
Pregnancy Test Kit	When women on board	2*	-	-
Stethoscope		1*	1*	-
Sphygmomanometer		1*	1*	-



Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers (unless*)		
		A	B	C
Standard clinical thermometer	Thermometer digital with range including hypothermia, with covers	1*	1*	-
Glucometer	i) Glucometer with 25 testing sticks	1*	-	-
	ii) Lancets for use with glucometer	25	25	-
Pulse Oximeter	Pulse oximeter	1*	-	-
Malaria test kit – requirement for inclusion in the medical stores is dependent upon operational area	WHO approved malaria test kit	As required	As required	-
5. Equipment for injection, perfusion, puncture and catheterization				
Bladder drainage equipment (suitable for men and women)	i) Bladder drainage set (including urine bag, spigots and tube)	1*	-	-
	ii) Foley Catheter 12 or 14 gauge, 10 ml balloon (short / medium term use in adults)	2*	-	-
	iii) Water for injections 5ml	As per 9(f)	-	-
	iv) Penile sheath set	1*	-	-
Disposable syringes	2ml, 5ml, 10ml	10 of each	5 of each	As required - RA
Disposable hypodermic needles	21G (0.8mm) and 23G (0.6mm)	20 of each	10 of each	-
“Sharps” disposal box	1 litre size	1*	1*	-



Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers (unless*)		
		A	B	C
Intravenous or intraosseous infusion set (depending on training)	i) Intravenous cannulae 18g ii) Intravenous cannulae 20g iii) Cannula dressing iv) Tourniquet – quick release	5* 5* 10* 1*	2* 2* 5* 1*	- - - -
	or i) Intraosseous (IO) access device ii) IO dressing	1* 2*	1* 2*	- -
Intravenous fluid set	i) Intravenous fluid giving set	2	2	-
	ii) Saline flush 5ml	10*	10*	-
	iii) Intravenous fluid – Ringers Lactate 1 litre	2	2	-
6. General Medical Equipment				
Personal protective medical and nursing equipment	i) Disposable Aprons	50*	10*	-
	ii) Masks (surgical type 2)	50*	10*	-
	iii) Respirator mask (FFP2 or FFP3)	10*	5*	-
	iv) Eye protection	5*	5*	-
Bedpan	(stainless steel or sterilisable plastic)	1*	-	-
Hot water bottle	With fabric cover	1*	-	-
Urine bottle (urinal)		1*	-	-
Icebag		1*	-	-



Statutory treatment requirements	Recommended medicine and dosage, representing best practice	Recommended quantity for 10 workers (unless*)		
		A	B	C
7. Immobilization and setting equipment				
Set of splints of different sizes for the extremities	i) Finger splint – malleable	1*	1*	-
	ii) Forearm /lower limb splint - malleable	1*	1*	-
	iii) Vacuum splints and pump – upper and lower limb set	1*	1*	-
	or Inflatable splints – upper and lower limb set	1*	1*	-
Traction splint	Traction splint for thigh	1*	1*	-
Collar semi-rigid for neck immobilisation	Adult pack of 3 – small, medium, large	1*	1*	-
	or Adult adjustable	1*	1*	-
8. Disinfection, Disinsectisation and Prophylaxis				
Water – disinfection compound	Of choice	As required	-	-
Liquid insecticide	Of choice - Proprietary product	As required	-	-
Powder insecticide	Of choice - Proprietary product	As required	-	-



RECOMMENDED ADDITIONAL MEDICAL EQUIPMENT

Recommended Additional Equipment	A	B	C
Naso-gastric tube 14G	1*	1*	-
Plastic measuring jug ½ litre size	1*	1*	-
Disposable paper towels	100*	100*	-
Plastic backed absorbent paper bed pads	10*	-	-
Lotion bowl (size at least 200mm x 90mm, stainless steel or sterilisable plastic, to be marked “medical”)	1*	-	-
Kidney dish (Size 250mm stainless steel or sterilisable plastic)	1*	-	-
Safety pins, rustless medium	6*	6*	6*
Magnifying glass 7.5 cm diameter with handle	1*	1*	-
Nail brush	1*	1*	-
Stretcher equipment (A system for trauma management, i.e. immobilisation and stretcher equipment most suited for treatment on the vessel concerned)	1*	1*	-
Body bag – Large size	1*	1*	-
Dental kit – for emergency repairs i) Excavator double ended Guys’ pattern G2 ii) Filling paste inserter (for inserting filling paste into the tooth) iii) Dental mirror size 4 on handle iv) Temporary dental filling material	1 Set of all items*	-	-



Recommended Additional Equipment	A	B	C
Defibrillators subject to risk assessment. See MGN297 for guidance.	-	-	-
Tough cut stainless steel scissors	-	-	1 pr
Triangular bandages about 90cm x 127cm	-	-	4
Sterile paraffin gauze dressings	-	-	10
Plastic Burns bags	-	-	1

<p><u>Kit for protection against blood transmitted diseases (to be carried in all vessels trading in areas where medical facilities are limited and emergency shore based treatment is necessary)</u></p> <p><i>To be kept in heavy gauge polythene bag and labelled “to be used only for the treatment of....” Insert the name of the seafarer going ashore for emergency treatment).</i></p> <p><i>Each kit to contain the following:</i></p> <ol style="list-style-type: none"> 1. 10 x 2ml syringes 2. 10 x 10ml syringes 3. 20 x 21G 0.8mm needles 4. 1 giving set suitable to give blood or other fluids 5. 4 x 18g cannulae plus dressings 6. pack of pre injection site swabs 7. Disposable latex free gloves 2 pairs (large size) 	1	-	-
--	---	---	---



ADDITIONAL REQUIREMENTS FOR PASSENGER VESSELS WITH NO DOCTOR AS A MEMBER OF THE CREW (THE DOCTOR'S BAG)

