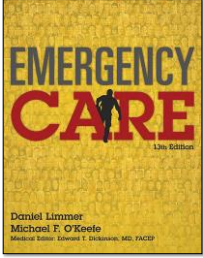


Emergency Care

THIRTEENTH EDITION

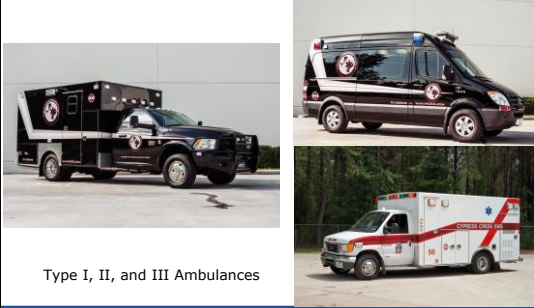


CHAPTER 36

Operations

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Preparing for the Call



Type I, II, and III Ambulances

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Preparing for the Call



Four types of ambulances: medium duty.

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Ambulance Supplies and Equipment

- North Dakota Division of Emergency Medical Services – regulation authority
- Where Is It? What is It? What's it For?
- Ready for use every call, every time!

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Ambulance Supplies and Equipment



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BLS Licensed Equipment

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Name of BLS Ground Ambulance Service: _____ License Number: _____

CHECKLIST OF REQUIRED EQUIPMENT: BLS GROUND AMBULANCE

Total Number of Vehicles in Service: _____

Please make copies if additional pages are needed.

Item	Unit Number(s)			
	UNIT #	UNIT #	UNIT #	UNIT #
Mounted ambulance cot with retaining straps				
Stretchers with retaining straps. Vehicle design dictates quantity.				
Piped oxygen system - with appropriate regulator and flow meter, or two "E" size bottles for minimum oxygen supply with regulator and flow meter				
Portable oxygen unit with carrying case				
To include one "D" size bottle with another "D" bottle in reserve				
Three nasal cannula, three non-rebreather oxygen masks in adult and pediatric sizes, and three sets of oxygen supply tubing				
Suction unit mounted and portable capable of achieving 400 mmHg 4 seconds or less, w/ catheters in adult sizes, rigid and soft				
Bag valve mask resuscitation units in infant, child and adult sizes with appropriate sized face masks or pocket masks with oxygen inlet in infant, child and adult sizes				

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Oakes Ambulance Bi-Monthly Vehicle Inspection

Unit 6158
2013 Ford F450 Super Duty Horizon
VIN # 1FD0F4HTCEB75539

4218 Vehicle Special Notes:
*Serialized every 4,000-6,000 miles as R11 unit
*Serialized every 2,000-3,000 miles as R12 unit
*New vehicle at 10 yrs
*10 years: work performed at Post Dealer

Important Dates of Last: Oil Filter: _____
Date: _____ Current Mileage: _____ Checked By: _____

Checked and Okay May Require Future Attention Requires Immediate Attention

Vehicle Exterior		Tires	
Signs of Leaks		Left Front	psi
Windows and Mirrors		Right Front	psi
Doors Open / Close		Left Rear	psi
		Right Rear	psi

Remarks: _____

Vehicle Interior		Electrical and Lighting	
Seat Belts		Turn Signals	
Heater / Air Conditioning		Driver Side	
Warning Lights / Symbols		Passenger Side	
Outlets / Chime / Horn		Headlights	
USCAR / State Chair		Right Beam	
		Left Beam	
		Brake Lights	
		Emergency Flashers	
		Backup Alarm	
		Horn	
		Siren	
		Wiper Blades	
		Wind Lights (on/off)	
		Front Emergency Lights	
		Side Emergency Lights	
		Rear Emergency Lights	

Remarks: _____

Fluids Under the Hood	
Engine Oil	
Coolant Level	
Wiper Washer	
Battery	
Belts	
Deerel Exhaust Fluid	
Low water	

Remarks: _____

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Ambulance Inspection, Engine On

- Check the dash-mounted indicators
 - Oil pressure
 - Engine temp
 - Electrical system failure
- Check dash-mounted gauges for proper operation.
- Depress the brake pedal. Note pedal travel.

