

First Aid & Medical—An Overview

Overview of Topic

First aid and medical services must be a part of every jobsite. Even if OSHA didn't require it, you still would want to provide emergency services for your employees. The minimum OSHA requirements are:

- Medical personnel must be available for advice and consultation on occupational health matters.
- Prior to the start of the project, you must make provisions for prompt medical attention in case of serious injury.
- You must have an infirmary, clinic, hospital, or physician that is reasonably accessible (in terms of time and distance), or someone with a valid first aid certificate available at the worksite.
- First aid supplies must be readily available and easily accessible. First aid supplies must be checked before being sent out to the jobsite and at least weekly.
- You must have proper equipment to transport an injured employee to a physician or hospital, or a communication system set up for contacting an ambulance service.
- In areas where 911 service is not available, you must conspicuously post emergency numbers for physicians, hospitals, and ambulances.

On-site medical treatment

The construction regulation for medical services and first aid at 1926.50(b), reads that provisions must be made prior to starting a project for prompt medical attention in case of serious injury. The phrase "reasonably accessible" emphasizes the desirability of prompt assistance when an injury or illness occurs.

A maximum response time of fifteen minutes is currently recognized by OSHA as appropriate. However, conditions at each workplace must be evaluated when a first aid program is developed to ensure that it is adequate to meet anticipated needs. Where a medical facility is near the workplace, the OSHA rules require you, the employer, to ensure the following:

- In areas where accidents resulting in suffocation, severe bleeding, or other life threatening injury or illness can be expected, a three to four minute response time is required. In other circumstances, i.e., where a life-threatening injury is an unlikely outcome of an accident, a longer response time of up to fifteen minutes is acceptable.
- If employees work in areas where emergency transportation is not available, you must make provisions for acceptable emergency transportation.
- If arrangements cannot be made to provide emergency medical service within an appropriate time frame, then a trained first aid person must be available for each shift of the operation.

Eyewash/drenching stations

Where an employee may be exposed to injurious corrosive materials, suitable eyewash/drenching stations must be available.

Employee Training

Other than the "generic" training requirement at 1926.21(b)(2) (the employer shall instruct each employee in the recognition and avoidance of unsafe conditions), this section only requires formal training for your first-aid responder. The training must be from the U.S. Bureau of Mines, the American Red Cross, or equivalent. You only need a first-aid responder at your worksite in the absence of an infirmary, clinic, hospital, or physician that is reasonably accessible.

Training Tips

Your company should have an Emergency Action Plan in place for first aid and medical services. This is a perfect time to review this document. Other issues to discuss would be: location of emergency numbers and first aid kits, and who your first aid responder is.

Where To Go For More Information

29 CFR 1926.33 — Access to employee exposure and medical records

29CFR 1926.50-Medical Services and first aid

OSHA CPL 2-2.53—Guidelines for First Aid Training Programs

First Aid & Medical—An Overview

First aid supplies and other medical services must be available at your jobsite. The minimum OSHA requirements are:

- Medical personnel must be available for advice on occupational health matters.
- Prior to the start of a project, provisions must be made for prompt medical attention in case of serious injury.
- An infirmary, clinic, hospital, or physician must be nearby, or someone trained in first aid must be available at the worksite.
- First aid supplies must be easy to get to.
- Having available means to transport an injured person to a physician or hospital.
- If 911 service is not available, the posting of emergency numbers for physicians, hospitals, and ambulances.

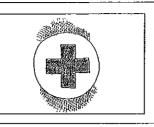
On-site medical treatment—The construction rules for medical services and first aid say that prior to starting a project, provisions must be made for prompt medical attention in case of serious injury. This means that when an injury or illness occurs, maximum response time is fifteen minutes. This is currently recognized by OSHA as appropriate for most cases.

However, conditions at each workplace must be looked at when the first aid program is developed. This is to ensure that fifteen minutes is adequate to meet all needs. Where a medical facility is near the workplace, OSHA rules require your employer to ensure the following:

- In areas where accidents resulting in suffocation, severe bleeding or other life threatening injury or illness can be expected, a three to four minute response time is required.
- In other circumstances, for instance where a life-threatening injury is an unlikely outcome of an accident, a longer response time of up to fifteen minutes is acceptable.
- If you work in areas where emergency transportation is not available, your company must provide acceptable transportation. If arrangements cannot be made to provide emergency medical service within an appropriate time frame, then a trained first aid person must be available for each shift.

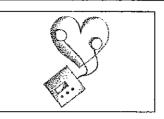
Eyewash/drenching stations—Where you may be exposed to injurious corrosive materials, suitable eyewash/drenching stations must be available at your jobsite.

You need to review your company's Emergency Action Plan for first aid and medical services. It should outline everything you need to know to get help during a medical emergency.



First Aid & Medical—An Overview, Sign-Off Sheet

| First Aid & Medical—An Overview at | employees who attended this training session on (company name) |
|---|--|
| The session covered: | |
| Jobsite first aid and medical require | ments. |
| • Medical treatment response times. | |
| • First aid responder training. | |
| The space below is for employees to "sign-off" | that they were in attendance. |
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First Aid & Medical— Automatic External Defibrillators (AEDs)

Overview Of Topic

To lose any employee can be devastating. Yet, sometimes your best employees are the ones with the highest risk of sudden cardiac arrest (SCA). Because construction workers account for a greater number of electrocutions, which often lead to SCAs, these workers have a higher risk for SCAs. That's why many construction companies are providing on-site automatic external defibrillators (AEDs).

Nearly 350,000 people die of sudden cardiac arrest each year. Currently, the chances of surviving an SCA without the aid of an AED are one in twenty. However, put an AED in the equation and those chances are raised to one in three. Over 100,000 lives can be saved each year!

SCA defined

The heart normally has a rhythmic beat. An SCA victim's heart stops beating and then beats irregularly, like a quiver. This is called ventricular fibrillation (VF). VF is not to be confused with the heart attack where blood to the heart is blocked. With VF, the blood stops circulating adequately and the victim loses consciousness. Breathing stops and the person will eventually die if not rescued.

CPR alone does not replace defibrillation in an SCA incident. CPR merely gives a person precious time until medical help arrives. Yet, many ambulance services arrive several minutes after the call. According to the American Heart Association, the chance of survival decreases 10 percent with each passing minute that the heart beat is not returned to normal. Very few people have survived after 10 minutes. Unfortunately, experts can't tell you why SCAs occur nor how to prevent them. They can, however, tell you the best known way to fix them—AEDs.

AED defined

If you've ever watched a hospital television show, you've probably seen the full-sized defibrillators—the machine with the paddles. Today's AED is a lot like these defibrillators in that it has the same function—to shock the victim's heart to restore a pulse.

However, manufacturers have developed lighter, smaller, battery-operated, and easy-to-use models. The cost of these devices has dropped significantly in the last few years. Today, you can purchase an AED for about \$3,000.

Laws and liability

In May 2000, Congress passed the Cardiac Arrest Survival Act to establish a national standard that provides good Samaritan immunity for cardiac arrest care providers, trainers, and owners of property where AEDs are kept.

