NC Industrial Commission

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Safety Bulletin

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"Practice Safety – Don't learn it through experience." – Unknown

December – 2006

Greetings Friends in the Name of Safety:

Please help us welcome our newest team members **Mike Bingham, Michael Nance, and Tania Whitfield.** This completes our team of new Safety Reps with **Markus Elliott** joining us earlier in the Southeastern area.

Mike Bingham will be serving the **Western Carolina area** and lives in Franklin, NC. He comes to the NCIC with many years' experience in safety training. Please give Mike a call at **919-218-9045** or email him at **binghamm@ind.commerce.state.nc.us** to schedule training.

Michael Nance will be serving the **Blue Ridge and Western Piedmont areas** and lives in Belmont, NC. He comes to the NCIC with many years in safety including the trucking industry. Please give Michael a call at **919-218-9047** or email him at **nancem@ind.commerce.state.nc.us** to schedule training.

Tania Whitfield will be serving the **Central Piedmont area** and lives in Greensboro, NC. She comes to the NCIC with a strong safety background as well. Please give Tania a call at **919-218-9049** or email her at **whitfielt@ind.commerce.state.nc.us** to schedule training.

We will be asking that **Randy Cranfill** will co-ordinate our **10 & 30-Hour Accident Prevention Certificate Awareness Programs** across the State so feel free to call him at **919-218-2986**.

It is with sadness that we bid **Billie Gay** goodbye as she has moved on to another position within the State. We are in the process of replacing her. In the meantime, **Ginny Schwartzer** is filling in as program assistant. Please give her a call at **919-807-2603** or email her at **safetyic@ind.commerce.state.nc.us** with your video request or other needs.

Looking into 2007, we ask for your continued support and as we move forward, get ready for some exciting changes and new programs!

As always, we continue to update our email list. These mailings are the life-blood for attendance of our Nine Regional Safety Councils and without good contacts; the word will not get out. If you know of someone who might wish to receive these mailings, please send their contact information along to me at parnelld@ind.commerce.state.nc.us or to their area Safety Representative as soon as possible. For those of you with SPAM software, you will need to add brontomail@blast.com to your "ACCEPT ALWAYS" list. Your Internet Provider service can help you with this. If that is not an option, provide us with a personal email address if you have or can create one.

Power generation facilities, substations: Look out for atmospheric hazards

Electric power generation facilities and substations contain numerous hazards, including atmospheric and chemical hazards.

If you work in such facilities, even occasionally, it is crucial that you be aware of such hazards, take them seriously, and follow the company's safety procedures.

Examples

Some examples of situations where atmospheric and chemical hazards may be present are:

1. Enclosed or confined spaces may contain various chemical (e.g., hydrocarbons, hydrogen sulfide) and hazardous atmospheres. For example, furnace effluents can contain particulate substances, coal tar pitch volatiles, sulphur dioxide, and carbon monoxide. Particulate from flash contains silica, and possibly arsenic, depending on the type of coal used. (A clue to the constant presence of sulphur dioxide is corroded metal structures or surfaces.)
2. Toxic material, such as hydrazine, and flammable liquids, gases, vapors, or combustible materials may be used or produced during the chemical cleaning of boilers and pressure vessels. (Hydrazine may be absorbed through the skin.)
3. Ozone is produced in some high voltage electrical operations. For example, it may be present in high concentrations in electrostatic precipitators.
4. Chlorine is likely to be present in chlorine system enclosures and may be present in the surrounding area. As a consequence of water treatment, there may be hazardous toxic or reactive chemicals in drainage trenches in the lowest levels of the power plant.
5. High-pressure steam leaks, which may be invisible, are hazardous energy sources to which exposure can be fatal. For example, steam from a pinhole leak could lance completely through the body of a person. The noise in the generation area may conceal this hazard. Experienced employees travel in these areas with a broom or a rag tied onto a stick held in front of them to detect such steam hazards.
6. Chrysotile asbestos is present in older power generation facilities. Amosite asbestos may be in use in valve packing.
7. Mercury may be present in the flooring of the instrument repair area of the power plant.
8. Cadmium may be used to coat fish-screens in the intake caissons and to tip blades used to propel coal.
9. Polychlorinated biphenyls (PCBs) may be present in maintenance operations involving capacitors and transformers. Dioxin may be present where these components were overheated.