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Ambulance Inspection, Engine On

- Test the parking brake. Move the transmission level to a drive position. Replace the level to the park position as soon as you are sure that the parking brake is holding.
- Turn the steering wheel from side to side.

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Ambulance Inspection, Engine On

- Check windshield wipers and washers.
 - The glass should be wiped clean each time the blades move.
- Turn on the vehicle's warning lights.
 - Check each flashing and revolving light for operation.

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Ambulance Inspection, Engine On

- Turn on the other vehicle lights.
 - Headlights (high and low)
 - Turn signals
 - Four-way flasher
 - Brake lights
 - Side and rear flood lights

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Ambulance Inspection, Engine On

- Check the heating and air-conditioning equipment (back and front)
- Check the onboard suction.
- Check oxygen levels
- Check the communications equipment.
 - Portable, fixed radios, and phones

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Inspection of Patient Compartment Supplies and Equipment

- Conduct a detailed inspection and inventory of the equipment and supplies.
 - Check all items for completeness, condition, and operation.

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Oakes Ambulance Bi-Monthly Equipment Inspection

Unit 6158
2012 Ford F450 Super Duty Horton
VIN # 3DU4H7SC0B75539

Date: _____ Checked By: _____

Checked and Okay May Require Future Attention Requires Immediate Attention

Airway Compartment		Compartment A & B	
King Airways ET Tube	<input type="checkbox"/>	Pediatric Bag	<input type="checkbox"/>
Junior Cannula	<input type="checkbox"/>	Venturi	<input type="checkbox"/>
Trach Kit	<input type="checkbox"/>	Stair Chair	<input type="checkbox"/>
ET Tube	<input type="checkbox"/>	Ora Vault	<input type="checkbox"/>
Remarks:		Remarks:	
Trauma Compartment		First-In Bag	
TV Supplies	<input type="checkbox"/>	Saline Flushes	<input type="checkbox"/>
TV Storage Kit	<input type="checkbox"/>	Respirator Packaging	<input type="checkbox"/>
Hot/Cold Packs	<input type="checkbox"/>	Blood Tubes	<input type="checkbox"/>
Shedlin Water	<input type="checkbox"/>	Extra Patches	<input type="checkbox"/>
Thermometer	<input type="checkbox"/>	TV Kit	<input type="checkbox"/>
Blood Tubes	<input type="checkbox"/>	Oxygenator	<input type="checkbox"/>
Remarks:		Remarks:	
Trauma and Cardiac Bags			
Respirator Packaging	<input type="checkbox"/>		
Thermal ID	<input type="checkbox"/>		
EKG ID	<input type="checkbox"/>		
TV Kit	<input type="checkbox"/>		
Remarks:			

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Receiving and Responding to a Call

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Role of the Emergency Medical Dispatcher

- Ask questions of caller and assign priority to call
- Provide prearrival medical instructions to callers and information to crews
- Dispatch and coordinate EMS resources
- Coordinate with other public safety agencies

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Role of the Emergency Medical Dispatcher

- Questions
 - What is the exact location of the patient?
 - What is your call-back number?
 - What's the problem?
 - How old is the patient?
 - What's the patient's sex?
 - Is the patient conscious?
 - Is the patient breathing?

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Operating the Ambulance

- Being a safe ambulance operator
 - Be physically and mentally fit.
 - Be able to perform under stress.
 - Have a positive attitude about your ability as a driver but not be an overly confident risk taker.
 - Be tolerant of other drivers.
 - Never drive while under the influence of any substance.

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Operating the Ambulance

- Being a safe ambulance operator
 - Never drive while taking prescription medications that can impair your ability to operate a motor vehicle.
 - Never drive with a restricted license.
 - Always wear your glasses or contact lenses if required for driving.
 - Evaluate your ability to drive based on personal stress, illness, and fatigue.

