



MLN 4.1

Revision No 3

DEPARTMENT OF ECONOMIC DEVELOPMENT

MLC Title 4.1 Medical care onboard ship and ashore

This MLN provides guidance on compliance with Isle of Man (IOM) Regulations which give effect to MLC 2006 Title 4.1. Implementation of these guidelines will be taken as evidence of compliance with the Isle of Man Regulations.

The guidelines do not preclude the shipowner from demonstrating an equivalent or higher standard as an "alternative method" of evidence of compliance.

Documents referred to in this notice:

Merchant Shipping (Maritime Labour Convention) Regulations 2013 (SD 0234/13);
Merchant Shipping (Medical Stores) Regulations 2001 (SD 735/01);
Merchant Shipping (Medical Stores) Regulations 2015 (SD 2015/0055);
Merchant Shipping (Crew Accommodation) Regulations 1978 (1978 No.795);
The Misuse of Drugs Regulations 2001 (SI 2001/3998);
The Misuse of Drugs Regulations (Application) Order 2002 (SD 72/02);
The Ship Captain's Medical Guide, published with permission of the Maritime and Coastguard Agency on behalf of the Controller of her Majesty's Stationery Office;
International Medical Guide for Ships, published by the World Health Organization;
International Aeronautical and Maritime Search and Rescue Manual;
International Convention on Maritime Search and Rescue, 1979;
MSN 1768 (M+F) Ships' Medical Stores published by the Maritime and Coastguard Agency; and
International Maritime Dangerous Goods Code, 2012 edition (IMDG Code).
Most regulations and notices are available on the Isle of Man Government website: www.iomshipregistry.com or by contacting marine.survey@gov.im

Medical care onboard ship and ashore

MLC Regulation 4.1 requires the shipowner to provide medical and essential dental care at no cost to seafarers. In general, the seafarer should have health care as comparable as possible to that generally available to workers ashore. This MLC Requirement is prescribed in the following Isle of Man Regulations:

- Merchant Shipping (Maritime Labour Convention) Regulations 2013, Part 13 Medical care on-board ship and ashore; and
- Merchant Shipping (Medical Stores) Regulations 2001 – please note on **01/07/2015** the (Medical Stores) Regulations 2001 will be revoked and the Merchant Shipping (Medical Stores) Regulations 2015 will enter into force. Shipowners should ensure that their Isle of Man registered ships comply with the medical stores requirements as stated in Part 2 of this MLN by the 01/07/2015.

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Section 1

Medical care onboard ship and ashore

1.1 Qualified medical doctor and medically trained personnel onboard

All ships are required to carry qualified medical personnel in accordance with the following minimum requirements:

- 1 Ships carrying 100 or more persons and ordinarily engaged on international voyages of more than 3 days' duration must carry a qualified medical doctor.
- 2 Ships which are ordinarily capable of reaching qualified medical care and medical facilities within eight hours must have at least one designated seafarer with STCW A-VI/4.1 approved medical first-aid training.
- 3 All other ships must have at least one designated seafarer with STCW A-VI/4.2 approved medical care training, who is in charge of medical care and administering medicine as part of his or her regular duties.

1.2 Radio equipment and radio medical advice

A ship must carry a complete and up-to-date list of radio stations relevant to the ship's area of operation, through which medical advice can be obtained. If the ship is equipped with satellite communication it must carry an up-to-date and complete list of coast earth stations where medical advice can be obtained.

Radio Medical Advice is available to all ships at sea by contacting HM Coastguard. Advice is provided by two UK designated centres at Aberdeen Royal Infirmary and Queen Alexandra Hospital, Portsmouth, but initial contact should be made with the Coastguard.

1.3 Preventative measures and health education programmes

Shipowners must provide information on preventative measures such as health promotion and health education programmes to seafarers. In order to achieve this, reference can be made to information on health promotion and education activities available through several industry publications. For example www.seafarershealth.org

The shipowner should refer to information regarding occupational accidents, diseases, and fatalities available through the IOM Ship Registry annual report, flag State and industry publications, in order to integrate lessons learned.

1.4 Publications

All ships must maintain current copies of the following publications for assistance in developing medical help and evacuation programs:

- International Medical Guide for Ships or the Ship Captain's Medical Guide;
- International Code of Signals as required by SOLAS Chapter V regulation 21; and
- ships carrying dangerous goods (in packaged or bulk form) must also carry the 'Medical First Aid Guide for Use in Accidents Involving Dangerous Goods'.

A seafarer with responsibility for medical care or medical first-aid must be instructed in the use of the ship's medical guide and the medical section of the most recent edition of the

International Code of Signals, to enable the designated seafarer to understand the type of information needed by the advising doctor as well as the advice received.

1.5 Forms to be carried on Isle of Man registered ships

The *Ship Master's Medical Report Form (IOM form MR001 or shipowners equivalent)*, *Patient Health Status Form (IOM form MR002)*, and *Report of a case of Occupational Disease (IOM form OD001)* should be available onboard. The information collected on these forms must remain confidential and should not be communicated with anyone who is not involved with the medical care of the seafarer.

MR001 – Ship Master's Medical Report Form (refer to Appendix 4)

The purpose of MR001 is to capture a sufficiently comprehensive record of every medical case onboard and thereafter it shall be safely filed in the ships medical log. The form records the initial onboard report details on the front page and continues on the back page with any telemedical details that may have been requested by the ship, (applicable radio logs may be attached as relevant medical records). It concludes with a report from the examining doctor in a case where the seafarer needs to be seen by a doctor. On ships that carry a doctor this may be an onboard visit but more likely will be a visit to a doctor onshore. Shipowners may use their own Medical Report form(s) so long as they contain, as a minimum, the information in MR001.

