5. Hazard Watch

Overview

This section discusses the following topics:

- General Hazard Safety Precautions
- Hazards

This section provides guidance to all employees who may come across hazardous materials so they may perform their work safely, and ensures FairPoint Communications, Inc. provides hazard watch criteria for the personal safety and health of each employee.

Many chemicals are relatively non-hazardous by themselves; however, they can become a hazard when they interact with other substances, either in planned experiments or by accidental contact. To avoid injury and/or property damage, persons who handle chemicals in any area of the company must understand the hazardous properties of each chemical with which they work. Safe handling methods must always be reviewed. Supervisors must provide the equipment necessary to work safely with chemicals.

The Occupational Safety and Health Administration (OSHA) placed in effect the requirements of a new standard called Hazard Communication (**29 CFR 1910.1200**). This standard establishes requirements to ensure chemical hazards in the workplace are identified and this information, along with information on protective measures, is transmitted to all affected employees.

References

OSHA Standard 29 CFR 1910.268 (19)
OSHA Standard 29 CFR 1910.1001
OSHA Standard 29 CFR 1910.1025
OSHA Standard 29 CFR 1910.1200

General Hazard Safety Precautions

The following general hazard safety precautions must be observed when working with chemicals:

1. Keep work area clean and orderly.

2. Use necessary safety equipment.

3. Carefully label every container with the identity of its contents and appropriate hazard warnings.

4. Store incompatible chemicals in separate areas.

5. Substitute less toxic materials whenever possible.

6. Limit the volume of volatile or flammable material to the minimum needed for short operation periods.

7. Provide a means of containing the material if equipment or containers should break or spill their contents.

Employees are not disciplined or suffer any type of retaliation for reporting a safety violation.

Hazards

The following types of hazards are discussed:

- Asbestos
- Battery
- Insects
- Lead
- Lyme Disease
- Poison Ivy and Poison Oak
- Rats and Mice

- Severe Weather
- Spillage
- Unsafe Conditions

Asbestos

Refer to OSHA Standard **29 CFR 1910.1001** for more information.

Asbestos, a white or gray powder or fibrous material, may be present when placing cable or wire operations within buildings. The use of asbestos for insulation and fire protection was once common. It was used as insulation for pipes and ducts and sprayed on steel beams or steel decking for fire protection.

WARNING: If you suspect the presence of asbestos, DO NOT DISTURB IT. Immediately notify your supervisor for verification. Cease all work operations and vacate the premises.

Battery

The following guidelines apply to battery use:

1. Ensure employees wear protective gloves, rubber apron, goggles, and face protector while handling electrolyte or acid. Store this equipment near batteries.

2. Ensure eye wash stations are near batteries to provide quick flushing of eyes. Inspect eye wash liquid and/or flush eyewash stations regularly.

3. Ensure adequate spill kit and supplies are on hand and employees are trained in emergency spill procedures.

4. Mix electrolyte for battery cells in a well-ventilated room. Pour acid or base gradually while stirring into the water. Never pour water into concentrated solutions.

5. When moving the hydrometer from cell to cell, cover the open end with an acid resistant material to avoid splashing or throwing the electrolyte.

6. Ensure battery rooms are well ventilated and flashlights are provided.

7. Open flames are not permitted near batteries or in battery rooms.

Insects

The following is discussed as it relates to insects:

- Insect Stings
- Sting Prevention
- Insect Sting Reactions
- Sting Treatment
- Emergency Sting Treatment
- Other Insect Hazards
- Insect Repellants

Note: We recommend employees who are allergic to insect stings notify the supervisor and/or fellow jobsite employees, so proper medical attention can be immediately given.

Insect Stings

During the summer months insects, including all types of bees, wasps and ants may sting people. These social insects do not normally attack people, but sting only in self-defense if disturbed. If a person is allergic to the sting venom, he/she may develop mild to life threateningly severe allergic reactions.