Healing the heel: Stretching is key

Ever wake up in the morning with excruciating heel pain as soon as your feet hit the floor? If so, you're not alone. Severe heel pain, also known as heel spur syndrome, but technically called plantar fasciitis (fashee-EYE-tiss), affects nearly 2.5 million Americans each year. But according to a new study published in a recent issue of *Journal of Bone and Joint Surgery*, those with plantar fasciitis now have a promising treatment option. A newly developed simple stretching protocol that targets plantar fasciitis has noted marked improvement in patients and was found to be superior for treating the inflammatory condition than the traditional weight-bearing Achilles tendon stretch.

The study is a two-year follow-up on 82 patients with plantar fasciitis, all of whom were part of an original clinical trial of 101 patients in 2003. The patients were taught a stretch that targets the plantar fascia, the band of tissue that supports the arch and originates on the heel bone and goes

to the toes. The plantar fascia stretching exercise requires the patient to sit with one leg crossed over the other, and stretch the arch of the foot by taking one hand and pulling the toes back toward the shin for a count of 10. The exercise must be repeated 10 times, and performed at least three times a day, including before taking the first step in the morning and before standing after a prolonged period of sitting. More than 90 percent of the patients were totally satisfied or satisfied with minor reservations, and noted distinct decrease in pain and activity limitations.

"Plantar fasciitis is everywhere, but we really haven't had a good handle on it," said Benedict DiGiovanni, MD, associate professor of orthopaedic surgery at the University of Rochester and author of the study. "The condition often causes chronic symptoms and typically takes about nine to 10 months to burn itself out, and for people experiencing this pain, that's way too long to suffer through it."

Dr. DiGiovanni should know. He's experienced plantar fasciitis first-hand. Deciding to get some extra exercise on a golf outing one recent afternoon, he carried his clubs around all 18 holes instead of an easy-going ride in a golf cart. The next morning, he woke up with severe heel pain, which brought the topic of his study close to home.

Dr. DiGiovanni described plantar fasciitis similar to pulling a hamstring, but continuing to run without proper stretching. "Walking without stretching those foot tissues is just re-injuring yourself," he said.

The study revealed that within three to six months of performing the stretch, patients have a 75 percent chance of having no pain and returning to full activity. In addition, patients have about a 75 percent chance of needing no further treatment.

"Surgery often involves a prolonged recovery and is associated with about a 50 percent success rate of eliminating pain and allowing for full activity," said DiGiovanni. "But that's just not good enough. We needed to further optimize non-operative treatments prior to considering surgical options – and if you look at the numbers, we've succeeded."

Insight…

- King Hezikiah of Israel built a tunnel to bring water into the city of Jerusalem, which helped Judah fend off the siege of the city by the Assyrians in 701 B.C. It is now called the Siloam Tunnel, and is one of the oldest human structures still in use today. In Sept. 2003, it became the first structure mentioned in the Bible (II Chronicles 32: 3, 4 and II Kings 20:20) to be confirmed conclusively by archaeologists. The tunnel has been dated by the carbon-14 method to 700 B. C., using organic material in the plaster used to construct it (which is holding up rather well after nearly 3000 years, it should be noted!!).
- "Crazy Glue" (Cyanoacrulate) is one of an increasing number of strong, versatile glues that are revolutionizing many fields such as construction, surgery and dentistry. It was originally designed for plastic surgery (remember "bonds skin instantly"??), where it replaces sutures, thus reducing scaring to a minimum. Since then it has become a cultural phenomenon and a parental nightmare!!
- Excess computer use, like any other excess, can be quite dangerous. A recent study in Great Britain showed that over a third (36%) of children there aged 11 to 14, had "serious, ongoing back pains", mainly due to sitting in front of computers for long periods of time, with poor posture. They also found a high incidence of repetitive movement injuries, especially in the children's wrists and elbows.

