



UNITED STATES MARINE CORPS
Marine Corps Base
Camp Lejeune, North Carolina 28542

MASTER FILE COPY

BO P5100.3F
SAFD/RJA/alm
9 Mar 1981

BASE ORDER P5100.3F *w/ch1*

From: Commanding General
To: Distribution List

Subj: Base Safety Program

Ref: (a) MCO 5100.8E (NOTAL)
(b) MCO 5101.8D (NOTAL)
(c) NAVFAC P-300 (NOTAL)
(d) MCO 6260.1C (NOTAL)
(e) BO 6260.4
(f) BO 6260.3B
(g) BO 12792.1C
(h) BO 11320.1G
(i) BO P4600.1E
(j) BO P5560.2H
(k) BO 12810.1
(l) NAVFAC P-309 (NOTAL)
(m) BO 5101.1H
(n) NAVMAT P-10470 (NOTAL)
(o) OPNAV 5100.16 (NOTAL)
(p) MCO P5100.22A (NOTAL)
(q) NAVMC 2692
(r) BO P1710.27D (NOTAL)
(s) OSHA 2206 (29CFR1910) (NOTAL)
(t) MCO 5100.19C (NOTAL)
(u) 49CFR171-179 (NOTAL)

Encl: (1) LOCATOR SHEET

Report Required: Mishap and Injury Report (NAVMC 10767) (Refer to paragraph 502.3 of the text)

1. Purpose. To promulgate the procedures and policies for execution of the Base Safety Program.
2. Cancellation. BO P5100.3E.
3. Summary of Revision. This revision continues the basic program with the addition of a section delineating the rights of employees to submit reports of unsafe or unhealthful working conditions. (See Chapter 8)
4. Change Notation. Significant changes contained in this revision are denoted by an arrow () in the outer left margin.
5. Applicability. Having received the concurrence of the Commanding General, 2d Marine Division, FMF; and the Commanding General, 2d Force Service Support Group (Rein), FMF, Atlantic, this order is applicable to those commands.

BO P5100.3F
9 Mar 1981

6. Certification. Reviewed and approved this date.


V. P. STOKES, JR.
Chief of Staff

DISTRIBUTION: A plus Base Safety (5)

CHAPTER 2

SAFETY COUNCIL AND COMMITTEES

201. Policy. The following Safety Council and Committees are established as a part of the Base Safety Program to initiate and take action to prevent accidents and injuries, through supervision, education of personnel, and by stressing safety consciousness.

202. Safety Council

1. The purpose of the Safety Council will be:

a. To review periodically the accident experience of the activity and reports of fatal and other serious accidents.

b. To make recommendations to the Commanding General for his action or the action of higher authority for:

(1) Physical or structural alterations designed to eliminate or control hazards.

(2) Changes in policies or procedures to minimize unsafe acts.

(3) Plans to strengthen the activity safety program.

c. The planning of educational and promotional efforts designed to create and maintain interest in safety and promote increased emphasis on accident prevention.

2. The Safety Council shall meet quarterly or more frequently as circumstances warrant.

3. The Base Safety Manager will ensure that all arrangements are made for the meetings and serves as recorder for all sessions.

4. The Safety Council will consist of the following members:

Assistant Chief of Staff, Manpower - Chairman
 Security Officer/Provost Marshal, MCB
 Safety Officer, 2d Marine Division, FMF
 Safety Officer, 2d Force Service Support Group (Rein), FMFLant
 Special Services Officer, MCB
 Maintenance Officer, MCB
 Motor Transport Officer, MCB
 Fire Chief, MCB
 Training Facilities Officer, MCB
 Safety Officer, Naval Regional Medical Center

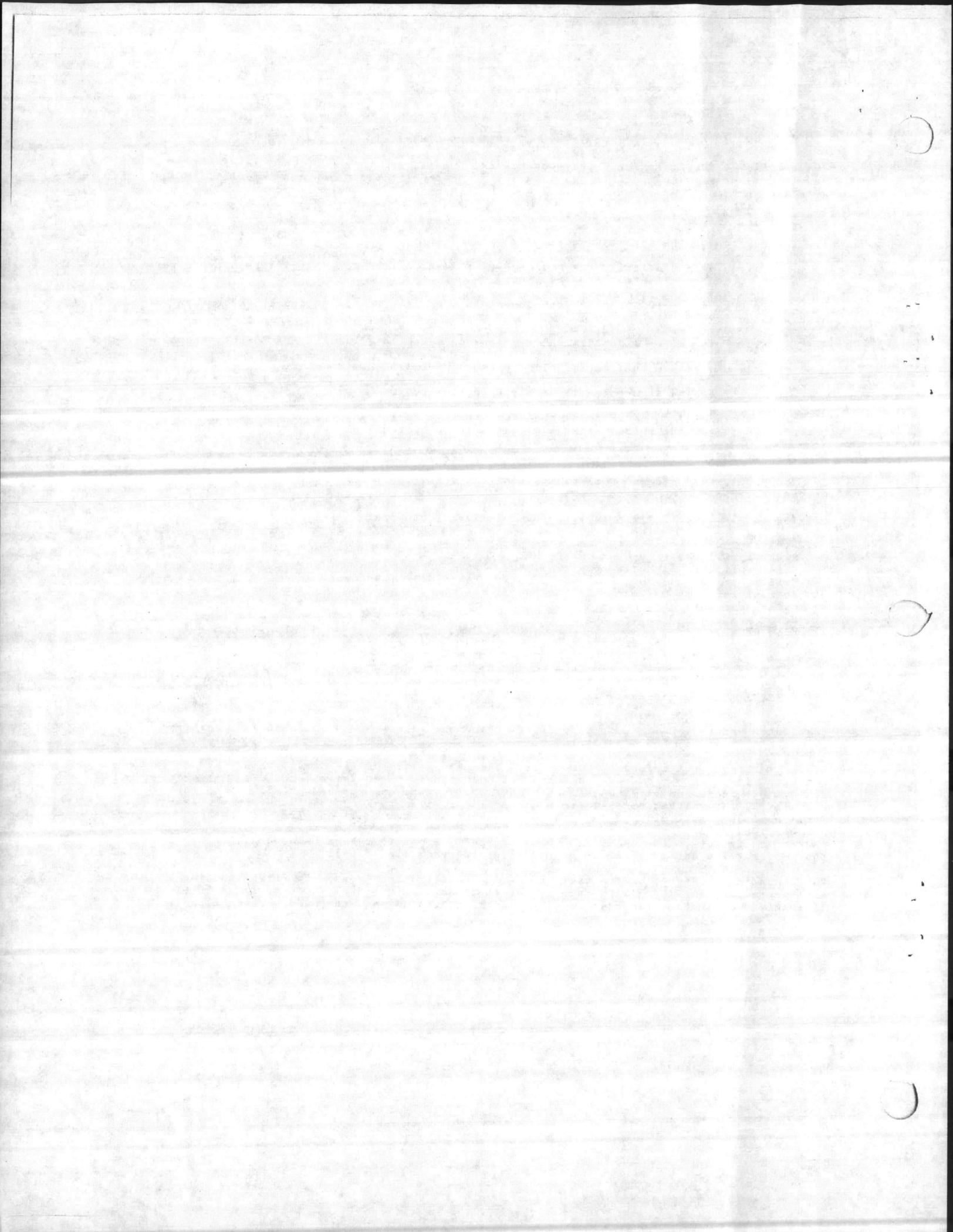
~~Ground Safety Specialist, Marine Corps Air Station (helicopter), New River Safety Officer, NAVY~~

Federation of Gov't employees. 203. Supervisor's Safety Committees. *Regimental Dental Center, Safety Officer, MAR. CORPS Exchange; Representative, American* Supervisor's Safety Committees shall be established in accordance with the current edition of MCO 5100.8.

204. Shop Safety Committees. Shop Safety Committees shall be established in accordance with the current edition of MCO 5100.8.

205. Eye Hazard Determination Committee. The purpose of the Eye Hazard Determination Committee is to survey areas, processes and operations within their command to determine which are eye hazardous and require the use of eye protection, and whether or not others in the vicinity of these areas or operations should be provided with appropriate safety eyewear. This committee shall meet at the call of the chairman, and shall consist of: Base Safety Manager, Chairman; Chief, Occupational and Preventive Medicine Service, Naval Regional Medical Center; Assistant to the Assistant Chief of Staff, Logistics; Base Maintenance Officer; and Base Motor Transport Officer (or other designated representative). *Hospital*

206. Hearing Conservation Program. A Hearing Conservation Program is established and implemented in compliance with the current editions of MCO 6260.1, BO 6260.2 and BO 6260.3. It consists of audiometric hearing tests, noise-reduction measures, and personnel protection.



CHAPTER 3

SAFETY PRECAUTIONS AND PROCEDURES

301. General. Safety is the responsibility of all personnel. Civilian or military personnel noting unsafe conditions or practices will report them to their supervisor immediately. The supervisor will ensure that corrective action is taken.

302. Supervisors

1. Civilian and military supervisors will be responsible for the safety of personnel working under their supervision. Particular care should be exercised in indoctrinating new employees in safety procedures and rules. Shop supervisors of industrially employed personnel, or their designated representatives, shall conduct at least one five-minute standup safety meeting each week. Personnel will be assigned only to such jobs as they are physically and professionally qualified to perform, and they shall be permitted to work only when they are physically fit, in accordance with the current edition of BO 12792.1.

2. Supervisors having recommendations for improvement of safety devices, protective equipment, and methods of operation should send them concurrently to the Base Safety Manager and the Civilian Personnel Officer if a Beneficial Suggestion is involved.

303. Fire Protection. Fire protection regulations are contained in the current edition of BO 11320.1.

304. Personal Protective Equipment. See Chapter 6.

305. Motor Vehicles and Materials Handling Equipment. All vehicles on this base shall be operated in conformity with the current editions of BO P4600.1 and BO P5560.2.

306. Toxic Materials, Gases and Acids

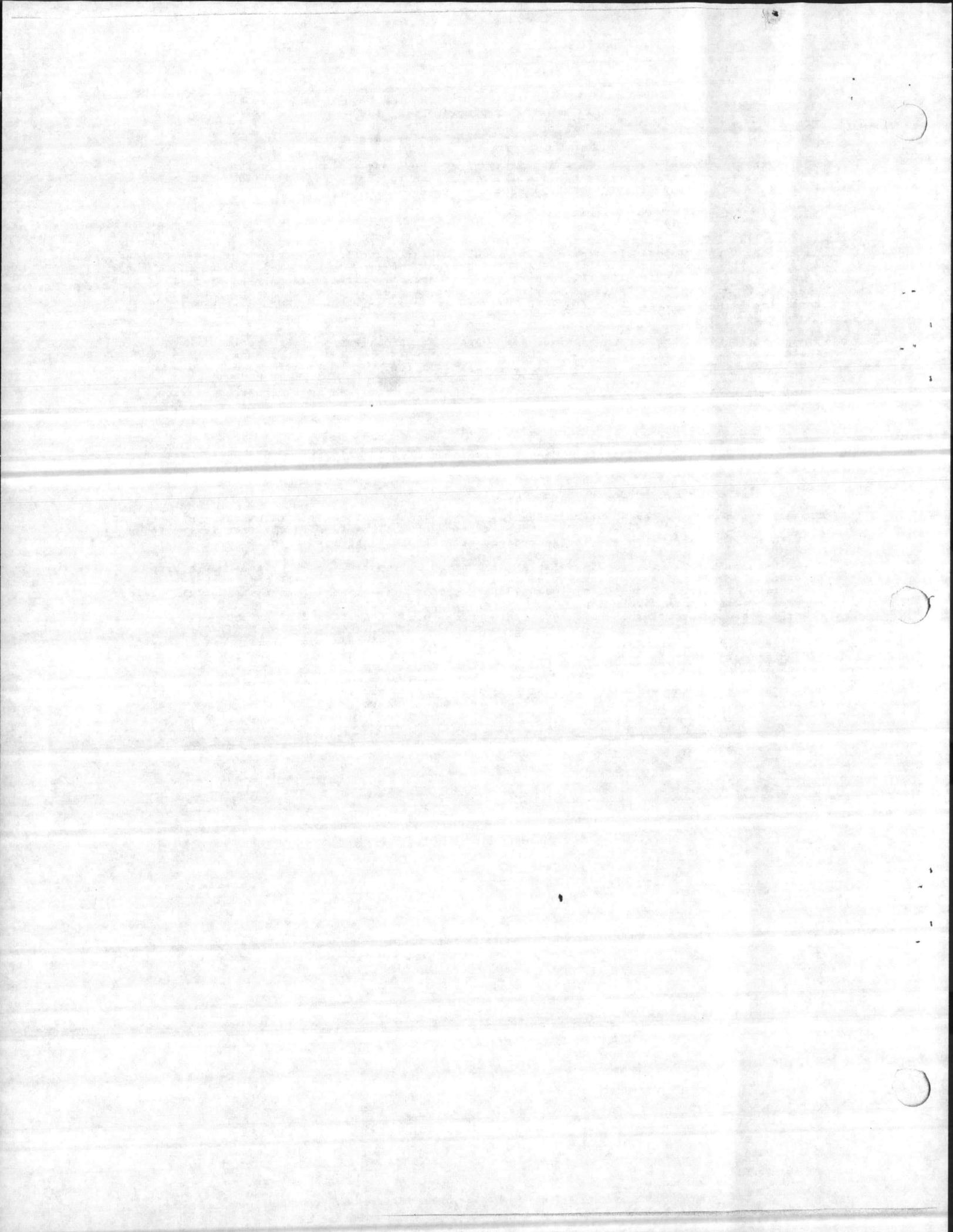
1. All containers of toxic material shall be inspected periodically for leaks by personnel in custody of materials. Contents of leaking containers shall be immediately transferred to new containers and properly labeled in accordance with Chapter 7 of this Order.

2. Personnel handling or working with acids, solvents, vapors, fumes, poisons, or other substances harmful either by ingestion, inhalation, or by contact, shall wear adequate protective clothing and equipment and have the working area properly ventilated. Instructions regarding ventilation may be found in the current edition of ~~NAVMAT P5100~~. Instructions regarding protective clothing and equipment may be found in Chapter 6 of this Order.

307. Installation and Use of Electronics Equipment. Precautions to be followed in order to prevent serious injury or fatal consequences are outlined in the current edition of NAVMAT P5100.

308. The Application of Color to Shore Establishments. The basic uses of color coding for safety purposes are contained in the current edition of NAVFAC P309.

OSHA 29 CFR
1910.94.



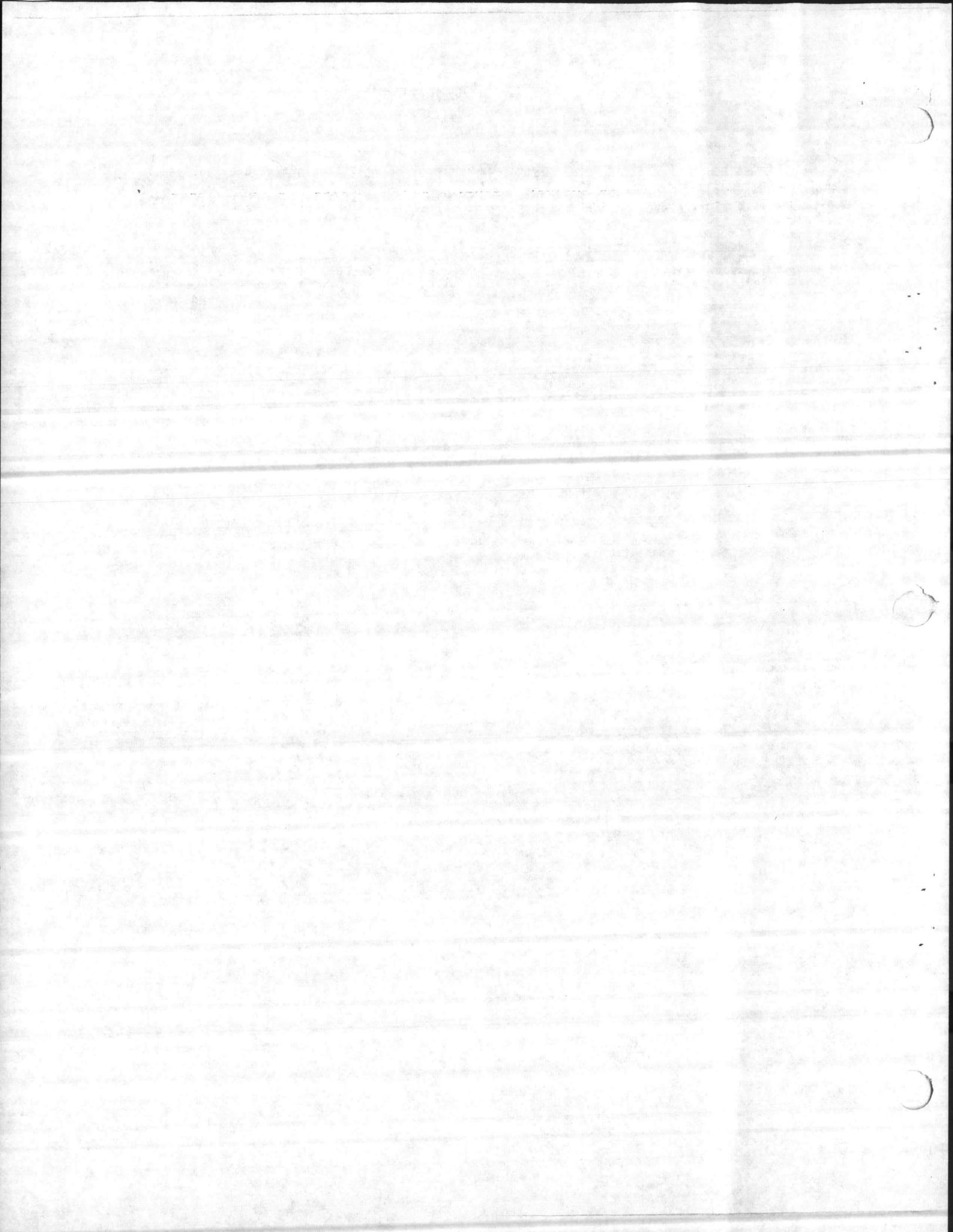
CHAPTER 4

MOTOR VEHICLE ACCIDENT PREVENTION PROGRAM

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401. Enforcement of Traffic Regulations. Enforcement of traffic regulations aboard Marine Corps Base shall be in accordance with the provisions of the current edition of BO 5560.2. ~~Personnel operating vehicles aboard Marine Corps Air Station (Helicopter), New River, shall comply with Station traffic regulations as outlined in the current edition of MCAAS(H)O P5100.12.~~ eh.1

402. Enforcement of Safety Principles and Regulations. Enforcement of safety principles and regulations shall be in compliance with the provisions of the current edition of BO 5101.1 and the responsibility of the Safety Manager, commanding officers, and others charted with this responsibility as specifically outlined in current Marine Corps and Navy safety regulations.





UNITED STATES MARINE CORPS
Marine Corps Base
Camp Lejeune, North Carolina 28542

BO P5100.3F Ch 1
SAFD/RJA/alm
25 Oct 1983

BASE ORDER P5100.3F Ch 1

From: Commanding General
To: Distribution List

Subj: Base Safety Program

Encl: (1) New page inserts to Base Order P5100.3F

1. Purpose. To transmit new page inserts and direct pen changes to the basic Order of 9 March 1981.

2. Action

a. Remove the letterhead page, pages iii, iv, 1-1, 1-2, 1-3, 5-1, 5-2, and replace with corresponding pages contained in the enclosure.

b. Add new Chapter 13 with all new figures contained in the enclosure to this Change

c. Page 2-1, paragraph 202, subparagraph 4, delete "Ground Safety Specialist, Marine Corps Air Station (Helicopter), New River" and add "Safety Officer, Naval Regional Dental Center; Safety Officer, Marine Corps Exchange; Representative, American Federation of Government Employees." Change "Safety Officer, Naval Regional Medical Center" to "Safety Officer, Naval Hospital."

d. Page 2-1, paragraph 205, sixth line, delete "Regional Medical Center" and add "Hospital."

e. Page 2-1, paragraph 206, second line, change "BO 6260.2" to "BO 6260.4."

f. Page 3-1, paragraph 306, subparagraph 2, fourth line, change "NAVMAT P5100" to "OSHA 29 CFR 1910.94."

g. Page 4-1, paragraph 401, delete third, fourth, and fifth lines.

h. Page 6-2, subparagraph (d), second line, change "BO 6260.2" to "BO 6260.4."

i. Page 6-2, paragraph 602, subparagraph 3, delete "Supply Department, AS-130, as appropriate." Subparagraph 5, delete "or Marine Corps Air Station (Helicopter), New River, Building 130." Paragraph 603, delete "or Marine Corps Air Station (Helicopter), New River, Building 130, and/or through the normal supply system."

j. Page 7-1, paragraph 701, subparagraph 3, fourth line, delete "Regional Medical Center" and add "Hospital." Fifth line, delete "S-4 Officer, Marine Corps Air Station (Helicopter), New River." Subparagraph 3d, delete from second line, "and Commanding Officer, Marine Corps Air Station (Helicopter), New River."

k. Page 10-1, paragraph 1001, subparagraph 2, delete "Commanding Officer, Marine Corps Air Station (Helicopter), New River, as appropriate." Paragraph 1003, delete subparagraph 1b; change subparagraph (c) to (b).

l. Page 11-1, paragraph 1102, delete "and Chapters 3 and 4 of the current edition of MCAS(H)O P1710.4C."

m. Page 12-1, paragraph 1201, first line, delete "NAVMAT P-5100."

n. Figure 1, delete "MCAS(H)."

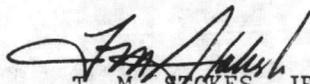
OC P5100.3F Ch 1
25 Oct 1983

o. Figure 8, page 3, paragraphs 1, 2, 3, and 4, delete "NAVMAT P5100 refers."
Page 7, paragraphs 2, 15, and 16, delete "NAVMAT P5100 refers." Page 8, paragraph 1,
delete "NAVMAT P5100 refers." Page 11, paragraph 12, change "man" to "many."

3. Summary of Change. Delete all references to the Marine Corps Air Station and
NAVMAT P5100, and to provide new page inserts and direct pen changes to the basic
Order.