Several states already have a good Samaritan exemption from liability. For a list of states that have such an exemption or allow the public to use AEDs, see the National Conference of State Legislatures website at www.ncsl.org/programs/health/aed.htm. Click on "Public User."

Moreover, a legal trend is starting to appear which suggests that failing to provide AEDs to respond to an SCA incident may be deemed as negligent.

Employee Training

While OSHA requires first aid training in certain circumstances in §1926.50, OSHA has no requirements for AEDs nor AED training. Most AED training courses include hands-on AED and CPR training. The AED used for training is a "practice AED" that will not provide an actual shock.

Training Tips

Learning to use an AED is not difficult. Studies have shown that even grade-schoolers quickly grasp the procedures. Trainees will find that extensive medical expertise is not needed. The devices themselves instruct the operator through the steps. Generally, proper training costs less than \$100 and takes about six to eight hours, including CPR training.

Where To Go For More Information

29 CFR 1926.50-Medical services and first aid.

OSHA CPL 2-2.53—Guidelines for first aid programs.

Automatic External Defibrillators (AEDs)

To lose any employee can be devastating. Yet, sometimes the best employees are the ones with the highest risk of sudden cardiac arrest (SCA). Because construction workers account for a greater number of electrocutions, which often lead to SCAs, these workers have a higher risk for SCAs. That's why many construction companies are providing on-site automatic external defibrillators (AEDs).

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Cardiopulmonary resuscitation (CPR) alone does not replace defibrillation in an SCA incident. CPR merely gives a person precious time until medical help arrives. Yet, many ambulance ser-

vices arrive several minutes after the call. According to the American Heart Association, the chance of survival decreases 10 percent with each passing minute that the heart beat is not returned to normal. Very few people have survived after 10 minutes. Unfortunately, experts can't tell you why SCAs occur nor how to prevent them. They can, however, tell you the best known way to fix them—AEDs.

AED defined

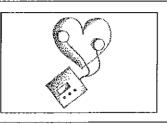
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Training

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Laws and liability

In May 2000, Congress passed the Cardiac Arrest Survival Act to establish a national standard that provides good Samaritan immunity for cardiac arrest care providers, trainers, and owners of property where AEDs are kept. Also, several states already have a good Samaritan exemption from liability.



First Aid & Medical— Automatic External Defibrillators (AEDs) Sign-Off Sheet

This sign-off sheet documents the employees at this company, ______, who have taken part in a training session on First Aid—Automatic External Defibrillators (AEDs). The session covered:

- Hands-on automatic external defibrillator (AED) training, and
- Hands-on cardio-pulmonary resuscitation (CPR) training.

The space below is for employees to "sign-off" that they were in attendance.

| Date of Training: | Job Location: |
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FIRST AID & MEDICAL—AUTOMATIC EXTERNAL DEFIBRILLATORS (AEDs) SIGN-OFF



First Aid & Medical — Bloodborne Pathogens

Overview Of Topic

Bloodborne pathogens are regulated under 29 CFR 1910.1030. Although the rule does not apply directly to the construction industry and is not found in the construction regulations, OSHA does apply the General Duty Clause upon construction sites that do not provide a safe working environment with respect to bloodborne pathogens.

The General Duty Clause of the Occupational Safety and Health Act states, "Each employer shall furnish to each of his [or her] employees employment and a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm to his [or her] employees."

Employee Training

According to the §1910.1030 employers must provide these training elements for all employees with potential exposure:

- Accessible copy and explanation of the regulation.
- General explanations of epidemiology, symptoms, and transmission modes.
- Explanation of company written program and how to get a copy.
- How to recognize events that may involve possible exposure.
- Procedures to follow in the event of exposure.
- Basis for selection of PPE including proper use, location, removal, handling, decontamination, and disposal of PPE.
- Use and limitations of practices to reduce exposure (including for engineering controls, work practices, and PPE).
- Hepatitis B vaccination information, such as safety, benefits, efficacy, and availability.
- Procedures to follow after an exposure with information on reporting and medical follow-up.
- Post-exposure evaluation and follow-up.
- Use, location, and decontamination/disposal of PPE and clothing.



First Aid & Medical — Bloodborne Pathogens

Training Tips

- Emergency response with information on follow-up and medical counseling.
- Explanations on warning signs, labels, and color coding.

As a safety trainer, you may want to:

- Outline who and which jobs or duties are covered by the standard. Explain exposure controls to undesignated first aid responders, even though Good Samaritan acts performed by undesignated employees are not covered by the standard.
- Define engineering and work practice controls and then describe those used at your company that support workers. Handwashing facilities are most common.
- Have samples of all PPE used during first aid or maintenance procedures.
- Explain special cleanup procedures. The biggest risk in construction is probably blood or body fluids from an accident or injury.
- Discuss sharps (broken glass and hypodermic needles, even though it doesn't sound like a big hazard for construction. You may have diabetic employees using syringes. Also, unfortunately, the use of illegal injectable drugs, because construction sites are often prime attractions for drug users.
- Familiarize all workers with the biohazard symbol, and ask them to respect containers or bags with the symbol.
- Explain what an exposure incident is and what must be done for exposure.
- Emphasize that everyone wants to help save a life, but workers should attempt only what they have been trained to do.

Where To Go For More Information

29 CFR 1910.1030—Bloodborne pathogens.

OSHA Directive CPL 2-2.44D—Enforcement procedures for the occupational exposure to bloodborne pathogens.

Be Aware Of Bloodborne Pathogens

The phrase "bloodborne pathogens" sounds like something out of a medical book, and it was, until several years ago when OSHA created a rule by that name to protect workers from exposure to the hepatitis B virus (HBV), the human immunodeficiency virus (HIV), and other bloodborne pathogens.

Any exposure to bloodborne pathogens can lead to disease or death. If you are reasonably anticipated to have skin, eye, or nasal membrane contact with blood, breast milk, saliva, urine, vomit, semen, vaginal secretions, amniotic fluid, any fluid that visibly contains blood, or other body fluids, you are "occupationally exposed." First responders in emergencies are likely to fit this category. OSHA's rule limits their occupational exposure.



Your employer will develop an exposure control plan, determine who is occupationally exposed at the company, implement engineering controls (i.e., handwashing facilities, barrels for broken glass, resuscitation bags, and/or proper sharps disposal containers), train you about good work practices and personal protective equipment, and post signs and label containers with the biohazard sign.

In addition to your employer's duties, you should take these steps to prevent infection whenever you may encounter blood or other body fluids:

Good Work Practices

- Always wash hands immediately after removing gloves or other protective equipment and after any hand contact with blood or potentially infectious fluids.
- Do not bend, break, or re-cap any used blade or sharp item. Never pick up broken glass or metal with your fingers. Use a broom or tongs.
- Dispose of used blades and needles in puncture-resistant containers with leakproof sides and bottom. Containers must be properly labeled.
- Do not eat or drink, apply makeup, or handle contact lenses in potential exposure areas.
- Never store food or beverages in refrigerators or cabinets, or on shelves or countertops of those areas.
- · Avoid spraying or splashing blood or body fluids.
- Use universal precautions. Treat all blood and body fluids as if they were infectious.