MR002 – Patient Health Status Form (refer to Appendix 5)

Form MR002 is used when an injured or sick seafarer requires medical evacuation. This form provides the most important and immediate details of the patient that will be relevant to the medivac service and/or the onshore medical facility. In preparation for evacuation, the completed MR002, the seafarer's medical records (if available) and any other necessary documentation such as passport can be placed in a (plastic) envelope ready to be sent with them.

OD001 – Report of a case of Occupational Disease (refer to Appendix 6)

There is a legal requirement to report any occupational disease occurring on a Manx ship to the IOMSR. Information on the reporting of occupational diseases can be found in MLN 4.3(E).

1.6 Medical care ashore

Seafarers have the right to visit a medical doctor or dentist without delay in ports of call where practical. '*Where practical*' relates to the availability of medical facilities and not the convenience of the ship.

The shipowner should assist seafarers suffering from disease in gaining admission to medical facilities for care.

1.7 Medical assistance to other ships and international cooperation

The shipowner should provide guidance for rendering aid to other ships in distress. Guidance can be obtained from the *International Convention on Maritime Search and Rescue, 1979*, as amended, and the *International Aeronautical and Maritime Search and Rescue (IAMSAR) Manual*. These publications, if applicable, should be onboard the ship.

Section 2

Medical stores

2.1 Merchant Shipping (Medical Stores) Regulations 2015

The new Merchant Shipping (Medical Stores) Regulations 2015 will enter into force on **01/07/2015** and it should be ensured that Isle of Man registered ships carry medical stores as stated in this Section by this date. Prior to 01/07/2015 the Merchant Shipping (Medical Stores) Regulations 2001 remains in force.

The new Regulations apply to all ships subject to the Maritime Labour Convention and the requirements for medical stores are stated in MLC regulation 4.1.4, which requires that national laws and Regulations shall as a minimum provide for the following -

all ships shall carry a medicine chest, medical equipment and a medical guide, the specifics of which shall be prescribed and subject to regular inspection by the competent authority; the national requirements shall take into account the type of ship, the number of persons onboard and the nature, destination and duration of voyages and relevant national and international recommended medical standards.

The shipowner and the master must ensure the ship is equipped and operated in accordance with the Regulations.

2.2 Medical stores categories

All IOM registered ships subject to the new Regulations will be required to carry medical stores in compliance with the list stated in Appendix 1. This list has been reproduced from the medical stores list included in the Maritime and Coastguard Agency publication MSN 1768 (M+F), which is an updated version of the existing IOM requirements.

The medical stores list has 3 categories which are defined as follows:

- a. a ship which operates 30 nautical miles or less from the nearest port with adequate medical facilities must carry medical stores of Category C;
- b. a ship which operates more than 30 but less than 150 nautical miles from the nearest port with adequate medical facilities must carry medical stores of Category B; and
- c. all other ships must carry medical stores of Category A.

A provision is available in the new Regulations for a shipowner, having taken advice from a qualified medical practitioner or pharmacist, to determine whether any additional or different quantities, products or equipment are required onboard, having taken into account the nature of the voyage and in particular:

- a. ports of call;
- b. destination;
- c. duration;
- d. type of work to be carried out during a voyage;
- e. nature of the cargo;
- f. number of persons working onboard; and

- g. anti-malarial drugs if operating in tropical areas.

If this provision is used and the ship is carrying medical stores containing different products or equipment or fewer quantities than stated in Appendix 1, evidence must be available (e.g. a letter, or email correspondence) to show that a qualified medical practitioner or pharmacist has been consulted in accordance with the requirements stated above.

It is also permissible, if following the advice from a qualified medical practitioner or pharmacist, to substitute exact equivalents to the medicine and dosage required in Category A, B or C medical stores, provided the equivalent level of treatment is assured.

2.3 First aid kits

In addition to any other medical stores required by the Regulations, ships of:

- a. less than 500 GT must carry at least one first aid kit, which shall be kept in an easily accessible location as determined by the shipowner; and
- b. 500 GT or more must carry a minimum of three first aid kits; one must be located in the galley, one in the engine room and one at an easily accessible location such as in the hospital or on the bridge.

First aid kits must be portable and be enclosed in a waterproof container.

The contents of the first aid kit are set out in Appendix 2.

2.4 Medical stores to be carried on a ship transporting dangerous goods

All ships carrying dangerous goods in excess of the limited quantities permitted in the IMDG Code must:

- a. carry the correct medicines and equipment in the quantities specified in Appendix 14 of the MFAG for the type of dangerous goods carried; and
- b. have an up to date copy of the MFAG available onboard.

If the medicines and equipment specified in the MFAG are already included in the ship's medical stores, additional stocks do not have to be carried.

*MFAG - Medical First Aid Guide for Use in Accidents Involving Dangerous Goods which is the Chemicals Supplement to the International Medical Guide for Ships, published by the World Health Organisation.

2.5 Emergency medical kit for Ro-Ro passenger ships not normally carrying a doctor

Ro-Ro passenger ships (including high-speed craft) not normally carrying a doctor must carry an 'emergency medical kit/bag' which must:

- a. be portable;
- b. contain the list of contents of the "emergency medical kit/bag" as stated in the Appendix to MSC/Circ.1042*;
- c. be kept securely;
- d. be labelled as follows:

"The medicines in this bag are to be used by a qualified medical practitioner or a registered general nurse, a qualified paramedic or a ship personnel in charge of the medical care onboard under the direct supervision of a medical practitioner onboard the ship or under telemedical advice/ prescription by a TeleMedical Advice Service (TMAS);" and

- e. be maintained by the master or a person authorised by the master.

