

**Title 14—Aeronautics and Space**  
**CHAPTER I—FEDERAL AVIATION ADMINISTRATION, DEPARTMENT OF TRANSPORTATION**

[Docket No. 12384; Amdt. No. 121-107]

**PART 121—CERTIFICATION AND OPERATIONS: DOMESTIC, FLAG, AND SUPPLEMENTAL AIR CARRIERS AND COMMERCIAL OPERATORS OF LARGE AIRCRAFT**

**Appendix A—First-Aid Kits**

The purpose of this amendment to Part 121 of the Federal Aviation Regulations is to revise the quantity and content requirements for first-aid kits required to be carried aboard aircraft operated under Part 121 and to replace the different types of kits presently required with a standard kit. Also, this amendment requires that the appropriate number of first-aid kits be distributed throughout the aircraft cabin and be readily accessible to the cabin flight attendants.

This amendment is based on a notice of proposed rulemaking (Notice 72-30) published in the *FEDERAL REGISTER* on November 25, 1972 (37 FR 25052). A number of comments were received in response to the Notice and, except for those indicating agreement with the proposal or merely repeating issues discussed and disposed of in the notice, the FAA's disposition of the comments is set forth hereinafter.

Several comments were received suggesting various additions and a deletion to the required list of contents proposed for the first-aid kits. Among the suggested additions were bandage compresses (2 in.), gauze compresses, tourniquet and forceps, eye patches, ophthalmic ointment, decongestants, aspirin, tweezers, an airway, and a pulmonator or Aneu Resuscitative Bag with a sidetube for oxygen input. The FAA does not agree. The list of contents proposed for the first-aid kits was developed by a medical committee composed of physicians representing, among others, air carriers, the Air Transport Association, and the FAA. Their determination as to the contents of the kits resulted from a study of turbulence accidents aboard aircraft, particularly an incident involving a Boeing 747 in 1972, which resulted in injuries to several passengers.

Some of the additions suggested are items of medical equipment which go beyond the scope of a first-aid kit, such as a pulmonator, or a tourniquet and forceps, or require training to operate. For instance, an airway was considered, but

it was determined that an airway should only be used by medically trained personnel. With respect to the ophthalmic ointment, it should be noted that there is no universal ointment for the variety of eye conditions which can occur, and the use of a particular type to treat certain conditions could even be harmful. Some of the additions suggested, such as decongestants, aspirin, and tweezers are items the FAA has determined are not necessary for an inflight first-aid kit, while others, such as the 2-inch bandage compresses, gauze compresses, and eye patches were not included because in the interest of inventory economy, the required 1-inch and 4-inch bandage compresses can be used wherever these items could have served.

Some commentators stated that a burn compound was not necessary since it is no longer included in the recommended first-aid treatment for burns. Other comments were received stating that the quantity of burn compound proposed should be increased. The FAA does not agree. Although there are other approved methods of treating burns, the burn compound can be an effective symptomatic treatment and, the FAA believes that the proposed quantity is sufficient.

Comments were received which suggested regulatory requirements for: (1) constructing the first-aid kit containers from heavy clear plastic, so as to allow inspection of the kits without opening them, (2) prominently marking the kits with bright colors, (3) mandatory first-aid training for pilots and flight engineers, (4) removing lounges in the airplanes which encourage passengers to stand and move about the cabin, (5) standardizing airport casualty support kits, and (6) airports to have staff and equipment available to assist in evacuation of persons who require hospitalization. These comments, although outside the scope of the notice concerning this amendment, may be considered in future FAA regulatory action.

Several commentators recommended increasing the quantities of certain proposed kit items, and also the number of first-aid kits required to be aboard the aircraft. Another commentator suggested that the required number of kits should be decreased on domestic flights because the aircraft would always be in a position to land before an appreciable amount of first-aid could be administered. However, the FAA believes, on the basis of data gathered from a study of turbulence accidents aboard aircraft that the number of first-aid kits and their contents proposed is appropriate for the

treatment of injuries likely to occur in flight.