4. Filing Instructions. This change will be filed immediately following the
signature page of the basic order.

5. Certification. Reviewed and approved this date.


T. M. SICKFS, JR.
Chief of Staff

DISTRIBUTION: A plus Base Safety (5)

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Base Safety Program

CHAPTER I

ADMINISTRATION

101. Policy. This command and the personnel thereof are by law committed to a policy of conservation of manpower and material to the maximum degree practicable by the application of a comprehensive and effective accident prevention program. In the accomplishment of this, it is the policy of this command to prevent accidents before they happen by the continuous use of sound and accepted safety practices. This command recognizes its responsibility for the safety of the individual and will exploit every possible means to create safe surroundings. It is also incumbent upon each individual to remain alert and cognizant of his own safety and the safety of his associates.

102. Scope

1. This program applies to safety education and training, industrial motor vehicle accidents, occupational or industrial-type accidents, training accidents, athletic accidents, and off-duty accidents. It further applies to all other accidents caused by equipment or personnel failure resulting in any of the following consequences:

a. Injuries to military personnel, including reserves on active duty, while on or off-duty.

b. Injuries to civilian employees of the Marine Corps (including civilian employees of appropriated and non-appropriated fund activities) when arising out of or in the course of employment.

c. Injuries to non-Marine Corps personnel and damage to property when occurring incident to this activity or on the premises under the control of the Marine Corps (N62470 contracts and N62470 contractor personnel excepted).

d. Injuries to personnel on the base employed by concessionaires.

2. Except as otherwise provided by the Commandant of the Marine Corps, the safety program and procedures established in the current edition of MCO 5100.8 are applicable and will continue in effect.

103. Responsibility

1. There will be one installation-wide safety program constituting the organized effort to keep to a minimum accidents in all operations and activities at Camp Lejeune.

2. In addition, each command located in the physical area of Camp Lejeune and not under the command of the Commanding General, Marine Corps Base, will establish and maintain a command safety program to fulfill its peculiar needs.

3. Commanding officers at every echelon are responsible for incorporating and enforcing safe practices, and establishing and maintaining safe physical standards in all operations, maintenance, and training under their cognizance. They will also, through proper channels, initiate corrective action necessary for the elimination and/or control of all inherent hazards.

4. Commanding officers and supervisors of clubs, cafeterias, special services, exchange activities, etc., will establish and conduct effective safety programs within their activities.

Base Safety Program

5. Public Works Officers and other contracting officers will ensure that all contracts, including N62470 contracts, contain a clause requiring the contractor to observe Marine Corps and Navy safety precautions and regulations, and ensure compliance therewith. N62470 contracts will not be otherwise included in this program.

6. It is the responsibility of all personnel to observe the standards and regulations which are established for the prevention of injury to themselves and others, or damage to property and equipment.

104. Base Safety Manager. The Base Safety Manager will establish, coordinate and administer the overall safety program of this base. He will assume responsibilities as a special staff officer of this command, under the cognizance of the Assistant Chief of Staff, Manpower. The Base Safety Unit, under the direction of the Base Safety Manager, shall render assistance to all commands, organizations and personnel of Camp Lejeune in establishing and conducting an adequate safety program for requirements. This shall include the performance of safety inspections, technical surveys, studies, etc., as required, and to implement and coordinate the Marine Corps Safety Program in accordance with current editions of MCO 5100.8, MCO 5101.8, NAVFAC P-300, MCO 6260.1, BO 6260.4, BO 6260.3, BO 12792.1, BO 11320.1, BO P4600.1, BO P5560.2, BO 12810.1, NAVMC 2692, BO P1710.27, OSHA 2206 (29CFR1910), MCO 5100.19, NAVFAC DM-8, and 49CFR171-179. For organization relationship, see Figure 1.

105. Unit Commanders

1. Establish a procedure for the proper application and determination of accident controls. This will be accomplished with the advice and assistance of safety personnel specialized in the specific technical fields, and in accordance with current Marine Corps directives.

2. Appoint a Unit Safety Officer in accordance with paragraph 106 of this Order. The Unit Safety Officer, at the discretion of the unit commander, may also be assigned responsibility for supervision of special phases of accident prevention, such as traffic safety, electrical safety, industrial, training, recreation, and miscellaneous safety.

3. Prior to assigning personnel safety responsibilities, unit commanders will ensure that safety officers/safety NCO's are oriented regarding safety duties, current policies, regulations, accident reporting procedures, etc., in accordance with the current edition of MCO 5101.8. Assistance and guidance will be provided by contacting the Base Safety Office.

4. Unit commanders will immediately notify their command safety officer, who will notify the Base Safety Manager, telephone 5725 or 3891, when personnel from their command are involved in fatal accidents. Reports will include name/names of deceased, duty or work status, organization, cause, hour, date, location and circumstances, in accordance with the current edition of MCO 5101.8.

5. Submit via the appropriate chain of command, and keep current, a list of appointed safety personnel, indicating name, rank and organization, to the Base Safety Manager to enable personnel of the Base Safety Office to contact such personnel and render assistance as needed.

106. Safety Officers

1. One safety officer shall be appointed in the 2d Marine Division, FMF, and one in 2d Force Service Support Group (Rein), FMF, Atlantic. One Unit Safety Officer and NCO

Base Safety Program

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shall be appointed in each subordinate regiment, battalion, or smaller separately administered unit of the 2d Marine Division, FMF; 2d Force Service Support Group (Rein), FMF, Atlantic, Marine Corps Base; and other specialized activities as deemed necessary.

2. The organizational safety officer will be responsible to the commanding officer for the safety program within his organization and for the supervision and execution of required reports as defined in this Order.

107. Supervisors

1. All levels of supervision, military and civilian, will act directly to eliminate all observed accident hazards existing within the activity over which they have jurisdiction.

2. Notify the Base Safety Manager immediately when accidents resulting in disabling injuries or death or damage to equipment occur, in accordance with the current edition of MCO 5101.8.

3. Prepare necessary accident reports as required by appropriate orders and instructions.

108. The Assistant Chief of Staff, Manpower, Marine Corps Base. Responsibility for submitting monthly strength reports to the Base Safety Manager rests with the Assistant Chief of Staff, Manpower, Marine Corps Base.

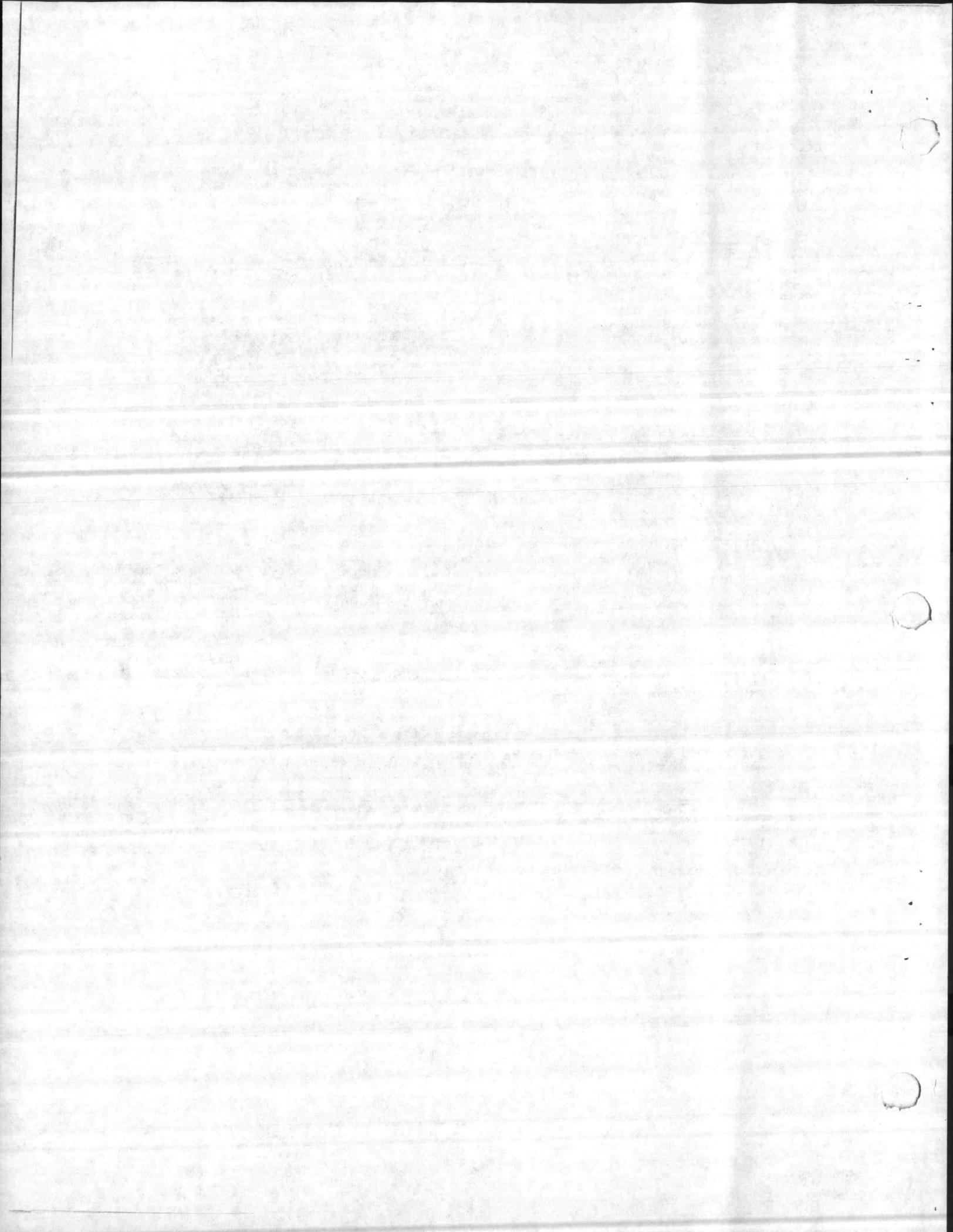
109. The Commanding Officer, Naval Hospital. Routine morning reports will be made available to the Base Safety Manager by the Commanding Officer, Naval Hospital.

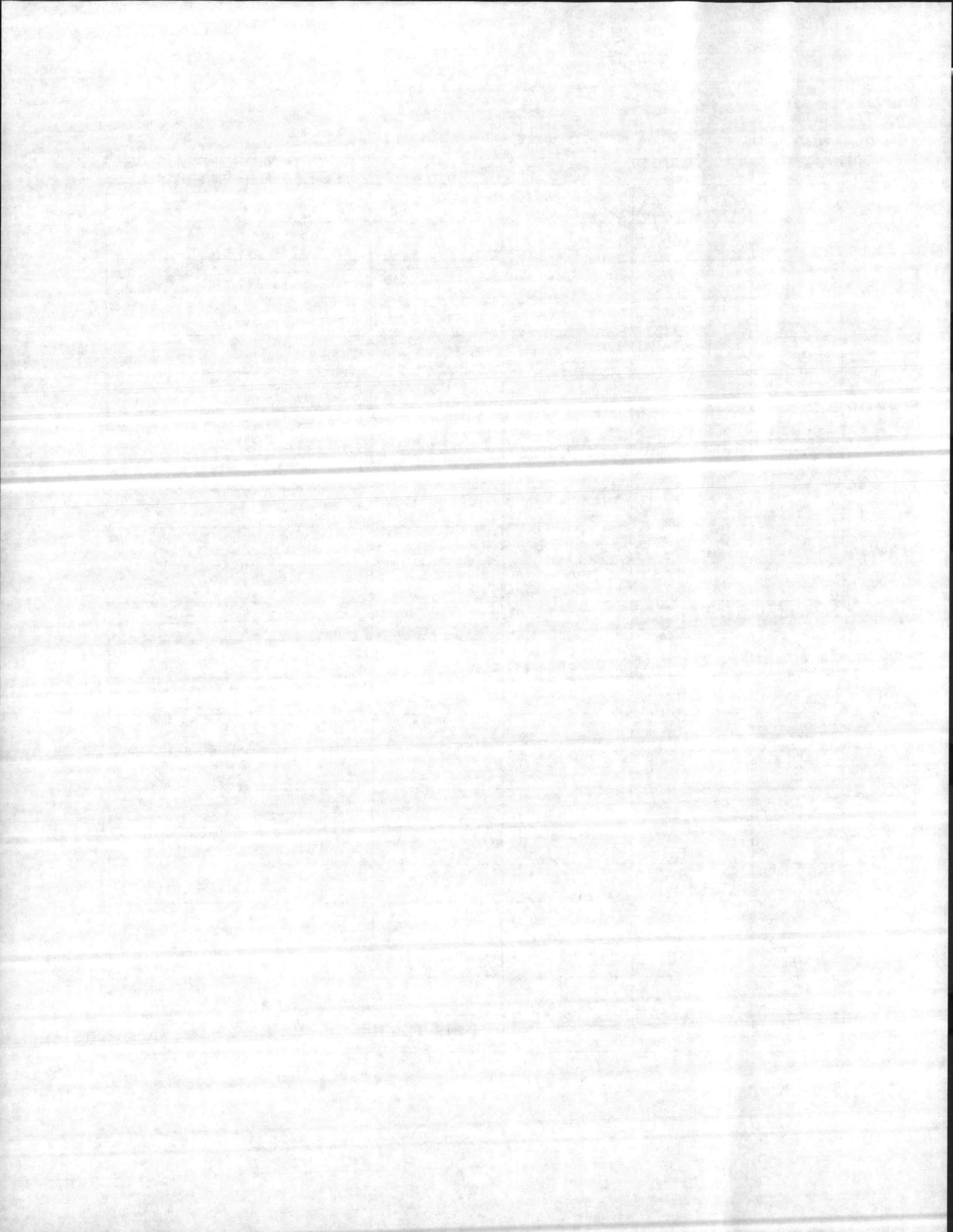
110. The Assistant Chief of Staff, Personnel Services, shall submit quarterly reports to the Base Safety Manager, prior to 1630 on the fifth calendar day after the close of the calendar quarter, reflecting all occupational accident experience and the total number of occupational man-hours worked by all direct-hire civilian employees paid from Marine Corps and non-appropriated funds, and the total number of miles driven in all government-owned or leased vehicles under the cognizance of non-appropriated fund activities.

111. The Assistant Chief of Staff, Comptroller. Quarterly reports shall be submitted to the Base Safety Manager by the Assistant Chief of Staff, Comptroller, prior to 1630 on the fifth calendar day after the close of the calendar quarter, reflecting the total number of occupational man-hours expended by civil service employees.

112. The Base Motor Transport Officer. Monthly reports shall be furnished the Base Safety Manager by the Base Motor Transport Officer, prior to 1630 on the tenth calendar day after the close of the calendar month, reflecting the number of miles driven in government-owned or leased commercial vehicles assigned to Marine Corps Base.

113. The Commanding Officers of Marine Corps Service Support Schools and Reserve Support Unit, Marine Corps Base. Monthly reports shall be submitted to the Base Safety Manager by the Commanding Officers of Marine Corps Service Support Schools and Reserve Support Unit, prior to 1630 on the fifth calendar day after the close of the calendar month reflecting the total number of miles driven in government-owned or leased tactical vehicles assigned to Marine Corps Base.





Base Safety Program

CHAPTER 5

INVESTIGATIONS AND REPORTS

501. Reports. In order to evaluate injuries and accidents, it is necessary that reports include how the accidents occurred, what caused them, and how they could have been avoided. This information is required to evaluate injuries and accidents for consolidation and study. The following reports shall be submitted on the occasions indicated.

502. Injuries to Military, Civil Service and Other Civilian Personnel

1. Emergency Care and Treatment Report, SF-558, shall be utilized by medical facilities, for reporting injuries treated, and a copy will be forwarded to commanding officers and the Base Safety Manager. An example of the Emergency Care and Treatment Report is contained in Figure 2.

2. Occupational Health Permit, MCBCL 5100/3, shall be made out by the immediate supervisor on all injured civilian (civil service) employees electing treatment by a Federal Medical Officer. Employees will report to the Occupational Nurse or the Chief of Dispensary Services for treatment. Occupational Health Permit will be completed in triplicate as illustrated in Figure 3. Upon completion of treatment, the original copy of the Occupational Health Permit shall be returned to the immediate supervisor, one copy to Civilian Personnel, and one copy to the Base Safety Office.

3. NAVMC 10767 (Mishap and Injury Report) shall be prepared by the immediate supervisor, reviewed and initialed by the Safety Officer or NCO, and approved by the department head on all accidents involving military, civil service, or other civilian personnel as follows:

a. When military personnel suffer a fatality, a disabling injury (on or off-duty) which results in their absence from duty or inability to return to duty or when placed on restricted or light duty on any full day or any full shift following the day of injury.

b. When civil service, or other civilian personnel suffer a fatality or sustain an occupational injury while in the performance of duty and are unable to return to duty or when placed on restricted or light duty on the day following the day of injury.

c. When the total cost of property damage paid by the government resulted from accidents with property damage of \$500 or more. The exact cost should be used, but when the cost cannot be determined within the time limit of this report period, reasonable estimates shall be made.

d. The original and one copy of the report will be forwarded to the Base Safety Office within five days after the accident occurs.

e. Detailed instructions are contained in MCO 5101.8D, enclosure (4). A sample of NAVMC 10767 is contained in Figure 4.

4. Consolidated Accident Report, NAVMC 10323:

a. As required by the current edition of MCO 5101.8, a Consolidated Accident Report, NAVMC 10323, shall be submitted quarterly by Marine Corps Base to the Commanding General, Marine Corps Development and Education Command, Quantico, Virginia 22134, Attention: Command Safety Office, Building 3035, Code C051-2, within 20 days following the last day of each quarter. A copy of NAVMC 10323 shall also be submitted to the Commandant of the Marine Corps, Code MPH-70, Washington, D. C. 20380.

b. Detailed instructions for the preparation of NAVMC 10323 are contained in the current edition of MCO 5101.8.

5. Occupational Injuries and Illnesses Report, OPNAV 5100/5:

a. As required by the current edition of MCO 5101.8, separate OPNAV 5100/5 reports for civilian and military personnel sustaining occupational injuries and illnesses shall be submitted quarterly by Marine Corps Base to the Commanding General, Marine Corps Development and Education Command, Quantico, Virginia 22134, Attention: Command Safety Office, Building 3035, Code CO51-2, within 20 days following the last day of the quarter. A copy of OPNAV 5100/5, Occupational Injuries and Illnesses, shall be submitted to the Commandant of the Marine Corps, Code MPH-70, Washington, D. C. 20380.

b. Detailed instructions for the preparation of OPNAV 5100/5 are contained in the current edition of MCO 5101.8.

c. A separate report for civilian and military personnel shall be consolidated annually from the four quarterly reports of Occupational Injuries and Illnesses, OPNAV 5100/5, and posted in a conspicuous location at the end of the calendar year, no later than 45 days after the close of the calendar year and left in place for at least 30 days.

503. Other Requirements. In addition to the requirements contained in this Base Order incident to the occupational injury of a Federal employee, the current edition of BO 12810.1 also contains certain required actions incident to the Base Safety Program.

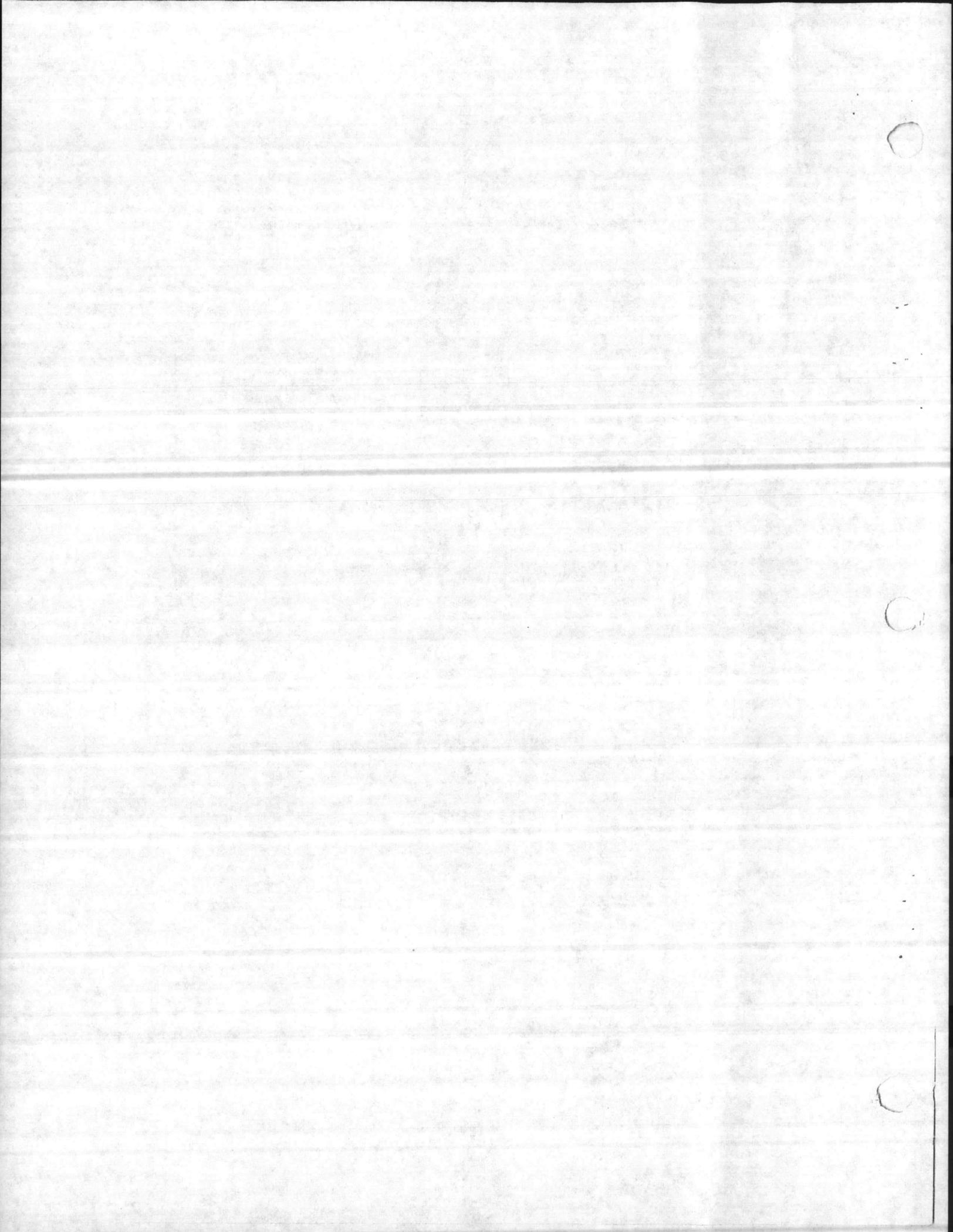
BASE SAFETY PROGRAM

CHAPTER 13

FIGURES

1300. Figure 13-1 through 13-8 are a total assortment of illustrational Charts, Reports, Forms and inspection checklists to further promulgate the procedures and policies for execution of the Base Safety Program.

