

SAFETY MEETING

Company Name: Superior Waterproofing

Tool Talk #21

Date: 5/27/2022

Two types of heat illness:

Heat Exhaustion



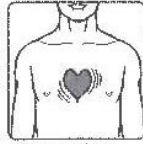
Dizziness



Headache



Sweaty skin



Fast heart beat



Nausea, vomiting



Weakness



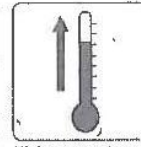
Cramps



Heat Stroke



Red, hot, dry skin



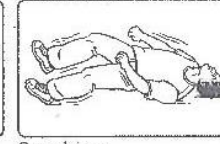
High temperature



Confusion



Fainting



Convulsions



Heat kills – get help right away!

Red Cross Heat Safety Tips: Everyone is at risk when temperatures rise above 90 degrees.

Dress for the heat. Wear lightweight, light-colored clothing. Wear a hat. **Wear Cooling Bands**

Drink water. Carry water or juice and drink continuously even if you do not feel thirsty. Avoid alcohol and caffeine, which dehydrate the body. Avoid using salt tablets unless directed to do so by a physician.

Eat small meals and eat more often. Avoid high-protein foods, which increase metabolic heat.

General Care for Heat Emergencies:

Heat cramps or heat exhaustion: Get the person to a cooler place and rest in a comfortable position, elevate feet about 12 inches. If the person is fully awake and alert, give half a glass of cool water every 15 minutes. Do not let them drink too quickly. Do not give liquids that contain alcohol or caffeine. Remove or loosen clothing and apply cool, wet cloths. Call 9-1-1 if the person refuses water, vomits or loses consciousness.

Heat stroke: Heat stroke is a life-threatening situation! Help is needed fast. **Call 9-1-1.** Move the person to a cooler place. Quickly cool the body. Immerse victim in a cool bath, or wrap wet sheets around the body and fan it. Watch for signals of breathing problems. Keep the person lying down and continue to cool the body any way you can. If the victim refuses water or is vomiting or there are changes in the level of consciousness, do not give anything to eat or drink.

QUESTION: 1. Which one of the following is not a sign of heat stroke? a) Confusion b) Sweaty Skin

Download OSHA Heat App @ http://www.osha.gov/SLTC/heatillness/heat_index/heat_app.html

Reviewed MSDS # _____ Subject _____

Meeting Attended By _____

Supervisor's Signature _____