*MSC/Circ.1042 means the document entitled 'List of Contents of the Emergency Medical Kit/Bag' and Medical Consideration for its Use on Ro-Ro Passenger Ships Not Normally Carrying a Medical Doctor' published by the Maritime safety Committee of IMO on 28 May 2002.

2.6 Standards of medical stores

All medical stores must conform to the standards and requirements of the:

- a. British Pharmacopeia;
- b. European Pharmacopeia; or
- c. United States Pharmacopeia.

If there is ever any doubt as to whether a medicine conforms to one of the required standards, the packaging can be checked. If the medicine conforms to British Pharmacopeia it will state (BP), European Pharmacopeia (Ph Eur) and United States Pharmacopeia (USP).

2.7 Storage of medicines

All medicines must be stored in a locked cabinet to prevent misuse, while ensuring they can be promptly accessed when they are required to be used.

This does not apply to first aid kits and the emergency medical kit or bag.

Any storage advice issued from the medicine's manufacturer should be followed, such as requirements for refrigeration or keeping the medicine in a dry ventilated environment.

2.8 Expired medicines & incineration

Expired medical stores must be:

- a. withdrawn from use;
- b. placed in a separate secure container;
- c. clearly marked as expired on the packaging; and
- d. removed from the ship at the first port of call after expiry, where disposal is permitted, but in any event within 3 months of expiry.

Expired medical stores (with the exception of controlled drugs) may be destroyed in the ship's incinerator. This is permitted if:

- a. if it has not been possible to dispose of the expired medicines ashore; and
- b. the ship must have a written medicine waste disposal policy that includes procedures for incinerating medical stores at appropriate temperatures by authorised personnel.

2.9 Medical stores inventory

An inventory of all medical stores must be maintained by the master, or a person authorised by the master, in order to verify the correct medical stores are maintained onboard.

The inventory must:

- a. be updated each time an item is purchased, disposed of, or used; and
- b. include, for each item:
 - i. the generic name;
 - ii. the expiry date, if any; and
 - iii. quantity.

2.10 Inspection of medical stores

Medical stores must be inspected on an annual basis to ensure:

- a. the ship is carrying the correct category of medical stores;
- b. medical stores are in date;
- c. medical stores are correctly stored;
- d. the inventory of medical stores is up to date;
- e. the controlled drugs register is up to date; and
- f. expired medical stores have been withdrawn from use.

The inspection may be carried out by:

- a. the master, a medical doctor or a qualified pharmacist; or
- b. a person authorised by the master, providing there are written procedures onboard which must include all the requirements set out in the paragraph above.

2.11 Automated External Defibrillators (AEDs)

AEDs are used to treat sudden cardiac arrest. AEDs analyse the individual's heart rhythm and can send an electric shock to the heart to try to restore a normal rhythm. Modern AEDs are inexpensive and simple to operate.

It is not a statutory requirement for ships to carry AEDs and it is a matter for shipowners to decide whether or not to include an AED as part of the ship's medical stores.

If an AED is carried, it is recommended that procedures are put in place to ensure the equipment is maintained in accordance with the manufacturer's instructions and training should be provided to the person(s) designated to operate the equipment.

Section 3 Controlled drugs

Specific provisions for controlled drugs required to be carried on a ship as part of the medical stores, are regulated by the UK's Misuse of Drugs Regulations 2001 (SI 2001/3998). This has been applied with some minor changes to the Isle of Man via the Misuse of Drugs Regulations (Application) Order 2002 (SD 72/02). These Regulations apply to an Isle of Man registered ship wherever it may be located.

Schedule 2 of the Misuse of Drugs Regulations 2001, states the list of controlled drugs. It should be noted that morphine sulphate and codeine phosphate are required to be carried on an Isle of Man ship operating in a category A or B area. These drugs are defined as a controlled drug in accordance with Schedule 2 of the Regulations. A copy of the latest list of drugs controlled under the misuse of drugs legislation is available on the following link:

<https://www.gov.uk/government/publications/controlled-drugs-list#history>

Controlled drugs should be obtained only from a retail pharmacist. All requests for the supply of controlled drugs require a written requisition; an example of wording which could be used is given in Appendix 3.

The following requirements apply to morphine sulphate and codeine phosphate (and any other drug listed on Schedule 2 of the Regulations) if they are supplied to a ship:

- a) When the drug is supplied to any person on a ship an entry shall be made in the official log book (this should not include the name of the person who the drug is administered to);
- b) All controlled drugs must be securely stored; for example in the ship's safe or in a separate locked compartment of the medical cabinet and access must be limited to the master or a person nominated by the master;
- c) Controlled drugs must not be destroyed onboard and shall be disposed of to a constable, or to a person who may lawfully supply that drug; and
- d) A record must be made in the controlled drugs register and a separate register or separate part of the register shall be used for each drug. The controlled drugs register must be retained onboard for two years after the date of the last entry. Shipowners may use their own register or purchase a commercially available version. An example of the controlled drugs register is shown below:

FORM OF REGISTER

Record of _____ obtained and issued

Date	Obtained from or issued to		Authority of person supplied to possess	Quantity		
	Name	Address		Obtained	Issued	Remaining

It is recommended that receipts are kept whenever controlled drugs are supplied to the ship or sent ashore for disposal.

Ships should not carry quantities of morphine sulphate and codeine phosphate greater than the quantities stated in Appendix 1.

Section 4

Precautions against malaria

There is a significant risk for any person travelling to a malaria risk area of getting malaria and preventative precautions must be taken.