The majority of insect stings in the U.S. come from yellow jackets, hornets, wasps, bees, and fire ants. These insects are throughout the U.S. except for fire ants, which are found only in the Southeastern states.

Whenever stung, try to capture or know the identity of the insect to help doctors diagnose the trouble. When a bee or wasp stings, it injects a venomous fluid under the skin. Honeybees have a barbed stinger. Only the honeybee leaves its stinger (with its venom sac attached) in the skin of its victim.

Since it takes two to three minutes for the venom sac to inject all its venom, instant removal of the stinger and sac usually reduces harmful effects. Scrape

away with a sideways movement (one quick scrape) with a fingernail. Never try to use the thumb and forefinger or tweezers to pinch out the stinger since this maneuver forces (injects) more venom from the sac down into the wound. Stings to the head and neck are more dangerous.

Wasps, yellow jackets, and hornets have a lance-like stinger without barbs and can sting repeatedly. They should be brushed off the victim's skin promptly with deliberate movements, then quietly and immediately leave the area.

Sting Prevention

Persons, especially those allergic to stings, should practice certain simple precautions to avoid being stung. Follow the guidelines below to prevent being stung:

1. Avoid heavily scented products.

2. Avoid shiny buckles and jewelry.

3. Wear light-colored (white) clothing, preferably cotton (never wool).

4. It is wise for hypersensitive persons to carry a card or have an identification bracelet or necklace, such as "Medic Alert," to alert others to the condition in an emergency.

5. Use only a commercially available stinging insect control aerosol that can shoot a high-volume spray stream 15 to 20 feet if you destroy the nests (aerial and ground) yourself. Always wear safety goggles when discharging any type of insecticide. Thoroughly saturate the nest with spray, contacting as many insects as possible. Do not stand directly under an overhead nest, since some insects receiving some of the spray may fall but retain their ability to sting for some time. Repeat treatment if re-infestation occurs.

6. Hire a professional exterminator to remove a nest, if allergic to insect stings.

7. Never try to burn or flood a nest with water since this practice only makes stinging insects angry and aggressive.

8. When eating outdoors, keep food covered until eaten, especially ripe fruit and soft drinks. Any scent of food, such as outdoor cooking, eating, feeding pets or garbage cans, attracts many bees and wasps (especially yellow jackets).

9. Keep refuse in tightly sealed containers. Dispose of refuse frequently (two times per week or more) during late summer and early autumn when most

activity occurs. Maintain good housekeeping in all plant facilities and company vehicles.

10. Be careful not to mow over a nest in the ground nor disturb a nest in a tree or eaves of the home. Any disturbance often infuriates and provokes stinging. Should a bee or wasp fly near you, slowly raise your arms to protect your face and stand still or move slowly away through bushes or indoors to escape. Never move rapidly, which often provokes attack. Never strike or swing at a wasp or bee against your body since it may be trapped causing it to sting. If crushed, it could incite nearby yellow jackets into a frenzied attack. The wasp venom contains a chemical "alarm pheromone," released into the air, signaling guard wasps to come and sting whomever and whatever gets in their way.

11. Remain calm if a bee or wasp gets into a moving car. They usually fly against windows in the car and almost never sting the occupants. Slowly and safely pull over off the road, open the window, and allow the bee or wasp to escape. Unfortunately, many serious accidents result when the driver strikes or swings at the insect during operation of the vehicle.

12. If you come in contact with a beehive or nest, DO NOT disturb it. If the nest is on a customer's premises, notify the customer and request its removal. Do not begin any work operations until the insect hazard has been removed by the customer. If the nest is discovered on company premises, see your supervisor for instructions.

Insect Sting Reactions

Most people stung experience a "local" reaction with redness, pain, swelling and some itching only at the sting site. If the reaction progresses quickly to sites other than the sting site or is followed by difficult breathing or choking at the throat, the person is experiencing a "systemic" allergic reaction (anaphylaxis) requiring emergency medical treatment.

