

ACCIDENT REPORT

REPORT EXOS-5100-6

DATE (Day, Month, Year): 12 August 1966

1. REPORTING SHIP, ACTIVITY OR UNIT										FLEET OR NAV. DIST. NO.		Do not use					
2. UNUS General John EGPE (T-AP116)										MSTSPAC							
PERSONNEL INJURED (Name, Rank, Rate or Trade, and Branch of Service)										AGE	YEARS EXPER.	DUTY OR WORK ASSIGNMENT REG. TEMP. RECR. LV/LIB. TRAV. OTHER			EST. DAYS LOST OR TIME CHGS.	TOTAL DISABLING INJURIES	
HOUSEL, John L. Jr. Engr. MSTSPAC										42							
3. PROPERTY/EQUIPMENT DAMAGE										ESTIMATED DAMAGE COST							
TYPE										OWNERSHIP	LABOR	MATERIAL	OVERHEAD	TOTAL			
None																	
4. DATE AND TIME OF ACCIDENT										WEATHER			LIGHT				
HOUR	DAY	MONTH	YEAR	GOOD	ADVERSE	NOT APPLIC.	GOOD	POOR	NOT APPLIC.								
2215	12	August	1966														
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.																	
<p>I was helping a man into a boat. The man had been drinking. He slipped and fell overboard taking me with him. I landed on some rocks.</p>																	
6. FORMS SUBMITTED APPLICABLE TO INJURED CIVILIAN EMPLOYEES																	
A. C.A.1 <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO										B. C.A.2 <input type="checkbox"/> YES <input type="checkbox"/> NO			C. OTHER (INDICATE):				
7. RECOMMENDED CORRECTIVE ACTION: What recommendations have been made which will help prevent another accident like this?																	
No comment, accident ashore																	

SIGNATURE OF SUPERVISOR, CHIEF OF WORKING PARTY OR HEAD OF WORK DETAIL: J. A. O'HALLORAN	TITLE, RANK, RATE OR GRADE Chief Engineer	DATE 12 August 1966
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8. REVIEW AND COMMENT OF REVIEWING OFFICIAL

Concur with Para 7.