Avoiding malaria involves several steps known as the ABCD approach of malaria prevention, which is recommended by the UK's National Health Service:

1 Awareness of risk

The shipowner and master need to be aware if the ship is travelling to a malaria risk area so the seafarers can be advised and preventative action can be taken. Advice on malaria risk areas worldwide is available on the National Travel Health Network and Centre website:

<http://www.nathnac.org/travel/factsheets/malaria.htm>

2 Bite avoidance

In order to reduce the chance of being bitten:

- a. cabin and accommodation doors, windows and natural air ventilators must be kept shut. The Merchant Shipping (Crew Accommodation) Regulations 1978 has specific requirements for protecting the crew accommodation by means of screening which must be followed;
- b. pools of stagnant water should not be allowed to develop on deck or in lifeboats where mosquitoes might breed;
- c. any person going on deck or ashore especially during early evening and at night, should:
 - i. wear light loose-fitting trousers and shirts with long sleeves; and
 - ii. use insect repellent on skin which should be re-applied frequently. The most effective repellents contain Diethyltoluamide (DEET); and
- d. if staying ashore in non-air conditioned accommodation, sleep under an intact mosquito net that has been treated with insecticide.

3 Check if malaria prevention tablets need to be taken

If malaria prevention tablets need to be taken, it should be ensured the right antimalarial tablets are taken at the correct dose and the course must be finished. Anyone suffering from another illness or taking treatment for another medical condition, should check with a doctor to ensure they are prescribed medication they can tolerate.

4 Diagnosis

Nothing guarantees 100% protection against malaria. If anyone shows any symptoms while they are in an area where malaria is found, or after being in an area where malaria is found they need to see a doctor immediately. The doctor will need to be advised of any antimalarial tablets which have been taken and the countries the patient has travelled to in the last 12 months.

Further information on preventing malaria can be found in the Ship Captain's Medical Guide and on the National Health Service website:

<http://www.nhs.uk/Conditions/Malaria/Pages/Prevention.aspx>

Section 5

Guidance on the carriage of medical oxygen cylinders

Appendix 14 of the Medical First Aid Guide (MFAG) requires ships carrying dangerous goods to carry 40 litres@200bar oxygen cylinder(s) in the ship's hospital. The Ship Registry considers carrying such large quantities of oxygen inside the accommodation may pose both fire and safety issues. As a result of consultation with industry, this appendix offers guidance to IOM registered ships on how such quantities of oxygen can be safely installed.

The MFAG applies to ships:

- a. carrying substances stated in the general index of the International Maritime Dangerous Goods Code (IMDG Code);
- b. complying with the International Code for the Construction and Equipment of ships carrying Dangerous Chemicals in Bulk (IBC Code as amended); and
- c. complying with the International Code for the Construction and Equipment of Ships Carrying Liquefied Gases in Bulk (IGC Code)

In order for a ship to comply with Column A or B of Appendix 14 of the MFAG, the following quantities of oxygen are required:

- 40 litre@200 bar medical oxygen cylinder in the ships hospital, assembled for direct use with 1 flow meter unit with two ports for supplying oxygen for 2 persons at the same time. If more than 1 non-portable oxygen cylinder is used, there must be 2 flowmeter units for supplying oxygen for 2 persons at the same time; and
- one complete portable set with 2litre@200 bar of oxygen ready for use and a spare cylinder of 2litre@200 bar.

Storage of medical oxygen cylinders

In order to resolve the conflict between the intentions of MFAG and the fire and safety issues, the Ship Registry recommends that compliance with the MFAG requirements can be achieved by either of the following means.

a. The supply of smaller cylinders inside the accommodation

The required amount of medical oxygen in a number of smaller cylinders: for example 4 cylinders of approximately 10 litres@200bar each, or equivalent. One of the cylinders should be stored in the hospital ready for immediate use. The other remaining cylinders are to be securely stored in a suitable space outside the accommodation, where the cylinders will be protected from deterioration and where the risk of fire and explosion is minimised.

b. The use of a single 40 litre cylinder fitted with a safety device to prevent accidental release

As a consequence of the difficulty that can be experienced in obtaining and refilling 10 litre cylinders, in the event that a 40 litre cylinder is installed it is recommended the following guidance is used:

The 40 litre@200bar medical oxygen cylinder can be stored:

- outside the accommodation block, as close to the hospital as is reasonably possible, in a secure and weather protected cabinet; or

- inside the accommodation block in the hospital beside the bed(s), provided the cylinder is securely locked in a frame connected directly to the steel structure of the ship.

In either case, it is recommended the safety device to prevent accidental release of high pressure oxygen into the hospital is installed as follows:

The oxygen regulator in the pipework from the 40 litre cylinder should have a relief valve fitted with a discharge line piped outside the hospital to free air. This ensures that if there is a fault in the system, high pressure oxygen cannot escape into the low pressure side of the system, and will be vented outside of the accommodation.

All systems should be maintained and inspected as follows:

- inspected annually onboard by a competent person in compliance with the manufacturer's instructions. *Note: a competent person may be a senior member of the ships staff.*
- medical oxygen has a limited shelf life of 3 years and should be landed ashore for re-charging prior to the expiry date.
- the cylinders are to be hydrostatically tested every 5 years, or at an interval specified by the manufacturer, whichever occurs sooner.
- oxygen pressure regulators should be serviced at least every 5 years.
- grease or oil should not be used to lubricate high pressure oxygen fittings.
- all high pressure pipes from the bottle to the regulator should be subject to a pressure test every 3 years by the manufacturer or his appointed agents.
- the hospital ventilation system should be maintained as per the manufacturer's instructions and operating correctly at all times.
- there should be a warning sign on the hospital door stating; *'high concentrations of oxygen may be present'.*
- there should be a sign in the hospital adjacent to the oxygen installation stating; *'all system valves to be shut when not in use'.*

Appendix 1

Medical stores for vessel categories A, B & C

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

The columns in this Appendix are as follows:

Column 1 shows the reference number in EC Directive 92/29. This is included for identification of treatments when seeking or receiving radio medical advice from any European Union Member State.