Remember that if you are stung on the hand and your face begins to swell or hives break out all over your body, this is a serious condition requiring emergency room attention.

Types of reactions to insect stings are described below:

- Normal Reaction – A normal reaction lasts a few hours. The sting site is painful, reddened, may swell and itch, but quickly dissipates.

- Large Local Reaction – A large local reaction lasts for days. The sting site is more painful, and swelling and itching may be present both at the sting site and in surrounding areas.

- Severe Allergic Reaction – A severe allergic reaction can commence rapidly (in a few minutes) after the sting occurs. The whole body is involved. The person may feel dizzy (lightheaded), nauseated and weak. There may be stomach cramps and diarrhea. There can be itching around the eyes, a warm feeling or coughing, hives breaking out, followed with vomiting and swelling. There can be wheezing, difficult breathing (shortness of breath) or swallowing, hoarse speech, drop in blood pressure, shock, unconsciousness and darkened skin following. Reactions may occur in a few minutes and most deaths occur within 30 minutes, but some within 15 minutes and some in five minutes or less.

Sting Treatment

For a normal reaction to an insect sting that causes itch, irritation, redness, and swelling at the sting site, the following may be useful:

- Ice
- Baking Soda

  Make a paste with a few drops of water to a teaspoon of meat tenderizer and quickly apply to the sting to reduce pain and inflammation (breaks down components of sting fluid).

- Oral Antihistamines--Tablets may be chewed for faster relief, but liquids are more readily absorbed after oral ingestion
- Epinephrine Inhaler
- Topical Steroids
- Local Anesthetics

Note: These medications are suggested treatments. You should use your own judgment or check with your family physician prior to usage.

Emergency Sting Treatment

The following guidelines apply to emergency treatment of insect stings:

1. Highly-sensitive persons should have emergency kits prescribed for them by their physician within easy access at all times.

2. If emergency kit isn't readily available, a tourniquet may be very useful if applied immediately and briefly to a limb. A tourniquet placed above the sting site, just tight enough to obstruct blood return but not so tight as to stop circulation, helps until medical treatment is obtained. Loosen the tourniquet every 10 minutes.

3. Apply ice to the sting to help reduce blood flow to the areas and spread of the venom.

Other Insect Hazards

Other insect hazards are described below:

Mud-Dauber Wasps

These slender wasps are about the size of paper wasps, but are conspicuously different due to their thread-like waist connecting the abdomen to the rest of the body. The black and yellow mud dauber is commonly encountered, but the black and metallic blue-black species may be observed around dwellings. They commonly build their mud nest in attics, porches, and carports and stockpile them with spiders.

These wasps are often seen around moist areas, such as near the edges of ponds, around water faucets, and near watered lawns, where they gather mud for their nest. Consequently, their frequent trips from their "mud hole" to their nest and back again makes them quite obvious.

Despite their conspicuous flight path near residences, they do not "attack" and sting humans. Occasionally, however, they build their nests in small cavities or holes in outside equipment, which may result in equipment failure.

MUD-DAUBER WASP TREATMENT:

Remove the nest and seal off access to the area or equipment. No insecticide is needed.

Flys

During warm weather, lifecycles of some domestic flies can be completed in as little as 7 to 10 days, so sanitation of likely breeding sites is the most effective control for flies. All garbage should be disposed of at least twice a week and cans should be scraped and washed out to prevent future infestations.

Once a problem has developed and chemicals become necessary for the control of flies, there are several "over the counter" products available.

NOTE: PESTICIDES ARE POISONOUS. PROPER SAFETY PRECAUTIONS ARE A MUST WHEN HANDLING ANY PESTICIDES. READ AND FOLLOW PRODUCT LABELS CAREFULLY WHEN HANDLING PESTICIDES AND ALWAYS WEAR SAFETY GOGGLES.

