

Equipment and Medication for Offshore Use

Disclaimer: Limited resources and potentially long transit times to definitive care may adversely affect health outcomes when illness or injury occur at sea. It is not possible to anticipate every potential illness or injury that may occur while offshore, nor is it possible to carry all medicines and equipment that may be needed in all situations. These lists represent items that may be needed while offshore, but do not represent a comprehensive catalog of all medical equipment and medicines that may be needed. Talk to your personal physician to discuss your specific needs.

George Washington's Maritime Medical Access (GW MMA) does not recommend any specific first aid kit and does not have a preferred vendor for medical equipment or medications.

Prior to going offshore, all sailors should have an appointment with their personal physician to ensure that they are fit to go offshore. At this appointment they should discuss with their doctor if there are any specific medications or equipment they should carry based on their medical history. They should also ensure that they are up to date on necessary vaccines per CDC guidelines and anticipated area of travel.

All individuals who take medications on a daily or regular basis should work with their personal physician and pharmacy to ensure that they have an adequate supply of their medications for their expected voyage duration PLUS extra to account for unforeseen circumstances. **PLAN AHEAD: DO NOT RUN OUT OF YOUR MEDICINE WHILE YOU ARE OFFSHORE.** Make sure that you and your crew know how to manage possible complications of your chronic medical conditions and have the supplies necessary.

Captains should know what medications are being taken by their crew and should ensure that crew are not taking sedating or impairing medications.

A note on cost: Medications and medical equipment are critical life safety equipment. While individuals may not want to incur the cost of medication and equipment that may ultimately expire before use, when these medicines and equipment are needed they are lifesaving. Sailors hope to never have to use equipment such as a life raft or EPIRB, but most would consider these items absolutely necessary to avoid disaster. Medications and medical equipment should be considered similarly.

GW MMA strongly recommends that any boat greater than 12 hours from shore at any time carry a robust medicine chest, including antibiotics to treat common infections, a urinary (Foley) catheter kit, as well as other medicines and equipment to treat illness and injury.

In the list below the (Rx) symbol indicates that the medication is only available by prescription. GW MMA does not supply medications or equipment. Prescriptions for travel medicines can often be provided by one's own personal physician. There are also

services that can provide prescriptions and medications remotely, e.g. Duration Health (<https://durationhealth.com>), Jase Medical (<https://jasemedical.com>), etc. GW MMA does not endorse any specific third-party vendor.

The listed medications below do not represent a prescription or specific instruction to use these medications. You should discuss your illness or injury with a GW MMA doctor prior to using any prescription medication and you should follow all manufacturer labelling and instructions if you choose to use an over-the-counter medication. Brand names are listed for name recognition only.

Medicines to Carry:

1. Anti-infectives (quantities represent a 10-day supply or single course of treatment. Any boat with more than 4 persons on board and/or with an expected transit time to definitive care greater than 7 days should consider carrying multiple courses of treatment)
 - a. Cephalexin (Keflex) 500mg, 40 tabs (R) - Antibiotic
 - b. Doxycycline 100mg, 20 tabs (R) - Antibiotic
 - c. Azithromycin 250mg (z-pack), 6 tabs (R) - Antibiotic
 - d. Ciprofloxacin 500mg, 20 tabs (R) - Antibiotic
 - e. Metronidazole (Flagyl) 500mg, 30 tabs (R) - Antibiotic
 - f. Fluconazole (Diflucan) 150mg, 7 tabs (R) - Antifungal
 - g. Valacyclovir (Valtrex) 1000mg, 30 tabs (R) - Antiviral
 - h. Erythromycin 0.5% Ophthalmic Ointment, 1 Tube (R)
 - i. Ciprofloxacin 0.3% Ophthalmic Drops, 1 bottle (R)
 - j. Miconazole Nitrate (Monistat) Vaginal – for vaginal yeast infection
2. Analgesics
 - a. Acetaminophen (Tylenol) 325mg or 500mg
 - b. Ibuprofen (Motrin) 200mg
 - c. Chewable Aspirin 81mg
 - d. Clove oil (for dental pain)
 - e. Tetracaine 0.5% or Proparacaine 0.5% (ophthalmic analgesia) (R)
3. Gastrointestinal Medicines
 - a. Ondansetron (Zofran) 4mg (R)
 - b. Famotidine (Pepcid, Zantac360) 20mg
 - c. Loperamide (Imodium) 2mg
 - d. Bismuth Subsalicylate (Pepto-Bismol)
 - e. Docusate Sodium (Colace)
 - f. Sennosides (Senokot, ex-lax)
 - g. Medicated hemorrhoid pads and/or cream (Tucks or similar)
 - h. Oral rehydration salts
4. Cough/Cold/Allergy/Respiratory Medicines*