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Operating the Ambulance

- Understanding the law
 - An ambulance operator must have a valid driver's license and may be required to complete a training program.
 - Privileges granted under the law to the operators of ambulances apply when the vehicle is responding to an emergency.
 - Not applicable if not on call

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Operating the Ambulance

- Understanding the law
 - Exemptions granted do not provide full immunity to the driver.
 - Privileges granted during emergency situations apply only if the operator uses warning devices in the manner prescribed by law.

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Operating the Ambulance

- Understanding the law
 - Most statutes allow:
 - Parking wherever necessary as long as life and property are not endangered
 - Proceeding past stop signs/signals
 - Exceeding the posted speed limit as long as life and property are not endangered
 - Passing other vehicles in no-passing zones after properly signaling and taking precautions

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Operating the Ambulance

- Understanding the law
 - Most statutes allow:
 - Disregard for regulations that govern direction of travel and turning in specific directions with proper caution and signals
 - Laws interpreted by the court based on:
 - Using due regard for safety of others
 - Whether to the best of your knowledge, the situation was a true emergency

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Operating the Ambulance

- Using the warning devices
 - The siren
 - Never use it indiscriminately.
 - The horn
 - Visual warning devices
 - Day or night
 - Vehicle should be easily seen from 360 degrees in emergency response mode.

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Operating the Ambulance

- Speed and safety
 - Excessive speed increases the probability of a collision.
 - Speed increases stopping distance, reducing the chance of avoiding a hazardous situation.

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Operating the Ambulance

- Escorted or multiple-vehicle responses
 - Inexperienced ambulance operator often follows the escort vehicle too closely and is unable to stop when the lead vehicle makes an emergency stop.
 - Recommendation of no escorts unless absolutely necessary
 - Greater care must be used.

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Operating the Ambulance

- Factors that affect response
 - Day of the week
 - Time of day
 - Weather
 - Road maintenance and construction
 - Railroads
 - Bridges and tunnels
 - Schools and school buses

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Operating the Ambulance

- Navigating to the scene
 - Global positioning satellite (GPS) navigation often installed
 - No substitute for an intimate knowledge of the response area.
 - May become a distraction
 - Obtain detailed maps of your service area.

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Operating the Ambulance

- Response safety summary
 - Minimize lights-and-siren "hot" responses. Driving with lights and siren involves high risk.
 - Wear your seat belts.
 - Know where you are going before you respond. Use the GPS and check the maps. Be familiar with your response area.

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Operating the Ambulance

- Response safety summary
 - Come to a complete stop at intersections.
 - Don't be a distracted driver. Have the crew leader operate the radio, siren, GPS, computer, and other devices.
 - Pay complete attention to safe driving.

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Overall Ambulance Safety

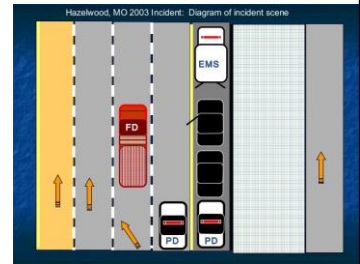
- Keep unnecessary units and people off the highway
- Avoid crossovers unless a turn can be completed without obstructing traffic
- Backing up
 - Avoid backing up whenever possible



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Accident Scene Safety

- First unit on scene?
 - Park apparatus "upstream" from incident



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Operating the Ambulance

- Safety at highway incidents
 - Wear Your PPE
 - Place cones/flares and reduce Emergency lighting
 - Unit placement is important!



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Transferring the Patient to the Ambulance

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Four Steps of Transferring

1. Select proper patient-carrying device
2. Package patient for transfer
3. Move patient to ambulance
4. Load patient into ambulance



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Transferring the Patient to the Ambulance

- Packaging the patient
 - Ready patient to be moved and combining patient and patient-carrying device as unit ready for transfer
 - Sick or injured patient must be packaged so that condition is not aggravated.

