

First Aid Kit Program

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1. Background

1.1 Purpose

The California Division of Occupational Safety and Health (Cal/OSHA) regulation <u>Title 8</u>, <u>California Code of Regulations (CCR) Section 3400</u>, "Medical Services and First Aid," (opens in new tab) specifies that first aid supplies be available to all employees on every job. The standard states that a physician must approve the contents of the first aid kit in the workplace but does not specify the exact contents of a kit.

All University of California Riverside (UCR) personnel are required to have access to quick and effective first aid in the event of an emergency. This guide contains instructions for creating a first aid plan for UCR personnel on UCR campuses, UCR-owned sites, UCR-leased spaces, temporary field locations, and field trips that are under the control of university operations and staff.

1.2 Roles and Responsibilities

UCR Environmental Health Safety, and Risk Management (EHSRM) provides guidelines to accommodate the wide variety of work types, locations, and environments shared by UCR personnel. UCR departments use these guidelines to determine the required number of first-aid-trained personnel, which first-aid supplies are needed, and how to obtain necessary supplies and training.

1.2 1. EH&S Responsibilities

The UCR EHSRM assists UCR departments in implementing these guidelines to meet first aid requirements. EH&S interprets the first aid requirements and serves as a liaison to the California Division of Occupational Safety and Health (Cal/OSHA). In addition, EHSRM helps to ensure compliance with federal and state first aid regulations through program oversight and provisions of services, including information, resources, and training.

1.2.2. UCR Departmental Responsibilities

First aid supplies shall be made available to all employees at the department's expense on every job (including after-hours and weekends). Each department must define the department's method for meeting the first aid requirements from the options and guidelines included in this document. The <u>First Aid Kit Reference Guide</u>, (opens in new tab) Appendix A, and Appendix B are tools departments can use to develop their first aid kits. Appendix C lists the approved first aid kits for the campus.

University departments are responsible for ensuring the availability of quick and effective first aid and readily accessible first aid supplies in work areas. First aid supplies shall be kept available in a sanitary and usable condition. The department shall inspect the first aid supplies frequently and replenish them as necessary, taking special care to replace expired supplies.

1.3. First Aid Requirements

First aid plans must address the following two regulatory requirements:

- 1. First aid trained personnel are available to provide quick and effective first aid.
- 2. Appropriate first-aid supplies are readily available.

1.3.1 First Aid Trained Personnel

University departments have two options for ensuring first-aid trained personnel are available:

Option 1: For University work locations served by municipal enhanced 9-1-1 emergency medical services, the first Aid Plan can indicate that local emergency medical services will be relied upon in case of emergency.

Option 2: Compliance may be achieved in any location by having at least one first-aid-trained employee present when personnel work. A common method for ensuring a consistent presence of first-aid responders is for each supervisor (or their designee) to be trained and certified in first aid. It is strongly recommended that an alternate person also be trained and certified in first aid to ensure coverage during absences.

Departments may choose to implement one or both options; however, some higher-risk work environments and activities require that first-aid responders be on site while personnel are working. Refer to the sections below for more information.

1.3.2 First-Aid Supplies

First Aid Plans created by UCR departments must address the type and accessibility of first-aid supplies:

- 1. First-aid supplies at your workplace are appropriate to:
- a. Your occupational setting and work-related activities; and
- b. The response time of your emergency medical services.
- 2. First-aid supplies are:
- a. Readily available and easily accessible to all your employees;
- b. Stored in containers that protect them from damage, deterioration, or contamination; containers must be clearly marked, not locked, and may be sealed; and
- c. Able to be moved to the location of an injured or acutely ill worker.

1.4 First Aid Plan Documentation

Departments with off-site locations and activities, such as field trips and remote research field stations, should have separate site-specific and situation-specific first aid response plans for these

events. Departments should refer to the <u>Field Operations Safety Manual</u> (opens in new tab) and create a <u>Fieldwork Safety Plan</u> (opens in new tab) as part of their first aid plan. View Remote Locations under section 3.3. First-Aid Materials (§3400(c)).

In addition, departments may review the UCR Office of Emergency Management's <u>emergency</u> <u>response procedures</u>(opens in new tab). The emergency response procedures are a critical component of first aid planning, ensuring that individuals can promptly and effectively respond to medical emergencies. Anticipating and planning UCR's campus emergency response minimizes possible injuries and property damage during an active emergency.

The UCR Office of Emergency Management has provided an updated <u>Emergency Procedures Flip Chart</u> (opens in new tab). This chart provides critical information in response to 15 emergency situations, including: evacuation, violence or crime in progress, utility failure, active shooter, person in distress, suspicious package/mail, hazardous material incidents, shelter-in place, hazardous materials, secure-in-place: police activity, evacuation of persons with disabilities, access or functional needs, blood exposure and medical emergency, bomb threat, dire, earthquake and emergency preparedness.

Off-site locations and activities must also comply with reporting incidents that have occurred off-campus. It is important to document the details of the incident, including any casualties and injuries, the actions taken, and any observations made during the response. This information may be valuable for follow-up care and reporting purposes. To report an employee injury, incident or safety concern use the ehs.ucr.edu/report form (opens in new tab).

1.5 Cal/OSHA Definitions: First Aid vs. Serious Injury or Illness

To ensure compliance with Cal/OSHA regulations, it's important to understand the distinction between first aid and serious injuries or illnesses. These definitions play a key role in determining whether an incident needs to be reported. Below is a summary of how Cal/OSHA differentiates between the two:

First Aid (according to Cal/OSHA)

- First aid refers to minor, non-serious injuries that do not require reporting to Cal/OSHA.
- These are simple treatments administered on-site without the need for formal medical intervention.
- Examples of first aid under Cal/OSHA include:
 - o Cleaning, flushing, or soaking minor wounds
 - Applying bandages, antiseptics, or over-the-counter medications
 - Using hot or cold therapy, like ice packs
 - o Non-invasive removal of splinters or foreign objects from the skin or eyes
 - Providing tetanus immunizations
 - o Temporary immobilization devices (slings, splints) to stabilize minor injuries
- Reporting to Cal/OSHA is not necessary if the injury is classified as first aid.

Serious Injury or Illness (as defined by Cal/OSHA)

- Serious injuries or illnesses must be reported to Cal/OSHA within 8 hours of the employer becoming aware of the incident.
- Serious injury or illness includes:
 - Death (fatal injuries)
 - Amputations (loss of any body part)
 - Loss of an eye
 - Injuries requiring inpatient hospitalization (more than 24 hours, excluding medical observation)
 - Permanent disfigurement (such as scarring or burns)
 - o Serious fractures or injuries that significantly impair the employee's ability to function
- Immediate reporting is mandatory if an injury meets the criteria for a serious injury.

When to Report:

- Serious injuries must be reported to Cal/OSHA promptly, while non-serious injuries that fall under first aid do not need to be reported.
- At UCR, all injuries, regardless of severity, must be reported through the injury, incident, or safety concern form on the EH&S website ehs.ucr.edu/report (opens in new tab). EHSRM will determine if the incident needs to be reported to Cal/OSHA.