Ch 1 (25 Oct 1983)



CHAPTER 6

PERSONAL PROTECTIVE EQUIPMENT

601. General. Personal protective equipment is furnished for the express purpose of preventing injuries to employees working in hazardous areas and/or occupations. The areas of such hazards, including occupations involving personal hazards, are determined by careful study of accident records and local conditions and are divided into two groups:

1. Those areas or occupations wherein workers or visitors are subject to the possibility of injury resulting from falling objects, moving equipment or the inherent dangers of operating power machinery, are designated as hazardous areas or hazardous occupations. Such areas must be clearly indicated as set forth in the current edition of BO 12792.1.
2. Certain areas or occupations create a hazard to the workers' eyes. These include occupations or operations involving chipping, grinding, cutting, and other instances in which there is a possibility or probability of flying chips, clinkers, or other matter which could be injurious to an individual's eyes. In these cases, the employee must be required to wear safety eyewear of the impact-resistant type appropriate to the occupation or operation. In addition, many other occupations or operations expose the employee to concentrated dust or abrasives, splashing chemicals or acids, bright flashes, or surges of light, and other hazardous materials injurious to the eyes but not of high impact nature. In these cases, protective eyewear must be worn, but the impact-resistant type is not a requirement. Eye hazardous areas will be identified by signs as indicated in the current edition of NAVFAC P309.
3. The responsibility for designating a hazardous area, either personal injury or eye hazardous, rests jointly with the supervisor of the area and the Base Safety Manager (Division Safety Officer in 2d Marine Division shops and areas, and 2d Force Service Support Group (Rein) Safety Officer in 2d Force Service Support Group (Rein) shops.) Personal protective equipment required in each area or case shall be designated within this responsibility and the enforcement of safety procedures/precautions and personal protective equipment requirements will be the responsibility of the supervisor.
 - a. No specific standard can be established for all cases in designating areas of occupational or operational hazards; therefore, each area or case must be determined on its own degree of hazard.
 - b. In the course of routine inspections of the base by representatives of the Base Safety Office, 2d Marine Division, or the 2d Force Service Support Group (Rein) organizations, occupations and areas may be noted which should be designated as hazardous and personal protective equipment specified.
4. Personal protective equipment is varied in its applicability to various occupations and conditions. Care must be exercised to specify equipment which will adequately protect the individual while not unduly restricting his ability to perform all assigned tasks. Personal protective equipment will be of a quality commensurate with recommendations contained in the current edition of NAVMAT P10470. Instructions to supervisors shall be given by competent, authorized personnel from the Base Safety Office regarding the proper use of various protective devices. The supervisors, in turn, will instruct their men. The instructions shall include:
 - a. An explanation of the need for the device
 - b. Its operating principle
 - c. Steps to be taken to assure it is in good operating condition
 - d. Proper adjustment to the wearer
 - e. Proper use and maintenance of equipment.
5. The following is an outline of protective equipment available:
 - a. Protective footwear, such as safety shoes, shin guards, etc., are designed for use where a possibility of injury to the feet exists. Toe guards are no longer acceptable substitutes for the issuance of permanent safety shoes; however, in cases where foot protection is necessary on a temporary basis, toe guards may be issued as an interim measure for the protection of personnel. Protective footwear is divided into groups according to the degree of foot hazard as illustrated in Figure 5. Supervisors, equipment operators, and inspectors are not required to wear foot protection unless they physically work in the area or handle material.
 - b. Protective headwear, commonly called "hard hats," is designed for areas or occupations involving danger of injury from flying, falling, or swinging objects and from bumping the head against objects. There are many and varied types for various operations encountered in industrial areas, as illustrated in Figure 5.

c. As in the case of personal protective equipment, protective eyewear is divided into groups according to the degree of eye hazard. The current edition of MCO 5100.8 sets forth the requirements for protective eyewear. (Illustrations are shown in Figure 5.)

d. Hearing protection shall be provided in accordance with the current editions of MCO 6260.1, BO 6260.2 and BO 6260.3.

e. In addition to the safety footwear, headwear, eyewear and hearing protection described above, the following items are available to personnel engaged in hazardous areas of occupations as appropriate. These items are available through the Self-Service Center, Building 1606:

- (1) Respirators (NIOSH/MSA approved)
- (2) Protective creams
- (3) Gloves
- (4) Aprons, etc.

6. Personal Protective Equipment Chart, Figure 5, sets forth a guide in establishing the appropriate personal protective equipment for various operations. This chart is intended as a guide only, and is not the final authority in all cases listed. Each individual case, area, or operation must be determined on its own merit. This determination is the joint responsibility of the employee, supervisor and the Base, 2d Marine Division, or 2d Force Service Support Group Safety Officers.

602. Procurement

1. Safety shoes for supervisors and officer personnel must be procured at the individual's expense, unless those individuals physically work in a designated foot hazardous area or handle material.

2. Because of the specific nature of the hazards encountered, special safety footwear shall be provided for electricians, refrigeration mechanics, ordnancemen, and forestry technicians. Shoes may be purchased through local shoe and department stores.

3. Safety shoes for military enlisted and civilian personnel must be procured through normal supply channels. Safety shoes are found in Self-Service Center, Building 1606, or ~~Supply Department, AS-130, as appropriate,~~ for try-on purposes. Information regarding procurement is also available through those sources.

4. Rubber or synthetic material safety toe boots are used for protection against acids, caustic and other liquid chemical hazards. Requests for this type boot will be forwarded to Commandant of the Marine Corps (Code LMC). These requests will specify the type of hazard involved and the initial and replacement quantities for the item required.

5. Other personal protective equipment, except corrective safety glasses, may be procured for civilian employees through the Self-Service Center, Building 1606, ~~or Marine Corps Air Station (Helicopter), New River, Building 130.~~

6. If in doubt as to the proper protective equipment to be used, contact the Base Safety Office, Building 1403, for assistance.

603. Exchange of Unserviceable Items. All items of personal protective equipment (excluding corrective safety eyewear) worn out in service or otherwise rendered unserviceable other than those items normally expended in use; i.e., filter pads, liquids, suspension, etc., will be exchanged or replaced as needed at Self-Service Center, Building 1606, or Marine Corps Air Station (Helicopter), New River, Building 130, and/or through the normal supply system.

604. Care and Maintenance

1. Recipients of personal protective equipment are responsible for its proper care, cleaning, and maintenance. Negligent loss or destruction may subject the individual to disciplinary action.

2. Every effort shall be made to impress upon the individual that the safety glasses provided are for his protection. Protective-corrective eyewear prepared from the prescription of one person is not medically appropriate for reissuance to another person. Reclamation of such eyewear is not economically practical. For personnel who are retiring, resigning or otherwise separating from service, their protective-corrective eyewear may be assumed to be an expendable item which has served its useful life cycle.

CHAPTER 7

LABELING TOXIC, INFLAMMABLE, CHEMICAL, AND OTHER HAZARDOUS MATERIALS701. Labeling of Toxic, Inflammable, Chemical, and Other Hazardous Materials

1. The rapid development of new chemical products and the introduction of new chemical processes make it mandatory that precautionary measures be taken during the handling of toxic and dangerous chemicals. Warning labels affixed to containers of hazardous chemicals are one of the most practical means of accomplishing this objective.

2. This chapter applies to the labeling of all hazardous chemicals and materials at this activity where distribution is made to the actual consumer (shop, office, or unit), and governs labeling of materials received from any supply source if such material is intended for use at this activity. It refers to labeling of the original containers as well as any other containers to which the material may subsequently be transferred. The following categories of labels are not covered by this chapter:

a. Materials being held in storage for reshipment shall be labeled to comply with state and federal laws depending upon the nature of the material and whether the shipment is interstate or intrastate. In addition, procurement specifications require that materials be labeled in accordance with the Warning Labels Guide published by the Manufacturing Chemists' Association.

b. Chemicals and drugs used or dispensed by Medical Department pharmacies and chemicals used by clinical or chemical laboratories which may be waived will be designated by directives from various bureaus, offices, and Marine Corps Headquarters.

c. Explosives, fuels, and compressed gases are adequately covered by current Orders.

3. A Hazardous Material Control Committee is established under this Order. Membership will consist of the Assistant Chief of Staff, Logistics, who will act in the capacity of Chairman; representatives will be the Base Safety Manager, Base Fire Chief, Base Director of Natural Resources and Environmental Affairs Division, ~~Naval Regional Medical Center Industrial Hygienist, S-4 Officer, Marine Corps Air Station (Helicopter), New River,~~ and such other members as may be authorized by the Commanding General. The Committee shall meet at the call of the Chairman. Hospital

a. The Hazardous Material Control Committee will administer the technical phases of the labeling program and will maintain a current labeling guide for hazardous chemicals and materials used throughout this activity.

b. Assistant Chief of Staff, Logistics shall be responsible for the labeling of outside containers of hazardous materials upon receipt. If outside containers are opened for stock or issue, all inner containers therein will be labeled.

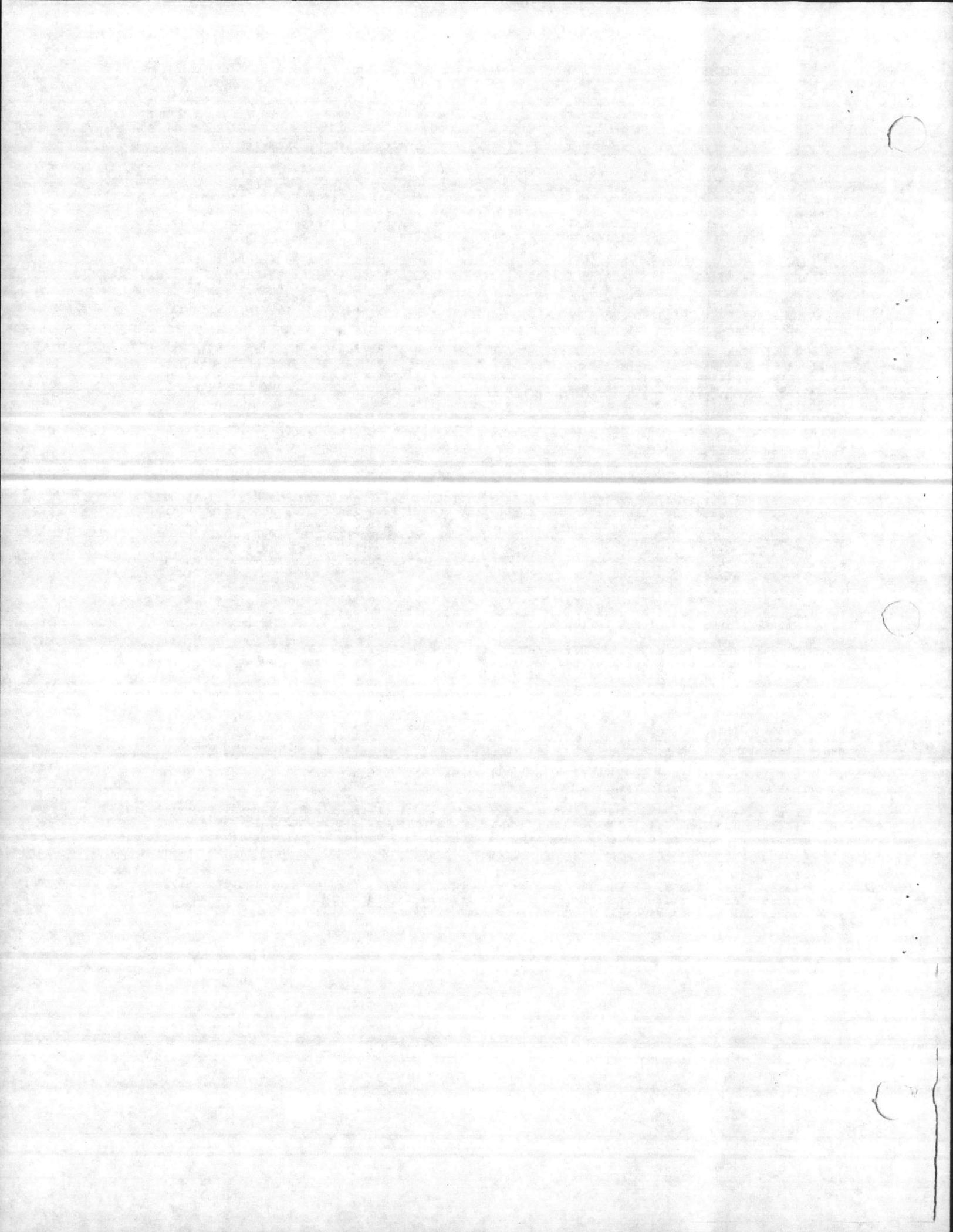
c. Commanding Officer, all Marine Corps Base Units, will:

(1) Be responsible for the proper labeling of any containers to which hazardous materials may be transferred after initial issue by Support Division, Assistant Chief of Staff, Logistics.

(2) Conduct necessary instructional programs to thoroughly familiarize unit personnel with the labeling program.

d. Commanding Generals, 2d Marine Division, FMF, and 2d Force Service Support Group (Rein), FMF, Atlantic ~~and Commanding Offices, Marine Corps Air Station (Helicopter), New River,~~ will take appropriate action to ensure compliance with the provisions of the Code of Federal Regulations, Title 49, Parts 171-179, with respect to labeling of hazardous materials by elements of their commands.

4. Pressure sensitive paper labels in accordance with the specified hazard classifications are available at the Self-Service Center. Their form numbers and ordering information are given in NAVSANDA Publication 2002, Navy Stock List of Forms and Publications.



EMPLOYEE REPORTS OF UNSAFE OR UNHEALTHFUL WORKING CONDITIONS

801. General. This chapter outlines instructions for the submission, evaluation, and appeal procedures for reports of unsafe or unhealthful working conditions by Marine Corps personnel.

1. Commanding officers shall assure prompt attention to reports by employees of unsafe or unhealthful working conditions and will assure prompt abatement of those conditions. Many safety and occupational health problems can be eliminated as soon as they are identified; documenting the problems is intended to supplement oral reports of unsafe conditions made by employees to their supervisors, not replace them.

2. The prevention of accidents, injuries and occupational illnesses is the primary objective of the Marine Corps Occupational Safety and Health Program. Detection of unsafe or unhealthful working conditions at the earliest possible level is an essential element of accident prevention. Supervisors shall encourage Marine Corps personnel, military and civilian, to report all unsafe or unhealthful working conditions; shall ensure prompt investigation and response to all such reports; and shall implement the procedures for appeal to higher authority as outlined below.

802. Initial Reports and Actions

1. Any employee, or representative of such employee, who observes an unsafe or unhealthful working practice or condition, or a violation of a safety or health standard, should orally advise the workplace supervisor of the condition. In lieu of orally reporting a deficiency to their supervisors, employees desiring anonymity may file a written report with the installation safety and health official. This official shall delete the employee's name and refer the matter to the workplace supervisor for appropriate action. Figure 6 is a sample form which will be utilized by civilian employees for reporting unsafe or unhealthful working conditions.

2. Upon receipt of a report, the designated safety and health official will verify the reported condition and will notify the workplace supervisor, who shall initiate appropriate corrective action. Inspections and investigations, as appropriate, shall then be conducted by the safety office to determine if a hazard exists.

3. Within five working days after notification, the workplace supervisor shall advise the command safety office in writing, via the cognizant department head (or equivalent) of what corrective action has been taken.

4. The originator of the report shall be notified in writing within 10 working days of action taken regarding the reported condition. This notification shall be signed by the installation commanding officer or deputy. If the 10-workday suspense cannot be met for any reason, an interim reply shall be made to the originator of the report.

5. If the safety officer determines that the reported condition is not unsafe or unhealthful, the originator of the report shall be advised within 10 working days by letter. This notification shall be signed by the installation commanding officer, or deputy, and will contain the rationale for the determination.

803. Appeals. If the originator of a report is dissatisfied with the determination made by the commanding officer, that person shall be encouraged to confer with the head of the safety office to discuss the matter further and attempt a resolution at the local level. If dissatisfaction still exists, the originator is authorized to submit an appeal following the procedures as set forth in the current edition of MCO 5100.8.

804. Stopping of Work. In all "Imminent Danger" situations, as defined in enclosure (7) of MCO 5100.8E and verified by the activity safety officer, the appropriate management official shall stop all work, withdraw employees, and initiate immediate abatement action.

805. Posting of Notices. In all cases where employees are exposed to unsafe or unhealthful conditions which are defined and verified by the safety office as being "Serious," as defined in enclosure (7) of MCO 5100.8E, a Notice of Unsafe or Unhealthful Working Conditions, signed by the commanding officer, shall be posted by the workplace supervisor in the immediate vicinity of the hazardous condition. Figure 7 is a sample form which will be utilized by the safety office for this requirement. Information on abatement actions may also be posted. These notices shall not be removed until the condition has been corrected or for three days, whichever is later.

806. Activity Responsibilities. To minimize the necessity for employees to resort to written reports or appeal procedures, all commanding officers shall:

Base Safety Program

1. Ensure that all management and supervisory personnel are clearly apprised of their responsibility for initiating prompt corrective action of unsafe or unhealthful conditions existing within their areas of authority and for initiating work stoppage where "Imminent Danger" situations are determined to exist.

2. Apprise immediate superiors of "Imminent Danger" or "Serious" situations which are outside the activity's capability to correct.

807. Retention of Records. Copies of reports and records of action shall be retained for five years following the end of the calendar year to which they relate.

808. Content of Instructions to Employees. In addition to the posting of notices of unsafe or unhealthful working conditions, all activities shall develop and post in conspicuous places the instructions and procedures to be followed in reporting such conditions. The instructions to be posted for employees' information shall include statements which:

1. Encourage employee participation in prompt identification and reporting of unsafe or unhealthful working conditions.

2. Encourage oral reports by employees to workplace supervisors for the purpose of identifying hazardous conditions. Specify that such reports may also be made in writing.

3. Set forth step-by-step reporting and appeal procedures.

4. Emphasize strict adherence to the specified reporting procedures. Emphasize that reports which bypass the established procedures will be returned to the originator, thereby delaying prompt action on the report.

5. Assure employees they may make anonymous written reports to the installation safety office and that these reports will be treated in the same manner as those in which the originator is identified.

6. Protect the identity of the person making the report if that person so desires.

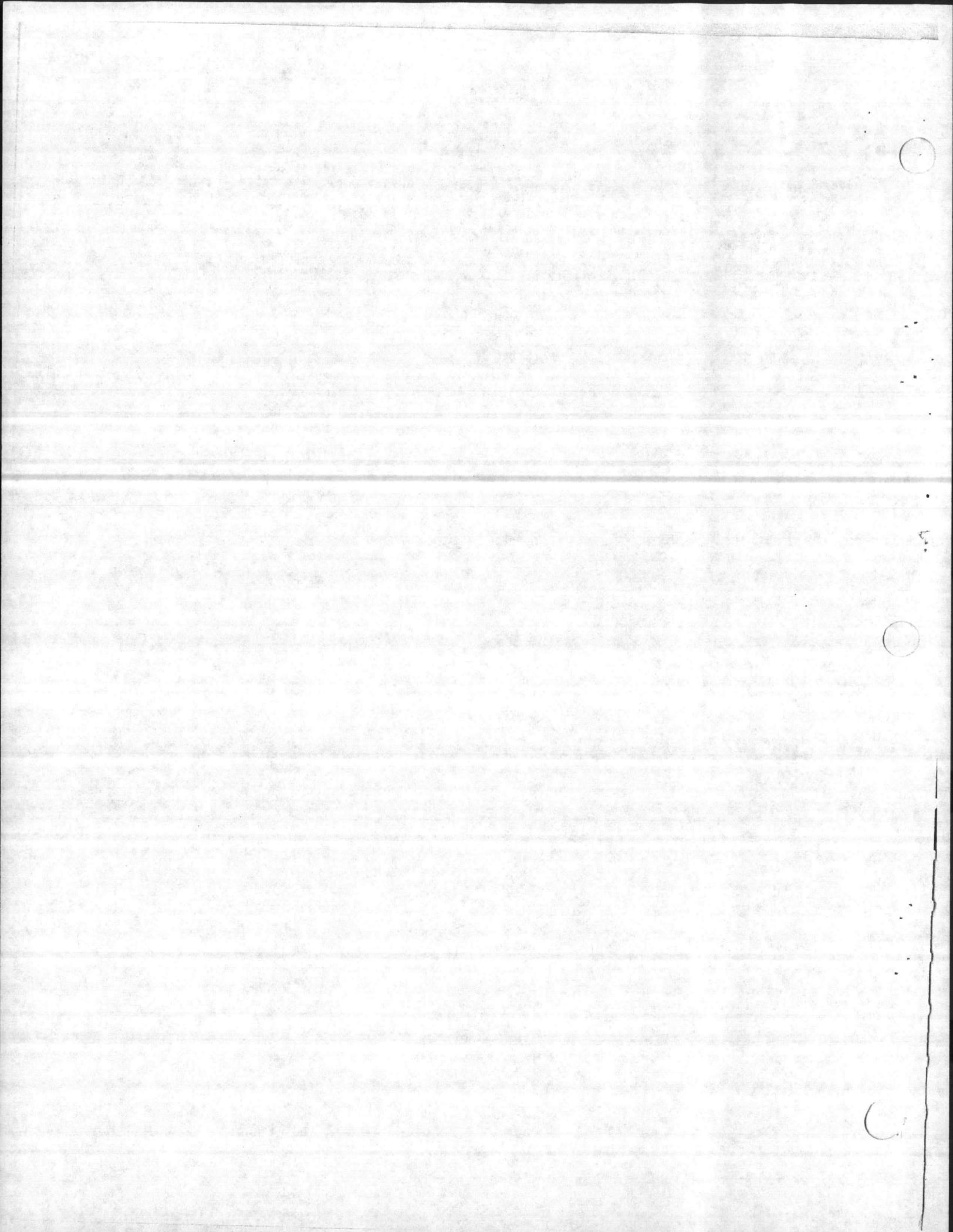
7. Clearly state that no reprisals or other punitive action will be taken against any employee originating a report.

809. Grievance Procedures. Nothing in this chapter is intended to interfere in any way with the prior, simultaneous or subsequent use by any employee of established grievance procedures as a means of requesting correction of alleged unsafe or unhealthful working conditions.

CHAPTER 9

SAFETY AWARDS

901. Safety Awards. Safety awards are designed to recognize individuals or groups which, through careful attention to the performance of assigned duties, prudent observance of safety rules and practices, or vigilant administration or supervision of hazardous work, attain excellent records in safety. Safety awards will be issued to eligible personnel in accordance with provisions set forth in the current edition of OPNAV 5100.16 and MCO P5100.22, which include: Secretary of the Navy Award; Department of the Navy Accident Prevention Awards; Department of the Navy Accident Prevention Awards (Supervisor); Certificate of Commendation, 10 years (Supervisor); Secretary of the Navy Certificate of Commendation, 15 Years (Supervisor); Navy Safe Driving Awards; and Materials Handling and Construction Equipment Operator's Safety Awards.