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Transferring the Patient to the Ambulance

- Packaging the patient
 - Before placing patient on carrying device
 - Complete necessary care for wounds, other injuries.
 - Stabilize impaled objects.
 - Check dressings and splints.
 - Cover patient and secure to patient-carrying device.

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Transferring the Patient to the Ambulance

- Protecting the patient
 - Must be secured to patient-carrying device
 - Use shoulder harness if available.
 - Minimum of 3 straps to secure
 - Chest level
 - Waist level
 - Lower extremities



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Transferring the Patient to the Ambulance

- Protecting the EMT
 - EMT at greater risk in patient compartment
 - Make sure all equipment is secured.
 - Remain seated.
 - Wear seat belt and harness if possible.
 - Avoid unnecessary movement during response and transport.



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Transporting the Patient to the Hospital

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Preparing the Patient for Transport

- Continue assessment.
- Secure stretcher in place in ambulance.
- Position and secure patient.
- Adjust security straps.
- Prepare for respiratory and cardiac complications.

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Preparing the Patient for Transport

- Loosen constricting clothing.
- Load relative or friend who must accompany patient.
- Load personal effects.
- Talk to your patient.
- Avoid letting patients sit on bench or airway seat.

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Caring for the Patient en Route

- Notify the hospital.
- Continue to provide emergency care as required.
- Use safe practices during transport.
- Compile additional patient information.
- Continue assessment and monitor vital signs.
- Notify the receiving facility.

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Pediatric Note

- The entire scene may create a terrifying experience for a child.
 - A toy such as a teddy bear can do much to calm a frightened child.
 - The presence of a female EMT or police officer may be helpful.
- Small children do not, as a rule, carry identification.

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Transferring the Patient to the Emergency Department Staff

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Transferring the Patient to the Emergency Department Staff

- If routine admission situation or when an illness or injury is not life threatening injury, check first to see what is to be done with patient.
- Assist emergency department staff as required, and provide a verbal report.

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Transferring the Patient to the Emergency Department Staff

- As soon as you are free from patient-care activities, prepare the prehospital care report.
- Transfer the patient's personal effects.
- Obtain your release from the hospital.



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Terminating the Call

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At the Hospital

- Quickly clean the patient compartment while taking appropriate Standard Precautions.
- Prepare respiratory equipment for service.
- Replace expendable items.
- Exchange equipment according to your local policy.
- Make up the ambulance cot.

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Terminating the Call: At the Hospital



1. A low-level disinfectant approved by the U.S. Environmental Protection Agency (for example, a commercial product such as Lysol) will clean and kill germs on ambulance floors and walls.

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En Route to Quarters

- Radio the EMD.
- Air the ambulance if necessary.
- Refuel the ambulance.

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Terminating the Call: En Route to Quarters



6. Replace expendable items as required.

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In Quarters

- Place badly contaminated linens in a biohazard container and noncontaminated linens in a regular hamper.
- As necessary, clean any equipment that touched the patient.
- Clean and disinfect used nondisposable respiratory-assist and inhalation therapy equipment.

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In Quarters

- Clean and sanitize the patient compartment.
- Prepare yourself for service.
- Replace expendable items.
- Replace or refill oxygen cylinders.
- Replace patient-care equipment.

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In Quarters

- Carry out post-operation vehicle maintenance procedures as required.
- Clean the vehicle.
- Complete your paperwork.



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Air Rescue



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When to Call for Air Rescue

- Operational reasons
 - To speed transport to distant trauma center
 - When extrication of high-priority patient is prolonged and air rescue can speed transport
 - When patient must be rescued from remote location

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When to Call for Air Rescue

- Clinical reasons
 - Patient in shock
 - Glasgow Coma Scale total less than 10
 - Head injury with altered mental status
 - Chest trauma and respiratory distress
 - Penetrating injuries to body cavity

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When to Call for Air Rescue

- Clinical reasons
 - Amputation proximal to hand or foot
 - Extensive burns
 - Serious mechanism of injury
 - Patient is post-cardiac arrest with a pulse.