- TV Trivia Question: *What TV celebrity had to have the lens removed from his right eye and replaced with a synthetic one after he suffered a basketball injury?*

Possible Answers: A: Robert Blake, B: George Clooney, C: Ray Romano, D: David Duchovny

Answer: see last page

Make Christmas Decorating Safe…

It's that festive time of year again — time when many people string the lights, hang decorations, and put up Christmas trees.

While it may seem like a harmless activity, there are many dangers associated with holiday decorating. Keep the following tips from the U.S. Consumer Product Safety Commission (CPSC) in mind as you decorate this season.

Trees and decorations

When purchasing an artificial tree, look for the label "Fire Resistant." Although this label does not mean the tree won't catch fire, it does indicate the tree is more resistant to burning.

When purchasing a live tree, check for freshness. A fresh tree is green, needles are hard to pull from branches and do not break when bent between your fingers. The bottom of a fresh tree is sticky with resin, and when tapped on the ground, the tree should not lose many needles.

When setting up a tree at home, place it away from fireplaces and radiators. Because heated rooms dry live trees out rapidly, be sure to keep the stand filled with water. Place the tree out of the way of traffic, and do not block doorways.

Use only non-combustible or flame-resistant materials to trim a tree. Choose tinsel or artificial icicles of plastic or nonleaded metals. Leaded materials are hazardous if ingested by children.

In homes with small children, take special care to avoid sharp or breakable decorations, keep trimmings with small removable parts out of the reach of children who could swallow or inhale small pieces, and avoid trimmings that resemble candy or food that may tempt a child to eat them.

To avoid eye and skin irritation, wear gloves when decorating with spun glass "angel hair."

To avoid lung irritation, follow container directions carefully while decorating with artificial snow sprays.

Lights

Indoors or outside, use only lights that have been tested for safety by a nationally recognized Testing Laboratory, such as UL or ETL/ITSNA. Use only newer lights that have thicker wiring and are required to have safety fuses to prevent the wires from overheating.

Check each set of lights, new or old, for broken or cracked sockets, frayed or bare wires, or loose connections. Throw out damaged sets.

If using an extension cord, make sure it is rated for the intended use.

Never use electric lights on a metallic tree. The tree can become charged with electricity from faulty lights, and a person touching a branch could be electrocuted.

When using lights outdoors, check labels to be sure they have been certified for outdoor use and plug them in only ground-fault circuit interrupter (GFCI) protected receptacles.

Turn off all Christmas lights when you go to bed or leave the house. The lights could short out and start a fire. Have a safe holiday season!

Understand How Your Respirator Protects You – Part One

Working around dusts, mists, fumes, aerosols, gases, and vapors can be hazardous to your health. Depending on the contaminant, overexposure can cause lung diseases; problems with the liver, kidneys, heart, or nervous system; or cancer. To control contaminants, operations can be enclosed or confined, general and local ventilation can be installed, or less toxic materials can be substituted. If these controls do not eliminate the risk, wearing an appropriate respirator can protect you. Your company is responsible for determining when respirators are needed in the workplace.

How can I protect myself?

Selecting the right respirator is essential. In making the selection, several factors must be considered:

- Chemical identity and physical nature of the contaminants.
- Toxicity of the contaminants.
- Your exposure level (the concentration of the contaminants in the air, and the amount of time you will be exposed).
- Amount of oxygen present.
- The respirator's assigned protection factor and the maximum use concentration for the application.

Using a respirator puts additional stress on your body. A physician or health care professional must evaluate your health before you can wear a respirator. Follow any recommendations from the evaluation.

Report any signs or symptoms that may influence your ability to use a respirator, including: shortness of breath, dizziness, coughing, wheezing, chest pain, chest injuries, lung diseases, cardiovascular conditions, or heart conditions.

All respirators must be approved for the contaminants and conditions. There are two basic types of respirators: atmosphere-supplying or air-purifying.

Atmosphere-supplying respirators

Atmosphere-supplying respirators provide clean breathing air from a source that is separate from the contaminated area.

Atmosphere-supplying respirators are to be used when:

- There is not enough oxygen in the area,
- Contaminant concentrations are unknown,
- Contaminant concentrations are Immediately Dangerous to Life or Health (IDLH), or
- Cartridges or canisters would not be effective.