1. This section refers to the Stores referred to in the Regulations (Merchant Shipping and Fishing Vessels (Medical Stores) Regulations 1995 (SI 1995/1802) and the Merchant Shipping and Fishing Vessels (Medical Stores) (Amendment) Regulations 1996 (SI 1996/2821)) as Category D. Category D stores are required for seagoing ships where there is no qualified medical practitioner among the crew and the vessel carries more than 12 passengers. (Classes VI and VI(A) or EC Group C or D vessels are exempt from this requirement).
2. If the master should feel that assistance from a medically qualified individual on board is justified, and having asked passengers for volunteers with medical qualifications, is able to assess the suitability of a volunteer then they may be asked to assist, using the contents of the Doctor's Bag.
3. The Master remains ultimately responsible for any care given, and it is advised that a policy is drawn up to assist in managing the situation in a consistent manner. The presence of a doctor on board should not prevent the Master from asking for assistance from TMAS services, nor the person delegated to provide medical care from providing what care they are qualified to perform.
4. All the medicines and equipment in this list should be kept together in portable bag(s) or container(s) collectively known as the Doctor's Bag, unless specific storage is required such as refrigeration. These should be locked and kept in a locked cabinet and the keys held by the Master or someone nominated by him.
5. If wished, those items on this list which are also included in Annex 1 may be kept in a separate container within the Doctor's bag for use by the trained crew on board. This can be taken to the site of an emergency in order to expedite assessment and treatment by the crew member delegated to provide medical care on board whether or not a doctor is available. The other items on the list should then be kept in a separate bag or case, clearly labelled as follows:

"The medicines in this case are only to be used by a qualified medical practitioner, registered general nurse, qualified paramedic, or trained crew under the direct supervision of a medical practitioner on board the ship or TMAS provider".

If it is preferred to keep the Doctor's bag as a single entity, all items included should be additional to those which the vessel may be required to carry as set out in Annex 1 of this Notice, and the whole labelled as above.

6. The obtaining, use and disposal of morphine from this case must be recorded in the ship's Controlled Drugs Register as usual. (See Annex 8).
7. A doctor or other authorised person using the Doctor's Bag should be made aware that telemedical advice may be obtained and if necessary medical evacuation arranged, by contacting HM Coastguard.
8. It is not within the scope of this document to recommend detailed types and quantities of treatment specifically for passengers. This should be risk assessed separately with a view to the number and type of passengers carried, duration of voyage and the route.



STATUTORY TREATMENTS REQUIRED FOR DOCTOR'S BAG

Annex 1 Reference	Recommended medicine and dosage	Quantity
1 (a)	Adrenaline / Epinephrine injection BP 1.0mg/1ml inj	5
NA	Adrenaline (base) 1mg/10ml (1 in 10,000) dilute solution for injection pre-filled syringes	5
1 (b)	Glyceryl Trinitrate 400mcg/dose 200 dose sublingual spray	1
1 (c)	Furosemide 20mg/2ml inj	5
1 (d)	Tranexamic Acid 500mg/5ml inj	1
1 (f)	Aspirin 300mg tab	32
NA	Atropine pre filled syringe	1
NA	Amiodarone 150mg/3ml amps for IV infusion	5
3 (b)	Codeine Phosphate 30mg tab or Tramadol 50mg tab	28 30
3 (b)	Morphine Sulphate 10mg/1ml inj and Naloxone 400mcg/1ml inj or Tramadol 100mg/2ml inj	10 10
3 (b)	Methoxyflurane (if carried)	1
4 (b)	Chlorpromazine hydrochloride 25mg/1ml inj or Haloperidol 5mg/1ml inj	10 10
4 (d)	Diazepam 10mg/2ml inj	10
4 (c)	Prochlorperazine maleate 3mg buccal tab or Cyclizine 50mg/1ml inj	8 5
4 (d)	Diazepam 10mg/2.5ml rectal solution tube	5
5 (a)	Chlorphenamine 10mg/1ml inj or Promethazine hydrochloride 25mg/1ml inj	5 5
5 (b)	Hydrocortisone 100mg inj	1
6 (a)	Salbutamol 100mcg/dose 200 dose inh	1
6 (a)	Beclometasone 100mcg/dose 200 dose inh	1
6 (a)	Spacer compatible with both Salbutamol and Beclometasone	1
NA	Magnesium sulfate injection 500mg/ml 10ml amps	10
7 (a)	Ceftriaxone injection 1g inj	10
NA	Glucagon injection 1mg	2
NA	Insulin injection, soluble, 100 units per ml, 10ml ampoule	1



Annex 1 Reference	Recommended medicine and dosage	Quantity
9 (a)	Proprietary antiseptic solution of choice 250ml Chlorhexidine-based preparation	1
	or Proprietary sterile wipe pack of choice 250 wipes Chlorhexidine-based preparation	1
9 (a)	Silver sulfadiazine 1% cream 50g	1
9 (b)	Tetracaine 0.5% 0.5ml	4

MEDICAL EQUIPMENT

Annex 1 Reference		Quantity
1	Bag/valve/mask (BVM); supplied with large, medium and small masks	1
1	Pocket face mask with valve and oxygen inlet	1
1	Oropharyngeal airway sizes 3, 4 and 5 and/or	1 each
	Nasopharyngeal airways 6mm and 7mm internal diameter	1 each
NA	Second generation supraglottic airway size 4 and 5	1 each
1	Manual aspirator and two suction catheters	1
1	If not already carried on board, Oxygen giving set comprising the following: Oxygen reservoir minimum 400 litres including: 1 pressure regulator 1 flow meter unit 1-15 litres/min 1 set of oxygen tubing 5 x medium concentration disposable oxygen masks 5 x high concentration disposable non-rebreather oxygen masks with reservoir. Each part constructed so that it can only be assembled in the correct manner	1
2	Trauma tourniquet	1
2	Plastic wrap roll 30cm x 80m	1
4	Pen torch	1
	Cardiology Stethoscope	1
4	Sphygmomanometer	1
4	Glucometer with 25 testing sticks	1
4	Lancets for use with glucometer	25
4	Thermometer, digital	1



4	Pulse oximeter	1
5	Disposable syringes 2ml, 5ml, 10ml	2 each
NA	Insulin syringes with 27G needles	2
5	Disposable hypodermic needles 21G (0.8mm) and 23G (0.6mm)	2 each
5	Sharps disposal box, small, portable	1
5	Intravenous cannulae 18g	2
5	Intravenous cannulae 20g	2
5	Cannula dressing	2
5	Tourniquet – quick release	1
5	Intravenous fluid giving set	2
5	Saline flush 5ml	2
5	Intravenous fluid – Ringers Lactate 1 litre	2
NA	10% Glucose infusion 500ml	1
6	Aprons	2
6	Masks (surgical)	2
6	FFP2 or FFP3 masks	2
6	Eye protection	1
7	Semi-rigid neck collar for neck immobilisation – Adult pack of 3 – small, medium, large or Adult adjustable	1



FIRST AID KITS – RECOMMENDATIONS

Seagoing ships with a crew of more than 10 should carry first aid kits, distributed in appropriate locations on the ship e.g. in the galley and engine room.