CHAPTER 10

SAFETY INSPECTIONS1001. General

1. The primary purpose of safety inspections is to uncover unsafe acts or unsafe conditions which might cause accidents. Whenever possible, minor hazards when found will be corrected immediately by informal recommendations to the responsible commander or supervisor.
2. Unsafe acts or conditions which require corrective action will be referred to higher authority, with a copy to the Commanding General, Marine Corps Base/~~Commanding Officer, Marine Corps Air Station (Helicopter), New River, as appropriate.~~

1002. Inspection Personnel

1. Safety inspections will be conducted by commanders, safety officers, safety NCO's, supervisors, maintenance personnel, and other qualified specialists. The Base Safety Manager will assign adequate safety inspectors to supervise the Command's Safety Inspection Program.
2. Inspection committees will be formed as a means of obtaining greater participation in the safety effort by unit personnel.
3. All personnel conducting safety inspections will be properly trained in locating hazards and should be familiar with Navy and Marine Corps publications establishing safety criteria for the specific operation or activity being inspected. The Base Safety Manager will assist in arranging for such training as is required.

1003. Types of Safety Inspections

1. There are two general types of safety inspections:

- a. A one call inspection will be conducted at random in each base activity in accordance with the established Management Evaluation Program (MEP) at a time mutually agreed upon by the activity concerned and the Base Safety Manager.

~~b. A one call inspection will be conducted at random in each Marine Corps Air Station (Helicopter), New River, activity at a time specified by the unit concerned.~~

- c. Continuing Intra-Organizational Inspection. Each unit, installation, or activity requires periodic safety inspections applicable to local requirements and are scheduled accordingly.

(1) Continuing Type of Inspection. The unit safety officer is concerned primarily with the continuing type of inspection. Special emphasis should be placed on correcting hazardous conditions and activities. The establishment of an effective, continuing inspection system requires consideration of the following factors:

- (a) What is to be inspected?
- (b) How often is each piece of equipment, operation or area to be inspected?
- (c) Who is to conduct the inspection?
- (d) Who is to supervise the inspection activities?
- (e) What reports and records will be needed?
- (f) What provision should be made for corrective action?

(2) The unit safety officer should request periodic inspections of certain phases of the unit activity by personnel from the Base Safety Office to bring a fresh approach to the safety inspection process.

1004. Inspection Checklists. Inspections should be carefully planned to cover all activities in the organization. A suitable checklist should be used as an inspection guide for each activity. Safety checklists covering the various safety requirements for each activity are available at the Base Safety Office. Figure 8 contains some recommended safety inspection checklist items. These may be reproduced locally and should be used together with the safety criteria contained in appropriate Marine Corps publications (current edition of NAVMC 2692).

1005. Inspection Records

1. During inspection, record unsafe conditions or practices. This information will be the basis for the complete inspection report.
2. Each unit, installation and activity shall maintain a record of inspections to include the following information.

Base Safety Program

- a. Date and type of inspection (by Safety Manager, Safety Officer, Safety NCO, Safety Committee, Safety Inspector).
- b. Hazards uncovered by the inspection and action recommended or taken to correct deficiencies.

1006. Conducting Safety Inspections

1. Inspections should be planned and scheduled to make the most effective use of safety personnel and time. Consideration should be given to inspecting an activity at such time as will minimize disruption of normal operations. Pre-IG Inspections should be scheduled no later than 30 days prior to the inspection date in order to allow corrective measures to be instrumented.
2. Special inspections will be conducted to cover the installation of new equipment, establishment of new procedures, relocation or revision of operations, and similar modifications. Special inspections are often necessary after an accident to ensure adequacy of corrective action to eliminate hazards and to determine if new hazards have developed.
3. In reporting his findings to the commanding officer or supervisor of the activity being inspected, the safety inspector must ensure that the commanding officer or supervisor understands the safety value of the inspector's recommendations. Recommendations for accident prevention measures or removal of hazards should be related to this mission.
4. Findings will be made available to the commanding officer of the unit being inspected for his use in improving safety in that unit.
5. A copy of findings will be forwarded to the Base Safety Office for accident prevention analysis.

1007. Applicability

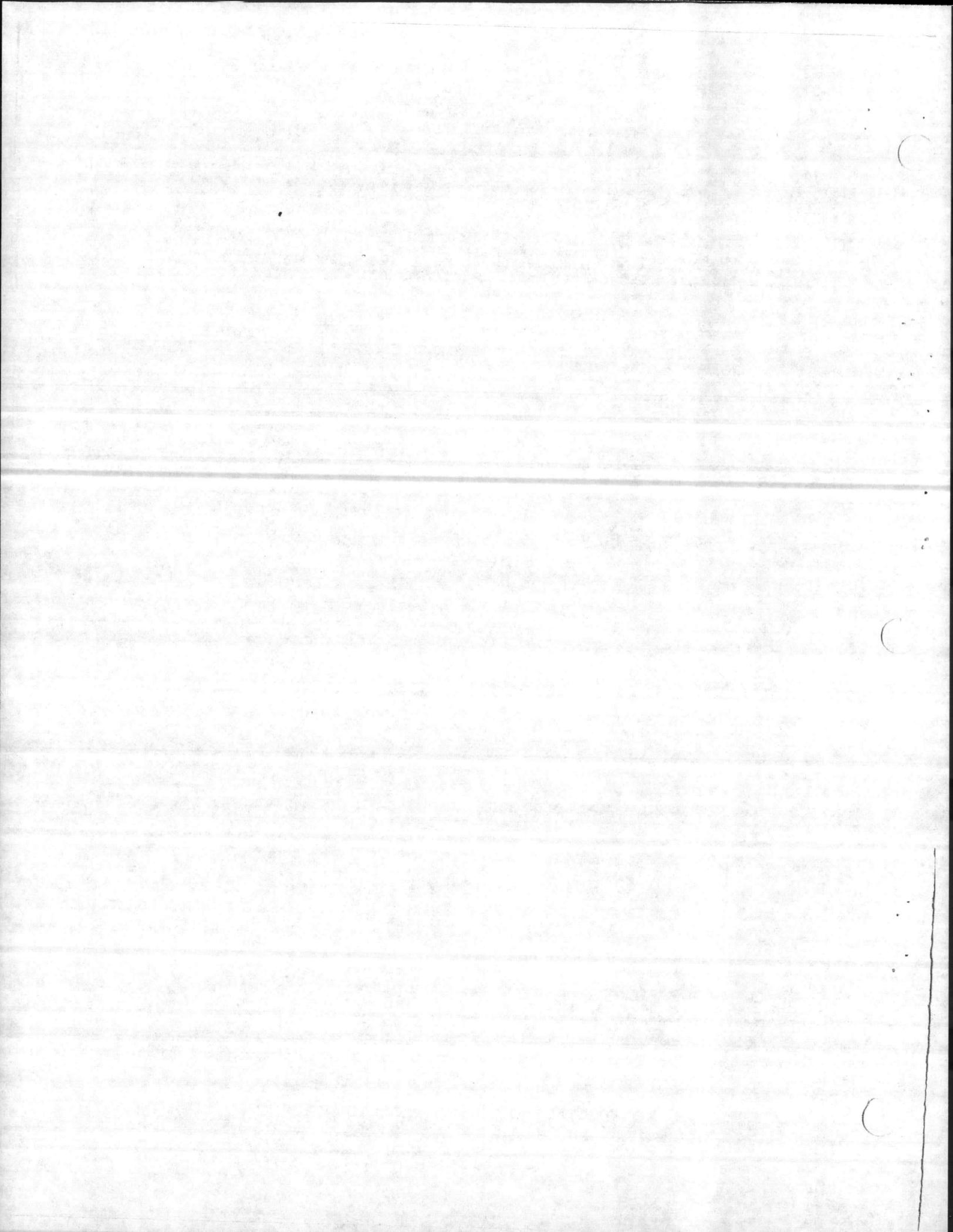
1. There will be one installation-wide safety inspection program constituting the organized effort to keep to a minimum accidents in all operations and activities located at Camp Lejeune.
2. In addition, each command located in the physical area of Camp Lejeune, and not under the command of the Commanding General, Marine Corps Base, will establish and maintain a "Command Safety Inspection Program" to fulfill its peculiar needs.

CHAPTER 11

SPORTS AND RECREATIONAL ACTIVITIES

1101. General. Recreational accidents may effectively be reduced by using proven administrative controls, exercising sound leadership and supervision, and maintaining adequate equipment and facilities. Also, the physical condition of participants must be taken into consideration.

1102. Duties and Responsibilities. Physical training and special services officers should exercise sound leadership and supervision, exercise controls of facilities and equipment, physical condition of participants, etc. Each person engaged in recreational activities is responsible for conformance with current edition of MCO 5100.8 ~~and Chapters 3 and 4 of the current edition of MCAS(H)O P1710.4C.~~

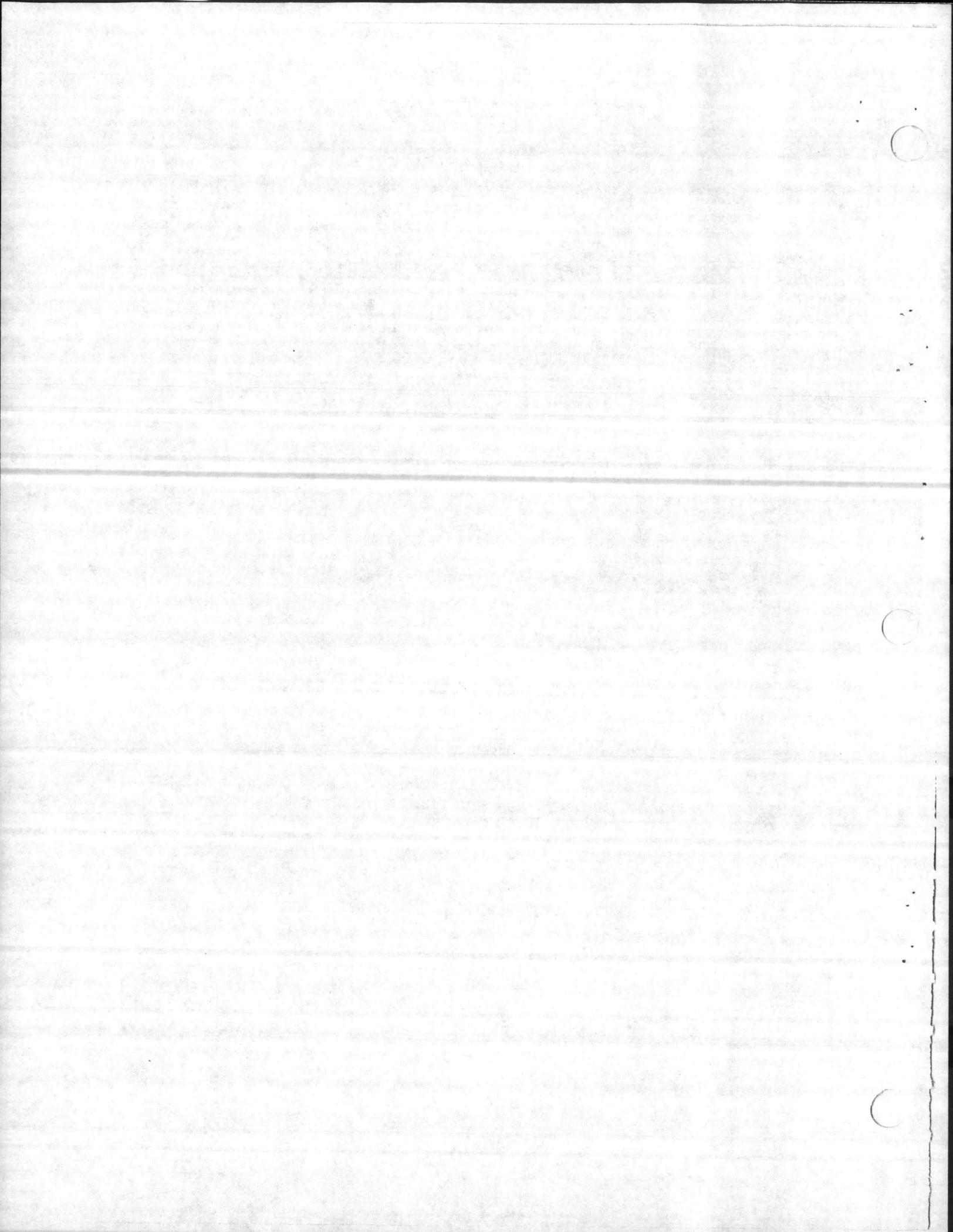


CHAPTER 12

CALIBRATION, SAFETY AND LOAD TESTING, AND INSPECTION
OF CRAWLER AND TRUCK MOUNTED CRANES

1201. General. Current editions of NAVFAC P-300, ~~NAVMAT P-5100~~ and OSHA 2206 (29CFR1910) establish the policy for testing and inspection of all crawler and truck mounted cranes in use by the Marine Corps. The current edition of NAVFAC P-300 establishes calibration, safety and load testing procedures. Subject tests and inspections are to be conducted on an annual basis. *ch. 1*

1202. Duties and Responsibilities. Commanding officers of all base units having crawler and truck mounted cranes in their respective organizations or under their cognizance will ensure that tests and inspections are conducted annually. A durable weatherproof notice, bearing the signature of the inspector and officer-in-charge of the equipment, as the approving authority, shall be conspicuously posted in the operator's compartment. The notice shall state that the capacities indicated on the permanent metal plates affixed to the crane were correct on the inspection date. A written report of this inspection will be maintained by the using organization. Marine Corps Base will provide the capability to test and inspect their own equipment and will provide these facilities to the Fleet Marine Force upon request.



**ORGANIZATIONAL RELATIONSHIP QUAD COMMAND
SAFETY PROGRAM**

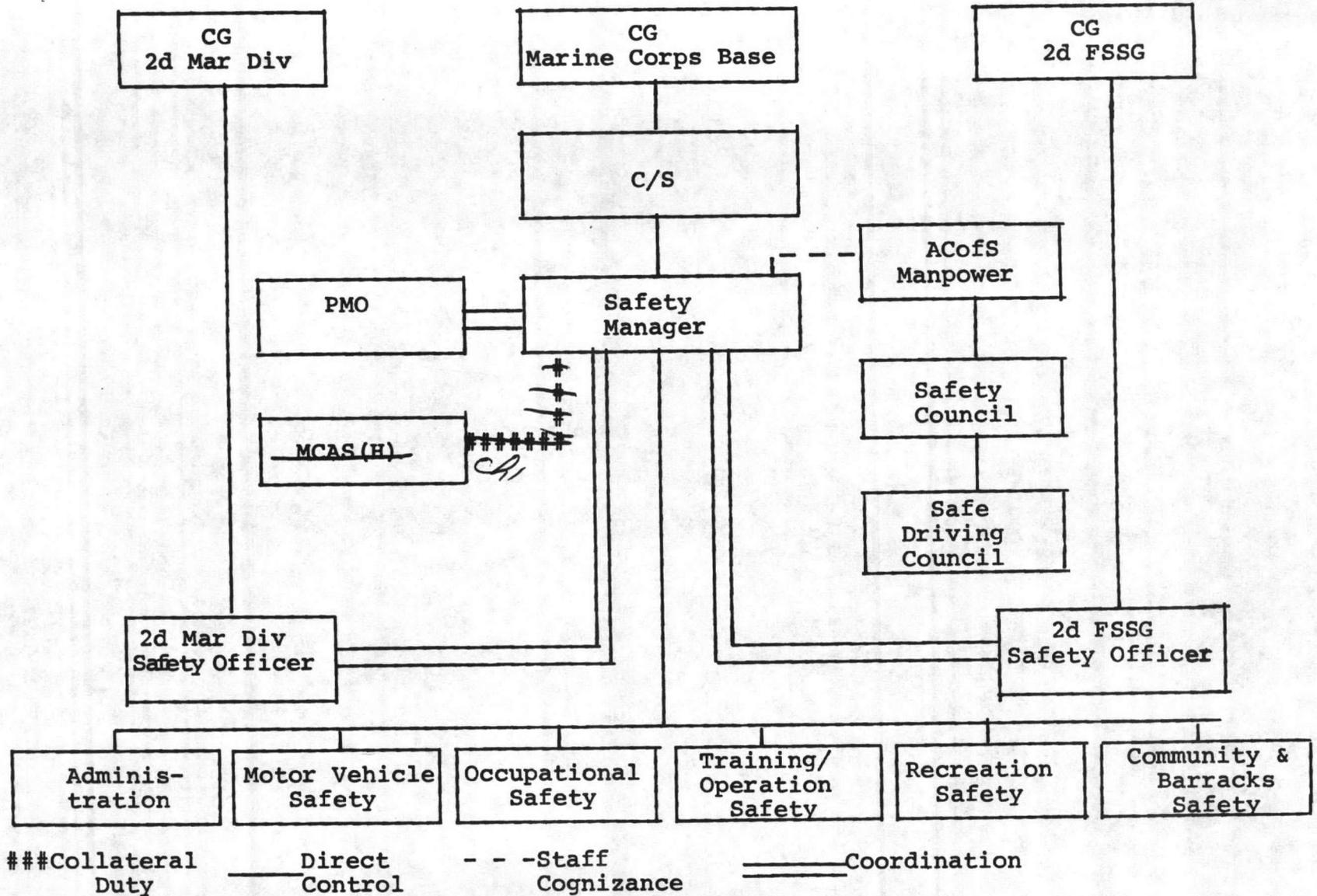
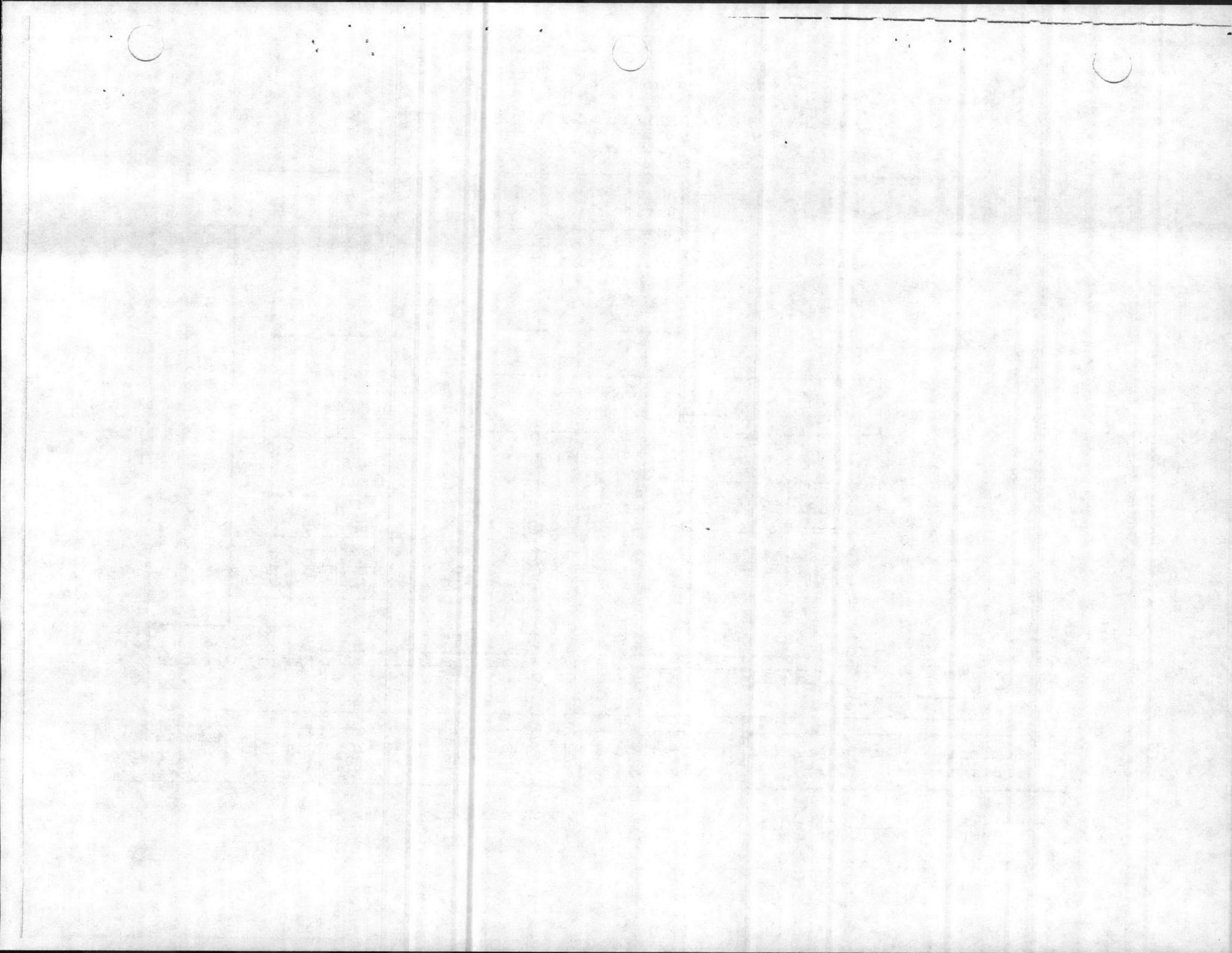


Figure 1



MEDICAL RECORD		EMERGENCY CARE AND TREATMENT			
ARRIVAL (Date and Time) 23 Jan 1981 1800		TRANSPORTATION USED AMBULANCE		CARE GIVEN ENROUTE None	
NAME OF TRANSPORTER		POLICE/RESCUE		ALLERGIES None	
		PRIVATE VEHICLE		DATE OF LAST TETENUS SHOT April 1979	
		OTHER (Specify)		HISTORY OBTAINED FROM	

CHIEF COMPLAINT(S) (Include symptom(s) duration) Laceration left side of face	IF CONDITION IS RESULT OF ACCIDENT/INJURY, STATE WHERE, WHEN, HOW ACCIDENT OCCURRED Pt states, "I was going through the door and someone slammed it in my face." POSSIBLE THIRD PARTY <input type="checkbox"/> YES <input type="checkbox"/> NO
--	--

ARRIVAL CONDITION	VITAL SIGNS			CATEGORY (See reverse)
<input checked="" type="checkbox"/> CONSCIOUS	PULSE	94	TEMPERATURE	98.6 orally
<input type="checkbox"/> SEMI-CONSCIOUS	BP	120/80	<input checked="" type="checkbox"/> ORAL	RECTAL
<input type="checkbox"/> UNCONSCIOUS	RESP	N/A	TIME SIGNS TAKEN	<input checked="" type="checkbox"/> NON-URGENT
TIME SEEN BY PROVIDER 1900	PROVIDERS STATEMENT-INSTRUCTIONS: DESCRIBE (1) PERTINENT HISTORY (if not given above); (2) EXAMINATION (include results of tests and X-rays); (3) PROCEDURES; (4) TREATMENT (include medications given)			

1. Seen by MO
2. X-Ray (neg for facial fx)
3. Cleansed with PhisoHex and water
4. Betadine applied
5. Closed with six 6-0 Ethicon sutures
6. Dry, sterile dressing
8. To return in 3-5 days for suture removal
9. Keep bandage clean and dry

(Continue on SF 507 if Needed)

DIAGNOSIS/ASSESSMENT 3" superficial laceration on left cheek.	CONDITION UPON RELEASE FROM EMERGENCY ROOM (See reverse side) Satisfactory		
DISPOSITION	TIME: 2030	A.M./P.M.	INSTRUCTION SHEET GIVEN <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<input checked="" type="checkbox"/> SENT HOME/QUARTERS	REFERRED TO	CLINIC	PATIENT INSTRUCTIONS: (Include medications ordered and follow-up plans) Return to Dispensary 3-5 days for suture removal. Keep bandage clean and dry.
<input checked="" type="checkbox"/> RETURNED TO DUTY	OTHER (Specify)		
<input type="checkbox"/> ADMITTED TO HOSPITAL			
PROVIDER TYPE (Mark one) <input type="checkbox"/> PHYSICIAN <input type="checkbox"/> NURSE <input checked="" type="checkbox"/> PHYSICIAN'S ASSISTANT <input type="checkbox"/> OTHER (Specify)			PATIENT'S SIGNATURE AND DATE (or accompanying person)
PROVIDER'S SIGNATURE AND DATE W02 Mark T. Jones, USN			HOME PHONE: 451-0000
PATIENT'S HOME ADDRESS: 1234 Navy Lane, Camp Lejeune, NC			GRADE S/Sgt, USMC
PATIENT'S IDENTIFICATION (mechanical imprint) FOR WRITTEN ENTRIES GIVE: NAME—LAST, FIRST, MIDDLE; SSN; SEX; DOB, SERVICE STATUS; NAME AND RELATION OF SPONSOR OR NEXT OF KIN. SMITH, Patrick E. S/SGT, USMC, AD 000 00 0000			LOG NUMBER 10000000

Anna Smith (W)

M
24
Supt Co., Supt Bn, MCB
451-1111
(Over)

EMERGENCY CARE AND TREATMENT
STANDARD FORM 558 (9-79)
Prescribed by GSA and Interagency
Committee on Medical Records
FPMR (41 CFR) 101-11.806-8
MEDICAL RECORD COPY

Figure 2

Instructions for Completion of the Emergency Care and Treatment Form

NOTE: This form will be used to record all care rendered to patients in the Emergency Room and will be used in lieu of *all* locally prepared emergency room forms. This form is not a substitute for line of duty, accident/injury or third party liability forms, but it may be used as a basis for completing those forms.

