The Safety Chronicle

Floor Marshal Award
By: Paula Sweitzer

Every year EHS honors one of our Floor Marshals who has gone above and beyond his/her normal volunteer duties. EHS asked our Floor Marshals to nominate a fellow Floor Marshal they felt has done a great job.

We had three great nominations and congratulations to all of them!

- Tom Haas, Music School (Winner)
- Nancy Hosni, Mellon Hall Pharmacy Department
- Mike Cecil, Union

Tom was nominated by Mark Koch for his great leadership and guidance within their department, floor, and building; especially during times of evacuations.

Tom has always gone above and beyond his normal duties. He shows his leadership and dedication with all events happening within his building. Tom is excellent at communicating with internal and external customers. Tom was recognized during the Labor/Management Safety Committee Meeting on March 29, 2017. Thank you Tom for your leadership and commitment to safety!!!

Thank you to all floor marshals for your time and dedication! All of our Floor Marshals are volunteers that wish to take-on a leadership role. If you are interested, please contact Paula Sweitzer (sweitzerp@duq.edu or x4763).

Congratulations Tom Haas!
Evacuations Spring 2017
By: Ryan Reilly

On April 3rd the EHS department kicked off the spring evacuation drills. Drills were scheduled over eight days and cancelled on two days due to unseasonably cold and wet weather conditions. Occupants were well versed in procedures and evacuated in a timely and orderly fashion to the designated gathering points. Floor Marshals excelled in their duties, alerting occupants to clear egress paths and communicating with EHS any malfunctions or suggestions for more efficient processes. Interdepartmental communication and resolution of deficiencies are progressing towards our common goal of life safety.

Some common distractions which continue to hinder evacuees are earbuds and headphones. If you do choose to wear these, please be alert and look for a flashing strobe and follow the direction of the crowd. If questions arise, please see the Emergency Management section “Emergency Evacuation Guidelines” on our website at www.duq.edu/ehs for more information.

EXIT The BUILDING

OSHA Walking-Working Surfaces Update
By: Ryan Reilly

Falls to a lower level continue to plague construction and general industry employees. According to the Bureau of Labor Statistics, 350 of 937 construction fatalities in 2015 were falls from elevation. To combat these statistics and protect workers the Occupational Health and Safety Administration (OSHA) has issued a final rule on Walking-Working Surfaces and Personal Fall Protection Systems.

Statistics:

- 55 percent of fatal falls came from heights of 20 feet or less.
- 33 percent of fatal falls involved falls from roofs, 24 percent involved ladders, and 15 percent involved scaffolds and staging.
- Fatal falls in residential construction rose to 61 percent in 2015 from 26 percent in 2011.
- Roofers continue to experience the highest rate of fatal falls to a lower level: 31.5 per 100,000 full-time workers, although this represents a decrease from 39.9 in 2014.
- According to OSHA, falls from ladders are 20 percent of all fatal and lost work-day injuries.

The updated Rule provides best practices and guidance on fall protection options and ladder safety requirements. Options for fall protection include passive guardrail barrier systems for exposed edges of roofs and edges to lower levels; safety net systems to stop individuals from contacting an obstruction or a lower level; personal fall arrest systems that stop or limit a fall by using an anchorage point, body harness, and connection device; and ladder safety system designed to reduced falls from ladders with cables and carrier sleeves connected to body harnesses. To protect workers the new rule requires employers to have personal fall arrest systems on fixed ladders twenty four feet or greater. It is estimated these changes will save 29 lives and 5,842 lost-workday injuries each year.

Thunderstorms
By: Bob Haushalter

It’s only May and already the news media is reporting severe and destructive damage due to tornadoes and thunderstorms. This is a good time to cover some basic information regarding thunderstorms and safety.

What is a thunderstorm?
A thunderstorm is a rain shower during which thunder can be heard. Thunder comes from lightning, so all thunderstorms have lightning.

Thunderstorms are most likely to occur in the spring and summer months, and during the afternoon and evening hours, but they can occur year-round and at all hours.

Weather Alerts - Watches and Warnings???
The National Weather Service may issue either a “Severe Thunderstorm Watch” or “Severe Thunderstorm Warning”. What’s the difference?