Mosquitoes

Mosquito Facts:

- All mosquitoes must have water in which to complete their life cycle.
- Only seven days are required to complete their life cycle (egg to adult) during warm weather.
- Mosquitoes do not develop in grass or shrubbery, although flying adults frequently rest in these areas during daylight hours.
- Only the female mosquito bites to obtain a blood meal. The male mosquito feeds only on plant nectar.
- The female mosquito may live as long as three weeks during the summer or many months over the winter in order to lay her eggs the following Spring.

Insect Repellents

Mosquitoes, biting flies, and ticks can be annoying and sometimes pose a serious risk to public health. In certain areas of the U.S., mosquitoes can transmit diseases like equine and St. Louis encephalitis. Biting flies can inflict a painful bite that can persist for days, swell, and become infected. Ticks can transmit serious diseases like Lyme Disease and Rocky Mountain spotted fever. When properly used, insect repellents can discourage biting insects from landing on treated skin or clothing.

Insect repellents are available in various forms and concentrations. Aerosol and pump-spray products are intended for skin applications as well as for treating clothing. Liquid, cream, lotion and stick products enable direct skin application. Products with a low concentration of the active ingredient may be appropriate for situations where exposure to insects is minimal. Higher concentrations of the active ingredient may be useful in highly infested areas, or with insect species that are more difficult to repel. Consider nonchemical ways, if appropriate, to deter biting insects—screens, netting, long sleeves, and slacks.

The following guidelines apply to the safe use of insect repellents:

1. Check the container to ensure that the product bears an EPA approved label and registration number.
2. Read the entire label before using a pesticide. Even if you have used it before, read the label again—don't trust your memory.

3. Follow use directions carefully. Use only the amount directed at the time and under the conditions specified, and for the purpose listed. For example, if you need a tick repellent, make sure the product label lists this use. If ticks are not listed, the product may not be formulated for this use.

4. Store pesticides away from children's reach in a locked utility cabinet or garden shed.

5. Apply repellents only to exposed skin and/or clothing (as directed on the product label). Do not use under clothing.

6. Never use repellents over cuts, wounds, or irritated skin.

7. Do not apply to eyes and mouth, and apply sparingly around ears. When using sprays, do not spray directly onto face; spray on hands first and then apply to face.

8. Do not allow children to handle these products, and do not apply to children's hands. When using on children, apply to your own hands and then put it on the child.

9. Do not spray in enclosed areas. Avoid breathing a repellent spray, and do not use it near food.

10. Use just enough repellent to cover exposed skin and/or clothing. Heavy application and saturation is unnecessary for effectiveness; if biting insects do not respond to a thin film of repellent, apply a bit more.

11. After returning indoors, wash treated skin with soap and water or bathe. This is particularly important when repellents are used repeatedly in a day or on consecutive days. Also, wash treated clothing before wearing it again.

12. If you suspect that you or your children are reacting to an insect repellent, discontinue use, wash treated skin and then call your local poison control center. If/when you go to a doctor, take the repellent with you.

13. You and your doctor can get specific medical information about the active ingredients in repellents and other pesticides by calling the National Pesticide Telecommunications Network (NPTN) at 1-800-858-7378.

Lead

Refer to OSHA Standard **29 CFR 1910.268 (19), 1910.1001**, and **1910.1025** for more information.

Lead can enter the body through either inhalation (breathing) or ingestion (swallowing). When lead is heated it gives off fumes that enter the air of the workplace and can easily be inhaled. Once lead is inhaled, it enters the lungs, is absorbed into the blood stream, and builds up within the body. Lead dust is also a problem. Dust can be inhaled, build up on hands, clothing, cigarettes, food, etc., and transfer to the mouth where it is swallowed into the body.