Be especially careful and aware around blood and other potentially infectious materials. They may be dangerous, so use the practices you've been taught.

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First Aid & Medical — Bloodborne Pathogens Sign-Off Sheet

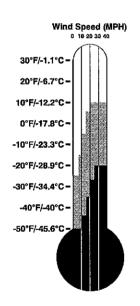
| First Aid & Medical — Bloodborne Patho The session covered: | ogens at (company name) |
|--|---|
| How to recognize events that | t may involve possible exposure. |
| • Procedures to follow in the e | event of an exposure. |
| - | nal protective equipment (PPE) including proper use decontamination, and disposal of PPE. |
| Use and limitations of pract trols, work practices, and PI | ices to reduce exposure (including for engineering con- PE). |
| The space below is for each individual w | ho has been trained on this topic to sign his/her names |
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First Aid & Medical— Cold Related Illnesses & Injuries

Overview Of Topic

Cold Stress Equation:
Low Temperature
+ Wind Speed
+ Wetness
= Injuries & Illness



Little Danger (Caution) Freezing to exposed flesh within 1 hour

Danger
Preezing to exposed flesh
within 1 minute

Extreme Danger Freezing to exposed flesh within 30 seconds

Adapted from: ACGIH Threshold Limit Values, Chemical Substances and Physical Agents Biohazard Indices, 1998-1999. When your body is unable to warm itself, serious cold-related illnesses and injuries may occur, and permanent tissue damage and death may result.

Hypothermia can occur when *land temperatures* are above freezing or *water temperatures* are below 98.6°F.

Cold related illnesses can slowly overcome a person who has been chilled by low temperatures, brisk winds, or wet clothing. Let's take a look at the two most common cold related illnesses—frost-bite, and hypothermia.

Frost bite

What happens to the body?

- Freezing in deep layers of skin and tissue.
- Pale, waxy-white skin color.
- Skin becomes hard and numb.
- Usually affects the fingers, hands, toes, feet, ears, and nose.

What should be done?

- Move the person to a warm dry area. Do not leave the person alone.
- Remove wet or tight clothes that may cut off blood flow to the affected area
- DO NOT rub the affected area. Rubbing causes damage to the skin and tissue.
- Gently place the affected area in a warm (105°F) water bath and monitor the temperature to slowly warm the tissue. Don't pour warm water directly on the affected area because it will warm the tissue too fast causing tissue damage. Warming takes about 25-40 minutes.
- After the affected area has been warmed, it may become puffy and blister. The affected area may have a burning feeling or numbness. When normal feeling, movement, and skin color have returned, dry and wrap the affected area to keep it warm. Note: If there is a chance the affected area may get cold again, do not warm the skin. If the skin is warmed and then becomes cold again, it will cause severe tissue damage.
- Seek medical attention as soon as possible.

Hypothermia—a medical emergency

What happens to the body?

- Normal body temperature (98.6°F) drops to or below 95°F.
- Fatigue or drowsiness.
- Uncontrolled shivering.
- Cool bluish skin.
- Slurred speech.
- Clumsy movements.
- Irritable, irrational, or confused behavior.

What should be done?

- Call for emergency help (i.e., ambulance or call 911).
- Move the person to a warm, dry area. Don't leave the person alone.
- Remove any wet clothing and replace with warm, dry clothing or wrap the person in blankets.
- Have the person drink warm, sweet drinks (sugar water or sports-type drinks) if they are alert. Avoid drinks with caffeine (coffee, tea, or hot chocolate) or alcohol.
- Have the person move their arms and legs to create muscle heat. If they are unable to do this, place warm bottles or hot packs in the arm pits, groin, neck, and head areas. DO NOT rub the person's body or place them in warm water baths. This may stop their heart.

How to protect your employees—Instruct them to:

- Recognize the environmental and worksite conditions that lead to potential cold-induced illnesses and injuries.
- Recognize the signs and symptoms of cold-induced illnesses/ injuries and what to do to help a fellow employee.
- Select proper clothing for cold, wet, and windy conditions.
- Layer clothing to adjust to changing environmental temperatures. Wear a hat and gloves, in addition to underwear that will keep water away from the skin (polypropylene).
- Avoid exhaustion or fatigue. Energy is needed to keep muscles warm.
- Use the buddy system (work in pairs).
- Drink warm, sweet beverages (sugar water, sports-type drinks). Avoid drinks with caffeine (coffee, tea, or hot chocolate) or alcohol.
- Eat warm, high-calorie foods like hot pasta dishes.

How to protect your employees—Allow them to:

- Take frequent short breaks in warm dry shelters to allow the body to warm up.
- Work during the warmest part of the day.

Employees are at increased risk when they:

- Have predisposing health conditions such as cardiovascular disease, diabetes, and hypertension.
- Are in poor physical condition, have a poor diet, or are older.
- Take certain medications. Ask your employees to check with their doctor, nurse, or pharmacy to see if any medicines they are taking affect them while working in cold environments.

Employee Training

There are no specific training requirements in the OSHA regulations for employee exposure to cold weather. However, the OSHA regulation at 29 CFR 1926.21(b)(2) says that you must instruct employees in the recognition and avoidance of unsafe conditions and the regulations applicable to their work environment to control or eliminate any hazards or other exposure to illness or injury.

Training Tips

See the instruction suggestions under the heading "How to protect your employees."

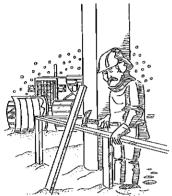
Where To Go For More Information

29 CFR 1926.50—Medical services and first aid.



Cold Related Illnesses and Injuries

When your body is unable to warm itself, serious cold-related illnesses and injuries may occur, and permanent tissue damage and death may result. Cold related illnesses can slowly overcome a person who has been chilled by low temperatures, brisk winds, or wet clothing.



Two of the most common cold related illnesses and injuries are frostbite and hypothermia. While frost bite is dangerous and can cause permanent injury, hypothermia is a medical emergency. If not handled properly, hypothermia can kill you.

Frost bite—What happens to your body?

Freezing in deep layers of skin and tissue; pale, waxy-white skin color; skin becomes hard and numb; usually affects the fingers, hands, toes, feet, ears, and nose.

Hypothermia—a medical emergency—What happens to your body?

Normal body temperature (98.6°F) drops to or below 95°F; fatigue or drowsiness; uncontrolled shivering; cool bluish skin; slurred speech; clumsy movements; irritable, irrational or confused behavior.

