

## SECTION 3

# MEDICAL AND FIRST-AID REQUIREMENTS

### 03.A GENERAL

03.A.01 Prior to the start of work, arrangements shall be made for medical facilities and personnel to provide prompt attention to injured employees and for consultation concerning occupational safety and health matters.

a. An effective means of communication (hard-wired or cellular telephone, two-way radio, etc.) with #911 access or other emergency response source, and transportation to effectively care for injured workers shall be provided. Communication devices shall be tested in the area of use to assure functionality.

b. The telephone numbers of physicians, hospitals, or ambulances shall be conspicuously posted, at a minimum, on the safety bulletin board and near the on-site project office telephones. Medical facilities and personnel expected to treat injured employees shall be informed of the nature of the work to be performed and the injuries/illnesses prevalent on such jobsites.

c. A highly visible map delineating the best route to the nearest medical facility shall be prepared and posted on the safety bulletin board.

03.A.02 First-aid and cardiopulmonary resuscitation (CPR) availability.

a. When a medical facility or physician is not accessible within five (5) minutes of an injury to a group of two (2) or more employees for the treatment of injuries, at least two (2) employees on each shift shall be qualified to administer first-aid and CPR. > **Minimum qualifications are listed in 03.D.**

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b. Individuals who are required to work alone in remote areas shall be trained in first-aid and shall be provided with an **effective** means of communication to call for assistance in the event of an emergency.

#### 03.A.03 First-aid and medical facility requirements.

a. All projects, activities, installations, or contracts for which fewer than 100 persons are employed (greatest total number of employees on a shift) at the site of the work, and where neither a first-aid station nor an infirmary is available, shall be provided with a first-aid kit complying with the criteria contained in ANSI Z308.1. There shall be one first-aid kit for every 25 (or fewer) employees. In addition to the basic fill requirements of the first-aid kit, the employer, in consultation with a health care professional or competent first-aid person, shall evaluate the hazards found in the work environment to determine the necessity of optional fill contents.

b. All projects, activities, installations, or contracts for which more than 99 and fewer than 300 persons are employed (greatest total number of employees on a shift) at the site of the work, shall establish and equip, ~~as directed by a Licensed Physician (LP),~~ a first-aid station. In non-rural locations, medical clinics, hospitals, or doctors' offices, accessible within five (5) minutes of an injury may be approved for use provided the requirements of paragraph 03.A.03.a. are met.

c. Where tunnels are being excavated, a first-aid station and transportation facilities shall be provided so that treatment is available within five (5) minutes of the occurrence of an injury.

d. All projects, activities, installations, or contracts for which 300 or more persons are employed (greatest total number of employees on a shift) at the site of the work shall establish and equip, as directed by a licensed physician, an infirmary.

03.A.04 Should work activities present any potential exposure (of any part of the body) to toxic or corrosive materials, drenching

and/or flushing facilities shall be provided in the work area for immediate emergency use. > **See Section 06.B.**

03.A.05 Before commencing use of epoxy resins, concrete, or other dermatitis-producing substances, employees shall be made aware of the manufacturers' skin protection recommendations. Barrier cream ointment or other skin protection measures recommended by the manufacturer for the specific exposure shall be available for use.

03.A.06 Employees designated as responsible for rendering first-aid or medical assistance shall be included in their employer's blood-borne pathogen program in accordance with 29 CFR 1910.1030 and shall:

- a. Be instructed in the sources, hazards, and avoidance of blood-borne pathogens and be provided the training specified in 29 CFR 1910.1030;
- b. Be provided with, and shall use and maintain, PPE (i.e., Breathing barrier, latex-free gloves, gowns, masks, eye protectors, and/or resuscitation equipment) when appropriate for rendering first-aid or other medical assistance to prevent contact with blood or other potentially infectious materials;
- c. Institute a site-specific blood-borne pathogen prevention program to include a site-specific Exposure Control Plan with provisions for engineering and administrative controls, Hepatitis B vaccination, PPE, training, recordkeeping, and a Post-Exposure Control Plan in the event of a blood-borne exposure. Post-exposure protocol shall include a plan to ensure **immediate** medical evaluation of exposed individual(s) per current recommendations of the Center for Disease Control (CDC) for human immuno-deficiency virus (HIV), Hepatitis B virus (HBV), Hepatitis C virus (HCV) and Hepatitis A virus (HAV).