To prevent the build up of lead in the body, personal hygiene must be a priority and proper precautions must be followed:

- Wash hands after touching lead and especially before eating.
- Do not smoke while in utility holes and working around lead.
- Avoid touching your mouth, nose or exposed areas of the body when around lead.
- Wear disposable coveralls (must be flame retardant).
- Wear gloves whenever touching lead.
- Additional precautions may be required (see management).

Lyme Disease

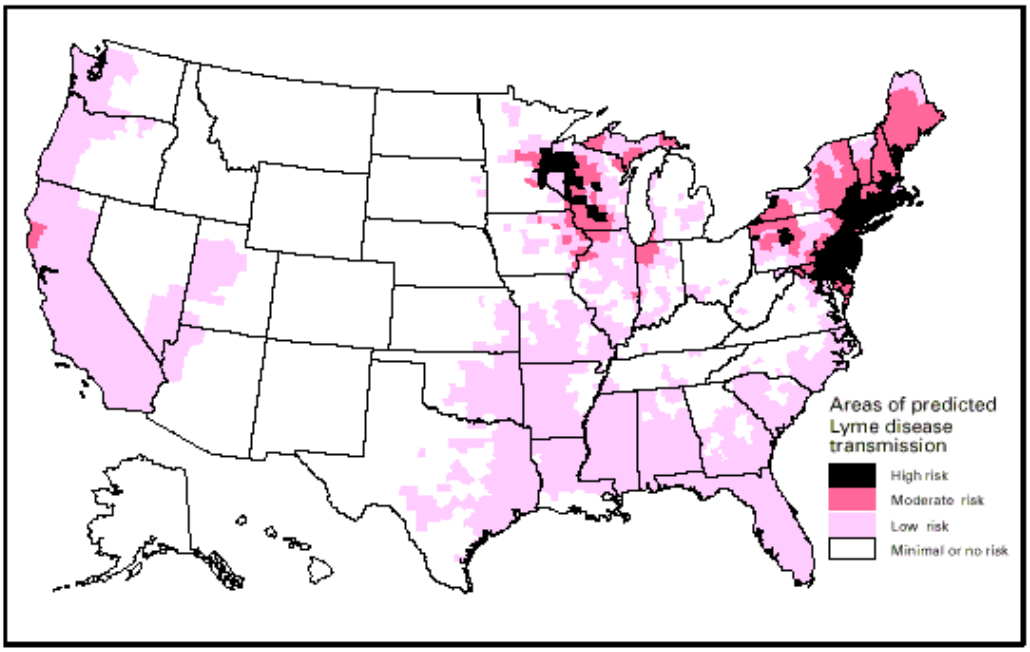
Lyme Disease is the second fastest growing infectious disease in the United States. Usually Lyme Disease is passed by the bite of a tick, which passes bacteria called Borrelia burgdorferi (Bb) to humans or animals. Three types of ticks are the most common carriers of the disease: the blacklegged tick, the Western blacklegged tick, and the lone-star tick.

More than half of the people who have Lyme Disease never remember being bitten by a tick. It is believed that ticks, which are in the larvae and nymph stage, bite many people. At this stage the tick may be no bigger than the period at the end of this sentence and difficult to see, especially in the hairline. There is also a rash associated with Lyme Disease, which is called EM (Erythema Migrans). This rash can be circular, oval, or the classic bulls eye shape. Again many people who have Lyme Disease may not have the rash or may overlook it.

Presently the states that are listed as endemic areas for Lyme disease are: New Jersey, **New York, Pennsylvania,** Connecticut, Rhode Island, **Massachusetts,** Wisconsin, Minnesota, California, **Maine, Vermont** and **New Hampshire.**

- Cases of Lyme Disease are increasing in many other coastal and Midwestern states.

National Lyme disease risk map with four categories of risk



Note: This map demonstrates an approximate distribution of predicted Lyme disease risk in the United States. The true relative risk in any given county compared with other counties might differ from that shown here and might change from year to year. Risk categories are defined in the accompanying text. Information on risk distribution within states and counties is best obtained from state and local public health authorities.