Atmosphere-supplying respirators can be used for any type of contaminant or any exposure level, but they do have some limitations. Some models rely on an airline that limits the wearer's mobility. Self-contained units have a limited operation time, and the air cylinders are heavy to wear.

Air-purifying respirators

Air-purifying respirators pass contaminated air through filters, cartridges, or canisters to clean the air as it is breathed. The most common models depend on a tight-fitting facepiece to keep contaminated air from leaking in past the cleaning elements as the wearer inhales (a "negative-pressure" air-purifying respirator).

These air-purifying elements only protect against certain contaminants, and must be selected carefully. Air-purifying respirators are lightweight and portable, but they have many more limitations than atmosphere-supplying respirators. These respirators must not be used in any oxygen deficient or IDLH situation.

When the purifying agents become saturated with the contaminant, the respirator no longer offers protection. The filter or cartridge-changing schedule must be followed. People using negative-pressure respirators must be careful to check the seal each time that they put on the facepiece.

Next month we'll cover fit testing and maintenance of respirators.

Construction sites and material safety data sheets…

OSHA requires that construction workers who come into contact with hazardous chemicals be provided with through and accurate information on each hazardous chemical present at their worksite. The material safety data sheet, or MSDS, is the means to provide the required information.

MSDSs must be readily accessible to you and your coworkers. You employer must tell you where those MSDSs are located on your site.

MSDSs come in all kinds of formats. As long as all the prescribed information is presented on the MSDS in English, the requirements have been met. The MSDS can be in writing on paper, or it can be available via accessing a computer. The key here is that the information is in English and is readily available to you.

Here are the MSDS sections you will find and what information they contain:

- Chemical identity—The identity used on the label, except trade secrets.
- Physical and chemical characteristics—Such as vapor pressure and flash point.
- Physical hazards—Including the potential for fire, explosion, and reactivity.
- Health hazards— Including signs and symptoms of exposure, and any medical conditions, which are generally recognized as being aggravated by exposure to the chemical.
- Primary route(s) of entry—Including skin contact, inhalation, and ingestion.
- Exposure limits—Exposure limits used or recommended by the chemical manufacturer, importer, or employer preparing the MSDS, where available.
- Whether the chemical is a carcinogen—Whether the hazardous chemical is listed in the official lists of carcinogens and potential carcinogens.
- Precautions for safe handling and use—Any generally applicable precautions for safe handling and use, including appropriate hygienic practices, protective measures during repair and maintenance of contaminated equipment, and procedures for cleanup of spills or leaks.
- Control measures—Any generally applicable control measures, such as appropriate engineering controls, work practices, or personal protective equipment.
- Emergency first aid procedures—As applicable.

- Date of preparation—Date of MSDS preparation or last change.
- Manufacturer, importer, or responsible party—The name, address, and telephone number of the chemical manufacturer, importer, employer, or other party preparing or distributing the MSDS.

Make sure you know where the MSDSs are located. If you have any questions, ask your supervisor.

From the Desk of Dennis Parnell, Director Safety Education…

The Federal Trade Commission (FTC) recommends that you know how to keep your information private and secure before you do any shopping online. Internet shopping is one of the fastest growing retail sectors, but you need to take some precautions before doing it. Follow these tips:

- Make sure you have the most up-to-date anti-virus software to recognize both current viruses and older ones. Ideally such software can reverse any damage and updates itself automatically. Failing that, you should update your anti-virus software on a regular basis. You may also wish to consider a firewall to block unauthorized access to your computer. If you have broadband, you absolutely need a firewall.
- Make sure your Web browser and operating system are also up-to-date. If you have "holes" in your browsers, spyware, hackers or phishers can get in to exploit your system.
- Make sure not to email any personal financial information – use another method to avoid compromises of your data.
- Make sure you don't open attachments unless you recognize the source and are expecting it.

Now you know…

From our family to your family, we would like to wish you a very Merry Christmas and Happy New Year! Dennis & Staff ☺

Flu season is here…again

We hear the same thing every year, but it's worth repeating: Get your flu shot! Flu season is upon us and the Centers for Disease Control and Prevention (CDC) estimates that the virus infects five to 20 percent of the U.S. population every year. Chances are you will be one of those people, but a flu vaccination could help prevent you from getting sick.