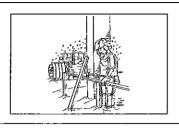
Things you can do to prevent difficulties from cold related illnesses and injuries

- Recognize the weather conditions that could cause cold related illnesses and injuries.
- Know the signs and symptoms of cold related illnesses/injuries and how to help yourself or a fellow worker.
- Wear proper clothing for cold, wet, and windy conditions. Layer your clothing so you can
 adjust to changing temperatures. Wear a hat and gloves in addition to underwear that will
 keep water away from your skin (polypropylene).
- Avoid exhaustion or fatigue. Energy is needed to keep your muscles warm.
- Use the buddy system when working in cold conditions.
- Drink warm, sweet beverages (sugar water, sports-type drinks). Avoid drinks with caffeine (coffee, tea, or hot chocolate) or alcohol. Eat warm, high-calorie foods like hot pasta dishes.
- Take frequent short breaks in warm dry shelters to allow your body to warm up; work during the warmest part of the day.

You are at increased risk when you:

- Have predisposing health conditions such as cardiovascular disease, diabetes, and hypertension.
- Are in poor physical condition, have a poor diet, or are older.
- Take certain medication (check with your doctor, nurse, or pharmacy and ask if any medicines you are taking affect you while working in cold environments).

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First Aid & Medical— Cold Related Injuries & Illnesses Sign-Off Sheet

| This sign-off sheet documents the names of First Aid & Medical—Cold Related Injuries & | employees who attended this training session on tillnesses at |
|--|---|
| The session covered: | (company name) |
| • Frostbite. | |
| • Hypothermia. | |
| Signs and symptoms of cold related injuri | es and illnesses. |
| • What your employees can do to protect the | emselves against cold related injuries & illnesses. |
| The space below is for employees to "sign-off" | that they were in attendance. |
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First Aid & Medical—Eye Wash and Safety Shower

Overview Of Topic

Using emergency eye washes and showers can minimize the effects of a chemical accident on the job. According to 29 CFR 1926.50(g), "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." In some cases (i.e., for battery changing and charging, acrylonitrile, and ethylene oxide), OSHA specifically requires certain drenching equipment, but typically, construction employers must decide if the work situation requires the presence of eye washes and/or showers.

All eye washes and showers flush affected areas of the body with water; however, you should be aware of a few distinctions:

| Eye wash/Shower | Description |
|------------------------------------|--|
| Plumbed eye wash | Stations connected permanently to a potable water source. |
| Self-contained eye wash and shower | Contain their own flushing fluid. Similar to plumbed eye washes/showers but do not have an unlimited water supply. |
| Personal eye wash | Are supplementary stations that support plumbed units with immediate flushing fluid (i.e., a squeeze bottle). |

OSHA does not provide much detail about emergency eye wash and shower installations. On the other hand, OSHA letters of interpretation state that these installations must meet the specifications of ANSI Z358.1, Emergency Eyewash and Shower Equipment. OSHA has also released OSHA STD 1-8.2, Instruction on eye wash and body flushing facilities in storage battery charging and maintenance areas. These two documents generally require:

| Installation | Location | Rate of water delivery | Water temperature |
|--------------|---------------|------------------------|-------------------|
| Eye wash | Within 100 ft | 0.4 gal/min for 15 min | 60° to 105° F |
| Shower | Within 100 ft | 20 gal/min for 15 min | 60° to 105° F |

Notes: A water hose may be used in conjunction with eye washes or safety showers, but not as a substitute for them. The employee (who may be partly blinded by chemicals) must be able to reach and use the eye wash and/or body drenching equipment within 10 seconds. Obstructions like machines and equipment must be considered in locating eye wash stations.

Employee Training

While there are no specific training requirements for eye washes and showers, formal first aid training explained under OSHA CPL 2-2.53, Guidelines for First Aid Programs, should cover chemical burns and the importance of flushing out the eye. An effective training program might include:

- Where your eye wash or safety showers are located.
- How and when and when not to use your eye wash or safety shower, including the importance of opening the eyes when flushing them with water.
- The limitations of a particular eye wash or safety shower—particularly the personal eye wash.
- The chemical hazards at the worksite that may cause one to need an eye wash or safety shower. Examples include dipping and coating operations, powered industrial truck battery changing and charging areas, and methylene chloride handling.
- Any inspection and maintenance procedures employees would be expected to perform.

Training Tips

Demonstrate how your eye wash/safety shower is used. Give trainees time to practice using an eye wash station if you have one. Tour the site identifying the locations of eye wash and safety showers and chemical areas. For efficiency, consider combining eye wash and safety shower training with Hazard Communication training.

Where To Go For More Information

29 CFR 1926.50—Medical services and first aid.

OSHA CPL 2-2.53—Guidelines for first aid programs.

OSHA STD 1-8.2—Instruction on eye wash and body flushing facilities in storage battery charging and maintenance areas.

ANSI Z358.1—Emergency eyewash and shower equipment.

Emergency eye washes and safety showers

No one can predict when and where a chemical accident will occur. Therefore, you should be familiar with the location and operation of emergency eye wash facilities and safety showers. These can include eyewash fountains, drench showers, hand-held drench hoses and emergency bottles. Very simply, they all flush affected areas of your body with water.

Before a chemical accident...

- Identify chemical hazards: Identify all your work areas and tasks which create potential splash or eye hazards. Be familiar with the chemicals with which you work. Caution: Some chemicals are water-reactive and become toxic or corrosive when mixed with water.
- Know locations: Know the locations of all eye wash and shower facilities.

Check distances: Your eyes can be damaged very quickly by many contaminants. The first fifteen seconds after the injury is the critical period. Because of this critical time period, the American National Standards Institute (ANSI), suggests that eye washes or showers be within 100 feet or a 10 second walk of the work area (ANSI Z358.1). Avoid placing machines and equipment in the pathway to an eye wash or safety shower.

• Check water delivery: Ask your employer how much water your eye wash stations deliver. Eye washes should supply 0.4 gallons per minute of water for at least 15 minutes. Safety showers should sup-

ply 20 gallons per minute for at least 15 minutes. *Note:* Many portable eye wash stations have a capacity of 5 to 10 gallons for a maximum usefulness of 5 minutes. Squeeze bottles and other plastic containers have even lower water capacities. These eye washes are meant to be supplementary to eye wash stations or showers that provide 15 minutes of flushing.

- Check emergency telephone number: Where 911 is not available, ensure the telephone number of medical help is posted on site telephones.
- Practice: Practice using the eye wash station to become familiar with how it works.

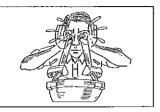
Inspection and maintenance

Eye washes and safety showers should be inspected according to manufacturer instructions. Squeeze bottles also require frequent testing, refilling, and maintenance since they lose water to evaporation, become contaminated, and are easily misplaced.

If a chemical splashes into your eye ...

- 1. Quickly flush your eyes with lots of water for at least 15 minutes (for best results, do so at an eye wash station or safety shower).
- 2. For serious burns (i.e., strong alkalies or acids), flushing should continue for 20 to 30 minutes which requires a considerable amount of water.
- 3. Try to force the eyes open to wash chemical out.
- 4. Do not bandage eyes.
- 5. Seek medical attention.