Lyme Disease Symptoms

Listed below are many symptoms associated with Lyme Disease. People usually experience some combination of these symptoms, but these symptoms also mimic many other medical disorders.

- Tick bite
- Rash at bite site or other sites
- Unexplained fevers, sweats, chills
- Chest pain or rib soreness
- Unexplained menstrual irregularity
- Shortness of breath, cough
- Joint pain or swelling
- Muscle pain or cramps
- Heart murmur or valve prolapse
- Muscle twitching of the face or other areas
- Unexplained milk production (lactation)
- Irritable bladder or bladder dysfunction
- Neck creaks and cracks, neck stiffness
- Upset stomach or change in bowel function
- Heart palpitations, pulse skips, heart block
- Difficulty with concentration or reading
- Stiffness of the joints, neck, or back
- Fatigue
- Headache
- Sexual dysfunction or loss of libido
- Tremor
- Facial paralysis
- Disturbed sleep
- Difficulty with speech
- Mood swings, irritability, depression
- Confusion, difficulty in thinking
- Tingling, numbness, burning or stabbing sensations
- Eye/vision: double, blurry, pain, increased floaters
- Ears/hearing, buzzing, ringing, ear pain
- Dizziness, poor balance, increased motion sickness
- Lightheadedness, wooziness, difficulty walking
- Exaggerated symptoms or worse hangover from alcohol
- Disorientation: getting lost, going to wrong places
- Forgetfulness, poor short term memory

Stages of Lyme Disease

Early Stage	Mid Stage	Late Stage
If a tick bite is detected, a rash may appear near tick bite.	If you are not treated in the early stages of the disease, within a few weeks or months you may experience the following:	If you are not diagnosed in the mid stages of the disease you may experience the following:
Fever	Pain in the joints, muscles, or tendons	Arthritis and joint swelling
Headache	Pain that seems to move around the body	Tingling or burning in different areas
Fatigue	Heart palpitations or inflammation of the heart muscle	A skin condition known as Acrodermatitis Chronica Atrophicans (a red leathery skin rash like condition)
Joint Pain	Facial paralysis or drooping eyelids	Confusion, dementia
Muscle Pain	Meningitis (swelling)	
Other rashes		

Because Lyme Disease can attack almost anywhere in the body, it is important to discuss all symptoms with your physician.

Like any other bacterial infection, the healthier you are as a whole, the better your body is prepared to fight the infection. In addition to antibiotics, a healthy lifestyle aids in fighting off the infection.

Poison Ivy and Poison Oak

Poison ivy and poison oaks are part of a group of plants that make up the poison ivy family. These plants are found in all the states of the continental United States.

The following is discussed as it relates to poisonous plants:

- Cause
- Prevention
- Reaction

- Contagion
- Treatment
- General Questions

Cause

Poison ivy and poison oak rashes are caused by an allergy to the resin of these plants, called Rhus plants. You don't have to come in direct contact with the leaves, roots, or branches of Rhus plants to get the rash. The plant resin can reach your skin indirectly when you touch clothing or a pet that carries the resin. Poison oak can spread through the air from the pollen.

Rhus plants may cause rashes throughout the year. Roots and stems can cause a rash just as much as the leaves. If you can't recognize poison ivy or poison oak plants, have someone point them out so you can avoid them.

Prevention

The only way to prevent Rhus rash is to avoid contact with the plant resin. Traditional advice is to wash with strong soap and warm water after exposure. This does no harm, but is only effective if you wash within 15 minutes of exposure. You need to wash clothing, pets, and tools or you may become re-exposed to the resin.

