

Jan. 4, 1944.

K. LEWIS

2,338,448

HOLDER AND APPLICATOR FOR ANTISEPTICS

Filed April 27, 1942

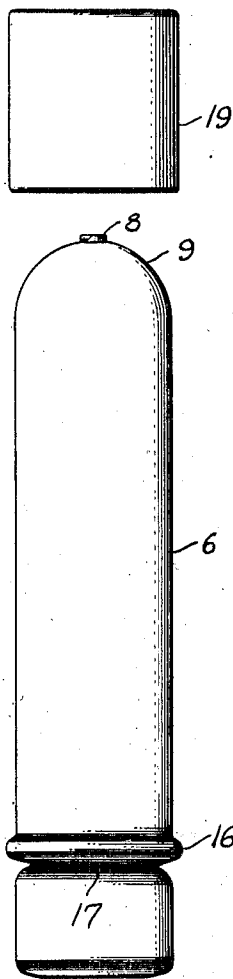


Fig. 1.

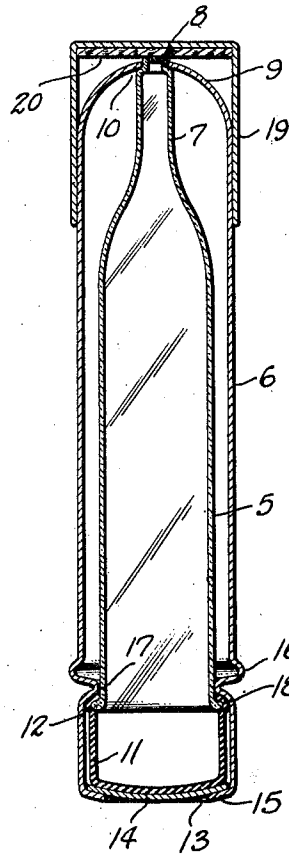


Fig. 2.

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2,338,448

HOLDER AND APPLICATOR FOR
ANTISEPTICS

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Application April 27, 1942, Serial No. 440,594

2 Claims. (Cl. 128—260)

This invention relates to a holder and applicator for antiseptics, and has for an object to provide an improved device of this character which will form a simple and effective holder for carrying a liquid antiseptic, such for example as tincture of iodine, in a handbag or pocket for immediate emergency need in the event of minor injuries when one is out of doors or at work, and it is also an object to provide such a device in which the antiseptic may be readily applied to the injury in the most effective manner and kept in a clean and sanitary condition with danger of contamination reduced to a minimum.

It is a further object to provide a device from which the antiseptic will flow directly to the wound or injury so that no swab is necessary and there is no danger of staining the fingers, and there is no bottle to be overturned to waste the material or stain other objects.

With the foregoing and other objects in view, I have devised the construction illustrated in the accompanying drawing forming a part of this specification. It is, however, to be understood the invention is not limited to the specific details and arrangement shown but may include various changes and modifications within the scope of the invention.

In this drawing:

Fig. 1 is a side elevation of the device with the closure cap removed from the casing, and

Fig. 2 is a longitudinal section through the completed device.

This improved holder and applicator comprises a container 5 of glass or similar material for carrying liquid antiseptic, such for example as tincture of iodine, which container is enclosed within a casing 6 of metal, molded plastic or other suitable material, which effectively protects the container from breakage and also contamination. The container has a reduced end portion 7 which may be still further reduced at the end 8 thereof to project through an opening in the end 9 of the casing, and forming a shoulder 10 to help position the container in the casing. The end 8 is provided with one or more small perforations for discharge of the antiseptic and its application directly to a wound or other injury.

At its opposite end the container is closed by a compressible bulb or cap 11 of rubber, or synthetic or reclaimed rubber, or other suitable material, which tends to assume its normal shape after being compressed, and preferably the end of the container is provided with an outwardly extending flange 12 over which the resilient bulb

or cap is fitted or wrapped to make a tight connection between the two. This end of the casing is provided with an opening 13 adjacent the bulb through which the bulb may be manipulated to force liquid antiseptic through the discharge openings in the other end 8. This may be manipulated directly by pressure of the thumb or finger through the opening, but it is preferred to provide a disc 14 of metal, molded plastic or other suitable material immediately under the opening and engaging the bulb, this disc being free to move inwardly under pressure of a thumb or finger from the outside to compress the bulb and force antiseptic from the container. The container is prevented from being forced out of the casing by an overhanging flange 15.