03.A.07 Prior to the start of work outside the employee's normal geographical area, the employer shall inform employees of

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parasitic, viral and environmental diseases endemic to the geographical work location. Common diseases to consider are: Lyme Disease, West Nile Virus, Hantavirus, Histoplasmosis, Rocky-Mountain Spotted Fever, Dengue Fever, and Malaria.

- a. For guidance on the potential biological and environmental diseases in the work location, the employer shall consult the CDC Travel webpage, U.S. Army Institute of Public Health Center for Health Promotion and Preventive Medicine web site, and the health department in the local area.
- b. Information to be provided to the employee traveling in areas where such diseases are endemic shall include:
  - (1) Modes of disease transmission;
  - (2) Specific health risks associated with the disease;
  - (3) Preventive measures such as available vaccines and PPE (gloves, eye and skin protection, respirator);
  - (4) Appropriate work practices to prevent contact with infected agents (bird/rodent droppings, etc.), such as watering areas prior to dust-generating activities;
  - (5) Vaccine information, to include information on the effectiveness, risk, and availability;
  - (6) Safe removal of source where applicable;
  - (7) Symptom recognition and medical referral.

### **03.B FIRST-AID KITS**

03.B.01 The performance requirements of the first aid containers shall be based on the storage area location of the first-aid kit and shall conform to ANSI Z308.1:

a. Type I container is for permanently affixed indoor or atmosphere-controlled settings. Type 1 first-aid kits are required to meet the requirements of a ten (10)-unit container.

b. Type II and Type III first-aid kits shall, at a minimum, meet the requirements for a 16-unit container:

(1) Type II container is for portable indoor settings;

(2) Type III container is for portable outdoor settings.

c. The contents of the first-aid kit shall, at a minimum, contain the items detailed in Table 3-1.

d. First-aid kits shall be easily accessible to all workers and protected from the weather. The individual contents of the first-aid kits shall be kept sterile. First-aid kit locations shall be clearly marked and distributed throughout the site(s).

03.B.02 The contents of first-aid kits shall be checked by the employer prior to their use on site and at least every three (3) months when work is in progress to ensure that they are complete, in good condition, and have not expired.

**TABLE 3-1**  
**REQUIREMENTS FOR BASIC UNIT PACKAGES**

Unit first aid item	Minimum Size or Volume (metric)	Minimum Size or Volume (US)	Item quantity per unit package	Unit package size
*Absorbent Compress	206 cm <sup>2</sup>	32 in <sup>2</sup>	1	1
* Adhesive Bandage	2.5 x 7.5 cm	1 x 3 in	16	1
Antibiotic Treatment	0.9 g	1/32 oz	6	1
* Adhesive Tape	<del>2.3 m</del> 457.2 cm	5 2.5 yd (total)	1 or 2	1 or 2
Antibiotic Treatment	0.5 g	0.14 fl oz	10	
* Antiseptic Swab	0.5 g	0.14 fl. Oz.	10	1
Antiseptic Wipe	2.5 x 2.5 cm	1 x 1 in.	10	1
Antiseptic Towelette	157 cm <sup>2</sup>	24 in <sup>2</sup>	10	1
Aspirin, Individually Wrapped	325 mg		2	2
Bandage Compress (2 in.)	5 x 91 cm	2 x 36 in.	4	1
Bandage Compress (3 in.)	7.5 x 152 cm	3 x 60 in.	2	1
Bandage Compress (4 in.)	10 x 183 cm	4 x 72 in.	1	1
<u>Breathing Barrier</u>				
Burn Dressing	10 x 10 cm	4 x 4 in	1	1-2
* Burn Treatment	0.9	1/32 fl. Oz.	6	1
<u>CPR Barrier</u>			4	4
Cold Pack	10 x 12.5 cm	4 x 5 in	1	1-2
Eye Covering, with means of attachment	19 cm <sup>2</sup>	2.9 in <sup>2</sup>	2	1
Eye Wash	<del>30</del> 118 ml (total)	4 4 fl. Oz total	1	2
Eye Wash & Covering, with means of attachment	<del>30</del> 118 ml total 19 cm <sup>2</sup>	4 4 fl oz. Total 2.9 in <sup>2</sup>	1 2	2
Gloves, latex free	XL	XL	4 2 pair	1
<del>Gloves, latex free</del>	L	L	4 pair	4
<u>Hand Sanitizer</u>	0.9 g	1/32 oz.	6	
Roller Bandage (4 in.)	10 x <del>550</del> 366 cm	4 in. x 6 4 yd.	1	1
Roller Bandage (2 in.)	5 x <del>550</del> 366 cm	2 in. x 6 4 yd.	2	1

