proActive Safety Services

Weekly Safety Meeting

Train. Protect. Prevent.

Hand Injuries

Hand injuries are a part of everyday life. When you use your hands to complete tasks it is easy to rip, cut, or tear your skin. At work the risk becomes greater due to the increased use of force needed to complete tasks.

So, how are hand injuries caused?

Hand injuries can be caused by holding, grabbing, twisting, or lifting equipment or tools improperly. Also, hand injuries can be caused by encountering chemicals, tools, machines, structures, vehicles, slips, trips, and falling objects.

What is the cost of hand injuries?

Hand injuries can result in financial, emotional, and social effects that can last a lifetime. Did you know that over one third of all workplace injuries involve the hands? Also, over 70% of industrial injuries that result in partial disability are hand injuries.

How do you prevent hand injuries?

Before starting your work conduct, a thorough job safety analysis to identify the hazards that you will encounter. Once you know the hazards, put together a plan that includes the supplies, tools, and materials needed to get the project finished without incident.

What do you need to protect your hands?

- Avoid wearing rings, bracelets, or watches on the job.
- Use proper gloves that support your wrist and are appropriate for each task or temperature.
- Use cotton and fabric gloves to keep hands cleaned and protect against abrasions.
- Use rubber or plastic gloves for cleaning.
- When working with chemicals, always use proper gloves.
- Inspect hand tools or equipment before use.
- Never wear loose clothing or jewelry.

Hand injuries can be prevented with the right attitude and attention to detail. Every day you will decide if you want to work safe or take risks. What will you choose today?

Has anyone ever experienced a hand injury? If so, what was it like? How did it feel? Were you able to heal completely?

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)**

_____ _____ _____

_____ _____ _____

(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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