To facilitate manipulation and provide a better grip on the device in use, an outwardly extending bead or flange 16 is provided on the casing which may be gripped by the fingers while the thumb or another finger is pressing on the disc 14 or compressing the bulb. This also assists in more accurately applying the antiseptic to a wound or other injury. The casing may also be provided with an inwardly extending bead 17 against which the portion 13 of the bulb wrapped around the flange 12 may engage. This prevents longitudinal shifting of the container in the casing upon pressure on the end of the bulb, and it also holds the bulb tightly wrapped around the flange 12 to prevent leakage or separation of the bulb from the container. It will also prevent forcing of the bulb away from the flange to cause leakage around the flange should too great pressure be applied. The shoulder 10 formed at the opposite or reduced end of the container by cooperation with the inner wall of the end of the casing also prevents shifting of the container under pressure on the bulb.

The discharge ends of the container and casing are protected by a suitable closure. In the form shown it comprises a removable cap 19 telescoping onto the casing with a good fit sufficiently tight to provide enough friction to prevent accidental removal from the casing but still to permit removal when desired to use the applicator. Within the cap may be a closure 20 of cork, cotton or other suitable material forming a pad to engage the perforated end of the container and effectively seal it against accidental discharge of the liquid material should there be accidental pressure on the disc 14 from other articles in the handbag or pocket. The disc, however, being preferably rigid, of itself greatly reduces the liability of pressure of such articles forcing the

liquid out of the container. The cap 19 and closure 29 also effectively protect the discharge end of the container against dirt or other contamination.

The device may be readily assembled by placing the container in place in the casing with the disc 14 over the end of the bulb and then rolling over the flange 15 if of metal, or if of plastic it could be shaped after heating to soften it.

This construction makes a very convenient and effective device for carrying liquid antiseptic, such as iodine for example, in a handbag or pocket for immediate emergency use in the event of minor injury when out of doors or at work. It is also adapted for use in a first aid kit, and would be useful to a man in the armed forces or to a person in charge of children. It is also of value in the event of air raids or other emergencies. As the antiseptic will flow directly on the wound and be applied to it by the perforated end of the applicator no swab is necessary and the fingers do not become contaminated. Also there is no bottle to be overturned with consequent loss and waste of material and staining of other articles. The shape of the device and arrangement of the bulb with the manipulating means in the end of the casing greatly facilitates use of the device and ready and accurate application of the material directly to the wound or other injury, pressure on the disc 14 compressing the bulb and forcing the liquid from the perforations in the end 8 directly into the wound.

Having thus set forth the nature of my invention, what I claim is:

1. A holder and applicator for antiseptic comprising an elongated tubular casing having openings in its opposite ends, a container for liquid antiseptic in the casing having a reduced perforated end seated in the opening in one end of the casing and projecting beyond the end of the casing to provide an exposed applicator, an outwardly extending rim at the opposite end of the receptacle, a compressible bulb of flexible material engaging over and embracing said rim and

located adjacent the opening in the other end of the casing for manipulation through said opening to force the antiseptic through the perforated end, an inwardly extending annular bead on the inner wall of the casing spaced inwardly from said latter end against which the rim and embracing flexible material are seated to retain said bulb on the rim and forming an abutment for said rim to prevent shifting of the container by pressure on the bulb, a closure cap telescoping with the other end of the casing, and a closure in the cap seated against the exposed perforated end of the container to seal it.

2. A holder and applicator for antiseptic comprising an elongated tubular casing having openings in its opposite ends, a container for liquid antiseptic in the casing having a reduced perforated end seated in the opening in one end of the casing and projecting beyond the end of the casing to provide an exposed applicator, an outwardly extending rim at the opposite end of the receptacle, a compressible bulb of flexible material engaging over and embracing said rim and located adjacent the opening in the other end of the casing, a movable disc within the casing and of larger size than the latter opening so as to close said opening and engaging the bulb for manipulation thereof by pressure on the disc to force the antiseptic through the perforated end, an inwardly extending annular bead on the inner wall of the casing spaced inwardly from said latter end against which the rim and embracing flexible material are seated to retain said bulb on the rim and forming an abutment for said rim to prevent shifting of the container by pressure on the bulb, an outwardly extending annular bead on the outer wall of the casing forming a grip for holding the casing while pressing the disc, a closure cap telescoping with the other end of the casing, and closure means in the cap engaging the exposed perforated end of the container to seal it.

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