- a. Diphenhydramine (Benadryl) - Antihistamine
 - b. Loratadine (Claritin) or Cetirizine (Zyrtec) - Antihistamine
 - c. Oxymetazoline (Afrin) - Decongestant
 - d. Fluticasone (Flonase) Nasal Spray - Steroid
 - e. Guaifenesin (Mucinex) – Expectorant
 - f. Dextromethorphan (Delsym) – Cough Medicine
 - g. Pseudoephedrine (Sudafed) – Decongestant
 - h. Epinephrine Autoinjector (EpiPen), 2 Pens (R)
 - i. Prednisone 20mg, 15 tabs – Steroid (R)
 - j. Albuterol Inhaler – Bronchodilator (R)
5. Dermatological
- a. Hydrocortisone 1% Cream
 - b. Clotrimazole (Lotrimin) 1% cream or Miconazole 2% cream – Antifungal
6. Sea Sickness
- a. Meclizine (Bonine) 25mg
 - b. Dimenhydrinate (Meclizine) 50mg
 - c. Scopolamine Transdermal Patches (R)

*A note about cough and cold medicines: there are many products that combine multiple medications. For example, dextromethorphan and Guaifenesin are often combined into a single pill or syrup. These combination products may also include an analgesic/antipyretic such as acetaminophen or ibuprofen. If combination products are purchased or used, it is important for the captain, the patient, and GW MMA to know what the active ingredients are so medication administration is not duplicated. This is why each medicine is listed individually.

Equipment To Carry:

1. Diagnostic Equipment/Tests
 - a. Thermometer
 - b. Stethoscope
 - c. Sphygmomanometer (Blood Pressure Cuff)
 - d. Pulse-oximeter
 - e. Flashlight and/or headlamp
 - f. Otoscope and specula (for looking in the ears)
2. Personal Protective Equipment
 - a. Hand Sanitizer
 - b. Examination Gloves
 - c. Eye Protection (glasses or face shield)
 - d. Facemasks (mix of surgical masks and N-95 respirators)
3. Diagnostic Tests
 - a. COVID tests
 - b. Pregnancy Tests
 - c. Urine test strips

4. Basic Tools
 - a. Forceps (Tweezers), both blunt and fine tip
 - b. Trauma shears
 - c. Bandage Scissors
 - d. Foil Emergency Blanket
 - e. CPR Barrier Mask or Bag Valve Mask
 - f. Oral Airways
5. Basic First Aid Equipment
 - a. Antiseptic (e.g. Isopropyl alcohol, hydrogen peroxide, or chlorhexidine)
 - b. Instant cold packs
 - c. Instant hot packs
 - d. Adhesive bandages (mix of sizes)
 - e. Sterile gauze squares (2x2 and/or 4x4)
 - f. Gauze rolls
 - g. Elastic Bandages (i.e. ACE wrap or similar)
 - h. Transparent film dressings (e.g. Tegaderm or similar)
 - i. Hemostatic dressing (e.g. Quickclot or similar)
 - j. Skin closure strips (Steri-strips)
 - k. Cotton swabs (q-tips or similar)
 - l. Trauma Pad Dressing
 - m. Eye wash
 - n. Flexible splint material (e.g. SAM splint or similar)
 - o. Triangular bandages
 - p. Tape
 - q. Burn dressing
6. Specialized Equipment
 - a. Foley Catheter and Insertion Kit (urinary catheter)
 - b. Nasal Tamponade Device (e.g. Merocel nasal packing or Rapid Rhino or similar)
 - c. Temporary cavity filling