



## EMERGENCY EYE WASH

Eye injuries are common at industrial workplaces. Many workers are exposed to a variety of chemicals, splashes, particles, sparks, dust, and flying objects. In an eye emergency it is very important to protect the employee's eyes from further damage as best as possible. Emergency eye wash stations must be located within ten seconds walking distance from the hazard area, as these can help to reduce damage in emergency situations. Eye wash stations come in different sizes and shapes and should be provided based on a workplace safety assessment. Maintenance must be considered. Every eye station should be inspected and be clear of any objects so it is easy to reach for an injured worker. Stations must also be clearly marked and visible to employees. SDS's should be available for all chemicals for employees at workplace. It is important for employee to know and understand the dangers of the chemicals and materials they handle as well as how to respond to exposure. OSHA regulations for eye wash stations apply to certain industries involving powered industry, open surface tanks, storage and handling ammonia, trucks, telecommunications, paper manufacturing, and hazardous materials. ANSI also has a standard for eye wash emergencies. The flushing fluid should be between 60 - 100 degrees Fahrenheit.

### Emergency Eye Wash Requirements and Procedures:

First line of eye protection is safety glasses, goggles, and face shields in any area that could potentially cause eye damage.

If eye wash device contains its own flushing liquid it must be refilled or replaced after each use.

Eye wash stations:

- Should be located no more than 10 seconds from the hazardous area.

- Must be in a visible area and have a sign.

- Must be on the same level as the hazard.

- Must be able to provide fluid for 15 minutes, and flushing fluid must be provided for both eyes.

- Must be protected from dust by installing a dust cap or cover.

All employees who might be exposed to a chemical splash shall be trained in the use of equipment.

Equipment must be inspected annually to meet ANSI requirements.

Manufacturer instructions should be followed.

### Work Site Review: Hazards/Safety Suggestions

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Company Name: \_\_\_\_\_

Work Site Location: \_\_\_\_\_

Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ Finish Time: \_\_\_\_\_

Foreman/Supervisor: \_\_\_\_\_

### Employee Signatures: (continue on back of sheet if necessary)

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(My signature attests and verifies my understanding of and agreement to comply with, all company safety policies and regulations, and that I have not suffered, experienced, or sustained any recent job-related injury or illness)

### Manager/Supervisor's Signature: \_\_\_\_\_

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