1. Complete form for each patient entered on Emergency Room Log.
2. Complete all parts of form.
3. Enter patient's log number from Emergency Room Log.
4. Check appropriate condition in "category" block based on following definitions:
Emergent—A condition which requires immediate medical attention and for which delay is harmful to the patient; such a disorder is acute and potentially threatens life or function.
Urgent—A condition which requires medical attention within a few hours or danger can ensue; such a disorder is acute but not necessarily severe.
Non-Urgent—A condition which does not require the immediate resources of an emergency medical services system; such a disorder is minor or non-acute.
5. Use SF 522, Request for Administration of Anesthesia and for Performance of Operations and Other Procedures, to obtain authorization for any necessary procedures.
6. Enter in "condition upon release" block patient's overall condition (i.e., good, fair, stable, seriously ill, very seriously ill), and how patient left Emergency Room (i.e., wheelchair, stretcher, ambulatory).
7. Have patient or person accompanying patient sign form. This signature *only* acknowledges that instructions were given to patient.
8. Give "Patient's Copy", containing instructions, to patient, sponsor (NOK) or person accompanying patient, except when patient is admitted.
9. File original in patient's treatment record (i.e., Military Health Record, Outpatient Treatment Record or Inpatient Record) as applicable.
10. Establish a treatment record for any patient who does not have a record. File and maintain treatment record in accordance with appropriate directives.

DISPENSARY PERMIT
OPNAV 5100/9 (REV. 1-76)
S/N 0107-LF-051-0047

PRIVACY ACT
STATEMENT ON REVERSE

CASE NUMBER

SUPERVISOR'S REPORT

TO DISPENSARY (Location)

DATE OF REPORT

Bldg 15

1Jul79

TIME & DATE OF INJURY

0900 1Jul79

TIME LEFT JOB

0910

TIME RETURNED

1030

Jones, A. B.

SOCIAL SECURITY NO.

123-45-6789

GRADE, RATE, JOB TITLE

Stockman

OCCUPATIONAL

YES NO QUESTIONABLE

REASON FOR REFERRAL

INJURY ILLNESS EMPLOYEE'S REQUEST OTHER (Specify)

REMARKS

Cut right thumb while stocking shelves

SUPERVISOR'S SIGNATURE

P. A. Blackmon

SHOP/OFFICE

Commissary

TELEPHONE NUMBER

1234

MEDICAL OFFICER'S REPORT

TIME REPORTED

0920

TIME RELEASED

1020

OCCUPATIONAL

YES NO QUESTIONABLE

TIME & DATE OF FIRST RE-TREATMENT

TIME & DATE OF SECOND RE-TREATMENT

DEGREE OF INJURY

FIRST AID DISPENSARY HOSPITAL PERSONAL PHYSICIAN SENT HOME OTHER (Explain)

DISPOSITION OF EMPLOYEE

RETURN TO PERM. JOB _____ TEMP. TRANSFER TO ANOTHER JOB TERMINATION OF EMPLOYMENT
 RESTRICT ACTIVITY UNTIL _____ PERM. TRANSFER TO ANOTHER JOB OTHER (Explain)

REMARKS

Superficial laceration right thumb; cleaned, bandaged

MEDICAL OFFICER'S SIGNATURE

I. M. FORRESTAL, Lt MC USNR

INITIAL TREATMENT DETERMINATION

DISCHARGED, TREATMENT COMPLETED RE-TREATMENT REQUIRED

PRIVACY ACT STATEMENT

Authority: SECNAVIST 5100.10B and OPNAVINST 5100.14

Principal Purpose: To control and monitor treatment and disposition of civilians at Naval Dispensaries in cases of occupational injury or illness.

Routine Use: To ensure prompt investigation of occupational injuries, and to initiate any necessary immediate corrective action.

Disclosure: Voluntary Treatment will be provided without regard to employee's willingness to divulge all or part of the requested information.

<u>Building and Grounds</u>	(Cont)	<u>Yes</u>	<u>No</u>	<u>NA</u>
22.	Are all floor fans provided with wire mesh guarding?	—	—	—
23.	Are materials stored under, or piled against buildings, or stairways?	—	—	—
24.	Is in-house construction of partitions authorized by the Command and inspected by fire department?	—	—	—
25.	Is jury rigging of wiring done? Where?	—	—	—
<u>Flammable Storage</u>				
1.	Is the location of the fuel storage system posted as a restricted area?	—	—	—
2.	Is adequate fire fighting equipment available in the storage area?	—	—	—
3.	Are No Smoking signs posted around the storage area? (DANGER, Fuel Storage Area, No Smoking Within 50 Feet).	—	—	—
4.	Is there a fire plan posted?	—	—	—
5.	Are the minimum safety distances maintained between fuel storage areas and buildings, equipment and ammunition and explosive areas?	—	—	—
6.	Are drip pans or suitable containers used to prevent spills?	—	—	—
7.	Is area washed down and sanded on a regular basis to prevent accumulation of spilled fluid?	—	—	—
8.	Building numbers: _____			

Figure 13-9.--Safety Guidelines (Continued)

<u>Motor Transport and Battery Shop</u>	<u>Bldg. No.</u> _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
1.	Are adequate precautions taken to prevent the use of vehicles by: (1) unauthorized personnel and (2) personnel not in possession of a valid motor vehicle operators permit? (NAVMAT P5100 refers).	___	___	___
2.	Are repair shops well ventilated for protection of service personnel against accumulation of carbon monoxide? (NAVMAT P5100 refers).	___	___	___
3.	Are floors and other exposed areas thoroughly inspected daily and kept free from oil, grease, or loose tools, which might result in fire, slipping, tripping or falling? (NAVMAT P5100 refers).	___	___	___
4.	Is the weight capacity printed on all equipment used to support raised vehicles? (NAVMAT P5100 refers).	___	___	___
5.	Are safety tire cages used during inflation of lock?	___	___	___
6.	Are repair pit lifts, and/or vehicle racks clean and orderly?	___	___	___
7.	Are all repair pit lifts and/or vehicle racks provided with drains equipped with oil and grease traps?	___	___	___
8.	Are vehicles blocked after being jacked into position for maintenance and are jack stands utilized?	___	___	___
9.	Are cables and cords positioned to eliminate tripping hazards?	___	___	___
10.	Are garage vehicle entrances and exits properly controlled?	___	___	___
11.	Is a low speed limit established and enforced around the garage?	___	___	___
12.	Are drip pans or suitable containers used to prevent oil, grease and gas from being spilled while vehicle is in garage maintenance area?	___	___	___
13.	Are warning labels applied and maintained on all vehicles having radio equipment installed?	___	___	___
14.	Are personnel adequately instructed pertaining to the hazards in battery shop work?	___	___	___
15.	Is adequate protective clothing (rubber boots, gloves, aprons and face shields) available? Is the equipment used?	___	___	___

Figure 13-8.--Safety Guidelines (Continued)

6

NOTICE - INJURED PERSON PLEASE READ THE PRIVACY ACT STATEMENT BEFORE AFFIXING SIGNATURE.

MISHAP AND INJURY REPORT (5100) REPORT SYMBOL - MC 5100-02
 NAVMC 10787 (REV. 7-78) (Previous editions are obsolete and will not be used)
 SN: 0000-00-006-2933 U/I: 5H

TO:				CHECK ONE: <input checked="" type="checkbox"/> Military <input type="checkbox"/> Civilian	
1. INJURED PERSON (Last Name, First, Middle Initial)			2. SSN		
PELL, Joseph W.			123-45-6789		
3. AGE	4. SEX	5. PAY GRADE	6. MOS/OCCUPATION/TRADE		
20	M	E-4	1141 Electrician		
7. CATEGORY (Military Only)			8. JOB ASSIGNMENT		
Enlisted Reg. Active			Electrical Maintenance		
9. REPORTING ACTIVITY/UNIT			10. DUTY STATION		
Base Maintenance MCB, Camp Lejeune, NC			Same as 9		

I have read and understand the Privacy Act Statement, a copy of which I have received. _____ 3Jul79
 (Signature of Injured Person) (Date)

II. PROPERTY, EQUIPMENT DAMAGE AND TOTAL COST		
A. TYPE	B. OWNERSHIP	C. TOTAL COST
Shorted circuits in Data Processing Machine	M	\$150.00

12. DATE OF INJURY (Day/Mo./Yr.)	13. DAY OF WEEK	14. HOUR OF DAY	15. DATE DISABILITY STARTED
1 Jul 79	Friday	0915	2 Jul 79
16. DATE RETURNED TO WORK	17. TOTAL DAYS LOST	18. WEATHER	21. WORKPLACE (Occupational Mishaps Only)
19 Jul 79	14	N/A	Real Property Maintenance
19. DUTY STATUS	20. PLACE OF OCCURRENCE	21. WORKPLACE (Occupational Mishaps Only)	
On Duty Regular Assign.	Bldg 1011	Real Property Maintenance	

22. DESCRIPTION OF MISHAP (Describe circumstances and events leading to and associated with mishap in sufficient detail that reviewing authorities may gain a complete understanding of cause and effect relationships. If more space is needed use Block 26.)

An electrician was oiling an electric wall fan in the data processing room. He stood on a chair which collapsed, allowing him to fall to the deck. His arm was broken when he tried to cushion the fall. The chair slid into machine, resulting in short circuits.

23. TYPE OF INJURY	24. BODY PART
Fracture	Left Forearm
25. SOURCE OF INJURY	26. TYPE OF MISHAP
Chair	Fall from elevation
27. HAZARDOUS CONDITION	29. UNSAFE PERSONAL FACTOR
Hazardous method - standing on chair	Inattention to safe practices
28. CAUSAL FACTOR (Occupational mishaps only)	30. CORRECTIVE ACTION TAKEN
Use of improper equip.	Five-foot step ladders are not available for electricians. All electricians have been instructed to use ladders.

31. SIGNATURE (Preparing Official)	32. DATE
R. J. CARR	3 Jul 79

Detach and furnish to injured person.

DATA REQUIRED BY THE PRIVACY ACT OF 1974
(5 U.S.C. 552A)

Authority for obtaining information on this form is Title 5, U. S. Code, Section 301. Executive Order 6367 of 22 November 1943 authorizes use of your Social Security Number. The purpose of this form is to gather and provide data for the analysis of miscellaneous mishaps other than government vehicle and private vehicle; to collect and provide data to the Department of Defense and Department of Labor on the subject of occupational safety and health; and to maintain safety and mishap prevention data and statistics. The information is used to record description of personal injury; mishap description and days lost on the job; personal vital statistics information; property damages, to include personal or private; and industrial equipment damages. Your Social Security Number is being obtained for purposes of positive personal identification. Providing information for this form is mandatory. Failure to provide the requested information would hamper the collection of data needed for the analysis of miscellaneous mishaps in which members of the Marine Corps are involved. Disclosure of your Social Security Number is mandatory.

NAVMC 10787 (Rev. 7-78) MISHAP AND INJURY REPORT - PRIVACY ACT STATEMENT

Figure 4

34. CORRECTIVE ACTION NOT ACCOMPLISHED/REASON

35. ADDITIONAL COMMENTS

36. SIGNATURE (Commanding Officer/Safety Officer)	37. TITLE, GRADE	38. DATE
E. L. LESS	Captain, USMC	4Jul79

Figure 4

PERSONAL PROTECTIVE EQUIPMENT

<u>HAZARDOUS TRADE AND/OR OCCUPATION</u>	<u>FOOTWEAR</u>	<u>HEADWEAR</u>	<u>EYEWEAR</u>	<u>OTHER</u>
Air Conditioning Equipment Mechanic	X	X-2 or 3	X-9, 12, or 14	
Aircraft Mechanic	X		X-9, 13, 14	
Aircraft Refuelers	X-Non-Conductive		15	
Asphalt Worker	X		X-9 or 12	X-7
Automotive Equipment Servicers (Lube)	X	X-2, 3		
Automotive Equipment Servicers (Tires)	X			
Automotive Mechanic/Helper	X		X-9, 10, 13, or 14	
Automotive Mechanic/Helper (Body/Fender)	X		X-9, 10, 13, or 14	
Blocker and Bracer	X	X-1	X-9, 14	
Boiler Plant Equipment Mechanic	X	X-1	X-9, 14	
Cable Splicer (Comm)	(Elec) X	(Elec) X-1, 2	X-9, 13, 15	X-7
Carpenter/Helper	X	X-1, 2	X-9, 14	
Cement Finisher	X	X-1	X-9, 13	
Coal Handling Equipment Operator			X-9, 13	
Crane Operator		X-1	X-9, 14	
Crash Crew Personnel	X			X-18
Electrician/Helper	(Elec) X	(Elec) X-1, 2	X-9, 13, 14, 15	X-7
Electrician/Lineman/Comm	(Elec) X	(Elec) X-1, 2	X-9, 13, 14, 15	X-7
Electrician/Telephone	(Elec) X	(Elec) X-1, 2	X-9, 13, 14, 15	
Electronics Mechanic	(Elec) X		X-9, 14	
Engineering Equipment Operator	X	X-1	X-9, 14 X-9, 13, 14	
Firefighters		X-1	14	
Forestry Technician	X	X-1	X-9, 13 X-9, 13, 14	
Galley Equipment Mechanic	X		X-9, 13, 14	
Gardener		X-1	X-9, 13, 14	
Gas Appliance Repairer	X		X-9, 13, 14	
Glazer			X-9, 14	
Heating Equipment Mechanic (Covers gas, cool, oil systems)	X		X-9, 14 X-9, 12, 13 (Tint)	
Heating Plant Operator	X	X-1, 2	X-9, 10, 13, 14	
Heavy Duty Equipment Mechanic	X	X-2, 3		
Instrument Mechanic Electronic/ Optical			X-9, 14	

Figure 5

PERSONAL PROTECTIVE EQUIPMENT
(Continued)

<u>HAZARDOUS TRADE AND/OR OCCUPATION</u>	<u>FOOTWEAR</u>	<u>HEADWEAR</u>	<u>EYEWEAR</u>	<u>OTHER</u>
Joiner		X-9, 13, 14		
Laborer (All)	X	X-1, 2	X-9, 13	
Laundry Equipment Repairman	X		X-9, 13, 14	
Locksmith			X-9, 14	
Machinist	X	X	X-9, 10, 12, 13, 14	
Maintenanceman	X		X-9, 13, 14	
Mason/Helper	X	X-1	X-9, 14	
Millman	X		X-9, 13, 14	
Office Appliance Repairer	X		X-9, 14	
Ordnanceman/Worker	X	X-2, 3	X-9, 10, 13, 14	
Packer	X		X-9, 14	
Painter (covers all methods)			X-15	X-5, 7
Pest Controller	X			X-7, 15
Pipefitter and/or Plumber	X	X-1	X-9, 13, 14	
Plasterer	X	X-1	X-9, 13, 14	
Preservation and Packing Mechanic/Worker	X		X-9, 13, 14	
Radio Mechanic			X-9, 13, 14	
Saw Filer			X-9, 13, 14	
Sheetmetal Equipment Mechanic	X	X-1	X-9, 13, 14	X
Small Engine Mechanic	X		X-9, 13, 14	
Stockman	X		X-9, 13	
Toolroom Mechanic	X		X-9, 13, 14	
Tractor Operator			X-9, 13, 14	
Warehouseman	X			

Figure 5

PERSONAL PROTECTIVE EQUIPMENT
(Continued)

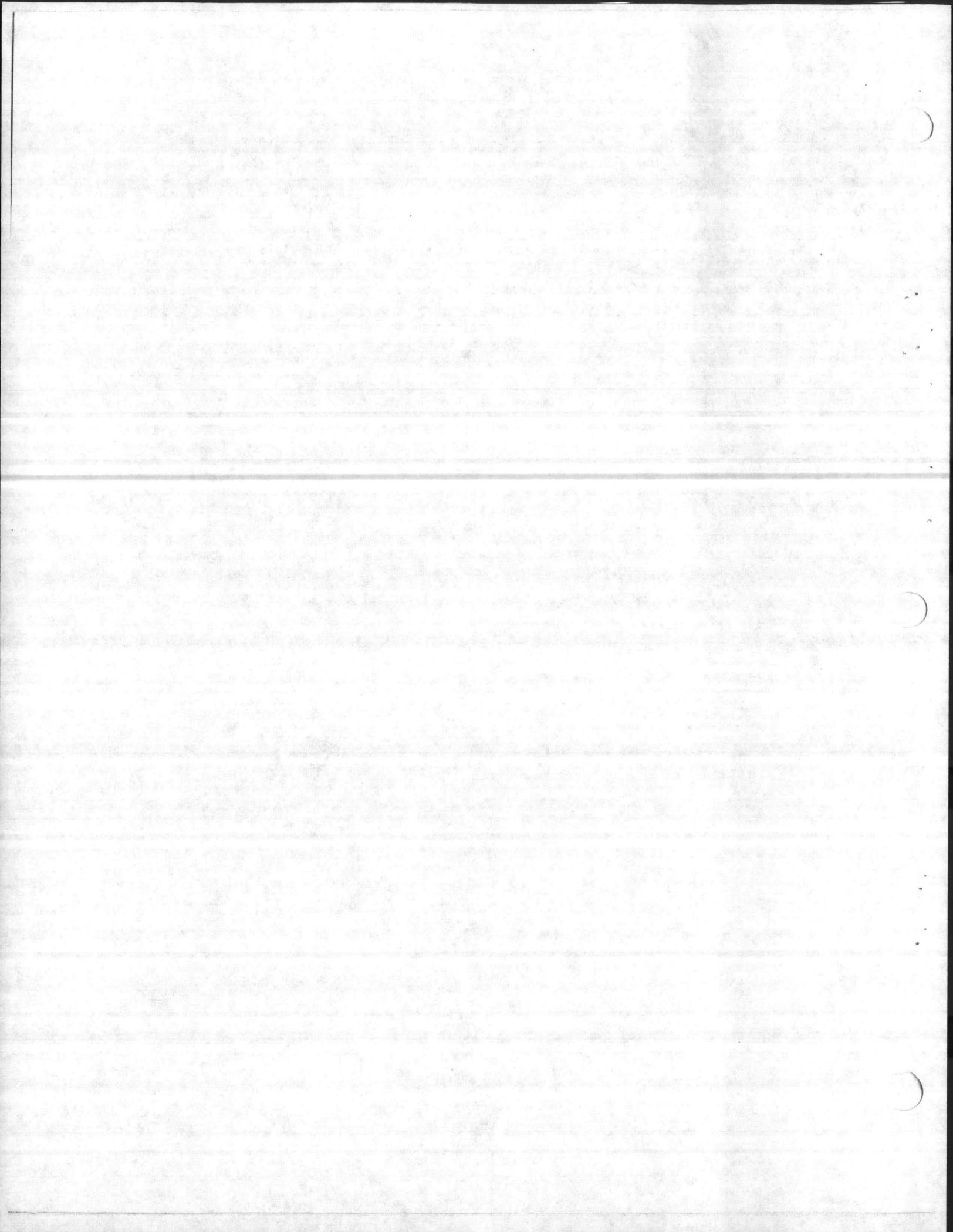
<u>HAZARDOUS TRADE AND/OR OCCUPATION</u>	<u>FOOTWEAR</u>	<u>HEADWEAR</u>	<u>EYEWEAR</u>	<u>OTHER</u>
Welder	X	X-4	X-11, 14	X-7,16,17
Wood Worker	X		X-9, 14	

Note: Occupations not listed, but who work in near proximity to one or more of those listed, will be required to wear adequate and appropriate protection as determined by supervisors and/or the Base Safety Manager.

