

**Randall Hedge**  
Ex-Officio Member, Chair  
(920) 424-1009  
hedge@uwosh.edu

**Dawn Dettlaff**  
Nonrepresented Classified Staff Member  
(920) 424-1869  
dettlafd@uwosh.edu

**Buckley Fechter**  
Student Member  
fechbt19@uwosh.edu

**Anna Filipova**  
Faculty Member  
(920) 424-0037  
filipova@uwosh.edu

**Kim Freier**  
Represented Classified Staff Member  
(920) 424-2082  
freier@uwosh.edu

**Charles Hermes**  
Nonrepresented Classified Staff Member  
(920) 424-3466  
hermes@uwosh.edu

**Stephanie Krueger**  
Student Member  
kruegs88@uwosh.edu

**Joseph LeMire**  
**University Police Chief**  
Administration Ex-Officio Member  
(920) 424-1212  
lemirej@uwosh.edu

**Pamela MacWilliams**  
**Director of Student Health Center**  
Ex-Officio Member  
(920) 424-0425  
macwillp@uwosh.edu

**Dana Merriman**  
Faculty Member  
(920) 424-3076  
vaughan@uwosh.edu

**Michael Morrissey**  
**Campus Hazardous Waste**  
Ex-Officio Member  
(920) 424-3426  
morrissm@uwosh.edu

**George Paul**  
Represented Classified Staff Member  
(920) 424-0377  
paul@uwosh.edu

**Evan Schwalbe**  
**Campus Safety Officer**  
Ex-Officio Member  
(920) 424-4484  
schwalbe@uwosh.edu

**Rae Ann Wetzel**  
Represented Classified Staff Member  
(920) 424-3202  
wetzelnr@uwosh.edu

**Jonathon Wilson**  
Academic Staff Member  
(920) 424-0385  
wilsonjo@uwosh.edu

**Christopher Stratton**  
Academic Staff Member  
(920) 424-1201  
strattonc@uwosh.edu



## Health and Safety Committee

Volume #3

February, 2012

A newsletter for and about safety at UW Oshkosh

### **“The Safety Teams Are Coming”**

By Evan Schwalbe

Employee Safety Teams (ESTs) are an effective way to promote safe workplaces. While ESTs have a variety of roles, they have one thing in common—employees and management collaborate to find ways to prevent accidents, injuries, and illnesses on the job. The benefits for all concerned are obvious in that employees have a safe place to work, employers save money on lost work time and workers’ compensation costs, and everyone returns home safe and healthy each day.

A successful EST will have the support and wholehearted participation of management and employees. An EST can effectively influence safety programs and provide recommendations to management, who have the resources and authority to implement changes in the workplace.

ESTs are effective because they combine the knowledge, expertise, perspective, enthusiasm, and effort of a variety of employees with diverse backgrounds. Those with experience in a specific job or work area know what the hazards or potential hazards are, and generally

have ideas how to go about controlling them. Those who are less familiar with a job or area play a vital role too, by seeing what others may have overlooked or taken for granted.

While the campus currently has no organized EST’s, we will be looking to establish them in the near future. Participation will be looked for from every corner of the campus community with the hopes of building a “Safety Culture”, (see January’s newsletter) that will help every person that comes on to our campus stay safe and healthy.

What kind of person are we going to be looking for?

We need people that are concerned about the safety needs of everyone on campus and that can communicate the “Safety Message” to those who work and study on campus. Be an example of safety to all and willing to learn the details of what it takes to build a safe campus.

SO what's next?

Keep watching the newsletter for future details on getting involved with the

**Employee Safety Team!**

### **American Heart Month raises heart health awareness**

Heart disease is the leading cause of death in the United States and a major cause of disability, according to the Centers for Disease Control and Prevention (CDC). To raise awareness of this issue, the American Heart Association has designated February as American Heart Month.

The most common heart disease is coronary heart disease, which often appears as a heart attack. Every year, an estimated 785,000 Americans have a new coronary attack and about 470,000 have a recurrent attack. About every 25 seconds, an American has a coronary episode; and about every minute, an American dies from one.