Reaction

These plants can cause a skin reaction. No reaction usually occurs the first time the skin is exposed to the plant. Subsequent contact with the plant or plant resin, however, may result in an allergic skin reaction, which usually appears 7-14 days after contact. Subsequent contact results in a more rapid reaction usually 2-5 days after contact. The severity of the reaction is related to the amount of plant material that comes in contact with the skin, as well as the degree of allergic sensitivity of the individual. The allergen (irritant from the plant) is often transferred from the hands or clothing to other parts of the body.

Symptoms of an allergic reaction may include itching, rash, dry, stiff-feeling skin, blisters, and possibly pain due to the blisters or cracks in the dry skin. The rash may appear in patches or in a line. Swelling around the face, eyes, and genital area is common. Palms, soles, and scalp are often not affected. Fluid from the blisters does not spread the reaction to other parts of the body or to another person.

The usual course of poison ivy and poison oak (rhus) dermatitis varies significantly with the degree of exposure and the sensitivity level of the individual. The dermatitis is characteristically very itchy even with limited skin involvement. The dermatitis often remains on the skin for at least 1 to 2 weeks.

Contagion

Poison ivy or poison oak rash is not contagious. The fluid in the blisters does not spread the rash. Rhus rash doesn't appear immediately after exposure to the plant resin, but only after a time called the latent period. This latent period between exposure to the plant and appearance of the rash may be as short as four hours or as long as 10 days, depending on individual sensitivity and the amount of plant contact. Sometimes, more rashes appear after treatment has begun. These new patches are areas that had a longer latent period.

Treatment

Rhus rashes clear up sooner or later without treatment. Letting nature take its course with a mild Rhus rash is reasonable, but severe rashes need a visit to a doctor and treatment to ease the misery and disability.

Most of the treatments for poison ivy and poison oak dermatitis are directed toward the relief of itching, edema and blistering – i.e. cool compresses, colloidal baths and lotions, topical anesthetics, antihistamines and corticosteroids (both OTC and prescription). Serious and extensive cases of poison ivy dermatitis are usually treated with a high dose oral cortisone for at least two weeks in addition to palliative medicaments. A physician should check severe allergic reactions because they may require treatment with corticosteroids.

You may bathe or shower as usual. Keep the water as cool as possible after the first shower and don't use soap on the rash since it may irritate it.

Rats and Mice

Rats and mice are a community-wide problem. They are difficult to control on an individual property basis. Domestic rodents including rats, mice, and squirrels have been implicated in the spread of the plagues and cause a large economic loss by chewing on building materials and personal belongings, feeding on food, and contaminating food with urine, feces, and hair.

The following is discussed as it relates to rats and mice:

- Rat Facts
- Hantavirus
- Cleanup and Disposal Procedure

Rat Facts

Rats may establish nests in these areas:	Rats prefer to feed on the following:
Italian cypress	Oranges
Algerian ivy	Avocadoes
Bougainvillea	Other ripe fruits
Oleander	Walnuts
Palm trees	Natal plums
Yucca	Pet food left out at night
Other heavy shrubbery	Snails
Wood and lumber piles	Grass seed
Storage boxes	Bird seed

Be alert for these signs of rat activity:

- Damaged, partially eaten oranges, avocadoes, or other fruits.
- Broken snail shells under bushes, on fences, near nesting sites.
- Signs of gnawing on plastic, wood, or rubber materials.
- Greasy rub marks caused by the rat's oily fur coming in repeated contact with painted surfaces or wooden beams.
- Rat droppings are usually signs of significant rat activity. The droppings are randomly scattered and will normally be found close to a rat runway, feeding location, or near shelter. They are dark in color, pellet shaped, and are about 1/2 inch long.
- Droppings found in forced air heaters, swimming pool heater covers, and water heater closets.
- Visual sightings in or around the premises, on utility cables, tops of fences, or in trees.

Hantavirus

This virus is primarily located in rodent's urine, saliva, and feces. The transmission occurs when people get in close contact with these secretions and by inhaling contaminated dust. Direct contact with rodents increases the risk of virus inhalation. There is no evidence of person-to-person infection. High risk environments are encountered when working around nesting material, burrows, droppings, and surrounding soil.