LEGEND: X - Must wear protective equipment at all times while engaged in hazardous occupations or operations.

- 1 - Safety Hat
- 2 - Safety Cap
- 3 - Bump Cap
- 4 - Welder's Protective Cap
- 5 - Respirator
- 6 - Cream or Lotion
- 7 - Gloves (protective)
- 8 - Apron (protective)
- 9 - Safety Spectacle Goggles
- 10 - Eyecup (Chippers) Goggles
- 11 - Spectacle Goggles, Type A, Filtered Lens (Welders)
- 12 - Face Shield
- 13 - Cover Goggles
- 14 - Corrective Safety Glasses
- 15 - Other eye protective equipment (splash goggles, plastic spectacle goggles, etc.)
- 16 - Welder's Helmet
- 17 - Welder's Protective Clothing
- 18 - Non-Static, Flame Resistant Coverall

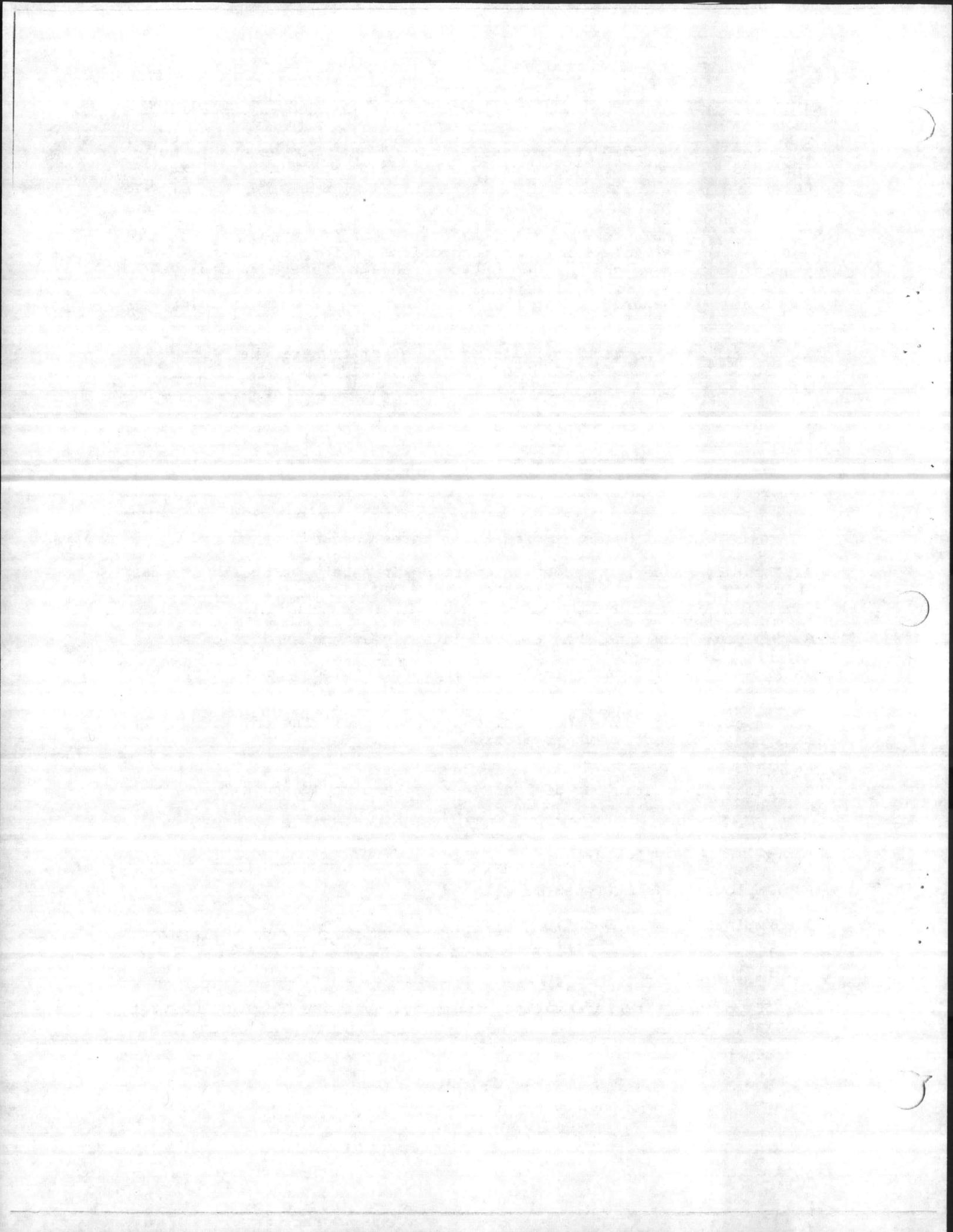
Figure 5

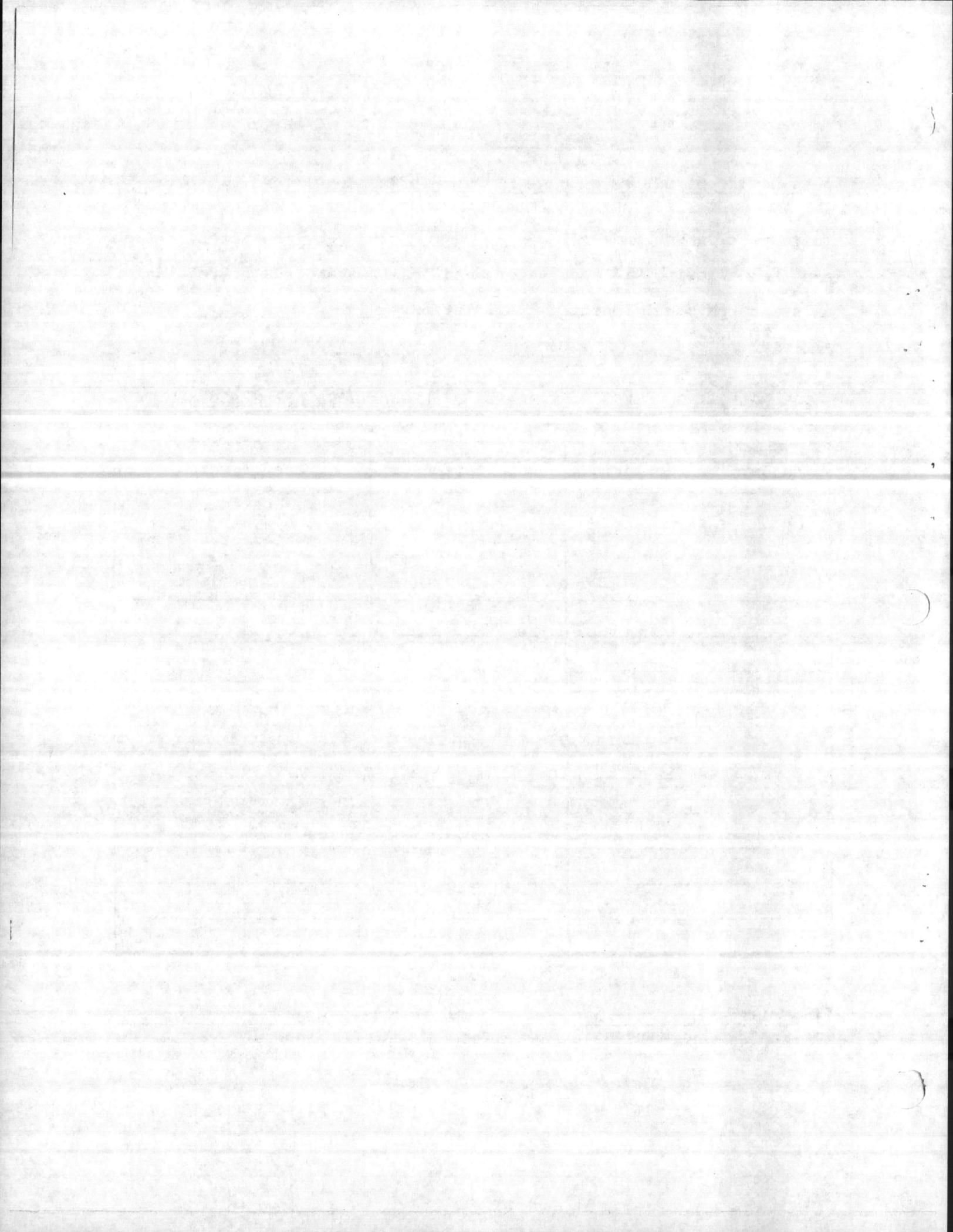


CIVILIAN EMPLOYEE REPORT OF UNSAFE OR UNHEALTHFUL WORKING CONDITIONS

This form is provided for the assistance of an employee and is not intended to constitute the exclusive method by which a report is submitted.

1. The undersigned (check one)
 Employee Representative of Employees
believes that a violation of an occupational safety or health standard exists which is a job safety or health hazard to employees.
2. Does this hazard immediately threaten death or serious-injury?
 Yes No
3. Specify the particular building or worksite where the alleged violation is located, including installation address _____
4. Specify the name and phone number of the supervisor at this location _____ (Phone) _____
5. Describe briefly the hazard which exists _____
6. Number of employees exposed to or threatened by the hazard _____
7. List by number, or name, the particular safety or health standard which you allege has been violated, if known _____
8. To your knowledge, has this violation been the subject of any union/management grievance or have you (or anyone you know) otherwise called this violation to the attention of, or discussed it with, the supervisor? Yes No
9. If so, please give the results thereof, including any efforts by management to correct the violation _____
10. Please indicate your desire: My name may be revealed
 I do not desire my name revealed
- Employee's Signature _____
- Employee's Name (Typed or Printed) _____
- Employee's Work Location _____
(City) _____ (State) _____ (Zip) _____
- Employee's Work Phone _____
11. If you are a representative of employees, state the name of your organization _____





<u>Buildings and Grounds</u>	Bldg. No. _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
1. Are entrances and exits well lighted and marked?		___	___	___
2. Are doors and windows blocked?		___	___	___
3. Are stairs and steps kept clean and free of obstacles?		___	___	___
4. Are risers painted yellow for visibility in the dark?		___	___	___
5. Are landings, steps or stairs painted?		___	___	___
6. Are they posted "slippery when wet"?		___	___	___
7. Are suitable warning signs posted where there is less than 7 feet of headroom?		___	___	___
8. Are roads, parking lots and walkways kept clear, in good repair and well defined?		___	___	___
9. Are grounds particularly around flammable storage areas kept well policed?		___	___	___
10. Are power mowers and edgers inspected and certified safe?		___	___	___
11. Are personnel engaged in use of power lawn equipment trained?		___	___	___
12. Are personnel provided with safety shoes or steel toe guards?		___	___	___
13. Is gasoline for powers kept in safety cans plainly lettered "GASOLINE"?		___	___	___
14. Is the amount kept to a minimum of 5 gallons?		___	___	___
15. Are drainage ditches kept clean?		___	___	___
16. Is electrical equipment (i.e., buffers, scrubbers) used on floors equipped with 3 wire ground cord?		___	___	___
17. Are heavy duty extension cords used in connection with floor cleaning equipment?		___	___	___
18. Are ceilings kept in good repair, free of loose plaster, paint, etc.?		___	___	___
19. Are burned out or missing bulbs replaced?		___	___	___
20. Are aisleways arranged to provide a minimum of 5 foot candle illumination at floor level?		___	___	___
21. Are windows painted over to block natural light?		___	___	___

Figure 8

Building and Grounds

(Cont)

Yes No NA

- 22. Are all floor fans provided with wire mesh guarding? ___ ___ ___
- 23. Are materials stored under, or piled against buildings, or stairways? ___ ___ ___
- 24. Is in-house construction of partitions authorized by the Command and inspected by fire department? ___ ___ ___
- 25. Is jury rigging of wiring done? Where? ___ ___ ___

Flammable Storage

- 1. Is the location of the fuel storage system posted as a restricted area? ___ ___ ___
- 2. Is adequate fire fighting equipment available in the storage area? ___ ___ ___
- 3. Are No Smoking signs posted around the storage area? (DANGER, Fuel Storage Area, No Smoking Within 50 Feet). ___ ___ ___
- 4. Is there a fire plan posted? ___ ___ ___
- 5. Are the minimum safety distances maintained between fuel storage areas and buildings, equipment and ammunition and explosive areas? ___ ___ ___
- 6. Are drip pans or suitable containers used to prevent spills? ___ ___ ___
- 7. Is area washed down and sanded on a regular basis to prevent accumulation of spilled fluid? ___ ___ ___
- 8. Building numbers: _____

<u>Motor Transport and Battery Shop</u>	<u>Bldg. No.</u> _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
1.	Are adequate precautions taken to prevent the use of vehicles by: (1) unauthorized personnel and (2) personnel not in possession of a valid motor vehicle operators permit? (NAVMAT P5100 refers).	—	—	—
2.	Are repair shops well ventilated for protection of service personnel against accumulation of carbon monoxide? (NAVMAT P5100 refers).	—	—	—
3.	Are floors and other exposed areas thoroughly inspected daily and kept free from oil, grease, or loose tools, which might result in fire, slipping, tripping or falling? (NAVMAT P5100 refers).	—	—	—
4.	Is the weight capacity printed on all equipment used to support raised vehicles? (NAVMAT P5100 refers).	—	—	—
5.	Are safety tire cages used during inflation of lock?	—	—	—
6.	Are repair pit lifts, and/or vehicle racks clean and orderly?	—	—	—
7.	Are all repair pit lifts and/or vehicle racks provided with drains equipped with oil and grease traps?	—	—	—
8.	Are vehicles blocked after being jacked into position for maintenance and are jack stands utilized?	—	—	—
9.	Are cables and cords positioned to eliminate tripping hazards?	—	—	—
10.	Are garage vehicle entrances and exits properly controlled?	—	—	—
11.	Is a low speed limit established and enforced around the garage?	—	—	—
12.	Are drip pans or suitable containers used to prevent oil, grease and gas from being spilled while vehicle is in garage maintenance area?	—	—	—
13.	Are warning labels applied and maintained on all vehicles having radio equipment installed?	—	—	—
14.	Are personnel adequately instructed pertaining to the hazards in battery shop work?	—	—	—
15.	Is adequate protective clothing (rubber boots, gloves, aprons and face shields) available? Is the equipment used?	—	—	—

<u>Motor Transport and Battery Shop</u>	(Cont)	<u>Yes</u>	<u>No</u>	<u>NA</u>
16.	Is a siphon pump available?	—	—	—
17.	Is a deluge shower available?	—	—	—
18.	Does ventilation equipment include general exhaust as well as local exhaust system as appropriate?	—	—	—
19.	Are terminal straps available for handling batteries?	—	—	—
20.	Are safety regulations and operating procedures posted in shop including signs restricting area to entrance by authorized personnel only?	—	—	—
21.	Is suitable fire extinguishing equipment of approved types being maintained near all work areas?	—	—	—
22.	Is acid always poured into water?	—	—	—
23.	Are vent caps replaced before attaching or detaching charger cables?	—	—	—

9

Communication and Electronics

Bldg. No. _____

Yes No NA

- 1. Are personnel who are engaged in electrical work fully informed of the hazards involved? ___ ___ ___
- 2. Are rubber gloves provided and are they used when engaged in electrical work? ___ ___ ___
- 3. Are metal handles of hand tools insulated? ___ ___ ___
- 4. Are appropriate warning signs displayed in electrical, electronics shops? ___ ___ ___
- 5. Are periodic inspections of equipment held?
Is equipment properly marked? ___ ___ ___
- 6. Are non conductive rubber mats provided for performance of maintenance on electrical equipment? ___ ___ ___
- 7. Are all electrical workers trained in current methods of artificial resuscitation? ___ ___ ___
- 8. Are these procedures posted for personnel to see? ___ ___ ___
- 9. Is training given annually and documented? ___ ___ ___
- 10. Are signs available for posting when high voltage equipment is in use (i.e., DANGER, HIGH VOLTAGE) or repair? (i.e., DO NOT TURN ON). ___ ___ ___
- 11. When repairs to equipment are authorized is a safety observer being used? ___ ___ ___

Supply and Warehousing

Bldg. No. _____

Yes No NA

- | | | | | |
|-----|---|-----|-----|-----|
| 1. | Are warehouse principles followed as to firelane aiseways, cleaning space and boundary lines? | ___ | ___ | ___ |
| 2. | Is material stacked in a secure manner? | ___ | ___ | ___ |
| 3. | Are overhead storage lofts provided with stable double guard rail and posted as to maximum load limits? | ___ | ___ | ___ |
| 4. | Are safety shoes and gloves supplied and are they worn when handling materials? | ___ | ___ | ___ |
| 5. | Are personnel engaged in handling materials instructed by supervisors in the proper method of lifting heavy objects? | ___ | ___ | ___ |
| 6. | Are hand trucks and similar devices loaded for easy handling? (Not overloaded). Are loads pulled up inclines and guided down keeping load below the worker? | ___ | ___ | ___ |
| 7. | Are M/O boxes stacked in front of windows preventing natural light from entering? | ___ | ___ | ___ |
| 8. | Are desks, work benches and work areas organized beneath overhead lights to afford maximum use of available lighting? | ___ | ___ | ___ |
| 9. | Is supplementary lighting used where natural or overhead lights are not available? | ___ | ___ | ___ |
| 10. | Are windows painted unnecessarily preventing natural light from entering? | ___ | ___ | ___ |
| 11. | Is unauthorized asbestos material being stored? (SECNAV MSG R252240Z). | ___ | ___ | ___ |

<u>Welding and Compressed Gases</u>	<u>Bldg. No.</u> _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
1.	Is suitable fire extinguishing equipment of approved types being maintained near all welding and cutting operations? (NAVMAT P5100 refers)	—	—	—
2.	Is adequate ventilation provided while welding? (NAVMAT P5100 refers)	—	—	—
3.	Is appropriate protective clothing and equipment provided? Flameproof gloves, aprons, leggings, jackets, etc., as required. Eye protection (goggles) of correct type and head gear.	—	—	—
4.	Is there a designated, posted area for cylinders?	—	—	—
5.	Are cylinders stored standing upright?	—	—	—
6.	Are cylinders fastened to prevent their upset?	—	—	—
7.	Are cylinders kept separate by type?	—	—	—
8.	Are cylinders free from possible external damage?	—	—	—
9.	Are cylinders away from combustible materials? (Oil, grease, acetelyne)	—	—	—
10.	Are cylinders far enough away from actual operation so sparks, hot slag or flame can't reach them?	—	—	—
11.	Are cylinders away from other sources of fire, in summer away from direct sunlight (maximum temperature 130 degrees F.)	—	—	—
12.	Is extreme cleanliness maintained where oxygen acetylene welding equipment is utilized?	—	—	—
13.	Are safety regulations and preparatory operating procedures posted?	—	—	—
14.	Are safety observers used during welding operations?	—	—	—
15.	Are protective caps on compressed gas cylinders, when provided in the design, in place when in storage, in transit and whenever regulators are not in place? (NAVMAT P5100 refers)	—	—	—
16.	Are suitable trucks or carts used, with provisions for holding cylinders upright when moving them? (NAVMAT P5100 refers)	—	—	—
17.	Are empty cylinders tagged as "Empty" and segregated from full cylinders and valves securely fastened to assure the return of empty cylinders in good condition to suppliers?	—	—	—

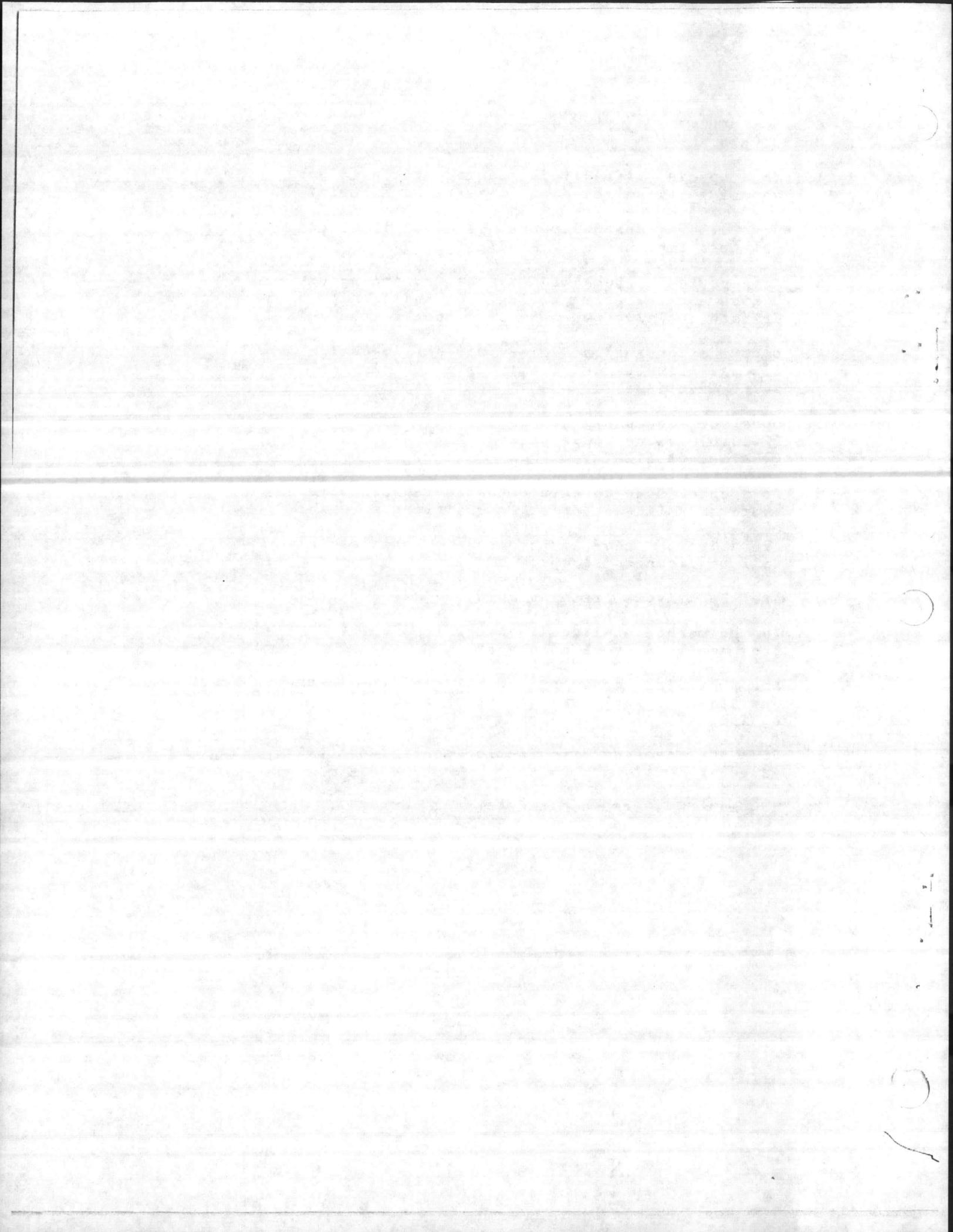
<u>Wood Working</u>	Bldg. No. _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
1. Are personnel working in woodworking shops aware of hazards involved due to the speed at which machines operate and sharp cutting edges? (NAVMAT P5100 refers)		—	—	—
2. Are personnel instructed that loose clothing, and jewelry may catch in moving machinery? Are such items prohibited?		—	—	—
3. Are floors kept clean, free of sawdust, scrapes of wood and other objects which may cause tripping or slipping?		—	—	—
4. Are aisleways plainly marked?		—	—	—
5. Is personal protective clothing and equipment provided in adequate quantity?		—	—	—
6. Are all machines properly guarded?		—	—	—
7. Are all hazardous areas marked with signs?		—	—	—
8. Are signs posted stating only authorized personnel will operate woodworking machines?		—	—	—
9. Are switches within immediate reach of the operator on each machine?		—	—	—
10. Is a method provided for locking switches in the off position during maintenance operations?		—	—	—
11. Is adequate working space provided around each machine?		—	—	—
12. Are overhead lofts provided with stable double guard rail?		—	—	—
13. Are operating instructions and safety regulations posted near each machine?		—	—	—
14. Are nonadjustable ladders that are not self-supporting equipped with non skid bases or safety hooks?		—	—	—
15. Are adjustable extension ladders equipped with non-skid bases and spring loaded rung locks with metal shackles?		—	—	—
16. Are step ladders equipped with an automatic spreader or locking device to keep them open?		—	—	—