For more detailed definitions, refer to Cal/OSHA's official regulations:

https://www.dir.ca.gov/title8/330.html (opens in new tab)

(h) "Serious injury or illness" means any injury or illness occurring in a place of employment or in connection with any employment that requires inpatient hospitalization for other than medical observation or diagnostic testing, or in which an employee suffers an amputation, the loss of an eye, or any serious degree of permanent disfigurement, but does not include any injury or illness or death caused by an accident on a public street or highway, unless the accident occurred in a construction zone.

https://www.dir.ca.gov/title8/342.html (opens in new tab)

Serious injury or illness is defined in section 330(h), Title 8, California Administrative Code. (b) Whenever a state, county, or local fire or police agency is called to an accident involving an employee covered by this part in which a serious injury, or illness, or death occurs, the nearest office of the Division of Occupational Safety and Health shall be notified by telephone immediately by the responding agency.

2. Summary Interpretation of Cal/OSHA First Aid

This regulation outlines several key legal requirements for employers regarding the provision of medical services and first aid, which can be broken down as follows:

1. **Availability of Medical Personnel (§3400(a))**: Employers must ensure that medical personnel are readily available for advice and consultation on matters of industrial health or injury. This implies that employers should have a system in place to access medical expertise, either on-site or

- through external services.
- 2. **First Aid Training (\$3400(b))**: In workplaces with no nearby infirmary, clinic, or hospital used for treating all injured employees, the employer must ensure that one or more persons are adequately trained to render first aid. The training should be equivalent to that provided by the American Red Cross or the Mine Safety and Health Administration. This requirement emphasizes the need for trained first aid responders in the absence of nearby medical facilities.
- 3. **First-Aid Materials (§3400(c))**: Employers must have adequate first-aid materials, which must be approved by a consulting physician. These materials should be readily available for employees on every job site and must be kept in sanitary and usable conditions. Regular inspections and replenishment of these materials are mandated to ensure they are always in usable condition.
- 4. **Emergency Facilities for Corrosive Materials (§3400(d)):** If there's a risk of exposure to harmful corrosive materials, employers must provide suitable facilities for quick drenching or flushing of the eyes and body within the work area for immediate use in an emergency.
- 5. **Stretchers and Blankets (§3400(e))**: The provision of stretchers and blankets, or other adequate warm covering, may be required unless ambulance service is available within 30 minutes under normal conditions. This is to ensure that in the event of an injury, the injured person can be comfortably and safely transported or covered until professional medical help arrives.
- 6. **Provisions for Prompt Medical Treatment (\$3400(f))**: Employers must have effective provisions in place for prompt medical treatment in the event of serious injury or illness. This includes having a communication system for contacting medical services, on-site treatment facilities suitable for reasonably anticipated injuries, and proper equipment for medical transport when necessary.
- 7. **Compliance with Specific Sections for Electrical Workers**: Electrical workers must also comply with Sections 2320.10 (Low-Voltage) and 2940.10 (High-Voltage).
- 8. **Authority and Reference (Note)**: These regulations are based on Section 142.3 of the Labor Code. Employers must carefully assess their specific work environments and potential hazards to ensure compliance with these requirements, adapting their first aid and medical response capabilities to the unique needs of their workplace.

3. §3400 Medical Services and First Aid.

3.1 Availability of Medical Personnel (§3400(a))

The employer shall ensure the ready availability of medical personnel for advice and consultation on matters of industrial health or injury.

This requirement is presently fulfilled through the university's utilization of local 911 emergency medical services and the local UCRPD.

For life-threatening injuries, call 911 immediately and obtain emergency treatment.

The employer, via the HR partners or supervisors of a department, can handle the injured individual's paperwork later.

Step 1: Report an Employee Injury

Remember to report within 24 hours by completing the electronic form by visiting ehs.ucr.edu/report, (opens in new tab) this is available 24/7.

- AND -

Fill out a claim form **DWC-1** https://www.dir.ca.gov/dwc/dwcform1.pdf (opens in new tab)

Complete the first 9 lines of the form, and Workers Comp will complete the rest for you. When completed and signed, send to E-mail: workerscomp@ucr.edu or Fax: 951-827-3202

Step 2: Seek Medical Treatment

Seek Medical Treatment at UCR's designated Occupational Clinics. Kaiser on the Job

Riverside Office Medical Office Building 1

4th Floor, Room 408

10800 Magnolia Avenue, Riverside, CA 92505

(951) 353-4322 Hours: 8:30 AM to 5:00 PM (Monday - Friday)

Moreno Valley Office Heacock Medical Offices

Module 1B, 1st Floor

12815 Heacock Street, Moreno Valley, CA 92553

(951) 353-4322 Hours: 8:30 AM to 5:00 PM (Monday - Friday)

After Hours Care Kaiser Urgent Care Park Sierra Medical Offices

1st Floor

10800 Magnolia Avenue, Riverside, CA 92505

(951) 353-4322 Hours: 8:30 AM to 10:00 PM (7 days a week)

Additional Medical Treatment Facilities

Riverside Medical Clinic Occupational Medicine

Brockton Clinic

7117 Brockton Avenue Riverside, CA

(951) 782-3707 Hours: 8:00 AM to 5:00 PM (Monday - Friday)

After Hours/ Weekends/ Holidays Please report to Urgent Care Hours: 9:00 AM to 9:00

PM.

After Hours Phone: (951) 782-3789

Eastvale Clinic

(Located in Cloverdale Marketplace) 12742 Limonite Ave., Eastvale, CA 92880

(951) 739-2746

Hours: 8:00 AM - 5:00 PM (Monday - Friday) 9:00 AM - 9:00 PM (Saturday - Sunday)

Moreno Valley Clinic

6405 Day Street Riverside, CA

(951) 697-5611

Hours: 8:00 AM to 5:00 PM (Monday-Friday)

After Hours/ Weekends/ Holidays Please report to Urgent Care Hours: 9:00 AM to 9:00

PM.

After Hours Phone: (951) 697-5453

Temescal Valley Clinic

21634 Retreat Parkway, Temescal Valley, CA 92883

(951) 493-6929

Hours: 8:00 AM - 9:00 PM (Monday-Friday) 9:00 AM - 9:00 PM (Saturday-Sunday

Central Occupational Medicine Providers (COMP)

4300 Central Avenue Riverside, CA 9250

(951) 222-2206 Hours: 24 hours a day, seven days a week.

Transportation can be requested by calling this facility in advance.

3.2 First Aid Training (§3400(b))

In the absence of an infirmary, clinic, or hospital, in near proximity to the workplace, which is used for the treatment of all injured employees, a person or persons shall be adequately trained to render first aid. Training shall be equal to that of the American Red Cross or the Mine Safety and Health Administration.

For personnel working at remote locations:

When university personnel are situated in remote areas such as research field stations, on field trips, or on diving expeditions where municipal emergency medical services are not available, on-site personnel must be trained in advanced first aid. This requirement aligns with the guidelines outlined in the <u>UC Field Operations/Fieldwork Safety Plan.</u> (opens in new tab).

EHSRM, available on campus, provides Wilderness First Aid Training, which fulfills the criteria for advanced first-aid training. Wilderness First Aid training is appropriate for outdoor fieldwork or visiting

remote sites because it provides a more extensive range of first responder knowledge and relevant scenarios than traditional first aid courses.

Furthermore, when University personnel are designated to work in remote field settings or on field trips, the respective unit must create a comprehensive <u>Fieldwork Safety Plan</u> (opens in new tab) for each location or trip. This plan should detail emergency contact information, communication methods, arrangements for transporting injured or unwell individuals, and the nearest medical facility's location. It is also appropriate to list required training as prerequisites in a <u>Field Safety Plan</u> (opens in new tab) that all participants review. For more information on the Field Safety Program, visit <u>UCR EHSRM Field Safety</u> (opens in new tab).