In addition, passenger vessels should carry at least one first aid kit for every 100 passengers or fraction of that number subject to a maximum requirement for 3 kits e.g. 250 persons require three kits. A first aid kit is also to be included in the Doctor's Bag (Annex 2).

The first aid kit should include the following items, kept in a portable waterproof container.

- (1) 4 x triangular bandages
- (2) 6 x medium sterile bandages with unmedicated dressings,
- (3) 2 x large sterile bandages with unmedicated dressings,
- (4) 2 x extra large unmedicated dressings,
- (5) 6 medium safety pins, rustless
- (6) 20 assorted elastic adhesive dressings medicated
- (7) 2 x Sterile eye pads with attachment
- (8) 2 x packages containing sterile gauze swabs
- (9) 5 pairs large size disposable latex-free examination gloves
- (10) Sterile eye wash in eye wash bottle

The Merchant Shipping and Fishing Vessel (Medical Stores) Regulations 1995 do not apply to vessels operating on inland waters, as defined in MSN 1837(M) Amendment 2. However, the HSE Health and Safety (First Aid) Regulations 1981 do apply and the HSE Approved Code of Practice for First Aid at Work should be followed.



ADVICE ON MEDICINES TO BE CARRIED ON SHIPS (INCLUDING FERRIES) TRANSPORTING DANGEROUS SUBSTANCES

General

1. When a UK registered vessel is carrying a dangerous substance or substances, as whole or part of the cargo, the Master must ensure that the correct antidote to the substance (plus the necessary ancillary equipment e.g. syringes) is carried. The correct antidote for most substances can be found in the IMO Medical First Aid Guide for Ships MFAG 2000 edition. Any updating of the IMO International Maritime Dangerous Goods Code or MFAG should be taken into account when preparing the list of medicines to be carried.
2. The substances listed below are to be taken into account, in whatever form they are carried on board, including the form of waste or cargo residues.
 - Explosive substances and objects
 - Gases : compressed, liquefied or dissolved under pressure
 - Inflammable liquids
 - Inflammable solids
 - Substances liable to spontaneous combustion
 - Substances which on contact with water give off inflammable gases
 - Combustible substances
 - Organic peroxides
 - Toxic substances
 - Infectious substances
 - Radioactive substances
 - Corrosive substances
 - Various dangerous substances, i.e. any other substances which experience has shown, or may show, to be dangerous, so that antidotes need to be carried.
3. The quantities of any medicines to be carried aboard should be based on an estimate of risks, taking into account such factors as number of crew, length of voyage and risk of accidental exposure.

Ferries

4. Whether or not the vessel is required to carry Category A or B stores, ferries or similar vessels whose operating arrangements do not allow sufficient forewarning of the nature of any dangerous substances which might be transported on them, must carry at least the antidotes and equipment listed below :

Antidotes:

- General
- Cardiovascular
- Gastro-intestinal system
- Nervous system
- Anti-infective
- For external use

Equipment: for the administration of oxygen.

Where these substances are already included in the ship's medical stores, separate stocks are not necessarily required. On a regular route where the crossing is due to last less than two hours, the antidotes may be limited to those which have to be administered in cases of extreme emergency within the period of time not exceeding the normal duration of crossing.



MEDICAL DOCUMENTS TO BE CARRIED AND TELEMEDICAL ADVICE SERVICE (TMAS)

Category	Publication
Category A	Ship Captain's Medical Guide Controlled Drugs Register
Category B	Ship Captain's Medical Guide Controlled Drugs Register
Category C	First Aid Manual e.g. St John's, Red Cross or St Andrew's or First Aid Instructions, in English on Waterproof paper (<i>Lifeboats and Liferafts only</i>) Controlled Drugs Register Ship Captain's Medical Guide (if carrying RA items)

In addition, all Categories (other than lifeboats and liferafts) should carry a copy of this Notice or subsequent replacements.

Telemedical advice service (TMAS)

Telemedical advice service (TMAS) is available to all ships at sea by contacting HM Coastguard (See MGN 623 M+F for details). Advice is provided by 2 UK designated centres, but initial contact should always be made with the Coastguard rather than direct to a provider.



GUIDE TO THE USE OF MEDICINES

General Advice about medicines

Most medicines are now available with patient information leaflets in English and the advice on dose precautions and side effects should be consulted and retained for reference. If this is not available then valuable guidance is also available from pharmacists or by seeking telemedical advice.

When obtaining medicinal products, ensure that they are labelled with their strengths (e.g. 125mg per tablet or 125mg per 5ml) and expiry date, and that they are packaged in accordance with the UK medicines legislation.

Medicines obtained abroad

Medicine supplies should be replenished wherever possible at the same strengths as specified in the British Pharmacopoeia. If medicines are obtained elsewhere, e.g. in the USA, they may be of different strength, and this must be taken into account when administering them. Be cautious about purchasing online other than from marine pharmacists.

The non-proprietary name (local pharmaceutical name) for some medicines bought abroad may differ from that used in the list of medical stores. The pharmacist should have a “translation” of the non-proprietary name, but if in doubt about a medicine seek Telemedical Advice.

Medicines obtained by a seafarer from a doctor ashore

A seafarer who goes to a doctor ashore should be asked to obtain from the doctor a written note of the non-proprietary name of any prescribed medicine, details of how it is to be taken and any cautionary or advisory guidance e.g. may cause drowsiness. The details on the note from the doctor should be checked against the information on the medicine container to ensure that they match. In case of any problem or doubt, it may be necessary to check the prescription with the Telemedical advice service.

Supply of medicines in compliance with the Merchant Shipping (Medical Stores) Regulations 1995.

In order to make it possible to provide effective treatment to seafarers at sea many of the medicines listed in the medical stores are deemed “prescription only medicines” with some also being designated Controlled Drugs and thus subject to additional restrictions as covered by the Misuse of Drugs Regulations 2001 (as amended). The Human Medicines Regulations 2012 Schedule 17¹ allows the owner or master of a ship, which does not carry a doctor on board as part of the ship’s complement, dispensation to procure, carry and administer prescription only medicines for the treatment of persons on the ship to comply with merchant shipping legislation. The Misuse of Drugs Regulations 2001 (as amended), regulation 8(5)(a), 8(6), 9(5)(a) and 10(5)(a)² allow the owner or master of a ship which does not carry a doctor to have controlled drugs in accordance with merchant shipping legislation.

