

First Aid

1. Purpose

USPL has established a First Aid policy to comply with OSHA’s Medical Services and First Aid Standard (CFR 1910.151).

USPL’s policy is designed to:

- Provide first aid supplies for treatment of minor injuries.
- Provide access to medical personnel for advice and consultation on the overall safety and health condition of employees.
- Train employees who meet the criteria for first aid and/or CPR training.

2. Scope

This policy applies to all USPL personnel who are trained in first aid and/or CPR and who choose to render it. It additionally outlines requirements for the provision of first aid kits and first aid/CPR training. First Aid must be limited only to that treatment, which is necessary to prevent death or further injury, relieve pain and prevent or reduce shock. USPL employees are not expected to render first aid and CPR as part of their normal job duties.

3. Minimum Requirements

	Minimum Requirements	Supporting Documentation
1.	Adequate first aid supplies shall be readily available at all work locations.	Section 7
2.	For any USPL location that determines a need to have an AED in the workplace, the requirements of section 8 shall be met.	Section 8
3.	Post-exposure vaccinations and medical evaluations are available to all employees who have had an exposure incident, including incidents as a result of “Good Samaritan Act”	Section 9
4.	Employees required to be trained in first aid and/or CPR shall be identified in VTA and assigned appropriate levels and frequency of training.	Section 10

4. Definitions

Bloodborne Pathogens—Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

CPR—Cardiopulmonary resuscitation, an emergency medical procedure for a victim of cardiac arrest or, in some circumstances, respiratory arrest.

Exposure Incident—A specific eye, mouth, or other mucous membrane, non-intact skin, or parenteral contact (piercing, such as needlesticks, cuts, abrasions) with blood or other potentially infectious materials that results from the performance of an employee's duties.

First Aid—The immediate, temporary care given to a victim of an accident or sudden illness until the services of a physician can be obtained.

Marine terminal—A facility such as bulkheads, piers, docks, and other berthing locations and adjacent areas and structures associated with the primary movement of cargo or materials from vessel to shore or shore to vessel.

Personal Protective Equipment (PPE)—Specialized clothing or equipment worn by an employee for protection against a hazard.

Stokes stretcher—A type of stretcher commonly used to transfer injured people to and from boats. The stretcher is a wire basket supported by iron rods, so even if it is tipped, the casualty is held securely in place.

Universal Precautions— all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other bloodborne pathogens.

5. Roles and Responsibilities

5.1. Employees

- A. Attend training as scheduled.

5.2. Supervisors

- A. Ensure first aid kits are available at facilities and are kept stocked.
- B. Notify Safety Coordinator if an AED will be located at the facility.
- C. Notify the Health Services Advisor if any employee had a bloodborne pathogen exposure incident.

5.3. Safety Coordinator

- A. Determine the requirements for obtaining and maintaining an AED in the state where the requesting facility is located.

5.4. Health Services Advisor

- A. Provide advice to the supervisor of any employee who had an exposure incident.

6. General

The First Aid policy is designed to identify the employees who require first aid and/or CPR training. The First Aid policy lists requirements and suggestions for the contents of first aid kits. USPL employees are not expected to render first aid and CPR as part of their normal job duties.

- A. In the event that an employee does decide to provide basic first aid or life support assistance to an injured person, some basic steps to remember are as follows:

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1. Keep calm and note the cause of accident and number of victims.
 2. Summon medical assistance.
 3. Move victim, only if he/she is in immediate danger.
 4. Assist emergency personnel when they arrive by providing pertinent information, such as medical alert tags.
- B. If first aid/CPR is rendered, protect yourself, apply universal precautions such as body fluid barriers and gloves, and wash thoroughly afterwards.

7. First Aid Kits

For questions about any item in a first aid kit, contact the Health Services Manager and forward the label from the product showing the ingredients.

- A. Adequate first aid supplies shall be readily available at all work locations.

Note: At work locations without medically trained individuals, only basic first aid supplies for the treatment of minor injuries should be maintained. For more serious injuries and illnesses, the victim should be transported immediately to a facility where medical professionals are available.