The chance of developing coronary heart disease can be reduced by taking steps to prevent and control factors that put people at greater risk. Knowing the signs and symptoms of a heart attack are crucial. People who have survived a heart attack can also work to reduce their risk of another heart attack or stroke in the future.

#### **Warning signs**

According to the American Heart Association, most heart attacks involve discomfort in the center of the chest that lasts more than a few minutes or that goes away and comes back. It can feel like uncomfortable pressure, squeezing, fullness or pain. Discomfort in other areas of the body, such as pain or discomfort in one or both arms, the back, neck, jaw or stomach, can also indicate a heart attack. Victims may feel shortness of breath with or without chest discomfort. Other signs may include breaking out in a cold sweat, nausea or lightheadedness.

Stroke symptoms may include sudden numbness or weakness of the face, arm or leg, especially on one side of the body; sudden confusion, trouble speaking or understanding; sudden trouble seeing in one or both eyes; sudden trouble walking, dizziness, loss of balance or coordination; and sudden severe headache with no known cause.

Cardiac arrest causes a sudden loss of responsiveness. There is no response to tapping on the shoulder and no normal breathing. The victim does not take a normal breath when the head is tilted up and checked for at least five seconds.

Anyone who witnesses any of the listed symptoms should immediately call 911 or the local emergency response number. The use of cardiopulmonary resuscitation (CPR) or an automated external defibrillator (AED) by a trained user may be needed. An AED should be used only on a victim who is unresponsive, not breathing and has no pulse.

### Heart disease by gender

According to the CDC, heart disease is the leading cause of death for women in the United States. In 2006, heart disease was responsible for 26% of total female deaths; that's more than one in every four. Each year, around the same number of women and men die of heart disease in the United States. Heart disease is the leading cause of death for women of most racial/ethnic groups in the U.S. Almost two-thirds of the women who die suddenly of coronary heart disease have no previous symptoms.

Heart disease is also the leading cause of death for men in the U.S., according to the CDC. This is true for men of most racial/ethnic groups. Half of the men who die suddenly of coronary heart disease have no previous symptoms. Between 70% and 89% of sudden cardiac events occur in men. The average age for a man's first heart attack is 66 years and almost half the men who have a heart attack before age 65 die within eight years.

### Get healthy

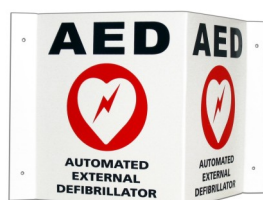
One way to fight heart disease is to get healthy. Here are some useful links:

Visit the American Heart Association's Getting Healthy webpage to find links to the organization's Nutrition Center, Physical Activity page, Weight Management page, Stress Management page, Fats and Oils page, and a page about how to Quit Smoking.

For more National Heart Month information, check out the CDC's article on American Heart Month at <http://www.cdc.gov/features/heartmonth/>

### WE HAVE AED'S ON CAMPUS!

For locations of AED's on campus go to <http://www.uwosh.edu/safety/safety-1/faculty-staff-1/aeds>



Or look for the signs located at the site of all AED's.

Become familiar with the locations in the buildings you frequent, it could save a life!

### •What is an Automated External Defibrillator (AED)?

•An Automated External Defibrillator is a portable medical device that is designed to analyze a person's heart rhythms recognize lethal heart rhythms associated with sudden cardiac arrest. AEDs let a user of the machine know whether or not the person's heart needs a jolt to reestablish a normal heart rhythm and, if necessary, directs a rescuer to deliver an electrical shock to persons in ventricular fibrillation or ventricular tachycardia. AEDs provide auditory and visual prompts to assist first responders in treating a cardiac arrest. AEDs have been shown to decrease mortality when used by trained persons and used in conjunction with cardiopulmonary resuscitation (CPR).

UW Oshkosh has 3 different manufacturers of AED's.



Lifepak 500    Philips HeartSmart    Cardiac Science G3

While the different brands don't look alike, they ALL operate basically the same way.

The units will either turn on automatically when you open them or have an ON/Off button and after that, they will lead you through the process with audio/visual commands. Don't worry, the units can't shock anyone accidentally but stay clear of the victim when the unit is administering a shock!

AND Most importantly, **ACTIVATE THE EMERGENCY RESPONSE SYSTEM BY CALLING 911, FIRST!**