According to the UC Diving Safety Manual, any scientific scuba diving conducted under university oversight necessitates documented pre-dive emergency planning. To comply with these standards, certified university divers must hold current certifications in diving first aid, CPR, and emergency oxygen training.

3.2.1. First Aid, CPR, and AED Training Opportunities

First Aid training courses are available on-campus and throughout Riverside County. These programs offer hands-on instruction and certification upon completion.

Training Course	Location
Standard First Aid with CPR/AED	University of California, Riverside – Recreation
Adult/Pediatric	Center
CPR, First Aid, and AED Certification	University of California, Riverside – Extension
Palm Desert Resuscitation Education	UCR Campus – Materials Science & Engineering
	Building (MSE 113, 1st floor)
Palm Desert Resuscitation Education	Riverside Countywide

3.3 First-Aid Materials (§3400(c))

There shall be adequate first-aid materials, approved by the consulting physician, readily available for employees on every job. Such materials shall be kept in a sanitary and usable condition. A frequent inspection shall be made of all first-aid materials, which shall be replenished as necessary.

First Aid Kit Compliance Requirements

Option A: Monthly checks by someone in your area of department:

UCR has a list of the approved First Aid Kits by the consulting physician: https://ehs.ucr.edu/first-aid-kit-guide (opens in new tab). These kits have undergone a thorough evaluation and are currently the only ones authorized for use on campus.

To ensure adherence to regulations, it's imperative to conduct monthly inspections of the first aid kits and additional checks following any medical incidents. These assessments are crucial for verifying the kits' completeness, assessing supplies' condition, and replacing expired items. Additionally, regular sanitization of the kits is recommended to uphold hygiene standards.

Here are the steps to follow:

- 1. Review the Monthly First Aid Kit Checklist to assess the contents of your kit. See Appendix A: Monthly First Aid Kit Checklist for details.
- 2. After reviewing, use the First Aid Kit Supply Inventory Worksheet (Class A or Class B Kits) to identify any supplies that need restocking to maintain compliance. See Appendix B: First Aid Kit Supply Inventory Worksheet for the full checklist.

Option B: Cintas Services will visit your site every month, depending on the agreement signed by the departments.

As a member of the UCR community, you have a valuable second option for managing your department's safety and compliance needs with ease. Cintas Services offers a comprehensive solution that includes a service agreement under a systemwide contract already in place.

For detailed information or to set up this service, please contact **Katie Inglett-Mendoza** (katherine.inglett@ucr.edu) or **UCR Procurement** at purchasing@ucr.edu, and **Amanda Higgins at Cintas** (<u>HigginsA2@cintas.com</u>).

Cintas' cost-effective approach means there's no monthly fee for replenishing materials. Instead, a service charge is applied, requiring payment only for refill services as necessary. This model ensures you pay only for what you need when needed. To better understand the costs of this service, review **Appendix B: Example of Cintas 5-Shelf Cabinet Full Prices**, which shows typical replacement costs.

Additionally, Cintas guarantees ongoing compliance as part of the monthly services provided, removing one more worry from your list.
Following the request through UCR procurement and Cintas directly, you will receive an order confirmation, including UCOP pricing for the cabinet.
The initial service begins with the purchase of the cabinet. Cintas will then establish a replenishment frequency and decide which items you'd like replaced regularly, allowing you to customize the original contents.
There's no binding contract for the supply of cabinet materials, only negotiated pricing to ensure you get the best value. Payment can be made via a Purchase Order (PO) or by having a credit card on file.
Typically, the time frame for delivery and installation ranges from 2-4 weeks, depending on quantities. Rest assured, installation is always handled by a professional Cintas installer, ensuring a seamless setup.

This comprehensive service option offers both flexibility and compliance, tailored to meet the specific needs of any department or UCR team member.

First Aid Installation Requirements:

All first aid kits must be readily accessible to all employees, with each kit or location clearly marked to indicate where the supplies are stored. It is essential to consult with Facilities Services to ensure that installations will not pose any issues to the building, such as disturbances like asbestos exposure or puncturing of cables.

1.	The cabinet installation should adhere to ADA requirements:
	☐ The handle of the First Aid Kit in a public space should be no higher than 48 inches from
	the ground.
	The maximum side reach for an unobstructed approach to a First Aid Kit cabinet is 54 inches.
	☐ The first aid cabinet should not protrude more than 4 inches from the wall into walks, corridors, passageways, or aisles.
2.	The preferred locations for First Aid Kit installation are as follows:
	☐ Laboratory/Shop Environment
	☐ Office Environment or Break Area

Types of First Aid Kits:

As per the latest revision, ANSI Z308.1-2021, the required first aid supplies vary based on the class of first aid kits:

- Class A Kits: These cater to common workplace injuries.
- Class B Kits: They contain a wider array and greater quantity of supplies, suitable for complex or high-risk environments.

Beyond Class A and Class B, four types of first aid kits vary in use. ANSI/ISEA Z308.1-2021 classifies first aid kits into four types:

Type I First Aid Kits are to be used in stationary indoor settings where the potential for damage of kit supplies due to environmental factors and rough handling is minimal. They are generally not intended to be portable and are found in a mounted fixed position. Typical applications may include, but are not limited to, general indoor use, an office setting, dining locations, shops, and trades.

Type II First Aid Kits are meant for portable indoor use where the potential for damage to kit supplies due to environmental factors and rough handling is minimal. Typical applications may include, but are not limited to, general indoor use, an office setting, dining locations, shops, and trades.

Type III First Aid Kits are meant for portable use in mobile, indoor, and/or outdoor settings where the potential for damage of kit supplies due to environmental factors is not probable. They shall be able to be mounted in a fixed position and have a water-resistant seal. Typical applications may include, but are not limited to, general indoor and outdoor use.

Type IV First Aid Kits are intended for portable use in mobile, indoor, and outdoor settings where the potential for damage of kit supplies due to environmental factors and rough handling is significant.

Type IV First Aid Kits shall have the means to be mounted in a fixed position. Due to risky environments, Type IV kits must meet the performance guidelines for corrosion, moisture, and impact resistance, as mentioned in ANSI/ISEA Z308.1-2021. Typical applications may include, but are not limited to, indoor offices, transportation services, shops and trades, and facilities services.

In the majority of cases, UCR first aid kits are prohibited from containing medications, including over-the-counter remedies. This restriction is in place due to the potential for medications to interact with an individual's existing health conditions or other medications they may be taking. Consequently, it is of utmost importance that medications are solely used by the intended person. For instance, items such as pain relievers or EpiPens should be kept with the individual's personal belongings instead of stored within the unit's general first-aid kit.

Nevertheless, there are specific scenarios in which medications may be considered for inclusion in a first-aid kit:

- 1. If the kit is designated exclusively for the use of a specific individual, it should not be used by others.
- 2. When the kit is designated for use in remote field locations where access to over-the-counter medications is limited, certain medications, such as diphenhydramine for allergic reactions or ibuprofen for minor injuries or illnesses, may be deemed appropriate. This inclusion should be incorporated into the UC Field Operation/Fieldwork Safety Plan.
- 3. If you are part of the Cintas agreement, they have their physician who approves the First aid kit cabinet contents, which may include items for pain relief and comfort. This is only authorized through the Cintas agreement plan. But if you do not need this, it is not required.

Specialized First Aid Kit:

While most UCR personnel work in office environments, many work in higher-risk settings and situations, such as laboratories, medical/clinical settings, shops and trades, working alone, and in remote locations. Below are additional considerations for UCR departments with personnel in specific settings and situations.