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First Aid & Medical—Eye Wash and Safety Shower

This sign-off sheet documents the employees at this company, who have taken part in a training session on First Aid & Medical-Eye Wash and Safety Shower. The session covered: Eye wash and safety shower locations. How and when and when not to use eye wash and safety showers. Eye wash and safety shower limitations. Jobsite chemical hazards. The space below is for employees to "sign-off" that they were in attendance. Date of Training: Job Location: **Print Name Here Employee Signature**

Supervisor's Signature



First Aid & Medical — First Aid

Overview Of Topic

The OSHA regulation for first aid is 29 CFR 1926.50—Medical Services and First Aid, according to which, you must provide the following:

| Provide: | Detail: |
|--|--|
| Prompt assistance for injury or illness OR | Provide prompt assistance when an injury or illness occurs. This means help must arrive within 3 to 4 minutes, as death can occur from the stoppage of breathing or severe bleeding depending on the type and location of injury. |
| A first aid person | If arrangements cannot be made to provide emergency medical services within a reasonable amount of time, then a trained first aid person must be available for each work shift. |
| First aid supplies when required | Provide, when required, easily accessible first-aid supplies approved by the consulting physician. The first aid kit must consist of materials approved by the consulting physician in a weatherproof container with individual sealed packages for each type of item. Check the contents of the first aid kit before it is sent out on each job and at least weekly on each job to ensure that the expended items are replaced. |
| Proper equipment for transport of injured person | Provide proper equipment for prompt transportation of the injured person to a physician or hospital, or a communication system for contacting the necessary ambulance service. |
| Emergency phone numbers | The telephone numbers of the physicians, hospitals, or ambulances must be conspicuously posted. |
| Drenching/flushing facilities | Where the eyes or body of any person may be exposed to injurious corrosive materials, provide suitable facilities for quick drenching or flushing of the eyes and body within the work area for immediate emergency use. |

Employee Training

While there is no first aid training specified in the regulation, OSHA has published a compliance document called, *Guidelines for First Aid Programs* (CPL 2-2.53). The guidelines in it are considered the basic and essential elements of a first aid program and assist OSHA compliance officers in evaluating individual site first aid programs during an inspection process. You can use the guidelines as a foundation for your first aid training program. The



First Aid & Medical — First Aid

guidelines include topics and teaching methods:

Training Methods

- Emphasize "hands-on" training involving mannequins and trainee partners.
- Expose trainees to acute injury and illness settings as well as appropriate response, including the use of visual aids.
- Include a course handbook.
- Allow enough time for the course to cover likely situations for your facility.
- · Emphasize a quick response.

Training Topics

- · Injury and acute illness.
- · Working with local emergency response systems and teams.
- The location of a current list of phone numbers of these systems and teams. (Keep them where they are easily used by employees.)
- · Principles of triage.
- · Legal aspects of providing first aid.
- Methods of surveying an incident scene and assessment of need for first aid and how to provide it safely.
- Performing primary survey(s) of victim(s), including airway, breathing and circulation.
- · Getting a victim's health history at the scene.
- · Cardiopulmonary resuscitation (CPR).
- · Bandaging.
- Splinting.
- · Rescue and transport of victim(s).
- · Personal protective equipment.
- Tagging and disposal of any contaminated sharp or material.
 (You may want to look at the First Aid & Medical Bloodborne Pathogens chapter.)

Trainees should be tested upon completion of initial training. A review every three years is recommended. Review of the entire program is recommended "periodically."

Training Tips

When training workers, review the first aid equipment and responders available at a given facility or jobsite.

Where To Go For More Information

OSHA regulation 29 CFR 1910.151 and OSHA CPL 2-2.53





In emergency situations, prompt, properly-administered first aid can mean the difference between life and death, rapid versus prolonged recovery, or temporary versus permanent disability. Safety comes first, but when accidents do happen, it is important to have someone who knows how to handle the situation effectively. You may be that person. In that case, knowing what to do, and not to is important. If you aren't qualified, quickly get someone who is. Also, know where the first aid kits and emergency eyewash stations are before an incident occurs. And, understand and follow the universal precautions when dealing with blood.

The following table lays out some basic first aid information:

| First Aid Basics: | Details: |
|--------------------------------|--|
| Call for help | If you are not alone, have someone go for help immediately. If you are alone, immediate care is a priority. However, that immediate care may be going for help. |
| Analyze the situation | Don't become a victim yourself. If you can be safe while doing it, get the victim away form any danger source such as water, fire, or downed power lines. Be sure to turn off all power sources before touching an electrocuted victim. |
| Don't move the victim | If there is any chance of spine or neck injury do not move the victim unless he or she is in a life threatening situation. |
| Look for signs of life | Look for signs of life and give artificial respiration or CPR if necessary but only if you have been trained. Be sure help is on the way before starting CPR. Do not tilt the victims head back if you suspect a neck injury. |
| Control heavy bleeding | Stop the flow of blood by direct pressure, elevating the injury above the heart or pressure points. Do not use a tourniquet unless the person is in danger of bleeding to death and you've been trained to apply one. |
| Treat for shock | Signs of shock include cold, pale skin; a rapid, faint pulse; nausea; rapid breathing; and weakness. To treat for shock, keep the victim lying down; cover him/her only enough to maintain body heat; don't move the victim unless absolutely necessary; and get medical help immediately. |
| Treat for choking | A person can choke to death in a few minutes. You can tell if a person is choking if he/she can't speak, cough, or breathe. If the person is choking, use the Heimlich Maneuver. |
| Treat for burns | For small burns, gently soak burn in cold water or pour cold water on burn. Do not treat large burns with water unless they are chemical burns. Cover burn with a dry, sterile bandage. Provide artificial respiration as needed. Seek medical attention. Some chemical should not be flushed with water, but neutralized by other means—see chemical label. |
| Treat for chemical burn in eye | Quickly flush the eyes with lots of water for at least 15 minutes (for best results, do so at an eyewash station, emergency shower, or hose). Try to force the eyes open to wash chemical out. Do not bandage eyes. Seek medical attention. |
| Treat for Fracture | Do not move the victim unless you absolutely have to. This is especially important if you suspect a neck or back injury. Get medical help. |

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First Aid & Medical — First Aid Sign-Off Sheet

| This sign-off sheet documents the en First Aid & Medical — First Aid at | mployees who have taken part in a training session on |
|--|---|
| | (company name) |
| The session covered an overview of i | first aid techniques and requirements. |
| The space below is for each individu | al who has been trained on this topic to sign his/her names |
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| | |
| Date of Training: | Job Location: |
| Employee Signature | Print Name Here |
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First Aid & Medical—First Aid Kits

Overview Of Topic

First aid supplies are required to be easily accessible at your jobsites. By assessing the specific needs of your workplace, you can ensure that reasonably anticipated supplies are available. The first aid kits and supplies you provide must be appropriately stocked for the type of hazards your workers are most likely to face. In addition, you must assess the specific needs of your worksite periodically and augment the first aid kit appropriately.

What should be included in the worksite first aid kit?