¹ S.I. 2012/1916 <http://www.legislation.gov.uk/uksi/2012/1916/schedule/17/made> See Part 2 row 2

² S.I. 2001/3998 <http://www.legislation.gov.uk/uksi/2001/3998/regulation/14/made>



Medicines must be procured from an appropriately licensed source. In the UK purchases of prescription medicines can be made from a registered Pharmacy or a supplier holding the appropriate Wholesale Distribution Authorisation (WDA) as issued by the MHRA (Medicine & Healthcare products Regulatory Agency). Additionally, for the supply of controlled drugs, a WDA holder must possess the correct Controlled Drugs Licence (issued by the UK Home Office) covering both the possession and supply of the drugs requested.

The General Pharmaceutical Council (GPhC) operates an internet pharmacy logo scheme to identify legitimate online pharmacies. In addition, The MHRA has a register of authorised online sellers of medicines, which you can use to check if a website is legally allowed to sell medicines to the public.

Evidence will be required that the procurement is being made by the ship owner or master of the ship by presentation of a signed order (Human Medicines Regulations 2012, Schedule 17). In addition, any requisition for controlled drugs will require a signed order in the approved form as explained in Regulation 14 of the Misuse of Drugs Regulations 2001 (as amended) e.g. in England, form FP10CDF should be used for the purposes of requisitioning all Schedule 2 and 3 controlled drugs ([FP10CDF form from NHSBSA website](#)).

An example of the wording to be used outside the UK is given in Annex 7.

If purchasing outside of the UK different local legislation and/or restrictions on the purchase of medicines might apply particularly with regards to Controlled Drugs. The risk of counterfeit and/or substandard medications is a global issue. As such additional care should be taken to ensure that the supplier, if not a Pharmacy, is appropriately authorised to supply prescription and/or controlled medicines. Local (non-UK) supplies may also be in non-English packs and product substitutions may also occur, so if in doubt professional advice should be sought from a pharmacist or doctor who can advise on the suitability of any “locally” obtained medicines. It is recommended that advice and supplies are obtained where possible from medically qualified individuals and/or companies experienced and knowledgeable in the supply to the maritime industry.

Storage and Security of Medicines

Storage of medicines

Drugs must be stored to ensure that the product potency, efficacy and stability is maintained and that there is no product degradation. Where no specific storage temperature is given drugs should be stored at room temperature between 15-25^o centigrade. Some of the drugs should be kept under refrigeration, 2-8^o centigrade, but care must be taken not to freeze them, otherwise they may not be suitable for use.

Security of controlled drugs

The Crew Accommodation Regulations require ships to have a lockable medical cabinet for the storage of medicines and drugs. For merchant ships and for fishing vessels of 24m and over, the Regulations³ also require the cabinet to have an ‘inner cupboard’ solely for the storage of ‘dangerous drugs’ (i.e. the controlled drugs) the cupboard should be fitted with a door and a lock which cannot be opened by the key to the medical cabinet. Other vessels must store medicines

³ Merchant Shipping (Maritime Labour Convention) (Minimum Requirements for Seafarers etc.) Regulations 2014 (S.I. 2014/1613) <https://www.legislation.gov.uk/ukSI/2014/1613/contents/made> and MSN 1844(M), Merchant Shipping (Crew Accommodation) Regulations 1997 (S.I. 1997/1508), Merchant Shipping (Crew Accommodation) Regulations 1978 (S.I. 1978/795) as amended <https://www.legislation.gov.uk/ukSI/1978/795/made>



in a cool, dry, locked cabinet or locked container⁴. Under the Misuse of Drugs (Safe Custody) Regulations 1973⁵ only the master or a person authorised by him may open the inner cupboard.

In the UK and most other countries, it is illegal for unqualified/unauthorised persons to destroy unwanted controlled drugs. They can be disposed of by giving them to a person who may lawfully supply them, such as a qualified pharmacist or a qualified doctor. In the UK, it is also possible to dispose of drugs via the police.⁶ A receipt should be obtained from the recipient, and kept with, or affixed to, the controlled drugs register.

Record Keeping

Under the Official Log Book Regulations 1981 the record of any treatment given to anybody on board including the type and quantity of any medicines, and drugs supplied, must be entered in the log book. For controlled drugs, the master is required to maintain, in a bound book, a two section register. The two sections of the register should detail, why, when and in what quantity the master purchased a controlled drug and similarly the history of the dispensing or disposal of those controlled drugs. This register must be kept for two years after the date of the last entry. Annex 8 gives an example of the entries required in each section of the Controlled Drugs Register (Computer records are acceptable⁷, although safeguards should be incorporated into the software to ensure the following:

- Access control should be in place to minimise the risk of unauthorised access to data.
- The author of each entry is identifiable
- Entries cannot be altered at a later date
- A log of all data entered is kept and can be recalled for audit purposes.)

In ships where there is no doctor, it is acceptable to use the official log book to record the Controlled Drugs Register⁸

⁴ The Merchant Shipping and Fishing Vessels (Medical Stores) Regulations 1995 (S.I. 1995/1802) Reg 8(3)(b) <https://www.legislation.gov.uk/ukSI/1995/1802/made>

⁵ The Misuse of Drugs (Safe Custody) Regulations 1973

<https://www.legislation.gov.uk/primary+secondary?title=misuse%20of%20drugs%20safe%20custody>

⁶ The Misuse of Drugs Regulations 2001 (S.I. 2001/3998) regulation 27 (4)

<https://www.legislation.gov.uk/ukSI/2001/3998/contents/made>

⁷ The Misuse of Drugs and the Misuse of Drugs (Supply to Addicts) (Amendment) Regulations 2005 (S.I. 2005/2864) <https://www.legislation.gov.uk/ukSI/2005/2864/contents/made>

⁸ The Misuse of Drugs Regulations 2001 (S.I. 2001/3998) regulation 21

<https://www.legislation.gov.uk/ukSI/2001/3998/contents/made>



Use of medicines

This table is a brief guide to the drugs detailed in this M Notice and is designed to be used in conjunction with the Ship Captain's Medical Guide however this is the more up to date list.

The side effects listed are a guide only. This list is not comprehensive. The common or important side effects only are listed. If a drug might be causing a problem which is not listed, seek telemedical advice.