Medical/Clinical Environments

At UCR Health clinics, first aid and emergency medical response are available to personnel from on-site medical staff through the clinical paging system. In areas where medical staff are unavailable or do not respond to employee injuries or illnesses, first-aid trained staff must be available. One first-aid-trained employee on each floor of a building, wing, or other defined work area provides adequate coverage if provisions are made for backup from first-aid-trained personnel in adjacent areas. Please note that medical center staff who render first aid as part of their primary job responsibilities must undergo bloodborne pathogen exposure training and are not covered under the Good Samaritan Act.

Shops and Trades Operations

Each shop and warehouse location must have at least one first-aid-trained employee on each shift in each work area to ensure first-aid-trained personnel are always available when staff are present. Additional first-aid-trained employees may be necessary to ensure coverage during absences and vacancies.

When shop work includes confined space entry, welding, scuba diving, electrical power construction, generation, transmission, and distribution, first-aid and CPR-trained individuals and first-aid supplies are required on site.

Individuals exposed to low-voltage electrical hazards must receive Cardiopulmonary Resuscitation (CPR) and first aid training to provide emergency aid promptly. Workers exposed to high voltage hazards must be certified in CPR and first aid by a recognized training organization such as the American Red Cross or the American Heart Association. Specialized First Aid kits must be present in worksites involving high voltage hazards.

Working Alone

Working alone applies to work or study that occurs when no other person is in direct line of sight or within hearing range of the person working. A person may work alone in a lab, office, shop, or other University location or in the field. Working alone can take place during normal working hours, as well as on evenings and weekends.

Personnel who work alone must know how to summon first aid. Supervisors/leads/PIs must know the location of all staff working alone and periodically confirm their safety.

Remote Locations

When University personnel are stationed in a remote location (e.g., at a research field station, on a field trip, or on a diving excursion) not served by a municipal emergency medical service, there must always be personnel at the site trained in advanced first aid. Refer to the UCR EHSRM Field Safety manual for additional information on this requirement. Use the Fieldwork Safety Plan to document who has advanced first-aid training. EHSRM offers Wilderness First Aid training, which satisfies advanced first-aid training requirements.

In addition, when university personnel are designated to work in remote field settings or on field trips, the respective unit must create a comprehensive <u>Fieldwork Safety Plan</u> for each location or trip. This plan should detail emergency contact information, communication methods, arrangements for transporting injured or unwell individuals, and the nearest medical facility's location. It is also appropriate to list required training as a prerequisite in a <u>Field Safety Plan</u> that all participants review. For more information on the Field Safety Program, visit <u>UCR EHSRM Field Safety</u>. In accordance with the UC Diving Safety Manual, scientific scuba diving conducted under university auspices must include documented pre-dive emergency planning. University-certified divers are required to have current diving first aid and CPR certification, as well as emergency oxygen training.

Where will specialized first aid kits be needed?

In exceptional circumstances and following close consultation with EHSRM and approval from a consulting Occupational Health Physician, units may assess the possibility of including a prescription medication in a general-access kit (e.g., epinephrine autoinjectors or naloxone). Such an evaluation necessitates a comprehensive risk assessment, which should encompass, at the very least, the following details:

П	Exposure to I	Incommon	Hazards: This ref	ers to instances	where individ	fuals encounte
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hazards outside the scope of typical work or leisure activities. Examples include incidents involving stinging insects, interactions with unhoused populations, or tasks involving specific hazardous drugs or narcotics.

- □ Probability of Hazard Encounter: This pertains to the anticipated likelihood of facing such hazards. Activities such as beekeeping or working with substances like MPTP or HIV post-exposure prophylaxis increase the chances of encountering these risks.
- ☐ Challenges in Emergency Medical Assistance: This highlights obstacles that may impede prompt access to emergency medical services. For instance, situations involving extended remote field deployments where assistance could be several hours or days away pose significant barriers.
- □ Provision of Hazard-Specific First Aid: When handling materials with higher hazard levels, it's crucial to have appropriate first aid supplies on hand. For instance, calcium gluconate lotion is essential when dealing with HF (hydrofluoric acid). For further guidance, contact EHSRM at 951-827-5528.
- □ Burn Creams: EHSRM recommends omitting burn creams from first aid supplies because the medical treatment of burns is specific to the type of burn. Burn treatment often consists of leaving the site clean (*not* applying butter, burn gels, creams, or lotions) after thoroughly rinsing with copious amounts of water.

There are a few exceptions to this approach:

- Dry lime, phenols, and elemental metals (e.g., sodium, potassium, calcium oxide, magnesium, phosphorous) are chemical burns that should not be irrigated immediately with water.
- Workers with skin contact with hydrofluoric acid should apply 2.5% calcium gluconate gel and seek medical attention. This treatment is specific to people working with hydrofluoric acid.

EHSRM will collaborate with the requesting unit to carry out both the risk assessment and the implementation plan for including prescription medication in a first-aid kit. T his process will ensure compliance with all University requirements and applicable regulations, including completing a medical assessment to authorize the provision of prescription medication. If you decide to go with the Cintas services, be sure to make this request for your operations.

Under paragraph § 1910.151(b), first aid supplies are mandated to be readily available. The American National Standard (ANSI) Z308.1–1998 outlines the minimum contents of a basic first aid kit, typically adequate for small worksites. For larger or multiple operations at a single location, employers should evaluate the necessity of additional kits, varied equipment, and diverse quantities and supplies within these kits.

Employers with evolving or unique first aid needs in their workplace should consider enhancing their kits accordingly. Utilizing resources such as the OSHA 300 log, OSHA 301 log, or other incident reports can be valuable in identifying these distinct requirements. Seeking advice from local fire/rescue departments, qualified medical professionals, or nearby emergency rooms can assist employers in this assessment. This process enables employers to ensure the availability of reasonably anticipated supplies tailored to their workplace needs, which should

be periodically reassessed and supplemented.

Moreover, employers must furnish appropriate personal protective equipment (PPE) in situations where employees reasonably anticipate encountering blood or other potentially infectious materials while utilizing first aid supplies. This compliance aligns with the Occupational Exposure to Bloodborne Pathogens standard, § 1910.1030(d)(3) (56 FR 64175). The standard delineates suitable PPE for such exposures, encompassing gloves, gowns, face shields, masks, and eye protection.

3.4 Emergency Facilities for Corrosive Materials (§3400(d))

Where the eyes or body of any person may be exposed to injurious corrosive materials, suitable facilities for quick drenching or flushing of the eyes and body shall be provided within the work area for immediate emergency use.

These resources must be readily accessible before commencing any work, especially when dealing with hazardous materials, and they should be situated within a specified proximity. Most laboratory facilities across campus are equipped accordingly, and this accessibility requirement should also apply to shops and trade operations.

3.5 Stretchers and Blankets (§3400(e))

Stretchers and blankets, or other adequate warm covering, may be required by the Division, unless ambulance service is available within 30 minutes under normal conditions.

This applies to remote regions and should be assessed in accordance with the work-related tasks and emergency services' response time.

3.6 Provisions for Prompt Medical Treatment (§3400(f))

Effective provisions shall be made in advance for prompt medical treatment in the event of serious injury or illness. This shall be accomplished by one or a combination of the following that will avoid unnecessary delay in treatment:

- (1) A communication system for contacting a doctor or emergency medical service, such as access to 911 or an equivalent telephone system. The communication system or employees using the system shall have the ability to direct emergency services to the location of the injured or ill employee.
- (2) Readily accessible and available on-site treatment facilities suitable for treatment of reasonably anticipated injury and illness.
- (3) Proper equipment for prompt medical transport when transporting injured or ill employees is necessary and appropriate.