An example of the minimal contents of a generic first aid kit is described in American National Standard (ANSI) Z308.1-1978 Minimum Requirements for Industrial Unit-Type First-aid Kits. The contents of the kit listed in the ANSI standard should be adequate for small work sites.

When larger operations or multiple operations are being conducted at the same location, employers should determine the need for additional:

- First aid kits at the worksite,
- Types of first aid equipment and supplies, and
- Quantities and types of supplies and equipment in the first aid kits.

It's vital that you have enough first aid supplies available for the number of employees that you have.

Keeping the first aid kit up-to-date

Employers who have unique or changing first aid needs in their workplace, may need to enhance their first aid kits. You can use the OSHA 200 log, OSHA 101's or other reports to identify these unique problems. Consultation from the local Fire/Rescue Department, appropriate medical professional, or local emergency room may be helpful to employers in these circumstances.

If it is reasonably anticipated your employees will be exposed to blood or other potentially infectious materials while using first-aid

supplies, you should provide personal protective equipment (PPE). Appropriate PPE includes gloves, gowns, face shields, masks and eye protection.

Restocking your first aid kits

It's important that you have a plan to replenish your kits. Examine your kits on a regular basis and refill as needed. Your workers may also suggest additional items to be included in the kits.

Are you including over-the-counter medicines (OTCs) in the kits?

If you include OTCs you need to be aware of the potential problems your employees may encounter. For instance, certain allergy medicines can cause drowsiness. What if a worker is sick and takes different kinds of medicine with duplicate ingredients? Exceeding the recommended dose could affect the worker's reaction time, judgement, and reasoning.

Employee Training

There are no requirements for training employees on using first aid kits. In the absence of an infirmary, clinic, hospital, or physician, that is reasonably accessible in terms of time and distance to the worksite, a person who has a valid certificate in first aid training must be available at the worksite to render first aid.

Training Tips

Have one of your company's standard first aid kits at the training session. Tell employees where the first aid kits are located. Explain the hazards of working if taking OTCs.

Where To Go For More Information

29 CFR 1926.50—Medical services and first aid.

OSHA CPL 2-2.53—Guidelines for First Aid Programs.

American National Standard (ANSI) Z308.1-1978 "Minimum Requirements for Industrial Unit-Type First-aid Kits".

First Aid & Medical—First Aid Kits

No one can predict when and where an accident will occur. Because of this, you should be familiar with where the first aid kits are located on your jobsite. The OSHA regulations require your employer to have readily available first aid supplies. The first aid kits and supplies provided by your employer must be appropriately stocked for the type of hazards you and your co-workers are most likely to face.

What should be included in the first aid kit?



An example of the minimal contents of a generic first aid kit is described in American National Standard (ANSI) Z308.1-1978 *Minimum Requirements for Industrial Unit-Type First-aid Kits*. The contents of the kit listed in the ANSI standard should be adequate for small work sites.

When larger operations or multiple operations are being conducted at the same location, your employer should determine the need for:

- additional first aid kits at the worksite,
- additional types of first aid equipment and supplies, and
- varying the quantity of equipment and supplies to be placed in each first aid kit.

Keeping the first aid kit up-to-date

If you realize that there are certain items that are not included in your jobsite first aid kit, let your employer know about it. That way, your employer can get it added to the kit.

Also, if it is reasonably anticipated you will be exposed to blood or other potentially infectious materials while using first-aid supplies, your employer should provide personal protective equipment (PPE). Appropriate PPE includes gloves, gowns, face shields, masks and eye protection.

Restocking your first aid kits

If, when using a first aid kit, you notice that a specific first aid item is getting low or is gone make your employer aware of this. That way, the first aid kit will always be stocked with enough of the needed supplies and equipment.

What about over-the-counter medicines (OTCs) in the kits?

If your employer decides to include OTCs in your jobsite first aid kits, you must be aware of the potential problems you may encounter when using these types of medicines. Drowsiness, overdosing, and allergic reactions could affect your reaction time, judgement, and reasoning.

Remember, the first aid kits supplied by your employer are there for your benefit. Removing the supplies for non-work related uses can have serious consequences when a real emergency occurs.



First Aid & Medical—First Aid Kits Sign-Off Sheet

This sign-off sheet documents the employees at this company, _ who have taken part in a training session on First Aid & Medical—First Aid Kits. The session covered: What should be included in the first aid kit. How to keep the first aid kit up-to-date. Dangers of taking over the counter medicines (if they are stocked in your first aid kit). The space below is for employees to "sign-off" that they were in attendance. Date of Training: Job Location: **Print Name Here Employee Signature**

FIRST AID & MEDICAL—FIRST AID KITS SIGN-OFF

Supervisor's Signature



First Aid & Medical— Heat Related Illnesses & Injuries

Overview Of Topic

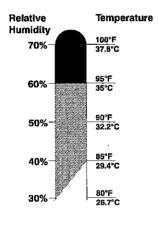
When the body is unable to cool itself through sweating, serious heat illnesses may occur.

The most severe heat-induced illnesses are heat exhaustion and heat stroke.

If actions are not taken to treat heat exhaustion, the illness could progress to heat stroke and possible death.

Heat Equation: High Temperature

- + High Humidity
- + Physical Work
 - = Heat Illness





Heat exhaustion

What happens to the body?

- Headaches.
- Dizziness/lightheadedness.
- Weakness.
- Mood changes (irritable, or confused/can't think straight).
- Feeling sick to the stomach.
- Vomiting/Throwing up.
- Decreased and dark colored urine.
- Fainting/Passing out.
- Pale clammy skin.

What should be done?

- Move the person to a cool shaded area to rest. Don't leave the person alone. If the person is dizzy or light headed, lay them on their back and raise their legs about 6-8 inches. If the person is sick to their stomach lay them on their side.
- Loosen and remove any heavy clothing.
- Have the person drink some cool water (a small cup every 15 minutes) if they are not feeling sick to their stomach.
- Try to cool the person by fanning them. Cool the skin with a cool spray mist of water or wet cloth.
- If the person does not feel better in a few minutes, call for emergency help (ambulance or call 911).

If heat exhaustion is not treated, the illness may advance to heat stroke.

Heat stroke—A medical emergency

What happens to the body?

- Dry pale skin (no sweating).
- Hot red skin (looks like a sunburn).
- Mood changes (irritable, confused, not making any sense).
- Seizures/fits.
- Collapse/passed out (will not respond).

What should be done?

- Call for emergency help (ambulance or call 911).
- Move the person to a cool shaded area. Don't leave the person alone.
- Lay them on their back and if the person is having seizures/fits remove any objects close to them so they won't strike against them.
- If the person is sick to their stomach, lay them on their side.
- Remove any heavy and outer clothing.
- Have the person drink some cool water (a small cup every 15 minutes) if they are alert enough to drink anything and not feeling sick to their stomach.
- Try to cool the person by fanning them. Cool the skin with a cool spray mist of water, wet cloth, or wet sheet.
- If ice is available, place ice packs under their arm pits and groin area.

How to protect your employees—Instruct them to:

Know about heat-induced illnesses.