Severe Thunderstorm Watch
Be Prepared
Severe thunderstorms are possible in and near the watch area.
Stay informed and be ready to act if a severe thunderstorm warning is issued.
The watch area is typically large, covering numerous counties or even states.

During the storm
• Listen to the local news or radio for reports.
• Go to a secure location – don’t forget to take the pets.
• Stay away from the windows.
• If you are outside, immediately seek shelter (no sheds or standing under a tree).

Severe Thunderstorm Warning
Take Action
Severe weather has been reported by spotters or indicated by radar.
Warnings indicate imminent danger to life and property.
Take shelter in a substantial building. Get out of mobile homes that can blow over in high winds.
The warning area is usually small (around the size of a city or small county) that may be impacted by a large hail or damaging winds.

After the storm
• Continue to listen to the local news or radio for report updates contact family and friends – let them know you are okay.
• Assess the damage.
• Check on your neighbors – see if they are okay.

Ticked Off...

By: Ryan Reilly

Lyme disease (LD) has been quite an epidemic the past 30 years that has ticked off hundreds of thousands of individuals in the United States, concentrating targets in the Northeast and Great Lakes region. Demographic data and diagnostics show this infection originated in Lyme, Connecticut when adolescents were diagnosed due to unusual symptoms of a rash and arthritis and was subsequently named Lyme disease in 1977. The culprit of this disease is transmitted from the spirochete causative bacterium Borrelia burgdorferi caused by Ixodes scapularis (adult deer tick) vectors biting the unsuspecting victim. The nymph form transmits this within 24-48 hours by feeding on blood. A tell-tell sign of a tick bite is a central bull’s-eye lesion at least 5 cm in diameter. The demographic landscape of these vectors is also expanding.

According to the Centers for Disease Control (CDC) statistics, in 2014, 96% of LD cases were from 14 states and the 5th most common reportable disease. In 2014, Pennsylvania reported 6,470 confirmed cases in comparison to 4,287 in 2005. The highest incidence rates were in Maine (87.9%), Vermont (70.5%), Massachusetts (54.1%), Rhode Island (54%), and Pennsylvania (50.6%). The diagnosis of LD peaked during summer showing 65% surveillance from June-August. Epidemiology studies show this impacted males at 57% and females at 43%, yet diagnosis for females was greater than expected for the 15-44 age range. Although these statistics are alarming; don’t get tick anxiety. Routine hygiene and awareness can help the disease from manifesting.

It is very common not to recall a tick bite; only about half of patients do. If you see a trademark bulls-eye rash, it is time to seek medical attention for diagnosis. Early onset symptoms do not manifest for a few days to months, and many assume nothing out of the ordinary when the rash disappears.

Other early symptoms can include: lesions; musculoskeletal pain and swelling; neurological disorders, and shortness of breath. Ocular problems are often asymptomatic including redness and tearing. If left untreated it can cause one or multiple joints swelling and pain; chronic arthritis; blurred vision; insomnia; fatigue; encephalopathy; and in rare cases changes in personality and dementia. LD is rarely fatal and early diagnosis is crucial to offsetting symptoms.

Common tests for LD will show an elevated white blood cell counts. Further tests that diagnose LD are enzyme-linked immunosorbent assay (ELISA) and Western blot testing. The Western blot test identifies LD with higher confidence after 4 weeks exposure. Diagnostics are proven for testing, but treatment is necessary to prevent chronic effects.

If you are diagnosed with LD and in its early stages, your potential for clearing the infection with antibiotics is likely. Guidelines show that doxycycline is advised for patient’s ages 9 and older that are not pregnant, and amoxicillin for patients younger than 9 years of age. Cefuroxime or erythromycin is used for patients allergic to penicillin and the treatments vary depending on what stage of LD.

If you enjoy the outdoors, especially in the spring and summer months you can defend against ticks with awareness, permethrin on clothing, and DEET. Permethrin is a synthetic contact insecticide derived from a chrysanthemum. It is applied to clothing and not skin. DEET (N,N diethyl-meta-toluamide) is the active ingredient in widely available insect repellent sprays, lotions, and liquids. It is considered safe, has a “no effect” rating by the EPA, and normal use is advised for tick prevention. EPA studies show that DEET can resist ticks for two to twelve hours by masking the insect’s ability to use its olfactory senses.