Note: Medical services and first aid provisions for electrical workers shall also comply with Sections 2320.10 (Low-Voltage) and 2940.10 (High-Voltage) as applicable.

Low-Voltage Work (Section 2320.10):

- Employers must ensure that first aid supplies are readily available at the worksite where low-voltage electrical work is being performed.
- The first aid supplies must be adequate for the type and size of the work crew and the hazards reasonably anticipated.

High-Voltage Work (Section 2940.10):

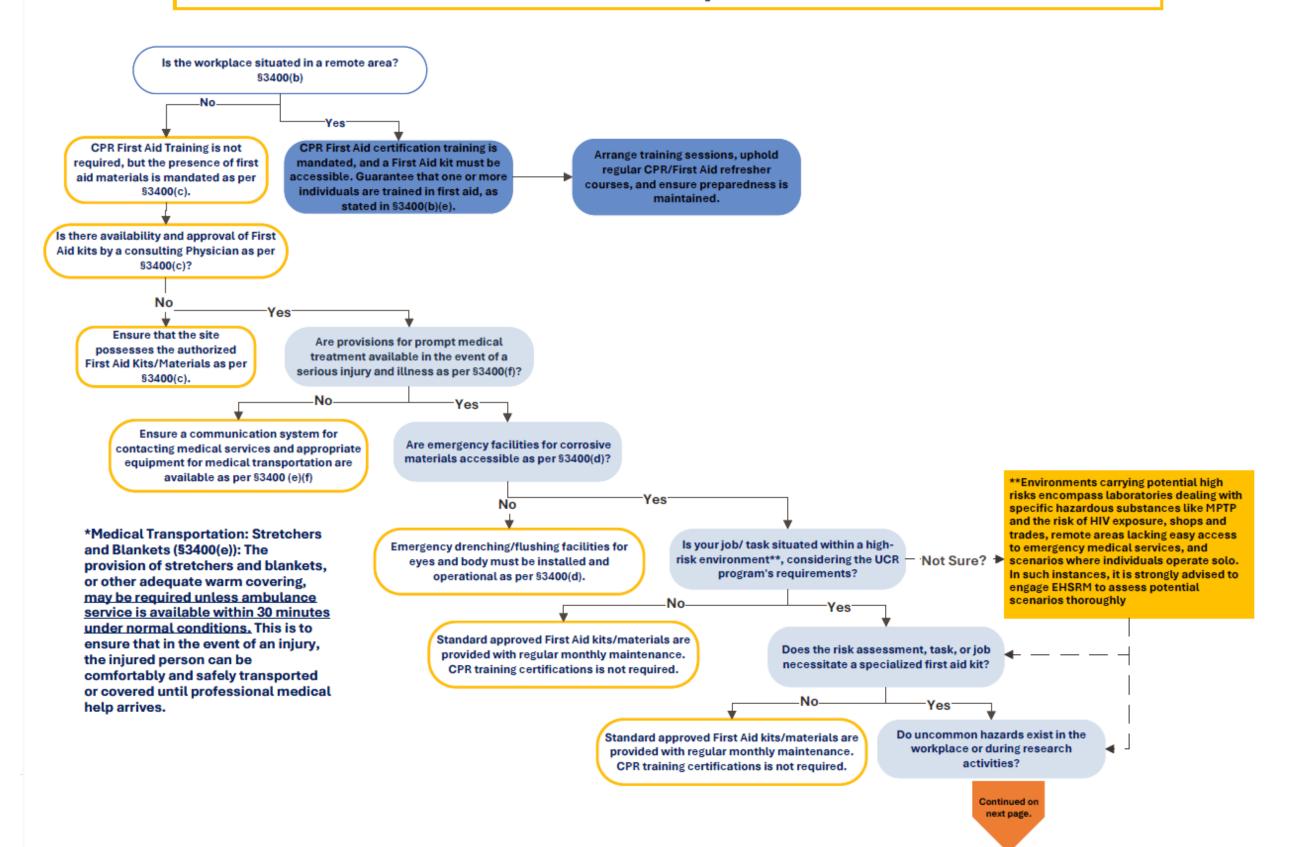
- For high-voltage electrical work, employers must have a fully equipped, approved first aid station located within a reasonably accessible distance from the worksite.
- The first aid station must be provided with an approved stretcher and blankets and maintained in a clean and sanitary condition.
- Additionally, employers must provide a qualified first aid attendant trained to render first aid for electrical injuries.

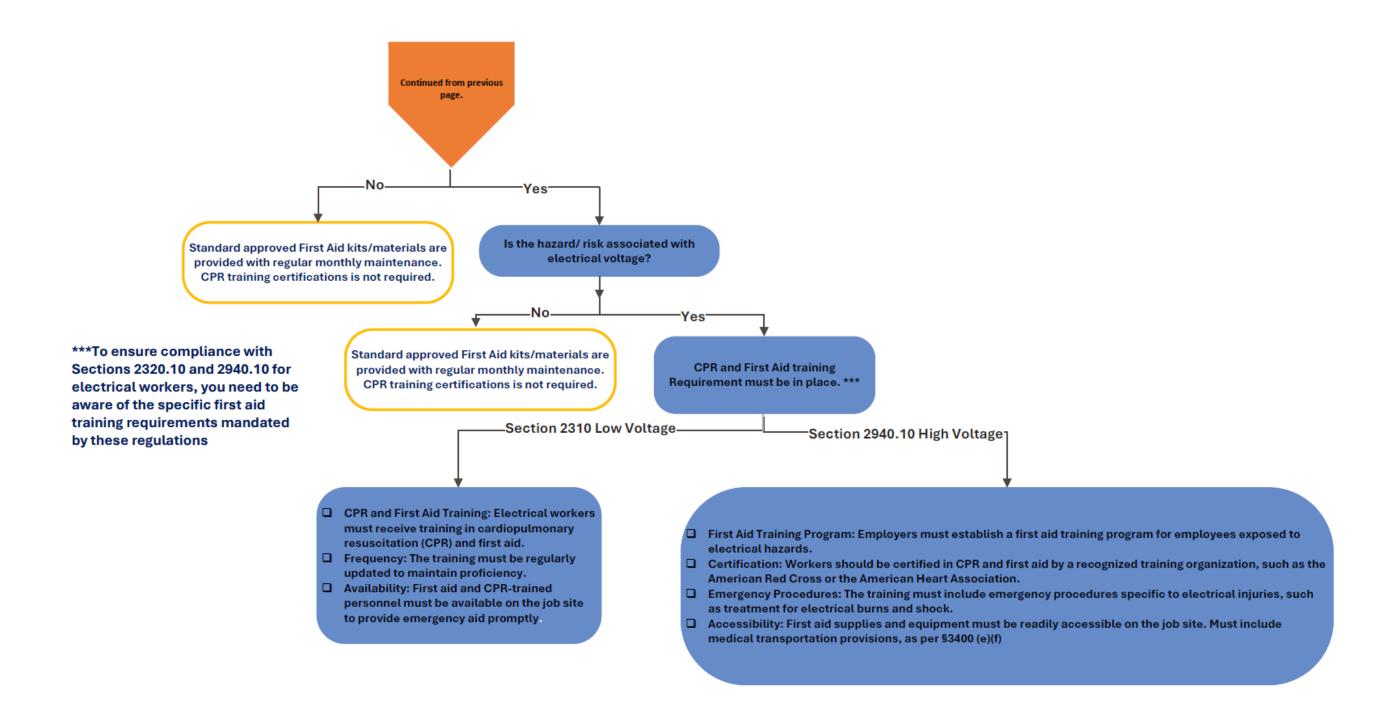
Flow Chart: Determining When First Aid Training and Special First Aid Kits Are Required