Learn the signs and symptoms of heat-induced illnesses and what to do to help themselves and/or a fellow employee.

Use the buddy system (work in pairs).

Drink plenty of cool water (one small cup every 15-20 minutes).

Wear light, loose-fitting, breathable (like cotton) clothing.

Avoid eating large meals before working in hot environments.

Avoid caffeine and alcoholic beverages. These beverages make the body lose water and increase the risk for heat illnesses.

How to protect your employees—Allow them to:

Slowly build up tolerance to the heat and the work activity (usually takes about two weeks).

Perform the heaviest work in the coolest part of the day.

Take frequent short breaks in cool shaded areas.

Employees are at increased risk when they:

Take certain medication. Have employees check with their doctor, nurse, or pharmacy and ask if any medicines they are taking affect them while working in hot environments.

Have had a heat-induced illness in the past.

Wear personal protective equipment (like respirators or protective suits).

Employee Training

There are no specific training requirements in the OSHA regulations for employee exposure to hot weather. However, the OSHA regulation at 29 CFR 1926.21(b)(2) says that you must instruct employees in the recognition and avoidance of unsafe conditions and the regulations applicable to their work environment to control or eliminate any hazards or other exposure to illness or injury.

Training Tips

See the training suggestions under the heading "How to protect your employees."

Where To Go For More Information

29 CFR 1926.50—Medical services and first aid.



Heat Related Illnesses and Injuries

When your body is unable to cool itself through sweating, serious heat illnesses may occur. The most severe heat-induced illnesses are heat exhaustion and heat stroke. If actions are not taken to treat heat exhaustion, the illness could progress to heat stroke and you could possibly die.

Heat exhaustion—What happens to your body?

Headaches; dizziness/lightheadedness; weakness; mood changes (irritable, or confused or can't think straight); feeling sick to your stomach; vomiting/throwing up; decreased and dark colored urine; fainting/passing out; pale clammy skin.

Heat stroke—A medical emergency—What happens to your body?

Dry pale skin (no sweating); hot red skin (looks like a sunburn); mood changes (irritable, confused or not making any sense); seizures/fits; collapse/passed out (will not respond).



Things you can do to prevent difficulties from heat related illnesses and injuries

Learn the signs and symptoms of heat-induced illnesses and what you can do to help yourself or a fellow employee.

Use the buddy system (work in pairs) when working in hot conditions.

Drink plenty of cool water (one small cup every 15-20 minutes).

Wear light, loose-fitting, breathable (like cotton) clothing.

Avoid eating large meals before working in hot environments.

Avoid caffeine and alcoholic beverages (these beverages make your body lose water and increase the risk for heat illnesses).

Slowly build up tolerance to the heat and your work activity (usually takes about two weeks).

Do your heaviest work in the coolest part of the day.

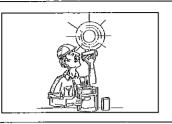
Take frequent short breaks in cool shaded areas. This allows your body to cool down.

You are at increased risk when you:

Take certain medications. Check with your doctor, nurse, or pharmacy and ask if any medicines you are taking affect you while working in hot environments.

Have had a heat-induced illness in the past.

Wear some personal protective equipment such as respirators or protective suits.



First Aid & Medical— Heat Related Illnesses & Injuries

| First Aid & Medical—Heat Related 1 | (company name) |
|---------------------------------------|---|
| The session covered: | |
| • Heat exhaustion. | |
| • Heat stroke. | · |
| • Signs and symptoms of heat rela | ted injuries and illnessess. |
| What employees can do to protect | t themselves against heat related injuries & illnesses. |
| The space below is for employees to ' | "sign-off" that they were in attendance. |
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| Date of Training: | Job Location: |
| Employee Signature | Print Name Here |
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FIRST AID & MEDICAL—HEAT RELATED ILLNESSES & INJURIES SIGN-OFF

Supervisor's Signature



First Aid & Medical—Helping an Injured Coworker

Overview Of Topic

Face it, construction work can be very dangerous. Employees can be injured or even killed while doing your job. What should your workers do if they see a coworker get hurt? What about if they just find a coworker injured? That is, they just happen upon them on the jobsite.

What happened?

A lot depends on if the employee sees the accident happen to their coworker. It makes things easier since they know what occurred. They know what the hazard is and maybe what even caused the accident and injury. The employee knows when the victim was injured and can report it immediately.

However, there are times when a worker finds someone lying injured. The injured person could be unconscious or not. There may be multiple signs of injury or there may be no apparent signs of injury.

The important thing to stress to your employees, in either situation, is to not just rush in and attempt to save the victim.

Call for assistance

It's very important to provide accurate and detailed information when reporting the accident. Make sure trainees understand they need to provide:

- Exact location and address;
- What the injured person is doing or not doing: unconscious, choking, vomiting, not breathing, shivering, sweating;
- Any injuries that you see: soft tissue wounds, broken bones, burns; and
- How the accident happened (if they know).

Survey the area

Stress that employees must survey the area to determine if any hazards still exist, before risking their life. Look around the area. Look for other injured people. Question other people at the site.

No danger

Never move the victim unless there is immediate life-threatening danger (fire, falling debris, building or floor collapse). Workers must not attempt to perform CPR or any other life-saving techniques unless they have had the proper training!

Emergency help arrives

Employees providing any first aid need to remain calm. When emergency help arrives, they should be prepared to assist by telling everything they remember about the accident and aftermath.

Employee Training

If there isn't an infirmary, clinic, hospital, or physician that is reasonably accessible in terms of time and distance to the worksite, the employer must make sure that a person who has a valid certificate in first-aid training is available at the worksite to render first aid.

OSHA state-plan-states: Certain states have more stringent regulations than Federal OSHA. If you operate in a state-plan-state, check with your local OSHA office to determine if there are regulations that go above and beyond Federal OSHA.

Training Tips

Stress the importance of:

- Reporting the accident before rendering aid,
- Surveying the accident area before rushing in to provide help,
- Only providing first aid if you've been trained, and
- Remaining calm.

Where To Go For More Information

29 CFR 1926.50—Medical services and first aid

First Aid & Medical-Helping an Injured Coworker

Face it, construction work can be dangerous. It makes no difference if you're a trades person or a laborer; you can be injured or even killed while doing your job.

What happened?

Let's consider this scenario:



You're working _____ construction (residential, industrial, work zone—you fill in the blank) and you either: see a worker get injured or you find a worker after they are injured, that is, you just happen upon them. If you've seen the accident happen, you're in a much better position to assist them (since you probably have a good idea what caused the accident). You can then go ahead and call emergency medical services (ambulance, police, 911, whatever). Before you help the injured person make sure there are no hazards. Survey the area to determine if it's safe to approach the victim.

Call for assistance

When you report the accident, provide as much detailed information as possible:

- Exact location and address;
- What the injured person is doing or not doing: unconscious, choking, vomiting, not breathing, shivering, sweating;
- Any injuries that you see: soft tissue wounds, broken bones, burns; and
- How the accident happened (if you know).