Ref. No.		Doses/route	Type of Drug/uses	Side effects
1. Cardiovascular				
(a)	Adrenaline/Epinephrine injection BP 1.0mg/1ml inj Adrenaline auto-injector (0.3mg or 0.5mg)	0.5 to 1.0ml by IM inj.	Heart stimulant. Only for use in anaphylaxis or resuscitation (severe allergy with collapse, loss of blood pressure /severe breathing problems)	Anxiety, tremor, high blood pressure, rapid irregular heart beat
(b)	Glyceryl Trinitrate 400mcg/dose 200 dose sublingual spray	1-2 sprays under tongue	Anti-angina (heart/chest pain) or suspected heart attack	Headache, flushing, low blood pressure, fast heart rate
	Metoprolol 50mg tab	Angina 50-100mg 8 hourly	Beta blocker. For high blood pressure or angina (chest pain)	Tiredness, slow heart rate, low blood pressure, wheeze
	Atenolol 50mg tab	Angina 50-100mg once daily	Beta blocker. For high blood pressure or angina (chest pain)	Tiredness, slow heart rate, low blood pressure, wheeze
(c)	Furosemide 40mg tab Furosemide 20mg/2ml inj	40mg once daily 20-40 mg (2-4ml) by IM or IV injection repeated in 2 hours if required	Diuretic (increases urination) for swelling/fluid retention, breathlessness due to heart failure	Low blood pressure, dizziness. Few in short term, low dose use



Ref. No.		Doses/route	Type of Drug/uses	Side effects
(d)	Tranexamic Acid 500mg tab	1g 8 hourly	Reduce bleeding e.g. in heavy periods, nosebleed	Diarrhoea, nausea, vomiting
	Tranexamic Acid 500mg/5ml inj	1g IV/IO over 10 mins, may repeat as infusion over next 8 hrs	Major haemorrhage	Low blood pressure in rapid injection
	Phytomenadione (Vitamin K) 2mg/0.2ml inj (paediatric)	0.2ml (2mg) IM injection single dose	Routine Anti-haemorrhage injection for newborn	
	Ergometrine 500mcg and Oxytocin 5 units 1ml inj	1ml (500mcg/5 units) by IM injection single dose	Anti-haemorrhage drug used immediately after delivery of baby or for bleeding after miscarriage	Nausea, vomiting, headache, dizziness
(e)	Amlodipine 5mg tab	5-10mg once daily	Calcium channel blocker, for high blood pressure	Dizziness, drowsiness, headache, nausea
	Atenolol 50mg tab	For high blood pressure 50mg once daily	Beta blocker. For high blood pressure or angina (chest pain)	Tiredness, slow heart rate, low blood pressure, wheeze
	Metoprolol 50mg tab	For high blood pressure 50mg 12 hourly	Beta blocker. For high blood pressure or angina (chest pain)	Tiredness, slow heart rate, low blood pressure, wheeze
(f)	Aspirin 300mg tab	300mg single dose 300mg daily	For cardiac problems (chest pain, angina, suspected heart attack), TIA (mini stroke) or CVA (stroke), other thrombotic problems	Indigestion, bleeding. Avoid with indigestion, stomach ulcers, asthma
	Clopidogrel 75mg tab	300mg initially then 75mg daily	Alternative to aspirin if cannot take	Diarrhoea, gastrointestinal discomfort, haemorrhage



Ref. No.		Doses/route	Type of Drug/uses	Side effects
2. Gastro Intestinal System				
(a)	Lansoprazole 30mg tab	30mg once daily	Stomach and duodenal ulcers, indigestion, acid reflux	Gastro-intestinal upset, dizziness, nausea, headache
	Ranitidine 150mg tab (availability issues)	150mg 12 hourly	If unable to obtain Lansoprazole. Stomach and duodenal ulcers, indigestion, acid reflux	Gastro-intestinal upset, dizziness, headache
	Proprietary alginate antacid of choice	As instructions on packaging	Indigestion, heart burn	See package insert
(b)	Ondansetron 4mg tab	4–8mg 8 hourly	Relief of nausea and vomiting	Constipation, headache
	Domperidone 10mg tab	10mg 8 hourly	Relief of nausea and vomiting	Dry mouth
	Prochlorperazine maleate 3mg buccal tab	3-6mg under tongue or between cheek and upper gum 12 hourly	Relief of nausea and vomiting in migraine, vertigo, seasickness or due to drugs	Dry mouth, drowsiness, blurred vision, rapid pulse
	Cyclizine 50mg/1ml inj	50mg IM 8 hourly	Nausea, vomiting, vertigo, motion sickness	May cause drowsiness. Painful injection
	Promethazine hydrochloride 25mg/1ml inj	25-50mg IM injection	Anti-histamine. Relief of nausea and vomiting, severe motion sickness and severe allergic reactions	Drowsiness, dry mouth. May cause urinary retention
(c)	Lactulose 10g/15ml	15ml 12 hourly	Laxative, stool softener	Flatulence, cramps, abdominal discomfort
	Magnesium hydroxide 79mg/1ml	30-45ml daily	Laxative	
	Bisacodyl 5mg tab	5-10mg at night	Stimulant laxative	Abdominal discomfort, nausea



Ref. No.		Doses/route	Type of Drug/uses	Side effects
	Glycerol 4mg suppository	One suppository inserted in the rectum	Lubricant laxative used to encourage passage of stools	
(d)	Loperamide 2mg cap	4mg (2 tabs) initially, then 2mg after each loose stool Max 16mg in 24 hours	Control of diarrhoea	Gastrointestinal disorders, headache, nausea
(e)	Haemorrhoid proprietary preparation	As instructions on packaging	Relief of discomfort from haemorrhoids (piles)	See package insert

3. Analgesics Anti-Spasmodics

(a)	Paracetamol 500mg tab	1g 4-6 hourly. No more than 8 in 24 hours	"Simple" painkiller suitable for most mild to moderate pain	Few at correct dose, very dangerous in overdose & poisonous to liver. Avoid with liver disease
	Ibuprofen 400mg tab	400mg 8 hourly	Anti-inflammatory painkiller. Mild to moderate pain, headache, joint pain, period pain	Stomach pains, nausea, wheeziness. May exacerbate asthma. Do not give if patient has indigestion or stomach/duodenal ulcer
	Naproxen 250mg tab	500mg, then 250mg 6-8 hourly	Anti-inflammatory painkiller. Mild to moderate pain, headache, joint pain, period pain. Take with or after food if possible	Stomach pains, nausea, wheeziness. May exacerbate asthma. Do not give if patient has indigestion or stomach/duodenal ulcer
	Diclofenac sodium 100mg supp	100mg (one suppository) once daily by rectum	Anti-inflammatory painkiller suitable for moderate pain, especially bone, joint and muscle pain	Nausea, diarrhoea, dizziness. May exacerbate asthma. Do not give if patient has indigestion or stomach/duodenal ulcer
(b)	Codeine Phosphate 30mg tab	30mg 6 hourly	Opiate painkiller. Moderate to severe pain	Nausea, vomiting, drowsiness, constipation. Respiratory depression in overdose. Avoid with breathing problems, head injury