Cal/OSHA has set clear guidelines regarding which employees must be trained in first aid and CPR. The requirement largely depends on the type of job and the potential risks involved. Here are the key sectors and scenarios:

- 1. **High-risk environments**: Workers in high-risk environments where serious accidents could occur are generally required to receive training. This includes working in high-containment laboratories, shops, and trades.
- 2. **Remote locations**: If employees work in a location where there is no medical facility nearby (typically defined as more than 30 minutes away), employers must ensure that there are trained first aid personnel available. This is applicable to fields like forestry, agriculture, and certain types of field research or remote service locations.
- 3. **Specific regulations for certain sectors**: Certain sectors require CPR and first aid training, such as electric power generation, transmission, and distribution (Title 8 of the California Code of Regulations, Section 2940.7) and construction (Title 8, Section 1512).
- 4. **General duty clause**: Beyond specific regulations, the Cal/OSHA General Duty Clause generally expects employers to provide a safe and healthy work environment. This can interpretively include making first aid and CPR training available, depending on the nature of the workplace.

Guidance for Assessing CPR/First Aid Training Requirements and Specialized First Aid Kits Are Required at UCR





Appendix A: Monthly First Aid Kit Checklist

Creating a monthly checklist to review and replenish your first aid kit is a practical strategy to ensure preparedness for emergencies. Here's a structured list to help you keep track of what to check and replenish:

This checklist is intended to be comprehensive but may require adjustments based on your specific needs, activities, or local guidelines. Regular checks guarantee you are always equipped for minor injuries or emergencies.

П	Download on	d print our First Aid Kit Supply Inventory Workshoot for Class A or B
Ц	kits.	d print our First Aid Kit Supply Inventory Worksheet for Class A or B
		Aid Kit Supply Inventory Worksheet for Class A or B kits to your first use it as a checklist to assess the supplies needed for each kit.
Monthly F	irst Aid Kit	Checklist
Date o	of Check:	First Aid Kit Class: □A OR □B
1. Med	dications	
□Che	ck avairation de	tes on all medications.

2. Wound Care Supplies

- Sterile gauze pads of various sizes.
- Adhesive bandages in various sizes.
- Antiseptic wipes or solution.
- Antibiotic ointment.
- □ Hydrocortisone cream (1%).
- Butterfly closures or strips.
- Sterile cotton balls and cotton-tipped swabs.

3. Tools and Equipment

• Check scissors and tweezers for rust or damage; replace if necessary.

• Replenish over-the-counter medications (e.g., pain relievers, antihistamines).

•
□ Ensure a sufficient supply of personal prescription medications.

- Ensure medical gloves are in good condition and have not degraded.

4. Specialized Items

- □ Instant cold packs.
- ☐ Heat packs.

- ☐ Finger splint.

	5. Miscellaneous
•	\square Review the first aid manual for any updates or revisions.
•	\square Ensure the emergency contact list is up to Date.
•	\Box Check flashlight batteries and replace them if necessary.
•	\square Verify that the whistle (if included) is in working condition.
	6. Replenish Based on Usage
•	\square Replace any items that were used since the last check.
•	\square Increase the stock of frequently used items if needed.
	7. Storage and Accessibility
•	\square Ensure the first aid kit is stored in a known, accessible, and dry location.
•	\square Check that all items are securely and hygienically stored.
•	8. Training (required for remote areas or field safety plans) Note any first aid procedures you're unfamiliar with and plan training/refresher.
•	7.1.7 155455 1541141
-	Items to purchase:
•	Additional observations:
	Signature of Checker: Date:

Appendix B: First Aid Kit Supply Inventory Worksheet for Class A or Class B Kits

You may use this inventory list to manage supplies. Mark the items that need to be replaced or that have expired.

First Aid Supply	Minimum Quantity	Minimum Quantity	Minimum Size or Volume	Approved Supplier UCR Grainger	Cost (Price may change based on UC negotiations)
*Items may have an expiration date and need to be replaced	Class A Kits	Class B Kits	(US)/ (metric)		
Adhesive Bandage	16	50	1 x 3 in./ 2.5 x 7.5 cm	Waterproof, 50 Bandages Included, Plastic, 50 PK Item 49H393 Mfr. Model 90333	\$4.85
Adhesive Tape	1	2	2.5 yd (total)/ 2.3 m	White, Cloth, 1/2 in Wd, 2 1/2 yd Lg, 2 PK Item 480G27 Mfr. Model AN51111	\$2.48
*Antibiotic Application	10	25	1/57 oz /0.5 g	Ointment, Box/Wrapped Packets, Unitized, 0.17 oz, 10 Count, 10 PK Item 483T69 Mfr. Model 22312	\$3.63 For 10 For 25, buy 3 packs (30)
*Antiseptic	10	50	1/57 oz / 0.5 g	Wipes, Box/Wrapped Packets, Unitized, 0.5 oz, 10 Count, 10 PK Item 483T76 Mfr. Model 21412	\$1.43 For 10 pkg For 50 pkg, buy 5 packs (50)
CPR Breathing Barrier	1	1		CPR Face Shield, Universal, CPR, 2 Components, 1 People Served, Bag Item 482X10 Mfr. Model 9999-1601	\$3.06
*Burn Dressing (gel soaked)	1	2	4 x 4 in./ 10 x 10 cm	HONEYWELL Burn Dressing: Sterile, White, Non-Woven, Unitized, 4 in Wd, 4 in Lg Item 1PCZ9 Mfr. Model 021031	\$11.83 single use
*Burn Treatment	10	25	1/32 oz .0.9 g	Burn Gel: Gel, Box/Wrapped Packets, 10 Count Item 48ZE51Mfr. Model FAE-6109	\$2.23 For 10 pkg For 25 pkg, buy 3 pcs (30)
Cold Pack	1	2	4 x 5 in./ 10 x 12.5 cm	instant Cold Pack: Disposable, White, Waterproof, 4 in Lg, 5 in Wd, Cold Pack Item 39P018Mfr.	\$2.13 single use only