Who should get vaccinated?

Vaccine is available to anyone who wants to reduce their chance of getting influenza, with a few exceptions, but the CDC strongly recommends it for the following groups of people:

- All children six months to 59 months of age—a new recommendation for this influenza season;
- Women who will be pregnant during the influenza season;
- People ages 50 years and older;
- Children and teenagers (ages six months to 18 years) who must take aspirin regularly and therefore might be at risk for developing Reye syndrome if they get influenza;
- Adults and children ages six months and older with chronic heart or lung conditions, including asthma;
- Adults and children who have required hospitalization or regular doctor visits during the past year because of chronic metabolic diseases, including diabetes, kidney disease, hemoglobin abnormalities, or weakened immune system;
- People with any condition that makes it hard to breathe or swallow, such as brain injury or disease, spinal cord injuries, seizure disorders, or other nerve or muscle disorders;
- Residents of nursing homes and other facilities that provide care for people with chronic medical conditions;

- Healthy household contacts and caregivers of children up to five years old and people at high risk for severe complications from influenza; and
- Health care workers.

Since no influenza vaccine is approved for children younger than six months of age, families should provide a cocoon, or zone of protection, around these very young children by vaccinating all the other people in the family, including grandparents who come in for visits and out-of-home caregivers.

Types of influenza vaccine

The FDA has licensed two types of influenza vaccine for use in the United States.

The first is the shot. It contains inactivated, or killed, viruses and is given with a needle in the arm. The influenza shot can be given to those six months of age and older, including healthy people and those with medical conditions.

The second is the inhaled vaccine. It contains live viruses that are weakened and is administered into the nose with a sprayer. The inhaled vaccine is approved only for healthy people between the ages of five years and 49 years, except pregnant women.

Can the influenza vaccine cause influenza?

Some people may get a mild fever, body aches, and fatigue for a few days, but you can't get influenza from the influenza shot. And no vaccine is 100 percent effective. So you may get the flu soon after you receive the vaccine, before it could be expected to protect you. It does not mean the shot gave you the flu.

And the inhaled vaccine does not cause influenza in healthy people, the only group for which it's approved.

How well does influenza vaccine work?

Infection-fighting antibodies develop about two weeks after vaccination. Studies have shown that influenza vaccine is 70 percent to 90 percent effective in healthy adults younger than 65. In older people, children, and those with chronic illnesses, the vaccine may not necessarily prevent influenza, but it can reduce the severity of the symptoms and the risk of complications if they do get sick.

Vaccination in people older than 65 reduces the likelihood of hospitalization for influenza-related complications by 30 percent to 70 percent. And for those living in nursing homes or other long-term care facilities, the vaccine is up to 80 percent effective in preventing death from influenza.

Where to get influenza vaccine

If you'd like to get the influenza vaccine:
- Contact your personal health care provider.
- Check the American Lung Association's locator at www.flucliniclocator.org for influenza clinics in your area.
- Call your local public health clinic or state health department immunization program or call the CDC at (800) 232-4636.

- Check newspapers, radio stations, or other public information sources for specific clinics in your community.
- Check with your county medical society.

Food safety: From farm to fork

You are an integral part in making safe food. But food safety doesn't begin at the manufacturing and processing plant. It begins on the farm.

That's why the Agricultural Research Service (ARS) — the United States Department of Agriculture's (USDA) chief scientific research agency — is routinely tracking the origins of certain disease-causing bacteria that can cause contamination of meat animals in order to better understand which are moving from the farm to the processor and then to retail outlets.

In 2003, ARS — along with USDA's Animal and Plant Health Inspection Service and Food Safety and Inspection Service — began what's called the Collaboration in Animal Health and Food Safety Epidemiology, or CAHFSE (pronounced "calves"), program. Under the program, a detailed sampling, testing, and analytical protocol is being followed to determine the on-farm and in-plant prevalence of *Salmonella*, *Campylobacter*, *Escherichia coli*, and *Enterococcus* bacteria. This will help USDA track emerging animal diseases within food animal populations.