Fools rush in

But, if you just happen upon an injured or unconscious coworker, you shouldn't just rush to their side. Why? Because you don't know what caused the injury. What if there's a live electrical wire? How about a toxic atmosphere? What if they were attacked by someone? Where they struck by falling debris?

Survey the area

You must survey the area to determine if any hazards still exist before risking your life. Look around the area. Look for other injured people. If there are other people around, ask if they saw what happened.

No danger

Once you have determined there is no danger, slowly approach the injured person. Keep in mind that the person may be in shock or have had a heart attack. Their injuries may not be apparent.

Don't move them unless there is immediate life-threatening danger (fire, falling debris, building or floor collapse). Don't attempt to perform CPR or any other life-saving techniques unless you have the proper training!

Whatever you do, remain calm. When emergency help arrives, be prepared to assist them by telling everything you can about the accident and aftermath.



First Aid & Medical—Helping an Injured Coworker Sign-Off Sheet

This sign-off sheet documents the employees at this company, ______, who have taken part in a training session on First Aid & Medical—What to Do if a Coworker Gets Hurt. The session covered:

- Procedures to follow if a coworker gets hurt.
- Determining what caused the accident.
- Determining is it is safe to assist the employee.
- Calling for assistance.

The space below is for employees to "sign-off" that they were in attendance.

| Date of Training: | Job Location: |
|--------------------|------------------------|
| Employee Signature | Print Name Here |
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| | Supervisor's Signature |

FIRST AID & MEDICAL—HELPING AN INJURED COWORKER SIGN-OFF



First Aid & Medical—Sanitation

Overview of Topic

Jobsite sanitation is important to the health of your workers. Good clean drinking water, toilets, food services, and washing facilities are all regulated by OSHA. Requirements depend on jobsite situations and numbers of workers.

Drinking water—You must provide drinking water at all construction sites no matter how many employees are working. The water must be:

- Potable (clean and drinkable). Potable water must meet the quality standards published in 42 CFR Part 72, or approved for drinking by state or local authorities.
- Portable water containers must be sealable and have a tap. Water cannot be dipped from containers.
- A common drinking cup is prohibited.
- When using "one serving" disposable cups, a sanitary unused cup and a used cup container must be provided.

Non-drinking water—If you have water at your jobsites used for "other than drinking" it must be clearly marked by signs meeting the requirements of Subpart G-Signs, Signals and Barricades, to indicate it is unsafe and not to be used for drinking, washing, or cooking.

Toilets at construction sites—Toilets must be provided for employees in the following numbers:

20 workers or less – 1; 20 workers or more – 1 toilet seat and 1 urinal per 40 workers; 200 or more workers – 1 toilet seat and 1 urinal per 50 workers.

Under temporary field conditions, not less than one toilet must be available.

Jobsites without a sanitary sewer must have: (1) privies where their use will not contaminate ground or surface water, (2) chemical toilets, (3) recirculating toilets, or (4) combustion toilets, unless prohibited by local codes.

The previous provisions for water and toilets do not apply to mobile crews having transportation readily available to nearby toilet facilities. OSHA has interpreted this to mean crews whose job functions require continual or frequent movement from jobsite to jobsite daily or hourly.

Other sanitation requirements

Other sanitation requirements, depending on your work situation, can include:

You must provide adequate **washing facilities** for painting, coating, working with herbicides or insecticides, or other operations where contaminants may harm employees. The facilities must be near the worksite. Washing facilities must be kept sanitary.

Lavatories must be made available in all places of employment. This does not apply to mobile crews or to normally unattended work locations if employees working at these locations have transportation to nearby washing facilities that: (1) have hot and cold or tepid running water, (2) hand soap or similar cleansing agents, and (3) individual hand towels or sections of hand towels of cloth or paper, warm air blowers, or clean individual sections of continuous cloth toweling.

Whenever **showers** are required by a particular standard, they must meet the requirements of 1926.52(f)(4).

Every enclosed workplace must be constructed, equipped, and maintained, as far as reasonably practical, to prevent entry or harborage of **rodents**, **insects**, **and other vermin**.

Employee Training

The OSHA regulations at 1926.21(b)(2) say that you must instruct each employee in the recognition and avoidance of unsafe conditions and the regulations applicable to his work environment to control or eliminate any hazards or other exposure to illness or injury.

Training Tips

The most important issue here is drinking water and toilets. Go over the requirements for water containers and where and how toilets are set up for a particular worksite.

Where To Go For More Information

Construction regulatory text: 29 CFR 1926.51.

U.S. Public Health Service Drinking Water Standards: 42 CFR Part 72.

First Aid & Medical—Sanitation

Jobsite sanitation is important to your health. Good clean drinking water, toilets, food services, and washing facilities are all regulated by OSHA. Of all the requirements, drinking water and toilets are probably the most important issues.

Drinking water—Drinking water must be available at all construction sites no matter how many employees are working. The following requirements are a must for drinking water:

- It must be clean and drinkable.
- A common drinking cup is prohibited. Water cannot be dipped from containers.
- Portable water containers must be sealable and have a tap.
- When using "one serving" disposable cups, a sanitary unused cup and a used cup container must be provided.



Non-drinking water—If you have non-drinking water at your jobsites it must be clearly marked by signs to indicate it is unsafe and not to be used for drinking, washing, or cooking.

Toilets at construction sites—Toilets must be provided for employees in the following numbers: 20 workers or less – 1; 20 workers or more – 1 toilet seat and 1 urinal per 40 workers; 200 or more workers – 1 toilet seat and 1 urinal per 50 workers. Under temporary field conditions, not less than one toilet must be available.

Other sanitation requirements

Other sanitation requirements, depending on your work situation, can include:

Adequate washing facilities for painting, coating, working with herbicides or insecticides, or other operations where contaminants may harm you must be provided. The facilities must be near the worksite.

Lavatories must be made available in all places of employment. This does not apply to mobile crews or to normally unattended work locations if employees working at these locations have transportation to nearby washing facilities that have: (1) hot and cold or tepid running water, (2) hand soap or similar cleansing agents, and (3) individual hand towels or sections of hand towels of cloth or paper, warm air blowers, or clean individual sections of continuous cloth toweling.

Whenever **showers** are required by a particular standard, they must meet the requirements of the OSHA regulations.

Every enclosed workplace must be constructed, equipped, and maintained, as far as reasonably practical, to prevent entry or harborage of **rodents**, **insects**, **and other vermin**.

Jobsite sanitation is critical to your health and well being. All kinds of diseases can be present around drinking and toilet facilities. See what you can do today to help keep your worksite sanitary.

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First Aid & Medical—Sanitation, Sign-Off Sheet

| First Aid & Medical—Sanitation at | (company name) |
|--|---|
| The session covered: | |
| Drinking water. | |
| • Toilet facilities. | |
| Other sanitation requirements control. | such as: washing facilities, shower areas, and rodent |
| The space below is for employees to "sig | gn-off" that they were in attendance. |
| Date of Training: | Job Location: |
| Employee Signature | Print Name Here |
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| | Supervisor's Signature |