Column 2 lists the treatment requirements.

Column 3 states the medicine and dosage strength considered to best comply with the treatment requirements. Shipowners may substitute exact equivalents on the advice of a qualified medical practitioner or pharmacist, provided they are satisfied that an equivalent level of treatment is assured.

Column 4 shows the quantity of medicine / equipment considered sufficient to provide treatment for 10 workers or for the crew of a lifeboat or liferaft.

1	2	3	4		
Ref No.	Treatment requirements	Medicine and dosage strength representing best practice	Quantity for 10 workers		
			A	B	C
1. Cardio Vascular					
(a)	Cardiovascular analeptics Sympathomimetics	Adrenaline / Epinephrine injection BP 0.5ml – adrenaline acid tartrate injection 1.0mg in 1ml (1 in 1000)	10*	5*	-
		and / or Epipen (Adrenaline 0.3mg)	5	5	-
(b)	Anti-angina preparations	Glyceryl Trinitrate Spray 400 micrograms / metered 200 dose aerosol and	1 unit	1 unit	1 unit
		transdermal patches 5mg x 2	2	2	-
(c)	Diuretics	Frusemide / Furosemidei	28*	28*	-
		i) 40mg tablets ii) 10mg in 1ml inj. (2ml ampoule)	2	-	-
(d)	Anti-haemorrhagics if there are women with potential for childbearing working onboard (including uterotonics)	i) Phytomenadione (Vitamin K1) paediatric injection (0.2ml ampoule)	1*	1*	-
		ii) Ergometrine 500mcg , Oxytocin 5 units (1ml ampoule) (Syntometrine)	2*	1*	-
(e)	Anti-hypertensive	Atenolol 50mg tablets	28	-	-
2. Gastrointestinal system					
(a)	Medicines for gastric and duodenal disorders i) Histamine H2 receptor anti-ulcer antagonists ii) Antacid mucous mixture	Cimetidine 400mg tablets	60	-	-
		Proprietary Antacid of choice	As reqd	As reqd	-

1	2	3	4		
Ref No.	Treatment requirements	Medicine and dosage strength representing best practice	Quantity for 10 workers		
			A	B	C
(b)	Antiemetics	i) Prochlorperazine maleate 3mg buccal tablets ii) Promethazine hydrochloride 25mg per ml (1ml ampoules) iii) Hyoscine hydrobromide 0.3mg tablets or Cinnarizine 15mg	50* 10* 60 60	50* - 60 60	- - 60 60
(c)	Lubricant laxatives	Glycerol Suppository mould 4mg	12	-	-
(d)	Antidiarrhoeals	Loperamide 2mg capsules	30	30	30
(e)	Intestinal antiseptics	i) Trimethoprim 200mg tablets ii) Ciprofloxacin 500mg tablets iii) Metronidazole 400mg tablets	Use 7(b) 7(a)ii 7(e)	Use 7(b) 7(a)ii 7(e)	- - -
(f)	Haemorrhoid preparations	Proprietary preparation of choice	As reqd	As reqd	-
3. Analgesics AntiSpasmodics					
(a)	Analgesics, antipyretics and anti-inflammatory agents	i) Paracetamol 500mg tablets and ii) Ibuprofen 400mg tablets iii) Diclofenac sodium 50mg suppository	100 100 10	50 50 -	50 50 -
(b)	Powerful analgesics	i) Codeine Phosphate 30mg tablets ii) Morphine Sulphate 10mg in 1ml injection (1ml ampoule) or Nalbuphine 10mg in 1ml injection	28 10 10	28 10 10	- - -
(c)	Spasmolytics	Hyoscine butylbromide 10mg tablets.	56	56	-
4. Nervous system					
(a)	Anxiolitics	i) Diazemuls injection 5mg per ml, (2ml ampoules) ii) Diazepam 5mg tablets	5* 28*	- -	- -
(b)	Neuroleptics	i) Chlorpromazine hydrochloride 25mg injection ii) Chlorpromazine hydrochloride 25mg tablets	5* 28*	- 28*	- -
(c)	Seasickness remedies	Hyoscine hydrobromide 0.3mg tablets or Cinnarizine 15mg	Use 2b(iii)	Use 2b(iii)	Use 2b(iii)
(d)	Anti-epileptics	Diazepam rectal dispenser 10mg in 2.5ml	5	5	-

1	2	3	4		
Ref No.	Treatment requirements	Medicine and dosage strength representing best practice	Quantity for 10 workers		
			A	B	C
5. Antiallergics and Anti-anaphylactics					
(a)	H ₁ Antihistamines	Cetirizine 10mg tablets	30*	30*	-
(b)	Injectable /oral glucocorticoids	i) Hydrocortisone injection powder for reconstitution 100mg vial with 2ml water for injection / ready diluted 100mg in 1ml injection	3	1	-
		ii) Prednisolone 5mg tablets	28	28	-
6. Respiratory System					
(a)	Bronchospasm preparations	i) Salbutamol inhaler 100 micrograms per metered dose. 200 dose inhaler with volumatic	1	1	-
		ii) Beclomethasone 100 micrograms per metered dose inhaler	1	1	-
(b)	Antitussives	Proprietary cough mixture	As reqd	As reqd	-
(c)	Medicines used for colds and sinusitis	Paracetamol 500mg tablets or proprietary cold remedy	Use 3a(i) As reqd	Use 3a(i) As reqd	-
7. Anti-infection					
(a)	Antibiotics	i) Benzylpenicillin – benzylpenicillin sodium 600mg injection (powder for reconstitution in a rubber capped and metal topped vial) and water for injection 2ml	10	2	-
		ii) Ciprofloxacin (as hydrochloride) 500mg tablets	20	10	-
		iii) Cefuroxime injection 750mg vial and water for injection	20	-	-
		iv) Erythromycin 250mg tablets	28	28	-
		v) Doxycycline 100mg capsules	8	-	-
(b)	Antibacterial /	Trimethoprim 200mg tablets	14	14	-
(c)	Urinary antiseptics				
(d)	Antiparasitics	Mebendazole 100mg tablets	6*	6*	-
(e)	Intestinal anti-infectives	Metronidazole suppositories 1g	10	-	-
		Metronidazole 500mg or 400mg tablets	21	21	-
(f)	Anti-tetanus vaccines and immunoglobulin	i) Tetanus vaccine (0.5ml ampoule) or tetanus & diphtheria vaccine	5*	1*	-
		ii) Tetanus Immunoglobulin ampoule for injection	1*	-	-