<u>Mess Hall</u>	Bldg. No. _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
1.	Is stock properly stacked in storerooms?	___	___	___
2.	Is storeroom properly ventilated?	___	___	___
3.	Is protective clothing (metal apron and gloves) and devices utilized when operating saws, grinders, and other machines?	___	___	___
4.	Are pads, potholders and other insulated hand guards provided?	___	___	___
5.	Are hot water and steam lines insulated to protect personnel from accidental burns?	___	___	___
6.	Are operating instructions posted by each machine?	___	___	___
7.	Are guards in place, feeds utilized or push sticks?	___	___	___
8.	Do reefer doors contain emergency opening devices?	___	___	___
9.	Is rodent and insect control being employed?	___	___	___
10.	Are insecticides or other substances that may contaminate food segregated?	___	___	___
11.	Are good housekeeping and sanitation habits being enforced?	___	___	___
12.	Are overhead exhaust systems cleaned regularly?	___	___	___

Unit Inspected _____	Bldg. No. _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
<u>Fire Prevention</u>				
1.	Are fire extinguishers properly mounted, full, inspected regularly?	—	—	—
2.	Are Fire Bills posted and fire stations assigned/posted?	—	—	—
3.	Fire procedures with reporting instructions, locations or available telephones and Fire Alarm boxes posted?	—	—	—
4.	Are extinguishers marked by class of fire?	—	—	—
5.	Are fire doors in working order and exits properly marked and clear?	—	—	—
6.	Are fire lanes maintained clear with directional arrows or signs for egress?	—	—	—
7.	Are door and windows obstructed?	—	—	—
8.	Are clearances maintained fire wall, side walls and overhead clearance maintained?	—	—	—
9.	Are no smoking signs posted and enforced in hazardous areas? Are butt receptacles provided in smoking area?	—	—	—
10.	Are rubbish cans provided, emptied regularly?	—	—	—
11.	Are oily rags stored in approved cans and emptied regularly?	—	—	—
12.	Are combustible materials stored properly and segregated when necessary?	—	—	—
13.	Is electrical work done by authorized personnel?	—	—	—
14.	Are extension cords of excessive length?	—	—	—
15.	Is there loose wiring?	—	—	—
16.	Are stoves and heaters separate from combustibles?	—	—	—
17.	Are stoves approved by the Fire Department for use?	—	—	—

TRAFFIC SAFETY EVALUATION

<u>QUESTION</u>	<u>Yes</u>	<u>No</u>
1. Is a special safe driving message given to personnel going on leave or on extended liberty?	—	—
2. Have all persons under the age of 26 received Driver's Improvement Training (DIC)?	—	—
3. Is a periodic check made by the Commanding Officer/Officer-in-Charge regarding the condition of private vehicles owned by personnel in the unit?	—	—
4. Does the Commanding Officer/Officer-in-Charge discuss private vehicle mishap prevention at safety meetings?	—	—
5. Does your command/organization have Base Order 5101.18, Marine Corps Special Emphasis Seatbelt Program, on file?	—	—
6. Is a check made to ensure that personnel have an operator's license prior to operating a vehicle?	—	—
7. Are drivers tested and trained in vehicles they will be licensed to operate?	—	—
8. Are the drivers' records complete and current?	—	—
9. Is the method utilized in the selection of prospective drivers adequate?	—	—
10. Are provisions made for special training in the operation of forklifts and other special purpose equipment?	—	—
11. Does your command/organization monitor seatbelt usage in GOVs?	—	—
12. How man GOVs are assigned to your command?	—	—



TRAFFIC SAFETY EVALUATION

<u>QUESTION</u>	<u>Yes</u>	<u>No</u>
1. Is a special safe driving message given to personnel going on leave or on extended liberty?	—	—
2. Have all persons under the age of 26 received Driver's Improvement Training (DIC)?	—	—
3. Is a periodic check made by the Commanding Officer/Officer-in-Charge regarding the condition of private vehicles owned by personnel in the unit?	—	—
4. Does the Commanding Officer/Officer-in-Charge discuss private vehicle mishap prevention at safety meetings?	—	—
5. Does your command/organization have Base Order 5101.18, Marine Corps Special Emphasis Seatbelt Program, on file?	—	—
6. Is a check made to ensure that personnel have an operator's license prior to operating a vehicle?	—	—
7. Are drivers tested and trained in vehicles they will be licensed to operate?	—	—
8. Are the drivers' records complete and current?	—	—
9. Is the method utilized in the selection of prospective drivers adequate?	—	—
10. Are provisions made for special training in the operation of forklifts and other special purpose equipment?	—	—
11. Does your command/organization monitor seatbelt usage in GOVs?	—	—
12. How man GOVs are assigned to your command?	—	—

Figure 13-8.--Safety Guidelines (Continued)

Unit Inspected _____	Bldg. No. _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
<u>Fire Prevention</u>				
1. Are fire extinguishers properly mounted, full, inspected regularly?		___	___	___
2. Are Fire Bills posted and fire stations assigned/posted?		___	___	___
3. Fire procedures with reporting instructions, locations or available telephones and Fire Alarm boxes posted?		___	___	___
4. Are extinguishers marked by class of fire?		___	___	___
5. Are fire doors in working order and exits properly marked and clear?		___	___	___
6. Are fire lanes maintained clear with directional arrows or signs for egress?		___	___	___
7. Are door and windors obstructed?		___	___	___
8. Are clearances maintained fire wall, side walls and overhead clearance maintained?		___	___	___
9. Are no smoking signs posted and enforced in hazardous areas? Are butt receptacles provided in smoking area?		___	___	___
10. Are rubbish cans provided, emptied regularly?		___	___	___
11. Are oily rags stored in approved cans and emptied regularly?		___	___	___
12. Are combustible materials stored properly and segregated when necessary?		___	___	___
13. Is electrical work done by authorized personnel?		___	___	___
14. Are extension cords of excessive length?		___	___	___
15. Is there loose wiring?		___	___	___
16. Are stoves and heaters separate from combustibles?		___	___	___
17. Are stoves approved by the Fire Department for use?		___	___	___

Figure 13-8.--Safety Guidelines (Continued)

<u>Buildings and Grounds</u>	Bldg. No. _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
1. Are entrances and exits well lighted and marked?		___	___	___
2. Are doors and windows blocked?		___	___	___
3. Are stairs and steps kept clean and free of obstacles?		___	___	___
4. Are risers painted yellow for visibility in the dark?		___	___	___
5. Are landings, steps or stairs painted?		___	___	___
6. Are they posted "slippery when wet"?		___	___	___
7. Are suitable warning signs posted where there is less than 7 feet of headroom?		___	___	___
8. Are roads, parking lots and walkways kept clear, in good repair and well defined?		___	___	___
9. Are grounds particularly around flammable storage areas kept well policed?		___	___	___
10. Are power mowers and edgers inspected and certified safe?		___	___	___
11. Are personnel engaged in use of power lawn equipment trained?		___	___	___
12. Are personnel provided with safety shoes or steel toe guards?		___	___	___
13. Is gasoline for powers kept in safety cans plainly lettered "GASOLINE"?		___	___	___
14. Is the amount kept to a minimum of 5 gallons?		___	___	___
15. Are drainage ditches kept clean?		___	___	___
16. Is electrical equipment (i.e., buffers, scrubbers) used on floors equipped with 3 wire ground cord?		___	___	___
17. Are heavy duty extension cords used in connection with floor cleaning equipment?		___	___	___
18. Are ceilings kept in good repair, free of loose plaster, paint, etc.?		___	___	___
19. Are burned out or missing bulbs replaced?		___	___	___
20. Are aisleways arranged to provide a minimum of 5 foot candle illumination at floor level?		___	___	___
21. Are windows painted over to block natural light?		___	___	___

Figure 13-8.-- Safety Guidelines.

S-A-M-P-L-E

NOTICE OF UNSAFE OR UNHEALTHFUL WORKING CONDITIONS

An inspection was made on _____ 19__ by the Safety Office
and the following violated safety and health standards or regulations
exist at (physical location of violation) _____
Activity _____

THE FOLLOWING VIOLATED STANDARDS OR REGULATIONS ARE HEREBY POSTED

Standard or regulation being violated	Description of Violation	Date on which violation is to be corrected or the status of any abatement action

SIGNATURE _____ Date of Issuance _____
(Commanding Officer)

Figure 13-7.-- Sample Notice of Unsafe or Unhealthful Working
Conditions

3

INSTRUCTIONS FOR COMPLETION OF THE EMERGENCY CARE AND TREATMENT FORM

NOTE: This form will be used to record all care rendered to patients in the Emergency Room and will be used in lieu of *all* locally prepared emergency room forms. This form is not a substitute for line of duty, accident/injury or third party liability forms, but it may be used as a basis for completing those forms.

1. Complete form for each patient entered on Emergency Room Log.
2. Complete all parts of form.
3. Enter patient's log number from Emergency Room Log.
4. Check appropriate condition in "category" block based on following definitions:
 - Emergent*—A condition which requires immediate medical attention and for which delay is harmful to the patient; such a disorder is acute and potentially threatens life or function.
 - Urgent*—A condition which requires medical attention within a few hours or danger can ensue; such a disorder is acute but not necessarily severe.
 - Non-Urgent*—A condition which does not require the immediate resources of an emergency medical services system; such a disorder is minor or non-acute.
5. Use SF 522, Request for Administration of Anesthesia and for Performance of Operations and Other Procedures, to obtain authorization for any necessary procedures.
6. Orders: Provider enters orders; i.e., CBC, UA, etc. The person completing the action enters the time and his/her initials at the time of completion.
7. Give "Patient's Copy", containing instructions, to patient, sponsor (NOK) or person accompanying patient, except when patient is admitted.
8. File original in patient's treatment record (i.e., Military Health Record, Outpatient Treatment Record or Inpatient Record) as applicable.
9. Establish a treatment record for any patient who does not have a record. File and maintain treatment record in accordance with appropriate directives.

☆ GPO : 1982 O - 360-498 (56)

Figure 13-2.--Emergency Care and Treatment (Continued)

OCCUPATIONAL HEALTH PERMIT
MCBCL 5100/3

- INSTRUCTIONS: 1. Complete in Triplicate.
2. Return Original to Supervisor; 1 Copy to Civilian Personnel; 1 Copy to Base Safety Manager.
3. If an Occupational Injury, Form CA-17 with Part A Completed MUST Also be Submitted.

THIS SECTION TO BE COMPLETED BY SUPERVISOR

TO: OCCUPATIONAL HEALTH NURSE, BUILDING 15, CAMP LEJEUNE, N.C. 28542

FROM: (Title of Supervisor, Shop or Office, and Location)

Shop Foreman, Real Property Maintenance, Base Maintenance

NAME OF EMPLOYEE (First, Middle, Last) Joseph W. Pell	PAYROLL NO. 0000 19999	SOCIAL SEC. NO. 123-45-6789
JOB TITLE Laborer	TIME LEFT JOB 0930	TIME RETURNED 1000

REASON FOR REFERRAL
 INJURY ILLNESS EMPLOYEE'S REQUEST OTHER (Specify)

DATE AND TIME OF INJURY 8-31-83 0900	DATE REFERRED TO CLINIC 8-31-83	OCCUPATIONAL <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> QUESTIONABLE
--	---	---

REMARKS
Employee mowing grass, lawn mower struck rock, hit left leg

NAME OF SUPERVISOR (Print) I. M. Able	SIGNATURE	PHONE 1234	DATE 8-31-83
---	-----------	----------------------	------------------------

THIS SECTION TO BE COMPLETED BY MEDICAL OFFICER

TIME REPORTED	TIME RELEASED	OCCUPATIONAL <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> QUESTIONABLE
---------------	---------------	--

DEGREE OF INJURY
 FIRST AID DISPENSARY HOSPITAL PERSONAL PHYSICIAN SENT HOME OTHER (Explain in Remarks)

DISPOSITION OF EMPLOYEE

RETURN FOR FURTHER TREATMENT	TIME	DATE
RETURN TO WORK		
DISCHARGED. TREATMENT COMPLETED		
RETURN TO LIMITED DUTY AS INDICATED BELOW		
NO LIFTING, PULLING OR CARRYING IN EXCESS OF _____ LBS.		DESK JOB ONLY
NO EXCESSIVE WALKING, STANDING OR BENDING		NO DRIVING GOVERNMENT VEHICLE
NO EXPOSURE TO SOLVENTS, GREASES, OILS, DETERGENTS, ETC.		NO WORKING AROUND MOVING MACHINERY
NO WALKING ON UNEVEN OR SLIPPERY SURFACES		NO WORKING ON LADDERS, SCAFFOLDING, ETC.
NO EXPOSURE TO EXTREME TEMPERATURE OR HUMIDITY		ONE HAND JOB ONLY
OTHER (Explain)		

REMARKS

NAME OF MEDICAL OFFICER (Print or Type)	SIGNATURE OF MEDICAL OFFICER	DATE
---	------------------------------	------

PRIVACY ACT STATEMENT
 Authority: SECNAVINST 5100.10B and OPNAVINST 5100.14
 Principal Purpose: To control and monitor treatment and disposition of civilians of Naval Dispensaries in cases of occupational injury or illness.
 Routine Use: To ensure prompt investigation of occupational injuries, and to initiate any necessary immediate corrective action.
 Disclosure: Voluntary. Treatment will be provided without regard to employee's willingness to divulge all or part of the requested information.

Figure 13-3. Occupational Health Permit

NOTICE - INJURED PERSON PLEASE READ THE PRIVACY ACT STATEMENT BEFORE AFFIXING SIGNATURE

MISHAP AND INJURY REPORT (5100)

NAVMC 10767 (REV. 5-82) (Previous editions are obsolete and will not be used.)
SN. 0000-00-006-2934 U/I: SH

REPORT SYMBOL MC 5100-02

TO

1. INJURED PERSON (Last name, first, MI) PELL, Joseph W.				2. SSN 123-45-6789		FOR REGIONAL SAFETY REPORTING CENTER USE ONLY ACCIDENT IDENTIFIER CODE	
3. AGE 40	4. SEX M	5. PAY GRADE WG-3	6. MOS/OCCUPATION/TRADE Laborer				
7. CATEGORY (Military only)				8. JOB ASSIGNMENT Laborer			
9. REPORTING ACTIVITY/UNIT Real Property Maintenance Base Maintenance MCB, Camp Lejeune, NC				10. DUTY STATION Same as 9			
11. CHECK ONE <input type="checkbox"/> MILITARY <input checked="" type="checkbox"/> CIVILIAN				12. CHECK ONE (or more, if applicable) <input type="checkbox"/> FATALITY <input checked="" type="checkbox"/> INJURY <input type="checkbox"/> ILLNESS <input type="checkbox"/> PERMANENT DISABILITY <input type="checkbox"/> PARTIAL DISABILITY <input type="checkbox"/> PROPERTY DAMAGE			
13. DATE OF INJURY (Day/Mo./Yr.) 31 Aug 1983		14. DAY OF WEEK Wednesday		15. HOUR OF DAY 0900		16. DATE LOST WORKDAY STARTED 31 Aug 1983	
17. DATE RETURNED TO WORK 31 Aug 1983		18. NO. OF WORKDAYS LOST 0		19. NO. OF DAYS RESTRICTED 2		20. NO. OF DAYS HOSPITALIZED 0	
21. TOTAL DAYS LOST 2		22. DUTY STATUS Civil Service - on duty		23. PLACE OF OCCURRENCE Industrial area - groundskeeping		24. WORKPLACE (Occupational mishaps only) Real Property Maintenance	

25. DESCRIPTION OF MISHAP (Describe circumstances and events leading to and associated with mishap in sufficient detail that reviewing authorities may gain a complete understanding of cause and effect relationships. If more space is needed use Block 35.)

Mowing grass at Bldg 1403, lawn mower struck rock, hit left leg.

26. TYPE OF MISHAP Laceration	27. WEATHER CONDITION clear
28. SOURCE OF INJURY other - rock	29. CAUSE OF MISHAP unsafe work practice
30. HAZARDOUS CONDITION no hazardous condition	31. UNSAFE ACT inattention to surroundings
32. UNSAFE PERSONAL FACTOR improper attitude	33. TYPE OF INJURY struck by
34. BODY PART leg (left)	36. TOTAL COST None
35. TYPE PROPERTY, EQUIPMENT DAMAGED None	

37. CORRECTIVE ACTION TAKEN

Employee has been cautioned to do a preliminary walk-over prior to mowing, as well as being alert when he is mowing. Used as a topic for shop safety discussion.

I have read and understand the Privacy Act Statement, a copy of which I have received.

38. SIGNATURE (Supervisor) I. M. Able		39. TITLE, GRADE Shop Foreman, WG-10		40. DATE 1 Sep 1983	
---	--	--	--	-------------------------------	--

Detach and furnish to injured person.

DATA REQUIRED BY THE PRIVACY ACT OF 1974
(5 U.S.C. 552A)

Authority for obtaining information on this form is Title 5 U.S. Code, Section 301. Executive Order 9397 of 22 November 1943 authorizes use of your Social Security Number. The purpose of this form is to gather and provide data for the analysis of miscellaneous mishaps other than government vehicle and private vehicle; to collect and provide data to the Department of Defense and Department of Labor on the subject of occupational safety and health; and to maintain safety and mishap prevention data and statistics. The information is used to record description of personal injury; mishap description and days lost on the job; personal vital statistics information; property damages, to include personal or private; and industrial equipment damages. Your Social Security Number is being obtained for purposes of positive personal identification. Providing information on this form is mandatory. Failure to provide the requested information would hamper the collection of data needed for the analysis of miscellaneous mishaps in which members of the Marine Corps are involved. Disclosure of your Social Security Number is mandatory.

NAVMC 10767 (REV. 5-82) MISHAP AND INJURY REPORT - PRIVACY ACT STATEMENT
Figure 13-4. -- Mishap and Injury Report

41. CORRECTIVE ACTION NOT ACCOMPLISHED/REASON

42. ADDITIONAL COMMENTS

43. SIGNATURE (Commanding Officer/Safety Officer)

44. TITLE, DATE

45. DATE

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Figure 13-4.--Mishap and Injury Report (Continued)

PERSONAL PROTECTIVE EQUIPMENT

<u>HAZARDOUS TRADE AND/OR OCCUPATION</u>	<u>FOOTWEAR</u>	<u>HEADWEAR</u>	<u>EYEWEAR</u>	<u>OTHER</u>
Air Conditioning Equipment Mechanic	X	X-2 or 3	X-9, 12, or 14	
Aircraft Mechanic	X		X-9, 13, 14	
Aircraft Refuelers	X-Non-Conductive		15	
Asphalt Worker	X		X-9 or 12	X-7
Automotive Equipment Servicers (Lube)	X	X-2, 3		
Automotive Equipment Servicers (Tires)	X			
Automotive Mechanic/Helper	X		X-9, 10, 13, or 14	
Automotive Mechanic/Helper (Body/Fender)	X		X-9, 10, 13, or 14	
Blocker and Bracer	X	X-1	X-9, 14	
Boiler Plant Equipment Mechanic	X (Elec)	X-1 (Elec)	X-9, 14 X-9, 13,	
Cable Splicer (Comm)	X	X-1, 2	15	X-7
Carpenter/Helper	X	X-1, 2	X-9, 14	
Cement Finisher	X	X-1	X-9, 13	
Coal Handling Equipment Operator			X-9, 13	
Crane Operator		X-1	X-9, 14	
Crash Crew Personnel	X (Elec)			X-18
Electrician/Helper	X (Elec)	X-1, 2 (Elec)	X-9, 13, 14, 15	X-7
Electrician/Lineman/Comm	X (Elec)	X-1, 2 (Elec)	X-9, 13, 14, 15	X-7
Electrician/Telephone	X (Elec)	X-1, 2	X-9, 13, 14, 15	
Electronics Mechanic	X		X-9, 14	
Engineering Equipment Operator	X	X-1	X-9, 14 X-9, 13, 14	
Firefighters		X-1		
Forestry Technician	X	X-1	X-9, 13 X-9, 13, 14	
Galley Equipment Mechanic	X		X-9, 13, 14	
Gardener		X-1	14 X-9, 13, 14	
Gas Appliance Repairer	X		14	
Glazer			X-9, 14	
Heating Equipment Mechanic (Covers gas, cool, oil systems)	X		X-9, 14 X-9, 12, 13 (Tint)	
Heating Plant Operator	X	X-1, 2	X-9, 10, 13, 14	
Heavy Duty Equipment Mechanic	X	X-2, 3		
Instrument Mechanic Electronic/ Optical			X-9, 14	

Figure 13-5.--Personal Protective Equipment

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PERSONAL PROTECTIVE EQUIPMENT
(Continued)

<u>HAZARDOUS TRADE AND/OR OCCUPATION</u>	<u>FOOTWEAR</u>	<u>HEADWEAR</u>	<u>EYEWEAR</u>	<u>OTHER</u>
Joiner		X-9, 13, 14		
Laborer (All)	X	X-1, 2	X-9, 13	
Laundry Equipment Repairman	X		X-9, 13, 14	
Locksmith			X-9, 14	
Machinist	X	X	X-9, 10, 12, 13, 14	
Maintenanceman	X		X-9, 13, 14	
Mason/Helper	X	X-1	X-9, 14	
Millman	X		X-9, 13, 14	
Office Appliance Repairer	X		X-9, 14	
Ordnanceman/Worker	X	X-2, 3	X-9, 10, 13, 14	
Packer	X		X-9, 14	
Painter (covers all methods)			X-15	X-5, 7
Pest Controller	X			X-7, 15
Pipefitter and/or Plumber	X	X-1	X-9, 13, 14	
Plasterer	X	X-1	X-9, 13, 14	
Preservation and Packing Mechanic/Worker	X		X-9, 13, 14	
Radio Mechanic			X-9, 13, 14	
Saw Filer			X-9, 13, 14	
Sheetmetal Equipment Mechanic	X	X-1	X-9, 13, 14	X
Small Engine Mechanic	X		X-9, 13, 14	
Stockman	X		X-9, 13	
Toolroom Mechanic	X		X-9, 13, 14	
Tractor Operator			X-9, 13, 14	
Warehouseman	X			

Figure 13-5.- Personal Protective Equipment---(Continued)

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PERSONAL PROTECTIVE EQUIPMENT
(Continued)

<u>HAZARDOUS TRADE AND/OR OCCUPATION</u>	<u>FOOTWEAR</u>	<u>HEADWEAR</u>	<u>EYEWEAR</u>	<u>OTHER</u>
Welder	X	X-4	X-11, 14	X-7,16,17
Wood Worker	X		X-9, 14	

Note: Occupations not listed, but who work in near proximity to one or more of those listed, will be required to wear adequate and appropriate protection as determined by supervisors and/or the Base Safety Manager.