- B. Use of the antiseptics merbromin (Mercurochrome) and thiomersal (Merthiolate) is prohibited.
- C. Kits shall not include any internal medications.
- D. Sterile items shall be sealed in individual packages.
- E. Supplies in first aid kits shall be maintained.
1. The kit must be checked monthly and restocked as needed.
- F. Basic first aid kits shall be purchased from a supplier with consideration for the intended purpose used to determine the proper size and contents.
- G. See Appendix I for a listing of suggested minimum contents for first aid kits as stated in ANSI Z308.1-2009 for facilities, and the additionally required list of first aid kits and lifesaving equipment required at the dock for marine terminals during cargo transfers as stated in 29 CFR 1917.26

8. Automated External Defibrillator (AED)

Automated external defibrillators (AEDs) are more prevalent in today's work places as a tool to assist an individual who may be experiencing cardiac arrest. Each state has its own rules and requirements governing the acquisition, use, maintenance and training requirements associated with AEDs.

- A. For any USPL location that determines a need to have an AED in the workplace, the following requirements shall be met:
1. The Safety Coordinator supporting the particular location shall review the state-specific regulations pertaining to AEDs and prepare a documented summary of the requirements.
 2. AEDs shall be purchased upon approval by a licensed health care professional in accordance with state requirements.

3. The location shall assign a designated individual who will have responsibility for the inspection and maintenance of the AEDs.
 4. CTM tasks shall be developed for the maintenance of the AEDs.
 5. Any individual expected to use an AED shall receive the appropriate training and documented in VTA.
- B. BP's preferred AED is the HeartSine Samaritan. Refer to BP Guide GG 4.6-0001, Automated External Defibrillators in the Workplace, which is summarized in Appendix II for further information.

9. Post – Exposure Vaccination and Medical Follow-Up Procedures for Bloodborne Pathogens

If an employee does administer first aid through a “Good Samaritan Act” while at work, and is exposed to human blood or other potentially infectious materials, that employee shall have post-exposure vaccinations and medical evaluations made available to them.

- A. An exposure incident, as defined by OSHA in their Bloodborne Pathogens standard, means a specific eye, mouth, or other mucous membrane, non-intact skin, or parenteral contact (piercing, such as needlesticks, cuts, abrasions) with blood or other potentially infectious materials that results from the performance of an employees' duties.
- B. Post-exposure vaccinations and medical evaluations are available to all employees who have had an exposure incident, including incidents as a result of “Good Samaritan Act” (e.g. an employee assisting a fellow employee with a bleeding nose. This act is not a part of the employee's required duty). These evaluations and vaccinations are provided at no cost to the employees and are provided by or under the supervision of a licensed physician or licensed healthcare provider at a reasonable time and place. All necessary laboratory tests are conducted by an accredited laboratory.
- C. The medical evaluation shall include the following elements:
 1. Documentation of the route(s) of exposure and the circumstances under which the exposure occurred.
 2. Identification and documentation of the source individual, unless this is not feasible or prohibited by state or local law.
- D. The Health Services Advisor shall be contacted for advice.

10. Employee Training

- A. An employee shall be trained in first aid if:
 1. The employee is a designated First Aid responder because their work location is more than 15 minutes away from emergency medical services (e.g., Pipeliners on the Right-of-Way, Damage Prevention personnel).
 2. The employee is a standby for working on live overhead electrical lines or transformers.
 3. The employee is a designated provider of First Aid on a Confined Space Entry (CSE) Rescue Team.
- B. An employee shall be trained in CPR if:

1. The employee is a standby for any of the following duties:
 - a) Working on live overhead electrical lines or transformers.
 - b) Entry into an underground electrical vault with energized equipment.
 - c) Tree-trimming around exposed electrical lines.
 - d) The employee is a designated provider of CPR on a Confined Space Entry (CSE) Rescue Team.
- C. Employees required to be trained in first aid and/or CPR as identified by their supervisor shall be assigned the appropriate training through the Learning Management System and by the Learning and Development Team.
 1. The default frequency for refresher training for First Aid and CPR training is every two years as established by the American Red Cross.

11. References

1. Occupational Safety and Health Administration, Department of Labor; 29 CFR 1910.151. "Medical Services and First Aid".
2. Occupational Safety and Health Administration, Department of Labor; 29 CFR 1917.26. "First Aid and Lifesaving Facilities".
3. Occupational Safety and Health Administration, Department of Labor; 29 CFR 1910.1030. "Bloodborne Pathogens".

Appendix I

First Aid Kits - Suggested Minimum Content Listing

Facilities

Item and Minimum Size or Volume	Minimum Quantity
Absorbent compress, 32 sq. in. (No side smaller than 4")	1
Adhesive bandages, 1" x 3"	16
Adhesive tape, 5 yd.	1
Antibiotic treatment, 0.14 fl oz. application	6
Antiseptic, 0.14 fl oz. application	10
Burn treatment, 1/32 oz. application	6
First aid guide	1
Medical exam gloves, CPR one-way valve faceshield	2 pairs
Sterile pads, 3" x 3"	4
Triangular bandage, 40" x 40" x 56"	1

Marine Terminals

The following is a list of the minimum first aid kit contents and lifesaving equipment required, at the dock, during cargo transfers as stated in 29 CFR 1917.26:

- A. First aid kits shall be weatherproof and contain individual sealed packages for each item that must be kept sterile. It is recommended each kit includes at least the following items:
 1. Gauze roller bandages, 1" and 2" (25.4 mm and 50.8 mm)
 2. Gauze compress bandages, 4 inch (101.6 mm)
 3. Adhesive bandages, 1 inch (25.4 mm)
 4. Triangular bandage, 40 inch (101.6 cm)
 5. Antiseptic applicators or swabs
 6. Eye dressing
 7. Wire or thin board splints
 8. Forceps and tourniquet

9. First Aid dressing
 10. Medical exam gloves, CPR one-way valve faceshield
- B. Stretchers permanently equipped with bridles for hoisting shall be readily accessible (Stokes/basket style stretcher required). A blanket or other suitable covering shall be available.
 - C. Telephone or equivalent means of communication shall be readily available.
 - D. A US Coast Guard approved 30 inch (76.2 cm) life ring, with at least 90 feet (27.42 m) of line attached, shall be available at readily accessible points at each waterside work area where the employees' work exposes them to the hazard of drowning.

Note: Readily available generally means to have the life rings spaced every 200 feet. Consideration should also be given to an automatic strobe water light for nighttime operations.

- E. A readily available portable or permanent ladder giving access to the water shall also be provided within 200 feet (61 m) of such work area. This ladder must reach from the apron of the dock to the surface of the water at low tide.

Appendix II

AED Implementation Process

1. Automated External Defibrillator (AED) specification

The preferred unit is the HeartSine Samaritan.

- a. Alternatives to HeartSine's AED units may be purchased.
- b. The following minimum specifications should be met:
 - i. Unit perform daily self-checks and is capable of informing members of the workforce when servicing is required.
 - ii. Unit has the ability to be upgraded as new AED protocols are recommended.
 - iii. When deployed, the unit can download and print an accounting of the event sufficient to meet regulatory reporting requirements and quality assurance needs.

2. Determination of need for AEDs

Facilities should utilize the following factors when determining the need for AEDs:

- a. Determine if there are locations with a high population density.
- b. Determine if Emergency Medical System (EMS) response time is greater than 3 minutes.
- c. Determine if there are locations that have a high-risk population based on prevalence of obesity, high levels of cholesterol, age over 40, or members of the workforce with previous heart attacks.
- d. Determine if employees will provide rescue services as listed in section 10.B.

3. Automated External Defibrillators (AED) – number and placement

- a. Consider the following:
 - i. Location and status of existing AED equipment
 - ii. Number of full and part time members of the workforce and visitors onsite
 - iii. Site geography (i.e. – overall size of the facility and layout of buildings).
 - iv. Risk areas (i.e. – locations with physical, environmental, chemical or electrical hazards).
 - v. Difficult to access areas (e.g. - multiple doors, secured work areas, presence of barriers, vertical response requirements).
 - vi. High visibility areas
 - vii. Accessible locations.

4. Automated External Defibrillators (AEDs) – maintenance and companying items

- a. A schedule for AED maintenance as well as status checks should be established for each unit purchased as directed by the AED manufacturer.
 - b. Existing units, as well as all new units placed into service should be entered into the AED Outlook tracking system with Sterlington Medical. Information should be sent to aed@sterlingtonmedical.com
 - c. If the 8 year product warranty has expired, no unit should be viewed as operationally ready.
5. Procurement process to obtain a HeartSine device
- a. Order request are to be sent to: aed@sterlingtonmedical.com. Include the following information:
 - a. Site contact name, phone, e-mail, physical address.
 - b. Quantity of AEDs, required accessories (such as wall cabinet), and so forth.