



The Emergency Kit

Seriousness of complication		Frequency of complication	
Minor complication		Common	
Worrying complication		Occasional	
Moderate complication		Infrequent	
Serious, but not major		Rare	
Major complication		Very rare	

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Introduction:

Just like any other area of medicine and surgery, aesthetic practice requires a set of skills and resources to first identify and then to manage a potential complication. The Aesthetic Complications Expert Group has produced a whole series of guidelines on how to manage some of the most common and more serious problems that may be experienced but all of this is academic if you do not have the right tools at your disposal.

Background:

An emergency kit is essential for anyone performing aesthetic treatments as in the event of a medical emergency, there is not enough time to prescribe and order the drugs required to treat it. Although this is not a problem for doctors and dentists, this is an obstacle to nurses performing aesthetic treatments who are not able to hold stock drugs. The British Association of Cosmetic Nurses are currently lobbying to have this restriction removed to allow safer practice however in the meantime, nurses only have the option of prescribing these drugs on a named patient basis or working in collaboration with a doctor or dentist who can hold these medicines as stock drugs.

According to Regulation 238 of the Human Medicine Regulations 2012, anybody can inject adrenaline and other drugs listed in Schedule 19 of the Regulations for the purpose of saving a life without breaking any laws however this does not get around the issue of how to obtain these drugs in the first place.

In the future, the Aesthetic Complications Expert Group would like to facilitate a register of clinics who stock emergency drugs that may be accessed in the case of an emergency by nurses who are unable to stock these drugs and also a register of experienced practitioners who may be able to give advice to others when diagnosis or treatment decisions are in doubt.

The Emergency Kit

The basic Emergency Kit should contain the following items:

Aesthetic Complications Expert Group Emergency Kit	
Adrenaline 1:1000 1ml	2 ampoules
Hyaluronidase 1500 units	2 ampoules
Water For Injection 10ml	2 ampoules
Aspirin 75mg	4
Topical Glyceryl Trinitrate	30g
Normal Saline Steripod Eye Wash	2 x 10ml
Resuscitation Mask	Adult x 1
2ml Luer-lok Syringe	2
10ml Luer-lok Syringe	2
1ml Graduated Syringe	3
23G Blue Needles (25-30mm)	4
27G Grey Needles	2
30G Yellow Needles	2

According to the latest guidance from the Resuscitation Council, the administration of chlorphenamine and hydrocortisone should be restricted to practitioners who are experienced in their use and prescribe these drugs on a frequent basis. It is unlikely that practitioners who are working solely in aesthetic medicine would be considered experienced and therefore the recommendation would be to call an ambulance and carry out Basic Life Support before help arrives.

The Emergency Kit is appropriate for the vast majority of aesthetic practitioners but it is recommended that the clinical lead for each establishment carries out a risk assessment and have facilities and equipment suitable for the treatments offered. Clinics offering surgical treatments or treating high-risk patients such as the very obese may require oxygen and a defibrillator on site.

There are several other medications that may be useful to have available to prevent or deal with a complication but not required as an emergency so could be held as stock or prescribed on a named patient basis as required:

1. Iodipine 0.5% Ophthalmic Solution (5mg/ml)
2. Aciclovir 200mg tablets x 25
3. Topical antibiotic (e.g. Fucidic Acid)
4. Topical steroid (e.g. Hydrocortisone, Clobetasone butyrate, Betamethasone)
5. Oral antibiotic (e.g. Flucloxacillin 500mg QDS x 28 or Clarithromycin 500mg BD x 14)
6. Oral antihistamine (e.g. Loratadine 10mg)

Key points:

- No-one should be performing cosmetic treatments that do not have the knowledge, skills and resources to immediately deal with a complication.
- Ensure that patients are fully informed of common and serious complications that may occur with a specific treatment and that this is highlighted on the consent form that they sign.
- If a patient requires resuscitation or has been treated for an anaphylactic reaction, they should be admitted to hospital via an ambulance as further anaphylaxis may occur when the initial dose of adrenaline wears off.
- Ensure that a Managing Aesthetic Complications folder is kept with the Emergency Kit in the case of a complication, this will allow easy reference to treatment algorithms and dosages and reconstitution for the drugs that may be required.
- In the event of a complication, ensure contemporaneous records and photographs are made.
- After a complication has occurred, ensure that there is appropriate follow up until it has fully resolved.
- Seek more expert help from a practitioner experienced in managing complications when needed.
- Complete a significant event form where available and inform your medical defence insurance company at the earliest convenience.
- Check the emergency kit on a monthly basis for any drugs that have expired and need replacing and replace any used drugs straight away.
- For complications caused by a certain medical product, consider whether this needs reporting via the Yellow Card scheme to the MHRA and/or reporting to the manufacturer.
- Ensure that all practitioners are up to date with resuscitation and Basic Life Support.
- Display Resuscitation/DRABC laminated posters in all clinical rooms.
- Grab packs should have been prepared by the Laser Protection Advisor in clinics who are offering Laser/IPL treatments which provides details on the laser device and power output and wavelength which should be sent with the patient to the Eye Casualty in the event of an eye injury.

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