1	2	3	4		
Ref No.	Treatment requirements	Medicine and dosage strength representing best practice	Quantity for 10 workers		
			A	B	C
8. Compounds promoting rehydration, caloric intake and plasma expansion					
	WHO Generic Formula	Sodium chloride & dextrose rehydration salts sachets of Oral Rehydration Salts, Formula A. (BP Oral powder in sachet to provide Na=35mmol, K=20mmol, Cl-37mmol, HCO ³ =18mmol and glucose 200mmol when reconstituted in a litre of water) or Proprietary equivalent e.g. Dioralyte	1 Box (16-20)	1 Box (16-20)	-
9. Medicines for external use					
(a)	Skin medicines				
	Antiseptic solutions	100ml solution or pre-impregnated wipes containing 0.015% w/v chlorhexidine and 0.15% w/v cetrimide	1* bottle or 1 pack wipes	1* bottle or 1 pack wipes	1* bottle or 1 pack wipes
	Antibiotic ointments	Neomycin / Bacitracin cream 15g tube	1	1	-
	Anti-inflammatory and analgesic ointments	i) Hydrocortisone 1% cream 15g tube ii) Proprietary NSAID gel/ointment	2 As reqd	- As reqd	- As reqd
	Antimycotic skin creams	i) Benzoic ointment BP 50mg(benzoic acid 6%; salicylic acid 3%), in emulsifying ointment 15g	3	1	-
		ii) Miconazole nitrate 2% topical cream 30g	2	1	-
		iii) Clotrimazole 500mg pessary (if women onboard)	2	1	-
	Burn preparations	i) Silver Sulfadiazine 1% cream 50g tube	2	1	-
		ii) Proprietary antiseptic cream	-	-	1
	Miscellaneous skin preparations	i) Permethrin 1% in a base containing isopropylalcohol 20% cream rinse	2*	-	-
		ii) Zinc ointment, BP (containing zinc oxide 15%) 25g	1*	-	-
		iii) Potassium permanganate crystals 10g container / Permitabs pack	1*	-	-

1	2	3	4		
Ref No.	Treatment requirements	Medicine and dosage strength representing best practice	Quantity for 10 workers		
			A	B	C
(b)	Eye Medicines				
	Antibiotic ointment	Chloramphenicol 1% 4g tube <i>All eye drops are recommended in Minim (single dose) form:</i>	4	1	-
	Antibiotic drops	Neomycin sulphate 0.5% 0.5ml	20*	20*	-
	Anti-inflammatory drops	Dexamethasone sodium phosphate 0.1% 0.5ml	20*	20*	-
	Anaesthetic drops	Amethocaine hydrochloride 0.5% 0.5ml	20*	20*	-
	Hypotonic drops	Pilocarpine nitrate 2% 0.5ml	20*	20*	-
	Diagnostic drops	Fluorescein sodium 1% 0.5ml (for detection of foreign bodies / scratches / ulcers)	20	20	-
(c)	Ear/Nasal Medicines				
	Antibiotic / anti-inflammatory solution	Antibiotic eardrops containing in each ml; neomycin 3,400 units, polymixin B sulphate 10,000 units, hydrocortisone 50mg (5ml dropper bottle)	1*	1*	-
		Decongestant solution: Ephedrine nasal drops BP 0.5% ephedrine hydrochloride (10ml bottle)	1*	1*	-
(d)	Medicines for oral and throat infections				
	Antibiotic or antiseptic mouthwashes	Chlorhexidine gluconate 0.2% mouthwash 300ml	1	1	-
(e)	Local anaesthetics				
	Local anaesthetics given by subcutaneous injection hydrochloride 1% 50mg in 5ml for injection	Lignocaine / Lidocaine	5	5	-
	Local anaesthetic gel	Lignocaine / Lidscaine gel 2%, chlorlexidine 0.25% in lubricant (syringe)	1	-	-
	Dental anaesthetics and antiseptic mixtures	i) Proprietary gel e.g. bonjela	1	-	-
		ii) Oil of cloves 10ml	1*	1*	-