There are several other ways rodents may spread hantavirus to people:

- If a rodent with the virus bites someone, the virus may be spread to that person, but this is very rare.
- Researchers believe you might get the virus if you touch something contaminated with rodent urine, droppings or saliva, and then touch your nose or mouth.
- Researchers also suspect that if virus-infected rodent urine, droppings or saliva contaminates food you eat, you could become sick.

The possibilities demonstrate why disinfecting rodent-infested areas is so important in preventing transmission of the virus. To prevent transmission of the virus:

- Avoid infected areas and creating dust.
- Use appropriate rodent control.
- Use appropriate cleanup methods.
- Use appropriate personal protective equipment if around high-risk environments.

Cleanup and Disposal Procedure

If an employee or contractor enters a crawl space, or is hand digging and encounters rodent dropping, urine, saliva nests or burrows, all work must stop and they must notify their direct supervisor. If the conditions are on a customer's premise, stop work and inform the customer of the conditions. Work must be stopped until the work area is sanitary and proper cleanup and disposal procedures are complete.

The following cleanup materials are required:

- 16 oz. Spray bottle
- Antiseptic Hand Sanitizer
- Disinfectant
- Disposable Clothing
- Disposable Gloves
- Disposable Respirator with High Efficiency Filter
- Plastic Goggles
- Scoop or Shovel
- Trash Bags

Complete the following cleanup and disposal procedure:

1. Put on respirator and adjust respirator so it fits well to the face. Put on disposable gloves and clothing. Put on protective goggles.

   Note the following procedure to properly fit the respirator:

   a. Follow unwrapping instructions on respiratory packaging.

   b. Adjust strap tension for a tight, but comfortable seal.

   c. Check the seal by covering the front of respirator with both hands and inhale. Negative pressure should be felt inside the respirator. If you feel a leak, reposition the respirator until the proper seal is achieved.

   d. Do not proceed if proper seal cannot be made. Contact your supervisor.

   Note: Most respirators cannot be worn over a beard. A proper seal cannot be made.

2. Gently spray the droppings or nest material until it is completely saturated with disinfectant solution. Avoid creating airborne dust. If the droppings are in a place where it can be flooded, pour solution directly from the bottle. Allow material to soak for 15 minutes. If the rodent droppings are in the bottom of a closure that does not contain sufficient gravel, flood the material thoroughly. After 15 minutes, cover the droppings with the proper amount of gravel.

3. Push or scoop the soaked material aside if it does not interfere with the work to be done. If droppings must be removed, put droppings in a trash bag. Do not touch material with bare hands. Remember to wear gloves and mask.

4. If a dead rodent is found, thoroughly flood animal with disinfectant solution and wait 15 minutes. If the dead animal is in a plaque prone area, spray carcass with wasp killer to kill fleas before spraying disinfectant. Bury, if possible, or place in bag for disposal. Do not touch with bare hands.

5. After all materials described above are placed in a plastic trash bag, tie up bag with a tie or knot. Place the first bag in the second bag. Take off the respirator, gloves, and disposal clothing and place them in the second bag. Tie up second bag for disposal in normal trash.

6. Clean goggles with disinfectant and rinse with water. Clean hands with waterless hand cleaner and sanitize with hand sanitizing gel. Wash hands and face with soap and water before eating or smoking.

7. Follow all sealed plant procedures. Seal all conduit openings and replace all damaged parts to prevent reinfestation.

Severe Weather

Refer to Section 18, Emergency Preparedness and Response, for information about severe weather.

Spillage

Refer to Section 18, Emergency Preparedness and Response, for information about chemical spills.

Unsafe Conditions

Refer to Section 18, Emergency Preparedness and Response, for information about unsafe conditions, such as bomb threats, civil disobedience, earthquakes, fire and explosion, robbery, and violence and weapons.