				Model 21-004	
*Eye Covering, with means of attachment	2	2	2.9 sq. in /19 sq. cm	Eye Pads: Sterile, White, Cotton, Box, 1 3/4 in Wd, 2 3/4 in Lg, Item 31DJ93Mfr. Model 7-002	\$3.63 includes 4 eye pads and 4 adhesives
*Eye Wash	1 FL. oz total		29.6 ml	Eye Wash: Liquid Solution, Bottle, 1 oz, 1 Item 6XNC7 Mfr. Model FAE-6011	\$6.84
*Eye Wash		4FL oz total	118.3 ml	Personal Eyewash: Liquid Solution, Bottle, 4 oz, 1 Count Item 3PVT2 Mfr. Model 620252	\$8.17
First Aid Guide	1	1	N/A	First Aid Guide: Guide to Basic First Aid, English Item 11A320 Mfr. Model BK021	\$0.88
*Hand Sanitizer	10	20	1/32 oz /0.9 g	Hand Cleaner: Gel, Box/Wrapped Packets, 0.06 oz, 25 Count, 25 PK Item 5GTH2 Mfr. Model 51173	\$7.42
*Medical Exam Gloves	2 pair	4 pair	N/A	We highly recommend using Nitrile instead of latex gloves due to potential allergies.	
Roller Bandage					
2 inches	1	2	2in. x 4yd /5cm x 3.66m	Sterile Gauze: Sterile, White, Bulk, 2 in Wd, 4 1/10 yd Lg Item 3JMC9 Mfr. Model 3JMC9	\$1.33 for each single use only
4 inches	0	1	4 in. x 4yd /10cm x 3.66m	HONEYWELL Bloodstopper: Sterile, White, Gauze, Bulk, 5 in Wd, 8 in Lg Item 3EWD5 Mfr. Model 061910	\$6.20/ each single use only
Scissors	1	1	N/A	Medical Scissors: 3 1/2 in Overall Lg, Blue, Angled Blade End, Titanium Bonded Item 39F027Mfr. Model 90294	\$6.16
Splint	0	1	4.0 x 24 in. /10.2 x 61 cm	Splint: Yellow, Foam Item 490W84Mfr. Model 7010- 0404Your	\$12.00 single use
Sterile Pad	2	4	3 x 3in. /7.5 x 7.5 cm	Gauze Pad: Sterile, White, Waterproof, Unitized, 3 in Wd, 3 in Lg, ANSI Z308.1-2009, 4 PK Item 1UZZ5 Mfr. Model 020430	\$3.30/ pkg. of 4
Tourniquet	0	1	N/A	COMBAT APPLICATION TOURNIQUET Black	\$32.86

				Item 55MW30Mfr. Model 30- 0001	
Trauma Pad	2	4	5 x 9 in./ 12.7 x 22.9 cm	FIRST AID ONLY Trauma Pad: Sterile, White, Gauze, Bulk, 8 in Wd, 10 in Lg, ANSI Z308.1-2015 Item 39N971 Mfr. Model 3-008	\$3.42/ each Buy at least 2 or 4
Triangular Bandage	1	2	40 x 40 x 56 in. /101 x 101 x 142 cm	DYNAREX Triangular Bandage: Non-Sterile, Tan, Cotton, Individually Wrapped, 36 in Wd, 12 PK Item 36PV24 Mfr. Model 3672	\$13.45/ pkg. of 12
Foil Blanket	1	1	52 x 84in /132 x 213cm	FIRST AID ONLY First Aid Kit Item 796J89 Mfr. Model 91354	\$2.41/ each

Example of Cintas 5 Shelf Cabinet Full Prices (Subject to Change):

Please note that these prices are provided as an example and are subject to change based on your needs and the type of cabinet you obtain.

of cabinet y				
Item Number	ANTISEPTICS	Amount	Total Cost	Number of Items you will need to
Number				order to be
				compliant
50030	ANTISEPTIC WIPES	10 EACH	\$6.17	
50239	2 OZ HYDROGEN PEROXIDE SPRAY	1 EACH	\$10.81	
50430	ALCOHOL WIPES	20 EACH	\$6.17	
50539	2 OZ ALCOHOL SPRAY	1 EACH	\$10.81	
61029	2 OZ ANTISEPTIC SPRAY	1 EACH	\$14.11	
100039	TRIPLE ANTIBIOTIC	30 EACH	\$9.70	
101239	FIRST-AID ANTISEPTIC CREAM	10 EACH	\$8.31	
Item	FIRST AID INSTRUMENTS	Amount	Total Cost	
Number				
70010	COTTON TIPPED APPLICATORS	1	\$11.03	
150110	METAL TWEEZERS	3	\$4.32	
150620	SPLINTER-OUT	10	\$12.73	
150800	SCISSORS	1	\$14.81	
151119	DISPOSABLE THERMOMETERS	4	\$9.65	
Item	BURN RELIEF	Amount	Total Cost	
Number	2 OZ BURN SPRAY	FACIL	¢1.4.11	
62029		EACH	\$14.11	
73029	2X3 NON-ADHERENT PADS	BOX	\$10.79 \$23.42	
163020	4X4 BURN DRESSING BURN RELIEF GEL PACKETS	2 Each		
163050 164010	COOL AND SOOTHE	6 Each 6 Each	\$4.92 \$11.49	
10309	BLEED STOP GAUZE	2 each	\$27.31	
82420	2" READY RIP	EACH	\$8.62	
82630	3" ELASTIC ACE TYPE BANDAGE	EACH	\$6.73	
91019	COLD PACK, SMALL	EACH	\$5.54	
92019	COLD PACK, LARGE	EACH	\$6.77	
122249	GLUCOSE	2 each	\$10.31	
151629	FIRST AID GUIDE	EACH	\$24.38	
170429	CPR MICRO SHIELD	1 each	\$18.61	
180049	TOURNIQUET	2 each	\$35.00	
180069	TRIANGULAR BANDAGE	EACH	\$6.35	
182019	STING RELIEF WIPES	10 Each	\$9.58	
182309	EMERGENCY MEDICAL GLOVES	1 Box	\$11.75	
592242	5X9 TRAUMA PADS	4 Each	\$16.32	
592243	SPLINT	EACH	\$17.00	
1030300	WOUNDSEAL POUR PACK	EACH	\$12.22	
Item	EYE CARE	Amount	Total Cost	
Number				

13040	1 OZ EYEWASH	3 Each	\$10.07	
130100	LUBRICANT EYE DROPS	5 each	\$12.85	
130429	4 OZ EYEWASH SOLUTION	1 each	\$18.85	
131600	EYE CUPS	6 each	\$9.50	
180029	EYE DRESSINGS	2 each	\$6.66	
Item	BANDAGES	Amount	Total Cost	
Number				
12221	LIQUID BANDAGE	5	\$7.72	
31069	1X3 PLASTIC STRIP BANDAGE	BOX	\$12.04	
33129	QUIKHEAL BANDAGES	BOX	\$16.17	
43059	FINGERTIP BANDAGES	BOX	\$13.28	
43259	KNUCKLE BANDAGES	BOX	\$13.28	
43658	WATERPROOF CLEAR STRIP BANDAGES	BOX	\$5.73	
43659	1X3 COMFORT STRIP BADNAGES	BOX	\$10.79	
43729	X-LONG STRIP BANDAGES	вох	\$5.85	
43859	JUNIOR STRIP BANDAGES	вох	\$10.79	
44269	ELASTIC STRIP BANDAGES	BOX	\$4.53	
44429	LARGE PATCH BANDAGES	BOX	\$4.27	
70819	3X3 GAUZE PADS	BOX	\$8.93	
72220	2" NON-STERILE ROLLER GAUZE	EACH	\$7.06	
72230	3" NON-STERILE ROLLER GAUZE	EACH	\$7.88	
72240	4" NON-STERILE ROLLER GAUZE	2 Each	\$9.14	
80479	1/2" X 5 YD TAPE DISPENSER	Each	\$7.47	
Item	PAIN AND ILLNESS/ COMFORT	Amount	Total Cost	
Number				
79191	MUCINEX	5 Each	\$8.71	
111230	CHEWABLE ASPIRIN	BOX	\$10.79	
111389	ACETAMINOPHEN	BOX	\$21.58	
111589	PAIN AWAY	BOX	\$21.58	
111730	CRAMP RELIEF	BOX	\$20.75	
111830	BACK RELIEF	BOX	\$24.07	
111989	IBUPROFEN	BOX	\$7.02	
112039	COLD RELIEF	вох	\$8.71	
113529	CHERRY COUGH DROPS	вох	\$17.14	
115089	ANTACID	BOX	\$21.62	
115089 119250	ANTACID ANTI-DIARRHEAL	BOX BOX	\$21.62 \$7.01	
119250	ANTI-DIARRHEAL	вох	\$7.01	
119250 119260	ANTI-DIARRHEAL ALLERGY RELIEF	BOX BOX	\$7.01 \$10.56	
119250 119260 119279	ANTI-DIARRHEAL ALLERGY RELIEF COLD-EEZE LOZENGES	BOX BOX 1 Box	\$7.01 \$10.56 \$17.14	
119250 119260 119279 119310	ANTI-DIARRHEAL ALLERGY RELIEF COLD-EEZE LOZENGES PEPLUM	BOX BOX 1 Box 1 box	\$7.01 \$10.56 \$17.14 \$20.56	
119250 119260 119279 119310 121220	ANTI-DIARRHEAL ALLERGY RELIEF COLD-EEZE LOZENGES PEPLUM ALEVE	BOX BOX 1 Box 1 box 5 Each 5 each	\$7.01 \$10.56 \$17.14 \$20.56 \$3.89 \$11.14	
119250 119260 119279 119310 121220 122110 573772	ANTI-DIARRHEAL ALLERGY RELIEF COLD-EEZE LOZENGES PEPLUM ALEVE BAYER ASPIRIN DAYQUIL	BOX BOX 1 Box 1 box 5 Each 5 Each	\$7.01 \$10.56 \$17.14 \$20.56 \$3.89 \$11.14 \$5.54	
119250 119260 119279 119310 121220 122110	ANTI-DIARRHEAL ALLERGY RELIEF COLD-EEZE LOZENGES PEPLUM ALEVE BAYER ASPIRIN	BOX BOX 1 Box 1 box 5 Each 5 each	\$7.01 \$10.56 \$17.14 \$20.56 \$3.89 \$11.14	