One comment was received questioning the quality of scissors which would be required in the first-aid kit. The FAA understands that this item is subject to pilferage. However, the bandage scissors required need not be the expensive surgical type. Any scissors that will cut the bandages included in the first-aid kit will suffice.

Several comments were received concerning the type of splints that would be required by the amendment. Some commentators recommended specifying inflatable splints, while others recommended the cardboard variety. The FAA agrees that the splint requirement should be clarified by specifying the type of splints intended to meet the proposed requirement. Therefore, the proposal has been revised in this amendment to require noninflatable splints. Consideration was given to permitting the use of inflatable splints, but tests conducted during decompression have revealed that this type of splint can be hazardous for use in airplanes due to changes in the cabin pressure.

One commentator suggested that inasmuch as an operator could at his discretion carry more than the required first-aid supplies, it should be emphasized that the list of contents in Appendix A is a minimum list only. It would appear to be generally understood that the list of contents is a minimum list, but in any event, the wording of the proposal has been revised to make this clear.

Some comments suggested that in place of 1-inch adhesive tape (standard roll) as proposed in the notice, that porous, nonallergenic tape be required. The FAA does not entirely agree. One-inch standard adhesive tape is the requirement and under the wording of this rule other varieties of adhesive tape are acceptable to meet that requirement, including the porous, nonallergenic type.

The FAA is unable to agree with certain comments which suggest that some required items, such as antiseptic swabs, ammonia inhalants, and splints should be located in a readily accessible container or drawer other than the first-aid kit. For emergency purposes it is considered more appropriate to have minimum required items kept in first-aid kits that are readily available. As stated previously, however, additional items may be carried in other locations at the discretion of the operators.

Several comments were made recommending that the required number of first-aid kits should not only be easily

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accessible to the cabin flight attendants, but should also be evenly distributed throughout the cabin. It was the intent of the proposal regarding Appendix A(2) to require that the kits be distributed as evenly as practicable throughout the cabin. Accordingly, for purposes of clarification, the wording of the proposal has been changed to state that the required first-aid kits must be distributed as evenly as practicable throughout the cabin and be readily accessible to the cabin flight attendants.

One comment was received stating that the amendment should not specify packing the contents in unit size, since it imposes an unnecessary and undue restriction. The FAA agrees, and the amendment has been revised to require only a total quantity of each particular item.

Interested persons have been afforded an opportunity to participate in the making of this amendment, and due con-

sideration has been given to all matter presented.

This amendment is made under the authority of sections 313(a), 601, and 604 of the Federal Aviation Act of 1958 (49 U.S.C. 1354(a), 1421, and 1424), and section 6(c) of the Department of Transportation Act (49 U.S.C. 1655(c)).

In consideration of the foregoing, Appendix A to Part 121 of the Federal Aviation Regulations is amended, effective June 24, 1974, to read as follows:

#### Appendix A—First-Aid Kits

Approved first-aid kits required by § 121.309 must meet the following specifications and requirements:

(1) Each first-aid kit must be dust and moisture proof, and contain only materials that meet Federal Specifications GG-K-391a, as revised.

(2) Required first-aid kits must be distributed as evenly as practicable throughout the cabin and be readily accessible to the cabin flight attendants.

(3) The minimum number of first-aid kits required is set forth in the following

table:

No. of passenger seats	No. of first-aid kits
0-50.....	1
51-150.....	2
151-250.....	3
More than 250.....	4

(4) Each first-aid kit must contain at least the following:

Contents	Quantity
Adhesive bandage compresses, 1-inch.....	16
Antiseptic swabs, 10 MM.....	20
Ammonia inhalants, 6 MM.....	10
Bandage compresses, 4-inch.....	8
Triangular bandage compresses, 40-inch.....	5
Burn compound, ¼-ounce or an equivalent of other burn remedy.....	4
Arm splint, noninflatable.....	1
Leg splint, noninflatable.....	1
Roller bandage, 4-inch.....	4
Adhesive tape, 1-inch standard roll.....	3
Bandage scissors.....	1

Issued in Washington, D.C., on December 13, 1973.

ALEXANDER P. BUTTERFIELD,  
Administrator.