The first food animal selected for CAHFSE examination was swine. The choice of pork was good news for pork producers, according to Paul Sundberg, vice president of science and technology for the National Pork Board (NPB). "The pork industry has long based its policies and programs on the best scientific data available," he says. "CAHFSE provides the means to gather information — in a scientific manner — on antibiotics and antibiotic resistance and to find out if and how they are related."

CAHFSE allows researchers and industry to gather as much information as possible about foodborne pathogens to determine what happens from farm to fork.

UCR development inches ahead

The Unified Carrier Registration Agreement (UCRA) Board of Directors met again on October 11, 2006, in Washington DC. On October 12, the Federal Motor Carrier Safety Administration (FMCSA) invited representatives from the states to a briefing to emphasize how the new UCR system will affect their state and motor carriers domiciled there.

The UCR Board of Directors is responsible for developing UCR System Plan and Agreement. However, implementing the UCR will require significant action by the states. All states will have the opportunity to participate in the UCR, even though only 38 states currently participate in the Single State Registration System (SSRS).

November 1, 2006, was set as the deadline for states to notify FMCSA and the Board of their intent to participate in the UCR in 2007. States that do not choose to participate during 2007 have until August 2008 to make a final decision regarding participation.

The UCR Board of Directors Subcommittee on Fees completed their research and submitted findings to the full Board for comment. Once the UCR Board finalizes fees, they will be published in the Federal Register for a 90-day comment period before FMCSA grants final approval. It is anticipated that FMCSA will allow states to utilize the MCMIS system to note whether carriers

have paid their UCR fees. The UCR will not issue a credential to the carrier. This method allows enforcement to have access to the carrier UCR status.

Carriers subject to the UCRA will register in their base jurisdiction, and should note information provided by their state regarding registration status for 2007. Private and exempt carriers, brokers, freight forwarders, and leasing companies who were not subject to the SSRS may find it helpful to contact their base jurisdiction for information.

Provisions in the 2005 enactment of SAFETEA-LU provided for replacement of the SSRS with the UCR system, and effective January 1, 2007, prohibits states from collecting revenues under the SSRS. The one-year delay in the repeal of the SSRS on January 1, 2007, sought by various groups is still awaiting action by Congress in late 2006 or early 2007.

The most recent meeting of the UCR Board of Directors was on November 7 and 8, 2006. The meetings are open to the public.

The Colors of Safety

We label and identify items in our facilities for many different reasons, and in many different ways. A sign or label can convey general information, where to locate something, what hazards are present. Many different types of labels are required, from labels on chemical containers to lockout/tagout markings.

It can become confusing when the labeling system or color or signal is not clear to everyone who reads the marking. When it comes to emergency response, understanding the system used at your facility is critical.

Because of this, certain colors are consistently used to indicate certain information.

Red

Fire equipment. Red is the basic color to identify fire protection equipment and apparatus.

Danger. Safety cans or other portable containers of flammable liquids are painted red with some additional clearly visible identification, either in the form of a yellow band around the can or the name of the contents conspicuously stenciled or painted on the can in yellow.

Red lights are provided at barricades and at temporary obstructions, as with building construction.

Danger signs are painted red.

Stop. Emergency stop bars on hazardous machines such as rubber mills, wire blocks, flat work ironers, etc., are red. Stop buttons or electrical switches used for emergency stopping of machinery are red.

Yellow

Yellow is the basic color for:

- Designating caution, and
- Marking physical hazards such as striking against, stumbling, falling, tripping, and "caught in between."

Other colors commonly used to convey certain information include:

- Orange — Used to indicate warning, machine parts that may cause injury, or exposed parts.
- Green — Used to label safety equipment, first-aid, and evacuation routes.

- Blue — Used to identify safety information, personal protective equipment, or to emphasize "Notice" messages.
- Black or white — Indicate traffic designations and used as housekeeping marks.

If you respond to emergencies at your facility, recognizing the colors of safety can help you minimize injuries and damage during potentially dangerous situations.

Basic safeguards for equipment and machinery

Although specific pieces of machinery will require specific safeguards, it is also important to keep in mind safe work practices when operating and maintaining all types of equipment and machinery.