Ref. No.		Doses/route	Type of Drug/uses	Side effects
	Tramadol 50mg tab	50-100mg 4-6 hourly	Opiate painkiller. Moderate to severe pain	Nausea, vomiting, drowsiness, constipation. Respiratory depression in overdose. Avoid with breathing problems, head injury, epilepsy
	Morphine Sulphate 10mg/1ml inj	5-10mg 4-6 hourly by IM inj	Very strong painkiller suitable for all severe pain. Give with anti-emetic	Nausea, vomiting, drowsiness, constipation. Respiratory depression in overdose or if used inappropriately. Avoid with breathing problems, head injury
	Naloxone 400mcg/1ml inj	100–200mcg IV or IM. Repeat 100mcg injection every 2 minutes depending on response	Reversal of opiates in overdose. Short action so may need to repeat to reverse longer acting opiates	May cause low or high blood pressure, heart arrhythmias, collapse
	Tramadol 100mg/2ml inj	50-100mg IM, or IV over 2-3 minutes, 4-6 hourly	Opiate painkiller. Moderate to severe pain	Nausea, vomiting, drowsiness, constipation. Respiratory depression in overdose. Avoid with breathing problems, head injury, epilepsy
	Methoxyflurane 3ml inh	Self administer 3-6ml as required under supervision of trained personnel only. Avoid use on consecutive days, max 15ml per week	Inhalational anaesthetic painkiller for moderate to severe pain. Only available in certain countries	Cough, dizziness, drowsiness, headache. Avoid in cardiovascular or liver disease, impaired consciousness or respiratory depression
(c)	Hyoscine butylbromide 10mg tab	10-20mg 6 hourly	Anti-spasmodic for treatment of abdominal cramps and colic	Dry mouth, blurred vision, Constipation



Ref. No.		Doses/route	Type of Drug/uses	Side effects
4. Nervous System				
(a)	Diazepam 5mg tab	5-10mg, 4 hourly up to a maximum of 30mg per day	Anti-anxiety, and sedative. Also useful in muscle spasm and low back pain	Drowsiness, light headedness, confusion, headache, respiratory depression. Avoid with strong painkillers
	Diazepam 10mg/2ml inj	5-10mg by IM injection	Muscle spasm, fits, panic attack	Drowsiness, light headedness, confusion, headache, respiratory depression
(b)	Chlorpromazine hydrochloride 25mg tab	25mg tablet 8 hourly	Severe anxiety/psychosis. Sedates and controls symptoms in acute psychosis especially violent or disturbed patients	Drowsiness, dry mouth, retention of urine, abnormal movements
	Chlorpromazine hydrochloride 25mg/1ml inj	25mg by IM injection, 8 hourly	Severe anxiety/psychosis	Drowsiness, low blood pressure, dry mouth, tremor, abnormal movements
	Haloperidol 5mg tab	5-10mg daily	Severe anxiety/psychosis	Drowsiness, low blood pressure, dry mouth, tremor, abnormal movements
	Haloperidol 5mg/1ml inj	1mg by IM injection repeated 2-4 hourly, max 10mg per day	Severe anxiety/psychosis	Drowsiness, low blood pressure, dry mouth, tremor, abnormal movements
(c)	Cinnarizine 15mg tab	15mg 8 hourly	Nausea vomiting, motion sickness, vertigo	Drowsiness (less severe than in other motion sickness treatments)
	Promethazine teoclate 25mg tab	25mg at night for prevention, repeat 25-50mg 8 hourly if needed	Long acting antihistamine. Motion sickness	Caution in asthma. Drowsiness, urinary retention, dry mouth
	Prochlorperazine maleate 3mg buccal tab	See 2b		



Ref. No.		Doses/route	Type of Drug/uses	Side effects
	Promethazine hydrochloride 25mg/1ml inj	See 2b		
(d)	Diazepam 5mg tab	See 4a		
	Diazepam 10mg/2ml inj	See 4a		
	Diazepam 10mg/2.5ml rectal solution tube	10mg per rectum up to a maximum of 2 doses	Anti-epileptic medication used to control fits	Drowsiness, light headedness, confusion, headache, respiratory depression
5. Allergy and Anaphylaxis				
(a)	Cetirizine 10 mg tab	10mg once daily	Anti-allergy (antihistamine). Itchy rashes, hay fever or other allergic symptoms	Uncommon. Low risk of drowsiness, urinary retention, blurred vision
	Loratadine 10mg tab	10mg once daily	Anti-allergy (antihistamine). Itchy rashes, hay fever or other allergic symptoms	Drowsiness, less than in older antihistamines
	Chlorphenamine tabs <i>Use Cetirizine or Loratadine</i>		Anti-allergy (antihistamine). Itchy rashes, hay fever or other allergic symptoms	Drowsiness, dry mouth, blurred vision low risk of urinary retention
	Chlorphenamine 10mg/1ml inj	10–20 mg by IM injection. Max 40mg in 24 hours	Anti-allergy (antihistamine). Itchy rashes, hay fever or other allergic symptoms	Drowsiness, low risk of urinary retention, blurred vision
(b)	Hydrocortisone 100mg inj	100mg by IM injection, repeat 8 hourly if necessary	Steroid. Serious allergies causing severe symptoms or collapse	Few for single dose or short course. May cause indigestion, abdominal discomfort