MEDICAL EQUIPMENT				
<i>Requirements</i>	<i>Specification</i>	<i>Quantity</i>		
		<i>A</i>	<i>B</i>	<i>C</i>
1. Resuscitation Equipment				
Appliance for the administration of oxygen	<i>Oxygen giving set comprising of the following:</i> 1) Oxygen reservoir (e.g. D Size 300ltr cylinder) 2) 1 flow meter unit giving a minimum setting of not less than 4ltrs per minute 3) 1 pressure regulating unit 4) 1 set of tubing 5) 5 x 24% oxygen disposable face masks 6) 5 x high concentration oxygen disposable face masks with a reservoir. Each part constructed so that it can only be assembled in the correct manner	1	1	-
Mechanical aspirator to clear upper respiratory passages	Aspirator to clear airways (manual, hand operated) + 2 catheters	1	1	-
Equipment for mouth to mouth resuscitation	Pocket face mask with valve and O ₂ inlet	1	1	1
	Guedal Airway Sizes 3 & 4	1	1	-
2. Dressing and suturing equipment				
Disposable skin stapler /or suture kit (including staple remover)	1) Sterile non-absorbable sutures swaged to a half circle needle with a cutting edge 2 sizes e.g. 16mm & 26mm	6	-	-
	2) Sterile absorbable sutures swaged to a half circle needle 1 size e.g. 26mm	3	-	-
Adhesive elastic bandage	Adhesive elastic bandage 7.5cm x 4m	4	1	1
	Crepe bandage 7.5cm x 4m	4	4	-
Tubular gauze bandage, for finger dressings	20m length with applicator	1	1	-
Disposable gloves	Latex free, vinyl	25prs	25prs	5prs
Adhesive dressings	Assorted sterile	40	40	20
Sterile bandages with unmedicated dressings (ambulance dressings)	(1) medium, No.1 (12x10) cm	5	3	2
	(2) large, No.2 (20x15) cm	5	3	2
	(3) extra large, No.3 (28x20) cm	4	2	1

Adhesive sutures	75mm adhesive suture strips	6	6	6
Sterile gauze swabs	Packet containing 5 sterile gauze pads size 7.5cm x 7.5cm	10	5	1
Sterile sheet for burns victims		1	1	-
Triangular sling / bandage		4	4	-
Paraffin gauze dressings, size 10cm x 10cm		40	10	-
3. Instruments				
Disposable scalpels	e.g. 10 blades	2	-	-
Stainless steel instrument box		1	1	-
Scissors	Stainless steel dressing scissors	1	1	-
	Sharp pointed scissors	1	1	-
Dissecting forceps	Toothed	1	1	-
Haemostatic clamps		1	1	-
Needle forceps		1	-	-
Disposable razors		5	-	-
4. Examination and monitoring equipment				
Disposable tongue depressors		10	10	-
Reactive strips for urine analysis	e.g. Multistix	1 pack	-	-
Temperature charts		1 pad	1 pad	-
Medical evaluation reports		1 pad	-	-
Pregnancy test kit	When women onboard	1	-	-
Stethoscope		1	1	-
Aneroid sphygmomanometer		1	1	-
Standard clinical thermometer		3	1	-
Hypothermic thermometer, low reading rectal thermometer		1	1	-
Sputum cup with cover	Disposable	2	-	-
Specimen jars	Strong glass or plastic with airtight lid 50ml with blank labels	2	-	-
5. Equipment for injection, perfusion, puncture and catheterization				
Bladder drainage	Bladder drainage set (including bag, spigots and tube)	1	-	-
Rectal drip set		1	-	-
Urine drainage bag	Use bladder drainage set	Use 5 (1)	-	-
Disposable syringes	2ml, 5ml, 10ml	10 of each	5 of each	-
Disposable hypodermic needles	(21G) 0.8mm and (25G) 0.5mm	30	15	-

"Sharps" disposal box	1 litre size	1	1	-
Catheter	1) Foley type 16 Charriere guage, 5ml balloon (short / medium term use in adults)	1	-	-
	2) Nelaton size 16 Charriere guage (with no balloon)	1	-	-
	3) Penile sheath set	1	-	-
6. General Medical Equipment				
Bedpan	(stainless steel or sterilisable plastic)	1	-	-
Hot water bottle	With fabric cover	1	-	-
Urine bottle (urinal)		1	-	-
Icebag		1	-	-
7. Immobilization and setting equipment				
Malleable finger splint		1	1	-
Malleable forearm and hand splint		1	1	-
Splints – simple, vacuum (inflatable only if others unavailable)	Set of four (half leg, full leg, half arm and full arm)	1	1	-
Thigh splint - (traction)	e.g. Thomas splint, Donway etc.	1	1	-
Collar for neck immobilisation – (semi-rigid)	Adult size pack of 3, small, medium and large or adjustable collar	1	1	-
8. Disinfection, Disinsectization and Prophylaxis				
Water – disinfection compound	In liquid form - litres	5	-	-
Liquid insecticide				
Powder insecticide	In liquid form - litres	5	-	-

RECOMMENDED ADDITIONAL MEDICAL EQUIPMENT			
	<i>Quantity</i>		
	A	B	C
Face masks disposable	6	6	-
Plastic measuring jug 1/2 litre size	1	1	-
Disposable paper towels	100	100	-
Latex free sterile surgical disposable gloves (large)	5prs	5prs	-
Waterproof plastic sheeting, size 1m x 2m	2	1	-
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 7.5cm 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 ship concerned)	1	1	-
Body bag – large size	1	1	-
Ships in malarial areas only – microscope slides in individual transit containers	5	5	-
1) Excavator double ended Guys' pattern G2 2) Filling paste inserter (for inserting filling paste into the tooth) 3) Dental mirror size 4 on handle 4) Cavit (temporary dental filling) tube	1 Set of all items	-	-
Scissors stainless steel or disposable	-	-	1pr
Triangular bandages about 90cm x 127cm	-	-	4
Sterile paraffin gauze dressings	-	-	10
Plastic burn bags	-	-	1

<p><i>Kit for protection against blood transmitted diseases (to be carried in all ships trading in malarial areas where medical facilities are limited and emergency shore based treatment is necessary)</i></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>Each kit to contain the following:</p> <ul style="list-style-type: none"> (1) 10 x 2ml syringes (2) 10 x 10ml syringes (3) 20 x 21G 0.8mm needles (4) 1 blood giving set (5) 1 blood taking set (6) pack of pre injection site swabs (7) disposable latex free gloves 2 pairs disposable (large size) 	1	-	-
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Appendix 2

First aid kits

The first aid kit must contain the following items which must be kept in a portable waterproof container.