The following list includes basic rules that apply to portable and fixed machinery:

Equipment ("parts" include blades, bits, sanding belts, dies, grinding stones, etc.)

- Follow the equipment manufacturer's recommendations.
- Use equipment only for the purpose for which it's design is intended.
- Operate the tool at the speed and tension specified by the manufacturer.
- Inspect the equipment visually before use.
- Remove unadjusted, defective, cracked, or worn parts from service.
- Maintain sharp and clean parts.
- When provided, use equipment with an exhaust or dust-collection system.
- Use the appropriate size and type of part for the material and cutting action.
- Check to see that guards, guides, and counterweights are properly adjusted and operable.
- Avoid overheating the equipment.

Work practices

- Use only tools you can control easily.
- Make sure hands are kept at a safe distance.
- Follow safe procedures as outlined in the operator's manual.
- Always wear eye and face protection and other appropriate personal protective equipment.
- Do not wear loose clothing or long hair.
- Check to see that power cords are kept away from the line of cut and other moving parts.
- Follow proper lockout/tagout procedures during service and repair.
- Never defeat the guard to expose the blade.
- Never reach under the equipment, work piece, or any place you can't see clearly.
- Direct the operation away from your body.

Work environment

- Practice good housekeeping — avoid crowded, cluttered conditions.
- Make sure combustible or flammable material is located away from spark-producing operations.
- Use adequate ventilation to reduce dust and other air contaminants.
- Wear hearing protection when necessary.

The *NC Industrial Commission Safety Education Section* stands ready to assist you with your Safety training needs. We offer a variety of courses, designed to suit your needs. Please give one of our Industrial Safety Representatives a call…

- **Mike Bingham – binghamm@ind.commerce.state.nc.us – Western Carolina Area – 919-218-9045**

- **Randy Cranfill** – cranfilr@ind.commerce.state.nc.us - APCAP Coordinator – 919-218-2986
- **Markus Elliott** - elliottm@ind.commerce.state.nc.us – Southeastern Area – 919-810-5788
- **Mel Harmon** - harmonm@ind.commerce.state.nc.us - Mid-State Area and Defensive Driving Instructor– 919-218-3374
- **Eric Johnson** – johnsone@ind.commerce.state.nc.us – Southern Piedmont Area 919-218-3567
- **Michael Nance** – nancem@ind.commerce.state.nc.us – Blue Ridge & Western Piedmont Areas 919-218-9047
- **Ginny Schwartzer** - SAFETYIC@ind.commerce.state.nc.us –Temporary Program Assistant– 919-807-2603
- **Alvin Scott** - scotta@ind.commerce.state.nc.us – Eastern & Northeastern Areas and Defensive Driving Instructor – 919-218-2792
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- **Dennis Parnell** – parnelld@ind.commerce.state.nc.us – Director Safety Education – 919-218-3000

We Are Working For You!

NC INDUSTRIAL COMMISSION

[CLIP AND SAVE]

Upcoming Events…

- December 5, 2006 – Mid-State Safety Council Quarterly Meeting – Coty, Sanford, NC 6:00 p.m.
- December 7, 2006 – NC Rural Water Workshop – City of Wilson Operations Center, 1800 Herring Ave, Wilson, NC 8:00 a.m. – 4:00 p.m. – Competent Person 4 hours, Confined Space, 1 hour & Safety Attitudes 1 hour = 6 hours credit for both Water & Wastewater - Cost- $ FREE $
- May 15 – 18, 2007 – NC Statewide Safety Conference – Koury Convention Center Greensboro, NC

- ***Answer: D. David Duchovny*** *suffered an eye injury while playing a pick-up game of basketball when he was 27. He was poked in the eye, and the force of the blow ruptured an eye muscle and caused a cataract to develop. As a result, he had to have the lens removed from his right eye and replaced with a synthetic one. He had to stay awake for the surgery and actually remembers the doctors talking to each other as if they'd never performed that kind of surgery before. He says, "It was like, Well, look at that. 'What do you normally do with that?' I don't know, I like to tie it in a knot or tie it in a bow or whatever. I was half awake, but I was so happy on the Demorol, I said, 'I thought you guys did this before.' I thought it was the funniest thing that they were operating on me. They'd never done it."*