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How to Call for Air Rescue

- Name and call-back number
- Agency name
- Nature of situation
- Exact location
 - Crossroads, major landmarks
- Exact location and description of landing zone
- If possible, GPS coordinates

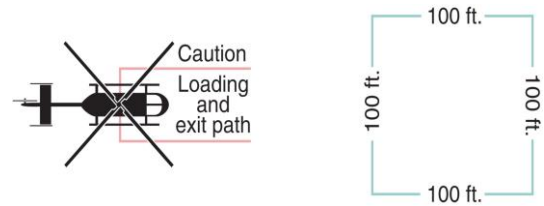
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How to Set up a Landing Zone

- Describe the landing zone to the air rescue service.
 - Terrain
 - Major landmarks
 - Estimated distance to nearest town
 - Other pertinent information
 - Such as wires, ditches, or wind

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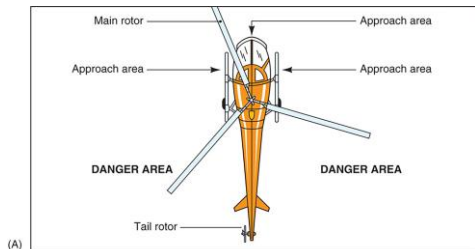
Landing Zone



Helicopter landing zone.

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Landing Zone



(A) The area around the tail rotor is extremely dangerous. A spinning rotor cannot be seen.

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How to Approach a Helicopter

- Do not approach unless escorted by flight personnel.
- Allow the crew to direct loading of the patient.
- Stay clear of tail rotor at all times.*
- Keep all traffic and vehicles at least 100 feet from the helicopter.
- Do not smoke near the aircraft.
- Be aware of danger areas.

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Chapter Review

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Chapter Review

- Inspect the vehicle to assure that it is complete and that critical items can be easily located.
- A "hot" response means using lights and siren. Hot responses involve high risk. A "cold" response means no lights or sirens. Cold responses decrease risk.

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Chapter Review

- The laws in most states allow the driver of an emergency vehicle running "hot" to break some of the vehicle and traffic laws. However, it must be done with due regard for the safety of others.
- Pay attention to driving! Do not text, make phone calls, drink beverages, or be in any way distracted while driving.

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Chapter Review

- Secure all gear. It can become a projectile in a crash!
- Do not let your patient become a projectile. Use the stretcher shoulder straps.

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Chapter Review

- Wear your seat belt in front and back (whenever possible).
- Know the medical and operational reasons for helicopter transport and know how to set up a safe landing zone.

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Remember

- Ambulances must be properly stocked and prepared. Pre-call inspections assure readiness and appropriate equipment.
- Emergency Medical Dispatchers enhance patient care by providing prearrival instructions and by obtaining information for responders.

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Remember

- Each state has statutes regulating operation of emergency vehicles. EMTs must be familiar with local rules and regulations.
- EMTs should use good judgment and due regard for safety of others when operating an ambulance.

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Remember

- The four steps involved in transferring the patient to the ambulance are:
 - selecting proper patient-carrying device,
 - packaging patient for transfer,
 - moving patient to ambulance, and
 - loading patient into ambulance.

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Remember

- Patients should be safely secured prior to the ambulance's moving. Assessment and care must continue during transport.
- The primary concern of transfer of care is continuation of patient care. Failure to do so properly can be considered abandonment.

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Remember

- Cleaning the ambulance, replacing used supplies and equipment, and readying the ambulance stretcher are important elements the EMT must complete while terminating a call. However, EMTs should be prepared for unusual circumstances.

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Remember

- Indications for utilizing air rescue may include both operational and medical reasons. EMTs should be familiar with local protocols for accessing and utilizing air rescue transport.

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Questions to Consider

- Does the patient have a true emergency adversely affected by time?
- How can I park to best protect the scene and personnel?
- Does my personal protective equipment "match" what is being worn by others?

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Critical Thinking

- What equipment should you include in a kit that you carry to the scene?
- How should the equipment be positioned so that you can reach urgently needed items quickly?
- What special items, if any, should be in the kit to meet local needs?

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