4 x triangular bandages, 90cm x 127cm base

6 x medium sterile bandages with unmedicated dressing, 10cm x 8cm

2 x large sterile bandages with unmedicated dressings, 13cm x 9cm

2 x extra large unmedicated dressings, 28cm x 17.5cm

6 x medium safety pins, rustless

20 x assorted elastic adhesive dressings medicated

2 x sterile eye pads with attachment

2 x packages containing sterile gauze swabs

5 pairs of large size disposable gloves

Sterile eye wash in eye wash bottle.

Appendix 3

Example of a requisition form for obtaining controlled drugs

Controlled drugs must only be obtained from a retail pharmacist or other person licensed to supply drugs, who will require an order such as shown in the example below. The order must be signed by either the shipowner or the master.

Requisition
To(<i>name and address of authorised supplier</i>)
From.....(<i>name of ship, master or shipowner</i>)
Master's Certificate of Competency number.....
Address.....(<i>shipowner's address</i>)
Please supply.....
.....(<i>name, strength and total quantity of drugs</i>)
The above drugs are required for the medical stores of the above named ship in compliance with the Merchant Shipping (Medical Stores) Regulations 2015.
Signature.....
Name.....
Occupation.....
Date.....

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

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

SHIP MASTER'S MEDICAL REPORT FORM*(When completed, the contents of this form shall be kept confidential and shall only be used to facilitate the treatment of the patient)*

Date of report _____

Ship's identity and navigation status

Vessel Name:

Owner:

Name & address of on-shore agent:

Position (latitude, longitude) at onset of illness:

Destination and ETA (expected time of arrival):

The patient and the medical problem

Surname and first name:

Sex: Male Female

Date of birth (dd/mm/yy):

Nationality:

Seafarer registration number:

Shipboard job title:

Hour and date when taken off work:

Hour and date when returned to work:

Injury or illness

Hour and date of injury or onset of illness:

Hour and date of first examination or treatment:

Location on ship where injury occurred:

Circumstances of injury:

Symptoms:

Findings of physical examination:

Overall clinical impression before treatment:

Treatment given on board:

Overall clinical impression after treatment:

Masters signature:

Telemedical consultation

Hour and date of initial contact

Mode of communication (radio, telephone, fax, other)

Surname and first name of telemedical consultant

Details of telemedical advice given

To the Examining Doctor

Please see this patient and complete this section of the form. Return original to ships Master (or agent)

Diagnosis

Treatment (Please specify exactly all medicines to be taken including the generic name of the medicine, the required dose, frequency of the dose, the manner in which it should be taken and any other treatments required)

Should patient see another doctor? No Yes

When?

Contagious or infectious disease? No Yes

Are any precautions necessary for other crew members?

Estimated duration of illness (days)

Fit for work now

Fit for work from Date:

Fit for restrictive work What restrictions?

Unfit for work For how many days?

Bed rest necessary For how many days?

Recommended to be signed off

• and be repatriated Is air transport recommended?

• and go to hospital

The patient was seen on (date) Charge

• in the doctors office Payment received Yes No

• on board

• Elsewhere Please specify

Doctors name, address and telephone number

Doctors signature:

Patient Health Status Form

To accompany patient being evacuated

Surname and first name

Age (years)

Sex

Time (hour) and date

Vital signs

Blood pressure (systolic/diastolic)

Pulse (beats per min)

Body temperature (oral), note F or C

Presenting medical problem

Symptoms, site(s) of pain or injury, time of onset, duration of problem, contributing factors

Treatment given (medication, dressings, etc)

Telemedical advice received

Other current medical problems

Past history of significant medical problems

Current medication being taken (generic **and** brand names; dosage; time of last dose)

REPORT OF A CASE OF OCCUPATIONAL DISEASE

For IOM Registered Vessels



This form must be completed by an employer or other responsible person

Part A**About you**

What is your full name?

What is your job title?

What are your contact details?

Tel:

Fax:

Email:

About your organisation

What is the name of your organisation?

What is its address and postcode?

What is the name of the vessel?

What type of vessel is it?

Where does it operate to and from?

Part B**About the affected person**

What is their full name?

What is their date of birth?

What is their job title?

Are they

Male?

Female?

Is the affected person (tick one box)

one of your employees?

on a training scheme? Give details:

on work experience?

Employed by someone else?

Give details:

Other? Give details:

Part C

The disease you are reporting

Please give:

- The name of the disease, and the type of work it is associated with; **or**
- The name and number of the disease (See IOM MLN 4.3(E))

What is the date of the statement of the doctor who first diagnosed or confirmed the disease?

What is the name and address of the doctor?

Part D

Describing the work that led to the disease

Please describe any work done by the affected person which might have led to them getting the disease.

If the disease is thought to have been caused by exposure to an agent at work (e.g. a specified chemical) please state what the agent is.

Give any other information which is relevant.

Continue your description here if necessary

Part E

Your signature

Signature

Date

If returning by post or fax, please ensure that the form is signed. Alternatively, if returning by E-mail please type your name in the signature box.

Send the completed form to:

E-mail marine.survey@gov.im

Fax +44(0)1624 688501

Mail address: Isle of Man Ship Registry
Department of Economic Development
St Georges Court,
Upper Church Street,
Douglas,
Isle of Man,
British Isles
IM1 1EX

For official use

Ref No.

Entered by: