



## eSafetyLine Top Electric Citations

Electricity is essential to modern life, both at home and on the job. Many times we tend to overlook the hazards electricity poses and fail to treat it with the respect it deserves. In 1999, for example, 278 workers died from electrocutions at work, accounting for almost 5 percent of all on-the-job fatalities that year, according to the Bureau of Labor Statistics. What makes these statistics more tragic is that most of these fatalities could have been easily avoided. By looking at OSHA's Most Frequently Cited violations, you can see where the industry is falling short and risking employee injury. Among the top 20 most frequently cited are three that fall under Subpart K electrical. They are

- 405- Wiring Methods and Components
- 404- Wiring Design and Protection
- 403- General Requirements.

These are important violations because they can cause serious injuries, even fatalities and they are relatively easy to fix or prevent. By inspecting electrical hand tools and extension cord for proper grounding and any defects to the insulation before each shift, many violations and injuries would be avoided. Injuries occur when electricity passes through the body. This happens when a person's body -- an efficient conductor of electricity -- mistakenly becomes part of the electric circuit. An electric shock can result in anything from a slight tingling sensation to immediate cardiac arrest. The severity depends on the following:

- the amount of current flowing through the body
- the current's path through the body
- the length of time the body remains in the circuit
- the current's frequency

The easiest way to avoid coming into contact with electricity and becoming part of a circuit is to respect electricity and be aware of the potential dangers when working around it.

### **Discussion Questions**

Which of OSHA's "Top 20" fall under Subpart K?

What influences how severe an electrical injury will be?

# MEETING / TRAINING ATTENDANCE ROSTER

COMPANY: \_\_\_\_\_

\_\_\_\_\_ SAFETY MEETING

JOB/DEPT: \_\_\_\_\_

\_\_\_\_\_ SAFETY TRAINING

DATE: \_\_\_/\_\_\_/\_\_\_\_\_

TIME: \_\_\_\_\_

TOPICS ADDRESSED: \_\_\_\_\_

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## EMPLOYEE'S SIGNATURES

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EMPLOYEE SUGGESTIONS AND RECOMMENDATIONS: \_\_\_\_\_

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ACTION TAKEN: \_\_\_\_\_

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Supervisor's Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

\_\_\_\_\_  
Safety Coordinator's Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date