Ref. No.		Doses/route	Type of Drug/uses	Side effects
	Prednisolone 5mg tab	5-20mg once daily, more in severe asthma	Steroid. Allergy or acute asthma	Few for single dose or short course May cause indigestion, abdominal discomfort
6. Respiratory System				
(a)	Salbutamol 100mcg/dose 200 dose inh (with spacer)	200mcg (2 puffs) 6-8 hourly using spacer if severe	Anti-bronchospasm (wheeze) drug. Asthma and other forms of wheezing	Tremor, headache, increased pulse rate
	Beclometasone 100mcg/dose 200 dose inh	200mcg (2 puffs) 6-8 hourly times daily using spacer if severe	Anti-asthma steroid taken by inhalation usually with salbutamol	Few in correct dose for short periods. Can cause oral candida (thrush)
(b)	Proprietary cough mixture	As instructions on packaging	For troublesome cough	See package insert
(c)	Paracetamol 500mg tab	See 3a		
	Proprietary cold remedy	As instructions on packaging		See package insert
7. Anti Infection				
(a)	Co-Amoxiclav 500mg/125mg tab	625mg (one tablet) 8 hourly	Antibiotic. Chest/dental/gut infections	Avoid in penicillin allergy. May cause stomach upset
	Amoxicillin 500mg cap	500-1000mg 8 hourly	Antibiotic. Ear/general infections	Avoid in penicillin allergy. May cause stomach upset
	Ciprofloxacin 500mg tab	500mg 12 hourly	Broad spectrum (general purpose) antibiotic. Gut/urinary infections	Nausea, diarrhoea, abdominal pain, rashes, allergic reaction. Caution in epilepsy



Ref. No.		Doses/route	Type of Drug/uses	Side effects
	Azithromycin 500mg tab	500mg once daily for 3 days	Antibiotic. Chest infections	May cause stomach upset, abdominal pain
	Erythromycin 500mg tab	500mg 8 hourly	General purpose antibiotic. Chest/gut/ear infections, useful in penicillin allergic patients	Nausea, diarrhoea, abdominal pain, rashes, allergic reaction
	Flucloxacillin tablets 500mg tab	500mg 6 hourly	Antibiotic. Skin infections	Avoid in penicillin allergy. May cause stomach upset
	Doxycycline 100mg cap	200mg initially then 100mg once daily	Antibiotic. Respiratory, gut, ear, skin, urine and sexually transmitted infections, malaria prophylaxis	Nausea, vomiting, diarrhoea, rashes, headache, sun sensitivity
	Metronidazole 400mg tab	400mg 8 hourly	Antibiotic and anti-protozoal. Gut/dental infections	Nausea, vomiting, altered taste, rashes. Must avoid alcohol
	Metronidazole suppositories 1g	1g per rectum 8 hourly	Antibiotic and anti-protozoal. Gut/dental infections	Nausea, vomiting, altered taste, rashes. Must avoid alcohol
	Co-Amoxiclav 1.2g inj	600-1200mg IV 8 hourly	Antibiotic. Severe chest/dental/gut infections	Avoid in penicillin allergy. May cause stomach upset
	Ceftriaxone 1g inj	1g once daily IM or IV	Broad spectrum antibiotic. Severe chest/gut infections	May cause stomach upset, abdominal pain
	Aciclovir 400mg tab	400-800mg 3-5 times daily depending on indication	Antiviral. Herpes infections (cold sores, chicken pox, shingles)	Gastro intestinal upset, dizziness, headache
	Fluconazole 50mg tab	150mg single dose or 50mg daily depending on indication	Anti-fungal. Fungal skin infections, candida (thrush)	Gastro intestinal upset, headache



Ref. No.		Doses/route	Type of Drug/uses	Side effects
	Terbinafine 250mg tab	250mg once daily	Anti-fungal. Skin and nail infections	Gastro intestinal upset, headache, joint pain
(b)	Mebendazole 100mg tab	100mg single dose or 12 hourly for 3 days depending on indication	Anti-parasitic. Threadworms, roundworm, other gut infestation	Gastrointestinal discomfort
(c)	Diphtheria with tetanus and poliomyelitis vaccine 0.5ml inj	0.5ml by IM or deep subcutaneous inj	Prevention of tetanus	Allergic reactions, fever, local skin reaction
	Tetanus immunoglobulin 250iu inj	250-500 iu by IM inj Always call TMAS	Post-exposure prophylaxis and treatment for tetanus in high risk wounds	Allergic reaction, low blood pressure
(d)	Anti-malaria medicines	As instructed depending on local recommendations	For prophylaxis, and for treatment of active disease	

8. Compounds promoting rehydration, caloric intake and plasma expansion

	Oral Rehydration Salts, as per current WHO formula sachet or Proprietary equivalent sachet	Follow instructions on sachet	Used to treat dehydration in vomiting and diarrhoea or severe illness	Nil
--	--	-------------------------------	---	-----

9. Medicines for external use

(a)	Antiseptic solution, or wipes	Follow instructions on bottle / packaging	For cleaning skin wounds and disinfection	
	Aciclovir 5% cream 2g	5 times a day for 5-10 days. Start at first sign of attack	Antiviral. Cold sores (herpes)	May cause stinging, dry skin. Avoid eye contact



Ref. No.		Doses/route	Type of Drug/uses	Side effects
	Fusidic acid 2% cream/ointment 15g	Apply 6-8 hourly	Antibiotic. Skin infections	Rare. Avoid eye contact
	Mupirocin 2% cream/ointment 15g	Apply 8 hourly	Antibiotic. Skin infections	Skin reactions
	Hydrocortisone 1% cream 15g	Applied to affected area sparingly, no more than 8 hourly	Steroid, anti-inflammatory. Eczema type rashes, allergic rashes, insect bites.	Encourages spread of infection. Do not apply to broken skin or rashes due to skin infection e.g. ringworm. Avoid prolonged use
	Proprietary NSAID gel/ointment 30g	As instructions on packaging	Anti-inflammatory. Joint and muscle pain relief	See package insert
	Miconazole nitrate 2% cream 30g	Apply 12 hourly for 10 days	Antifungal. Fungal skin and nail infections e.g. athlete's foot, ringworm	Uncommon
	Terbinafine 1% cream 30g	Apply to affected area twice a day for 2 weeks	Antifungal. Fungal skin and nail infections e.g. athlete's foot, ringworm	Skin reactions
	Clotrimazole 500mg pessary	Insert 1 pessary (single dose). A repeat dose may be required after a week	Antifungal. Treatment of vaginal or vulval thrush	Local irritation
	Silver sulfadiazine 1% cream 50g	Applied to burn in burn bag, under dressing or alone. Apply to wound in sterile manner once daily or more frequently if discharging	Antibiotic. Prophylaxis and treatment of infection in burns	Skin reactions
	Proprietary antiseptic cream	As instructions on packaging	Prevention of skin infections	See package insert



Ref. No.		Doses/route	Type of Drug/uses	Side effects
	Permethrin 5% cream 30g	Apply cream to whole body, allow to dry and wash off after 12 hours. Repeat after one week	Scabies and crab lice infestations	Skin irritation. Avoid contact with eyes, broken or infected skin
	Malathion 0.5% 200ml	Apply cream to whole body, allow to dry and wash off after 12 hours for crab lice, 24 hours for scabies. Repeat after one week. For head lice rub into dry hair and scalp, wash off after 12 hours	Head lice, crab lice and scabies	Allergy, skin reactions. Hair may catch fire after treatment if close to naked flame. Do not use on broken skin. Avoid contact with eyes
	Proprietary barrier cream	As instructions on packaging	Applied to affected area	
	Magnesium sulphate paste 50g	Apply under dressing daily	Assist drainage of superficial skin abscesses. If no improvement, or signs of spreading infection, contact TMAS	
(b)	Chloramphenicol 1% ointment 4g	Apply 8 hourly to affected area	General purpose ear/eye/skin antibiotic. Use after foreign body/minor injury and for conjunctivitis	Transient stinging. Avoid prolonged use
	Dexamethasone 0.1% 0.5ml	1-2 drops into affected eye 4 to 6 hourly	Treatment of inflamed irritated eyes. Anti-inflammatory. Contact TMAS before using	Eye discomfort



Ref. No.		Doses/route	Type of Drug/uses	Side effects
	Tetracaine 0.5% 0.5ml	1-2 drops into affected eye, do not use repeatedly. Use eye patch to avoid eye injury whilst numbed	Local anaesthetic drops for eye. Useful for numbing eye before removing foreign bodies and for acute pain e.g. in arc eye	Stings the eye for a short time
	Pilocarpine 2% 0.5ml	2 drops 6 hourly	Pupil constrictor (miotic). Used to treat raised pressure in the eye (glaucoma)	Blurred vision, headache, eye discomfort
	Fluorescein strips Fluorescein Sodium 1% 0.5ml	Moisten strip with saline solution and touch to white of eye or inside lower lid. 1-2 drops to affected eye	Staining for detection of foreign bodies and scratches or ulcers of the front of the eye (cornea)	Results in a yellow eye for several hours
	Saline sterile solution for eyewash 20ml	As required		
(c)	Combined antibiotic and steroid eye/ear drops 10ml	To the affected eye 4-6 hourly. To the affected ear 3 drops 6-8 hourly	General purpose antibiotic/ anti-inflammatory ear drops for Inflammation/infection of the outer ear or eye. Seek medical advice before using in a 'red eye' or with signs of infection	Nil in normal use. Avoid prolonged use
	Xylometazoline 0.1% 10ml Oxymetazoline 0.05% 15ml	2-3 drops/sprays 8 hourly for up to 7 days.	Nasal decongestant	Avoid prolonged use. Risk of rebound congestion
(d)	Proprietary antiseptic mouthwash 250ml	Rinse mouth with 10mls twice per day	Antiseptic mouthwash for sore throats, mouth sores etc.	See package insert



Ref. No.		Doses/route	Type of Drug/uses	Side effects
(e)	Lidocaine hydrochloride 1% 5ml inj	Inject around wound edges, 2-5mls usually sufficient, no more than 20mls in an adult	Local anaesthetic injection for numbing small wounds for treatment	Fits, heart problems in overdose or in accidental injection into a vein
	Lidocaine 2% and chlorhexidine 0.25% in lubricant gel (in applicator)	Instil 11ml from pre-filled syringe or apply to affected area	Local anaesthesia to skin, urethra, mouth. Used to numb urethra for insertion of urinary catheter	Avoid prolonged usage. Use once for insertion of urinary catheter
	Proprietary anaesthetic gel	As instructions on packaging	For dental or mouth pain e.g. mouth ulcers	See package insert
	Oil of Cloves 10ml	Apply sparingly to affected tooth as required	Natural oil with local anaesthetic properties useful in treating toothache	Nil in normal use



SPECIMEN REQUISITION FORM FOR USE WHEN OBTAINING CONTROLLED DRUGS

Controlled drugs should be obtained only from a pharmacist or other person licensed to supply drugs, and they will require an order worded along the lines below. The order must be signed by either the vessel’s owner or its master. If used in the UK, the requisition form must be an approved form⁹. E.g. in England, form FP10CDF should be used for the purposes of requisitioning all Schedule 2 and 3 controlled drugs ([FP10CDF form](#) from NHSBSA website). Please check which requisition form is required with the authorities from whom you are ordering the controlled drugs.

<u>Requisition</u>	
To	- (name and address of authorised supplier).
From	- (Name of Master or Shipowner)
Vessel Name	- (Name of vessel)
Address	- (Address of the Ship or the Ship owner)
Please supply - (name, strength and quantity of drugs in words and figures and purpose for which the drug is supplied).	
The above drugs are required for the medical stores of the above vessel in compliance with the Merchant Shipping (Medical Stores) Regulations 1995.	
Signature
Name [capital letters]
Occupation
Date

It is not necessary for the owner or master to personally receive the controlled drugs from the supplier, but if the drugs are received by another person the requisition must be endorsed as follows:

<i>I empower to receive the above drugs on my behalf. A specimen of their signature is provided below.</i>	
<i>Specimen signature of person empowered</i>
<i>Signature of master/owner</i>

⁹ The Misuse of Drugs Regulations 2001 (S.I. 2001/3998) regulation 14
<https://www.legislation.gov.uk/uksi/2001/3998/contents/made>



COMPLETION OF THE CONTROLLED DRUGS REGISTER

SECTION 1 – DRUGS OBTAINED FROM AUTHORISED SUPPLIER OR CONFISCATED FROM SEAMAN

Date obtained	Suppliers Name & Address	Amount obtained	Name of drug and form in which obtained
01/01/01	H.M Kingston Chemists 24 Elliot Street Southampton	10 ampoules	Morphine Sulphate 10 mg in 1 ml in glass ampoules

SECTION 2 – DRUG DISPENSED OR DISPOSED OF

Date	Name & Address of person given drug	Right of person to have drug	Amount Supplied	Drug and form in which supplied
01/02/01	TH Laidlaw Log book ref. 21	Injured crewman (fractured humerus)	Two ampoules	Morphine sulphate 10mg in 1ml (in glass ampoules)
10/02/01	HM Kingston Chemist 24 Elliot Street Southampton	Qualified retail pharmacist	8 ampoules	Morphine sulphate 10mg in 1ml (in glass ampoules)