Reference: Multiple references available upon request
Lab Program Review: Shipping – Dangerous Goods Shipment Program
By: Paula Sweitzer

Most labs are shipping samples (<30 g or <30 ml) from campus to another lab for analysis. Even though the amount of material may be small, there are still rules to follow under the Department of Transportation (DOT). While the material could be a small amount of a hazardous chemical or biological agent and therefore might fall under the limited quantity rule. It is important to involve EHS with every shipment from campus. To make the process easier, EHS has developed the “Dangerous Goods Shipment Request.” This form is completed by the lab and should be given to EHS at least three days prior to shipment. EHS will use the form to properly categorize the shipment – this could lead to special packaging requirements, specific labels/markings, and a shipper’s declaration.

Please visit our website to read the full procedure: www.duq.edu/ehs

City of Pittsburgh Inspections
By: Paula Sweitzer

Since Fall 2016, EHS and Facilities Management have been working with the Pittsburgh Bureau of Fire in scheduling and conducting building inspections. Every building on campus must be inspected under the Pittsburgh Bureau of Fire, Company Inspection Program.

The goal of the inspections is to maintain occupant safety and fire prevention. The inspections include a review of documentation regarding a building’s fire alarm and fire suppression systems, then a physical tour. The inspectors will not interrupt classes, but they do look into all rooms. The focus of inspections is on department storage rooms and mechanical/electrical rooms.

Items to be inspected include:
- Electrical – electrical panel access, extension cords, open junction boxes
- Exits and Aisles – exit signs, lighting, and egress
- Fire Extinguishers – mounted and serviced
- Fire Doors – no wedges/stoppers (no obstructions)
- Fire Protection – Pittsburgh thread and caps, fire department connections
- Fireworks – storage, display or discharge without approval
- Flammable Liquids – storage, amounts, containers
- Hazardous Materials – Safety Data Sheets, labeling, containers
- Heat Producing Appliance – kerosene heaters (prohibited)
- Housekeeping/Rubbish – cluttered areas
- Liquid Petroleum Gases – approval required
- Smoking and Open Flames – no smoking signs
- Storage – storage in exits/under stairways, storage height (at least 2ft below ceiling)

Recent/current inspections include:
- Koren (9/9/16)
- Tribone (9/9/16)
- Canevin (11/2/16)
- Bayer (2/20/17)
- Law School (3/13/17)
- Rangos (4/10/17)
- Libermann (4/24/17)
- Energy Center (5/23/17)
- LLC Buildings – over the summer
- Mellon Hall – September
Pedestrian Safety Reminders
By: Paula Sweitzer

With construction season on the horizon, please pay attention to where you are walking...especially through any construction site. Remove your earbuds/head phones and put your phone away. You need to be aware of your surroundings at all times.

Also, be cautious around any construction vehicles – they may not see you!

Pedestrian Safety Tips:
- Use sidewalks.
- When crossing the street, use crosswalks.
- Stay alert.
- Pay attention.
- Plan ahead – think about your path and how you would respond to an emergency.
- Avoid stepping out into traffic from between parked cars.

Personal Protective Equipment (PPE) Reminder:
By: Paula Sweitzer

With the warmer weather upon us, it is important to remember proper PPE for the lab. Anybody working in the lab must wear closed-toed shoes – no sandals or flip-flops are permitted. Shorts/skirts above the knee are also not permitted to be worn in the lab.

Another important reminder is to remove your PPE before leaving your lab, especially before using the restroom or eating food. Remove your gloves before touching a door knob or using the elevator because your gloves could be contaminated, and always wash your hands!
The EHS Department accepts batteries! Please bring any University used batteries to Mellon Hall, B-12 Receiving and place on the cart or in the pink battery bin.

REMINDER: ALL CAMPUS ROADS ARE 15 MPH

Department Updates
By: Paula Sweitzer

I am excited to announce that both Bob and Ryan have recently been promoted!

Bob is now our Industrial Hygiene Manager and Ryan is our Safety Manager.

Please join me in congratulating them both!

This summer, we will have an intern joining our department. Jake Huthmacher is a senior at Slippery Rock and will be starting with us on May 15, 2017. I expect you will see him doing several things around campus and within your lab(s).