* Sterile pad	7.5 x 7.5 cm	3 x 3 in.	4	1
* Triangular Bandage	101 x 101 x 142 cm	40 x 40 x 56 in.	1	1

\* Minimum mandatory contents for basic fill kit

03.B.03 Automatic External Defibrillator (AED).

a. The placement of AEDs is optional (except for infirmaries, see 03.C.03.d) but highly recommended. The placement of AEDs on the worksite shall be preceded by an assessment of the time and distance to emergency medical services (EMS) and a justified need for such equipment.

b. An AED program shall include, at minimum:

(1) Training: First-aid attendants shall hold certification in first-aid and CPR from the American Red Cross (ARC), the American Heart Association (AHA), or from an organization whose training adheres to the standards of the International Liaison Committee on Resuscitation (as stated in writing), or from a LP. All classes shall contain a hands-on component. The certificate(s) shall state the date of issue and length of validity;

(2) Physician, physician assistant, or nurse practitioner oversight and event assessment;

(3) Standard Operating Procedures (SOP) for EMS activation;

(4) Equipment Maintenance Program.

**03.C FIRST-AID STATIONS AND INFIRMARIES**

03.C.01 General.

a. For activities requiring a first-aid station or an infirmary, the type of facilities and equipment provided shall be determined after consideration is given to the proximity and quality of

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available medical services. The facilities and equipment shall also be in accordance with the recommendation of a licensed physician, physician assistant, or nurse practitioner. Alternative facilities that provide the quantity and quality of services outlined in this section may be used if recommended by the consulting physician, physician assistant, or nurse practitioner, a LP.

b. Identification and directional markers shall be used to readily denote the location of all first-aid stations and infirmaries.

c. Emergency lighting shall be provided for all first-aid stations and infirmaries.

03.C.02 A certified first-aid provider attendant shall be on duty in first-aid stations at all hours when work is in progress (except when on emergency calls).

03.C.03 Infirmaries.

a. Infirmaries shall provide privacy, adequate lighting, climate control, adequate toilet facilities, hot and cold water, drainage, and electrical outlets. Walls and ceilings shall be finished with the equivalent of two coats of white paint; windows and doors shall be screened; floors shall be constructed with impervious materials.

b. A properly equipped emergency vehicle, helicopter, or mobile first-aid unit shall be provided during work hours at sites requiring an infirmary. The emergency vehicle shall not be used for any other purpose, except in the case of a helicopter, which may be used for shift crew changes.

c. A Registered Nurse (RN), a ~~Licensed Physician's Assistant (LPA)~~, a certified Emergency Medical Technician (EMT), or a Licensed Practical Nurse (LPN), if approved by the consulting physician, physician assistant, or nurse practitioner a LP, shall be assigned on a full-time basis to each installation requiring an infirmary.

d. Infirmaries shall be equipped with an AED.

### **03.D PERSONNEL REQUIREMENTS AND QUALIFICATIONS**

03.D.01 All projects, activities, installations, or contracts on which 1,000 persons or more are employed (greatest total aggregate number of employees on a shift) shall have the full-time services of a LP. A Nationally Registered Emergency Medical Technician (NREMT) -Intermediate, NREMT - Paramedic, RN, LPN, or an LPA having direct communication with a physician, physician assistant, or nurse practitioner may be used when a full-time physician is not available.

03.D.02 First-aid attendants shall hold certification in first-aid and CPR training from the ARC, the AHA, or from an organization whose training adheres to the standards of the International Liaison Committee on Resuscitation (as stated in writing) or from a LP. All classes shall contain a hands-on component. The certificate(s) shall state the date of issue and length of validity.

03.D.03 First-aid attendants, RNs, LPNs, LPAs and NREMT-Intermediates shall be under the direction of a LP physician, physician assistant, or nurse practitioner.

03.D.04 Military personnel with equivalent qualifications may be used in lieu of the above personnel.

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