100639	HAND LOTION	10 EACH	\$7.71	
102640	BIOFREEZE MUSCLE RELIEF	5 EACH	\$4.71	
102835	DENTAL RELIEF	10 EACH	\$8.53	

Appendix C: First Aid Kit Reference Guide

The California Occupational Safety & Health Administration (8 CCR §3400) regulation requires a physician's approval regarding the contents of a first aid kit for campus employees. EHSRM recommends the following First Aid kits that may be stocked through Grainger or VWR.

First aid kits must meet standards: Federal OSHA 1910.151b, ANSI Z308.1- 2015 or ANSI Z308.1-2021, either Class A or Class B

The first aid kit should be considered adequate for a workplace only when a hazard assessment of the work environment has been completed by competent personnel. For a variety of operations, employers may find that additional first aid supplies and kits are needed. Kits should be inspected frequently to ensure the completeness and usability of all first aid supplies. Any supply beyond its marked expiration date should be discarded and replaced.

The following approved kits are available through eBuy at Grainger and VWR. If you wish to purchase a different brand, you may as long as the contents are the same type and quantity. If you need assistance, contact ehsocchealth@ucr.edu at EH&S.

Grainger: Item # 794KH1 MFR Model# 91336



FIRST AID ONLY First Aid Kit: Industrial/Vehicle/Workplace, 25 People Served per Kit, 115 Components

Item **794KH1**

Mfr. Model **91336**

**Recommended for labs, offices, and vehicles

Meets ANSI/ISEA Z308.1-2021. Class A- Kit Type: III. 11-25 people served. Case Material Metal; First Aid Kit Mounting Type Portable; Wall Mount; Height 6 in Width 2.38 in Depth 9.06 in; Waterproof No; First Aid Kit Application: Industrial; Vehicle; Workplace. Number of Components 115. Color White.

Grainger: <u>Item # 794KH5 MFR Model# 91340</u>



FIRST AID ONLY First Aid Kit: Gen
Purpose/Industrial/Workplace, 100 People Served per Kit,
Metal

Item **794KH5**

Mfr. Model 91340

**Recommended for labs, offices, and vehicles

Meets ANSI/ISEA Z308.1-2021. Class B- Kit Type: III. 100 people served. Case Material Metal; First Aid Kit Mounting Type Portable; Wall Mount; Height 16 in Width 5.5 in Depth 15 in; Waterproof No; First Aid Kit Application: General Purpose; Industrial; Workplace Number of Components 687. Color White.

Grainger: Item # 794KH7 MFR Model # 91342



FIRST AID ONLY First Aid Kit: Gen Purpose/Industrial/Workplace, 200 People Served per Kit, Metal

Item 794KH7

Mfr. Model 91342

**Recommended for maintenance shop complexes and other large work areas.

Meets ANSI/ISEA Z308.1-2021. Class B- Kit Type: I, II. 200 people served. Case Material Metal; First Aid Kit Mounting Type Portable; Wall Mount; Height 5.88 in Width 19.88 in Depth 22.5 in; Waterproof No; First Aid Kit Application: Industrial; Vehicle; Workplace. Number of Components 2138 Color White.

VWR: Catalog Number 76049-036 (Plastic case or 76049-034 metal case)



These 25 person bulk first aid kits meet OSHA and ANSI standards, and are designed for use in small offices, vehicles, and work sites.

- · Weatherproof, wall-mountable case
- Available with 89 or 141 pieces
- Available in a metal or plastic case
- ANSI/ISEA Z308.1-2015

**Recommended for labs, offices, and vehicles

The weatherproof plastic case is wall-mountable, yet has a handle for easy carrying.

Certifications: Meets OSHA and ANSI standards. ANSI/ISEA Z308.1-2015. Meets the 2015 ANSI Class A requirements. Sufficient to treat 25 or more people.

Note:

The latest revision, ANSI Z308.1-2021, includes several notable updates. A foil blanket has been added to both Class A and Class B kits, and the quantity of hand sanitizer for both Class A and Class B kits has increased. For the Class B kit, more specificity on the type of tourniquet required has been outlined to distinguish them from those types of bands used to draw blood, which are not as effective in preventing blood loss as intended. If you need to upgrade your current first aid kit to the latest revision, please send us an e-mail at ehsocchealth@ucr.edu.

If you are working with more hazardous materials, you also need to stock the recognized first aid materials for that hazard. For example, when using HF (hydrofluoric acid), you need calcium gluconate lotion. For more information, contact EH&S at 951-827-5528.

To keep supplies sanitary, first-aid items must be stored in sealed containers.

- First-aid kits should be kept in work areas and company vehicles to allow immediate access by employees.
- First-aid kits must be inspected monthly so the contents may be replenished as necessary. Pls and supervisors are responsible for this inspection.

Field Research First Aid Kits:

Field research groups can receive free <u>NOLS 4.0</u> first aid kits. If you have questions about which kit is appropriate for your group, contact <u>Pamela See</u> at EHSRM for more information.

<u>First Aid kits</u> are also available at the NOLS Store. You can receive a 20% educational discount at the <u>NOLS Store</u> when you provide your UCR edu e-mail address.







I have reviewed the above list of materials for UC Riverside first-aid kits and approved them as appropriate for the first-aid needs of its employees and for field research.

Physicians Name: Dr. Keith Wresch

Address: Concentra Clinics 1760 Chicago Ave # J3 Riverside, CA 92507

■ Phone Number: (951) 781-2200

Physicians Signature:

Date Signed: 07/25/2023.