

DATE (Day, Month, Year): 21 May 1968

1. REPORTING SHIP, ACTIVITY OR UNIT USNS GENERAL JOHN POPE, T AP 110										FLEET OR NAV. DIST. NO. MSTSPAC		Do not use	
2. PERSONNEL INJURED (Name, Rank, Rate or Trade, and Branch of Service)				AGE	YEARS EXPER.	DUTY OR WORK ASSIGNMENT					EST. DAYS LOST OR TIME CHGS.	TOTAL DISABLING INJURIES	
James W. Fisher, 32265, FWT Civilian Marine Personnel				57	2	x						0	0
3. PROPERTY/EQUIPMENT DAMAGE						ESTIMATED DAMAGE COST							
TYPE				OWNERSHIP		LABOR		MATERIAL		OVERHEAD		TOTAL	
N/A													
4. DATE AND TIME OF ACCIDENT						WEATHER				LIGHT			
HOUR		DAY		MONTH		YEAR		GOOD		ADVERSE		NOT APPLIC.	
2330		Mon		20 May		68		x				x	
5. DESCRIPTION OF ACCIDENT: Describe the accident so that the Reviewing Official can get a clear picture of the accident and the reasons for it. Select and check closest applicable item in each section on back of form.													

The injured person's report is authentic and reliable. These are heavy insulated entrance doors to each engine room and open into a passageway which on the third deck is not too wide. Ordinarily these doors swing freely and will close of their own free will due to normal trim of the vessel. The vessel was underway in a calm sea which would not be attributed to the additional pressure applied to the door. Consequently it is assumed that some person in haste had pushed the door closed.

6. FORMS SUBMITTED APPLICABLE TO INJURED CIVILIAN EMPLOYEES

A. C.A.1



YES



NO

B. C.A.2



YES



NO

C. OTHER

(INDICATE):

7. RECOMMENDED CORRECTIVE ACTION: What recommendations have been made which will help prevent another accident like this?

Door closers could be installed. However, this would add resistance to opening the door which in turn is undesirable. However, should safety committee ashore determine the frequency rate too high on this particular type of accident, door closers will be installed.

SIGNATURE OF SUPERVISOR, CHIEF OF WORKING PARTY OR HEAD OF WORK DETAIL: M S CHAMBERLAIN		TITLE, RANK, RATE OR GRADE Chief Engineer	DATE 5/21/68
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8. REVIEW AND COMMENT OF REVIEWING OFFICIAL

SIGNATURE OF REVIEWING OFFICIAL: H. L. HEINZ		TITLE, RANK, RATE OR GRADE Master	DATE 5/21/68
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