 LEGEND: X - Must wear protective equipment at all times while engaged in hazardous occupations or operations.

- 1 - Safety Hat
- 2 - Safety Cap
- 3 - Bump Cap
- 4 - Welder's Protective Cap
- 5 - Respirator
- 6 - Cream or Lotion
- 7 - Gloves (protective)
- 8 - Apron (protective)
- 9 - Safety Spectacle Goggles
- 10 - Eyecup (Chippers) Goggles
- 11 - Spectacle Goggles, Type A, Filtered Lens (Welders)
- 12 - Face Shield
- 13 - Cover Goggles
- 14 - Corrective Safety Glasses
- 15 - Other eye protective equipment (splash goggles, plastic spectacle goggles, etc.)
- 16 - Welder's Helmet
- 17 - Welder's Protective Clothing
- 18 - Non-Static, Flame Resistant Coverall

Figure 13-5.- Personal Protective Equipment---(Continued)

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S-A-M-P-L-E

NOTICE OF UNSAFE OR UNHEALTHFUL WORKING CONDITIONS

An inspection was made on _____ 19____ by the Safety Office
and the following violated safety and health standards or regulations
exist at (physical location of violation) _____
Activity _____

THE FOLLOWING VIOLATED STANDARDS OR REGULATIONS ARE HEREBY POSTED

Standard or regulation being violated	Description of Violation	Date on which violation is to be corrected or the status of any abatement action

SIGNATURE _____ Date of Issuance _____
(Commanding Officer)

Buildings and Grounds

Bldg. No. _____

Yes No NA

- | | | | |
|---|-----|-----|-----|
| 1. Are entrances and exits well lighted and marked? | ___ | ___ | ___ |
| 2. Are doors and windows blocked? | ___ | ___ | ___ |
| 3. Are stairs and steps kept clean and free of obstacles? | ___ | ___ | ___ |
| 4. Are risers painted yellow for visibility in the dark? | ___ | ___ | ___ |
| 5. Are landings, steps or stairs painted? | ___ | ___ | ___ |
| 6. Are they posted "slippery when wet"? | ___ | ___ | ___ |
| 7. Are suitable warning signs posted where there is less than 7 feet of headroom? | ___ | ___ | ___ |
| 8. Are roads, parking lots and walkways kept clear, in good repair and well defined? | ___ | ___ | ___ |
| 9. Are grounds particularly around flammable storage areas kept well policed? | ___ | ___ | ___ |
| 10. Are power mowers and edgers inspected and certified safe? | ___ | ___ | ___ |
| 11. Are personnel engaged in use of power lawn equipment trained? | ___ | ___ | ___ |
| 12. Are personnel provided with safety shoes or steel toe guards? | ___ | ___ | ___ |
| 13. Is gasoline for powers kept in safety cans plainly lettered "GASOLINE"? | ___ | ___ | ___ |
| 14. Is the amount kept to a minimum of 5 gallons? | ___ | ___ | ___ |
| 15. Are drainage ditches kept clean? | ___ | ___ | ___ |
| 16. Is electrical equipment (i.e., buffers, scrubbers) used on floors equipped with 3 wire ground cord? | ___ | ___ | ___ |
| 17. Are heavy duty extension cords used in connection with floor cleaning equipment? | ___ | ___ | ___ |
| 18. Are ceilings kept in good repair, free of loose plaster, paint, etc.? | ___ | ___ | ___ |
| 19. Are burned out or missing bulbs replaced? | ___ | ___ | ___ |
| 20. Are aisleways arranged to provide a minimum of 5 foot candle illumination at floor level? | ___ | ___ | ___ |
| 21. Are windows painted over to block natural light? | ___ | ___ | ___ |

Figure 13-8.-- Safety Guidelines.

<u>Mess Hall</u>	Bldg. No. _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
1.	Is stock properly stacked in storerooms?	___	___	___
2.	Is storeroom properly ventilated?	___	___	___
3.	Is protective clothing (metal apron and gloves) and devices utilized when operating saws, grinders, and other machines?	___	___	___
4.	Are pads, potholders and other insulated hand guards provided?	___	___	___
5.	Are hot water and steam lines insulated to protect personnel from accidental burns?	___	___	___
6.	Are operating instructions posted by each machine?	___	___	___
7.	Are guards in place, feeds utilized or push sticks?	___	___	___
8.	Do reefer doors contain emergency opening devices?	___	___	___
9.	Is rodent and insect control being employed?	___	___	___
10.	Are insecticides or other substances that may contaminate food segregated?	___	___	___
11.	Are good housekeeping and sanitation habits being enforced?	___	___	___
12.	Are overhead exhaust systems cleaned regularly?	___	___	___

Figure 13-8.--Safety Guideline (Continued)

Wood Working

Bldg. No. _____

Yes No NA

- | | | | | |
|-----|--|-----|-----|-----|
| 1. | Are personnel working in woodworking shops aware of hazards involved due to the speed at which machines operate and sharp cutting edges? (NAVMAT P5100 refers) | ___ | ___ | ___ |
| 2. | Are personnel instructed that loose clothing, and jewelry may catch in moving machinery? Are such items prohibited? | ___ | ___ | ___ |
| 3. | Are floors kept clean, free of sawdust, scrapes of wood and other objects which may cause tripping or slipping? | ___ | ___ | ___ |
| 4. | Are aisleways plainly marked? | ___ | ___ | ___ |
| 5. | Is personal protective clothing and equipment provided in adequate quantity? | ___ | ___ | ___ |
| 6. | Are all machines properly guarded? | ___ | ___ | ___ |
| 7. | Are all hazardous areas marked with signs? | ___ | ___ | ___ |
| 8. | Are signs posted stating only authorized personnel will operate woodworking machines? | ___ | ___ | ___ |
| 9. | Are switches within immediate reach of the operator on each machine? | ___ | ___ | ___ |
| 10. | Is a method provided for locking switches in the off position during maintenance operations? | ___ | ___ | ___ |
| 11. | Is adequate working space provided around each machine? | ___ | ___ | ___ |
| 12. | Are overhead lofts provided with stable double guard rail? | ___ | ___ | ___ |
| 13. | Are operating instructions and safety regulations posted near each machine? | ___ | ___ | ___ |
| 14. | Are nonadjustable ladders that are not self-supporting equipped with non skid bases or safety hooks? | ___ | ___ | ___ |
| 15. | Are adjustable extension ladders equipped with non-skid bases and spring loaded rung locks with metal shackles? | ___ | ___ | ___ |
| 16. | Are step ladders equipped with an automatic spreader or locking device to keep them open? | ___ | ___ | ___ |

<u>Welding and Compressed Gases</u>	Bldg. No. _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
1. Is suitable fire extinguishing equipment of approved types being maintained near all welding and cutting operations? (NAVMAT P5100 refers)		___	___	___
2. Is adequate ventilation provided while welding? (NAVMAT P5100 refers)		___	___	___
3. Is appropriate protective clothing and equipment provided? Flameproof gloves, aprons, leggings, jackets, etc., as required. Eye protection (goggles) of correct type and head gear.		___	___	___
4. Is there a designated, posted area for cylinders?		___	___	___
5. Are cylinders stored standing upright?		___	___	___
6. Are cylinders fastened to prevent their upset?		___	___	___
7. Are cylinders kept separate by type?		___	___	___
8. Are cylinders free from possible external damage?		___	___	___
9. Are cylinders away from combustibile materials? (Oil, grease, acetelyne)		___	___	___
10. Are cylinders far enough away from actual operation so sparks, hot slag or flame can't reach them?		___	___	___
11. Are cylinders away from other sources of fire, in summer away from direct sunlight (maximum temperature 130 degrees F.)		___	___	___
12. Is extreme cleanliness maintained where oxygen acetylene welding equipment is utilized?		___	___	___
13. Are safety regulations and preparatory operating procedures posted?		___	___	___
14. Are safety observers used during welding operations?		___	___	___
15. Are protective caps on compressed gas cylinders, when provided in the design, in place when in storage, in transit and whenever regulators are not in place? (NAVMAT P5100 refers)		___	___	___
16. Are suitable trucks or carts used, with provisions for holding cylinders upright when moving them? (NAVMAT P5100 refers)		___	___	___
17. Are empty cylinders tagged as "Empty" and segregated from full cylinders and valves securely fastened to assure the return of empty cylinders in good condition to suppliers?		___	___	___

Figure 13-8.--Safety Guidelines (Continued)

Supply and Warehousing

Bldg. No. _____

	<u>Yes</u>	<u>No</u>	<u>NA</u>
1. Are warehouse principles followed as to firelane aisleways, cleaning space and boundary lines?	—	—	—
2. Is material stacked in a secure manner?	—	—	—
3. Are overhead storage lofts provided with stable double guard rail and posted as to maximum load limits?	—	—	—
4. Are safety shoes and gloves supplied and are they worn when handling materials?	—	—	—
5. Are personnel engaged in handling materials instructed by supervisors in the proper method of lifting heavy objects?	—	—	—
6. Are hand trucks and similar devices loaded for easy handling? (Not overloaded). Are loads pulled up inclines and guided down keeping load below the worker?	—	—	—
7. Are M/O boxes stacked in front of windows preventing natural light from entering?	—	—	—
8. Are desks, work benches and work areas organized beneath overhead lights to afford maximum use of available lighting?	—	—	—
9. Is supplementary lighting used where natural or overhead lights are not available?	—	—	—
10. Are windows painted unnecessarily preventing natural light from entering?	—	—	—
11. Is unauthorized asbestos material being stored? (SECNAV MSG R252240Z).	—	—	—

Figure 13-8.--Safety Guidelines (Continued)

<u>Motor Transport and Battery Shop</u> (Cont)		<u>Yes</u>	<u>No</u>	<u>NA</u>
16.	Is a siphon pump available?	—	—	—
17.	Is a deluge shower available?	—	—	—
18.	Does ventilation equipment include general exhaust as well as local exhaust system as appropriate?	—	—	—
19.	Are terminal straps available for handling batteries?	—	—	—
20.	Are safety regulations and operating procedures posted in shop including signs restricting area to entrance by authorized personnel only?	—	—	—
21.	Is suitable fire extinguishing equipment of approved types being maintained near all work areas?	—	—	—
22.	Is acid always poured into water?	—	—	—
23.	Are vent caps replaced before attaching or detaching charger cables?	—	—	—

Figure 13-8.--Safety Guidelines (Continued)

<u>Communication and Electronics</u>	Bldg. No. _____	<u>Yes</u>	<u>No</u>	<u>NA</u>
1. Are personnel who are engaged in electrical work fully informed of the hazards involved?		___	___	___
2. Are rubber gloves provided and are they used when engaged in electrical work?		___	___	___
3. Are metal handles of hand tools insulated?		___	___	___
4. Are appropriate warning signs displayed in electrical, electronics shops?		___	___	___
5. Are periodic inspections of equipment held? Is equipment properly marked?		___	___	___
6. Are non conductive rubber mats provided for performance of maintenance on electrical equipment?		___	___	___
7. Are all electrical workers trained in current methods of artificial resuscitation?		___	___	___
8. Are these procedures posted for personnel to see?		___	___	___
9. Is training given annually and documented?		___	___	___
10. Are signs available for posting when high voltage equipment is in use (i.e., DANGER, HIGH VOLTAGE) or repair? (i.e., DO NOT TURN ON).		___	___	___
11. When repairs to equipment are authorized is a safety observer being used?		___	___	___

Figure 13-8.--Safety Guidelines (Continued)

Unit Inspected _____	Bldg. No. _____	Yes	No	NA
<u>Fire Prevention</u>				
1. Are fire extinguishers properly mounted, full, inspected regularly?		___	___	___
2. Are Fire Bills posted and fire stations assigned/posted?		___	___	___
3. Fire procedures with reporting instructions, locations or available telephones and Fire Alarm boxes posted?		___	___	___
4. Are extinguishers marked by class of fire?		___	___	___
5. Are fire doors in working order and exits properly marked and clear?		___	___	___
6. Are fire lanes maintained clear with directional arrows or signs for egress?		___	___	___
7. Are door and windors obstructed?		___	___	___
8. Are clearances maintained fire wall, side walls and overhead clearance maintained?		___	___	___
9. Are no smoking signs posted and enforced in hazardous areas? Are butt receptacles provided in smoking area?		___	___	___
10. Are rubbish cans provided, emptied regularly?		___	___	___
11. Are oily rags stored in approved cans and emptied regularly?		___	___	___
12. Are combustibile materials stored properly and segregated when necessary?		___	___	___
13. Is electrical work done by authorized personnel?		___	___	___
14. Are extension cords of excessive length?		___	___	___
15. Is there loose wiring?		___	___	___
16. Are stoves and heaters separate from combustibles?		___	___	___
17. Are stoves approved by the Fire Department for use?		___	___	___

Figure 13-8.--Safety Guidelines (Continued)

TRAFFIC SAFETY EVALUATION

<u>QUESTION</u>	<u>Yes</u>	<u>No</u>
1. Is a special safe driving message given to personnel going on leave or on extended liberty?	—	—
2. Have all persons under the age of 26 received Driver's Improvement Training (DIC)?	—	—
3. Is a periodic check made by the Commanding Officer/Officer-in-Charge regarding the condition of private vehicles owned by personnel in the unit?	—	—
4. Does the Commanding Officer/Officer-in-Charge discuss private vehicle mishap prevention at safety meetings?	—	—
5. Does your command/organization have Base Order 5101.18, Marine Corps Special Emphasis Seatbelt Program, on file?	—	—
6. Is a check made to ensure that personnel have an operator's license prior to operating a vehicle?	—	—
7. Are drivers tested and trained in vehicles they will be licensed to operate?	—	—
8. Are the drivers' records complete and current?	—	—
9. Is the method utilized in the selection of prospective drivers adequate?	—	—
10. Are provisions made for special training in the operation of forklifts and other special purpose equipment?	—	—
11. Does your command/organization monitor seatbelt usage in GOVs?	—	—
12. How man GOVs are assigned to your command?	_____	

Figure 13-8.--Safety Guidelines (Continued)

ORGANIZATIONAL RELATIONSHIP QUAD COMMAND
SAFETY PROGRAM

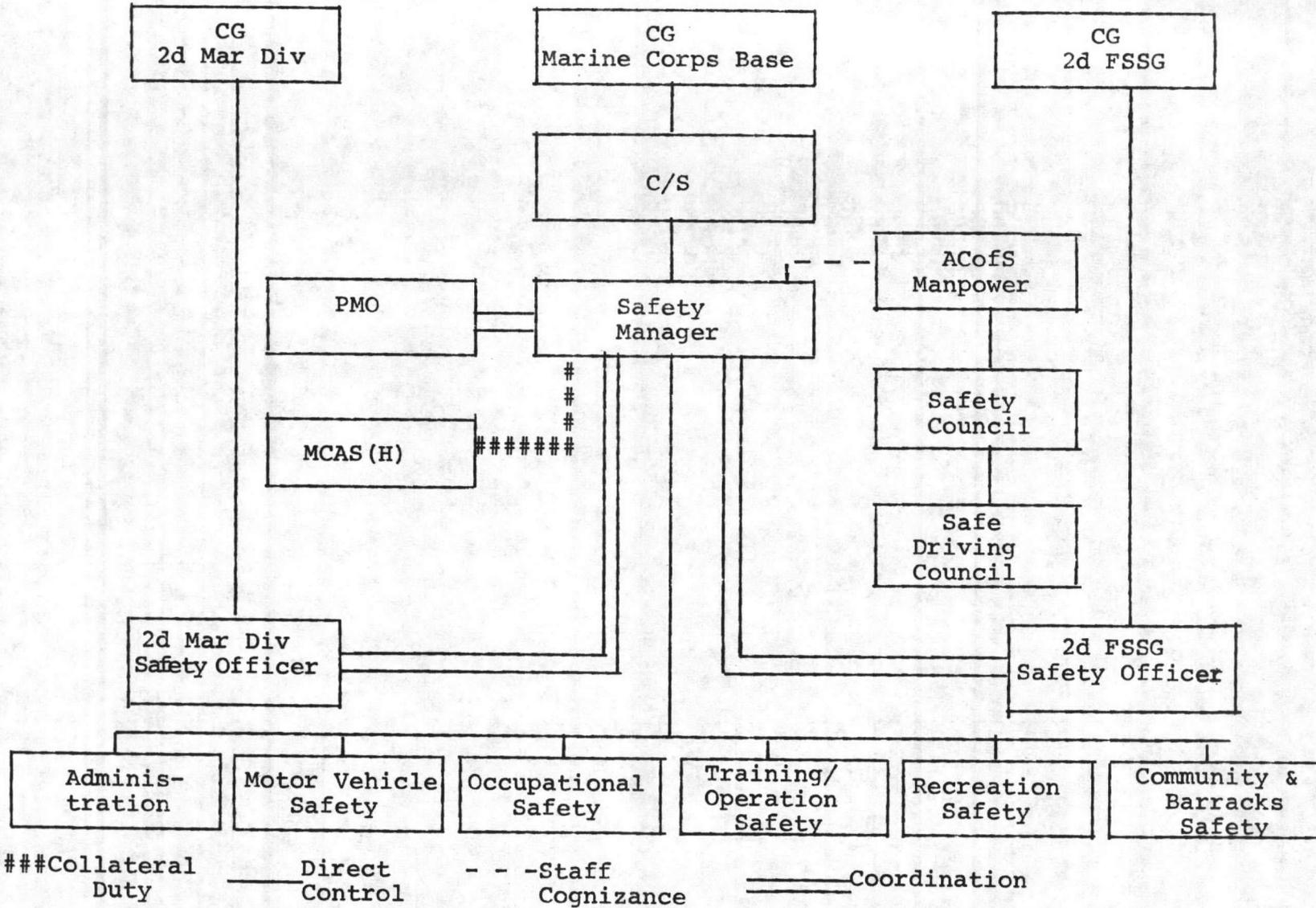


Figure 13-1.--- Organizational Relationship Quad Command Safety Program
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13-3

EMERGENCY CARE AND TREATMENT <i>(Medical Record)</i>				TREATMENT FACILITY (Stamp)		LOG NUMBER
ARRIVAL		TRANSPORTATION TO HOSPITAL <i>(Attach care enroute sheet)</i>		CURRENT MEDS. (tetanus immunization and other data)		HISTORY OBTAINED FROM <input type="checkbox"/> PATIENT <input type="checkbox"/> OTHER (Specify)
DATE		TIME				ALLERGIES
DAY	MONTH	YR.	<input type="checkbox"/> PRIVATE VEHICLE <input type="checkbox"/> AMBULANCE <input type="checkbox"/> OTHER (Specify)			
PATIENT'S HOME ADDRESS OR DUTY STATION (City, State and ZIP Code)						HOME TELE. NO. (Inc. area code)
CHIEF COMPLAINT(S) (Include symptom(s), duration)				SEX	AGE	POSSIBLE THIRD PARTY PAYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
VITAL SIGNS		DESCRIBE (1) Subjective data (Pertinent History); (2) Objective data (Examination - include results of tests and x-rays); (3) Assessment (Diagnosis); (4) Plan (Treatment/Procedures - include medication given and follow-up)				TIME SEEN BY PROVIDER
TIME						
BP						
PULSE						
RESP.						
TEMP.						
WT. (Child)						
CATEGORY (See reverse)						
<input type="checkbox"/> EMERGENCY						
<input type="checkbox"/> URGENT						
<input type="checkbox"/> NON-URGENT						
ORDERS	INITS.	TIME				
ASSESSMENT/DIAGNOSIS						
DISPOSITION (Check all that apply)						
<input type="checkbox"/> HOME <input type="checkbox"/> FULL DUTY						
QUARTERS						
<input type="checkbox"/> 24 Hrs.	<input type="checkbox"/> 48 Hrs.	<input type="checkbox"/> 72 Hrs.				
MODIFIED DUTY UNTIL:						
DAY	MONTH	YEAR				
REFERRED TO (Indicate clinic)						
<input type="checkbox"/> EMERGENCY <input type="checkbox"/> TODAY						
<input type="checkbox"/> 72 HOURS <input type="checkbox"/> ROUTINE						
ADMIT. TO HOSP. UNIT/SERVICE						
CONDITION UPON RELEASE						
<input type="checkbox"/> IMPROVED <input type="checkbox"/> UNCHANGED						
<input type="checkbox"/> DETERIORATED						
TIME OF RELEASE:						

(CONTINUE ON SF 507, IF NEEDED)

PATIENT'S IDENTIFICATION (Mechanical imprint)
 FOR WRITTEN ENTRIES GIVE: Name - last, first, middle;
 SSN, DOB, service status, name and relation of sponsor or next
 of kin. (IMPORTANT: LIST FACILITY HOLDING TREATMENT RECORD).

SIGNATURE OF PROVIDER AND ID STAMP

INSTRUCTIONS TO PATIENT (Include medications ordered, any limitations and follow up plans)