SIGNATURE OF REVIEWING OFFICIAL: JOHN HARRINGTON	TITLE, RANK, RATE OR GRADE Master	DATE 12 August 1966
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SECTION 9 AGENCY INVOLVED	<p>Check (x) and specify in space provided the object or substance most closely associated with the injury and which in general could have been properly guarded or corrected. One check (x) MUST be entered in this section.</p>						Do not use
	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <p>1. MACHINES: _____ (Agitators, grinders, sewing machines, vices, saws, lathes, welding machines, etc.)</p> <p>2. PRIME MOVERS & PUMPS: _____ (Steam, internal combustion or air, compressors, fans, blowers, etc.)</p> <p>3. ELEVATORS: _____ (Passenger, freight, aircraft or dumbwaiters)</p> <p>4. HOISTING APPARATUS: _____ (Cranes, hoists (air or electric), shovels, dredges, jacks, etc.)</p> <p>5. CONVEYORS: _____ (Belt, monorail, pneumatic, drag line, tiering or piling, etc.)</p> <p>6. BOILERS & PRESSURE VESSELS: _____ (Fired or unfired, pressure lines, etc.)</p> </div> <div style="width: 33%;"> <p>7. VEHICLES: _____ (All types, except in traffic or flight)</p> <p>8. ANIMALS: _____ (Including insects and reptiles)</p> <p>9. MECHANICAL POWER TRANSMISSION APPARATUS: _____ (Belts, gears, couplings, etc.)</p> <p>10. ELECTRICAL APPARATUS: _____ (Motors, transformers, lamps, appliances, etc.)</p> <p>11. HAND TOOLS: _____ (Hand, mechanical or electrical motive power; hammers, wrenches, welding tools, sandblasters, etc.)</p> </div> <div style="width: 33%;"> <p>12. CHEMICALS: _____ (Explosives, gases, vapors, acids, caustics, poisonous vegetation, etc.)</p> <p>13. HIGHLY INFLAMMABLE & HOT SUBSTANCES: _____ (Fire, alcohol, steam, points, etc.)</p> <p>14. DUSTS: _____ (Explosive, organic or inorganic; leather, emery, coal, etc.)</p> <p>15. RADIATIONS & RADIATING SUBSTANCES: _____ (X-Ray, radium, ultra violet rays, etc.)</p> <p>16. WORKING SURFACES: _____ (Floors, decks, roofs, roads, stairs, platforms, stagings, scaffolds, etc.)</p> <p>17. AGENCIES: _____ (Any object or substance not otherwise classified.)</p> </div> </div> <p>WHAT PART OF AGENCY CHECKED (X) ABOVE WAS MOST CLOSELY INVOLVED? _____</p>						
SECTION 10 UNSAFE MECHANICAL CONDITION	<p>Check (x) and specify the PRINCIPAL unsafe condition which led to or was responsible for the accident. One check (x) MUST be entered in this section.</p>						
	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <p>18. IMPROPER GUARDING: _____ (Unguarded, inadequately guarded, etc.)</p> <p>19. DEFECTIVE SUBSTANCES OR EQUIPMENT: _____ (Broken, rough, slippery, poorly designed, etc.)</p> </div> <div style="width: 33%;"> <p>20. HAZARDOUS ARRANGEMENT: _____ (Unsafe piling, poor layout, etc.)</p> <p>21. IMPROPER ILLUMINATION: _____ (Insufficient light, glare, etc.)</p> <p>22. IMPROPER VENTILATION: _____ (Dusty, gassy, impure air source, etc.)</p> </div> <div style="width: 33%;"> <p>23. UNSAFE CLOTHING: _____ (Lack of, untested or defective shoes, goggles, gloves, respirators, etc.)</p> <p>24. NO UNSAFE CONDITION:</p> <p>25. UNSAFE CONDITION NOT OTHERWISE CLASSIFIED: (Explain) _____</p> </div> </div>						
SECTION 11 TYPE OF ACCIDENT	<p>Check (x) type of accident. One check (x) MUST be entered in this section.</p>						
	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <p>26. STRIKING AGAINST (Contact with rough or sharp objects, resulting in cuts, etc., due to striking against, kneeling on, or slipping on objects.)</p> <p>27. STRUCK BY (Falling, flying, sliding, or moving objects.)</p> <p>28. CAUGHT IN, ON, OR BETWEEN.</p> <p>29. FALL ON SAME LEVEL.</p> </div> <div style="width: 33%;"> <p>30. FALL TO DIFFERENT LEVEL.</p> <p>31. SLIP (not fall) OR OVER-EXERTION. (Resulting in strain, hernia, etc.)</p> <p>32. EXPOSURE TO TEMPERATURE EXTREMES. (Resulting in burning, scalding, heat exhaustion, sunstroke, freezing, etc.)</p> <p>33. INHALATION, ABSORPTION, SWALLOWING. (Asphyxiation, poisoning, drowning, etc.)</p> </div> <div style="width: 33%;"> <p>34. CONTACT WITH ELECTRIC CURRENT.</p> <p>35. ELECTRIC WELDING FLASH.</p> <p>36. FOREIGN BODIES IN EYE. (Resulting from dust, chips, airborne particles, etc.)</p> <p>37. TYPE OF ACCIDENT NOT OTHERWISE CLASSIFIED: (Explain) _____</p> </div> </div>						
SECTION 12 UNSAFE ACT	<p>Check (x) and explain PRINCIPAL unsafe act. One check (x) MUST be entered in this section.</p>						
	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <p>38. OPERATING WITHOUT AUTHORITY. (Failure to secure or warn)</p> <p>39. OPERATING OR WORKING AT UNSAFE SPEED. (Too slow, too fast, throwing materials, etc.)</p> <p>40. MAKING SAFETY DEVICES INOPERATIVE. (Removing, misadjusting, disconnecting, etc.)</p> <p>41. USING UNSAFE EQUIPMENT, HANDS INSTEAD OF EQUIPMENT, OR EQUIPMENT UNSAFELY.</p> </div> <div style="width: 33%;"> <p>42. UNSAFE LOADING, PLACING, MIXING, ETC.</p> <p>43. UNSAFE POSITION, POSTURE OR ACT, ETC. (Under suspended loads, lifting with bent back, etc.)</p> <p>44. WORKING ON MOVING OR DANGEROUS EQUIPMENT. (Cleaning, adjusting, oiling, etc.)</p> <p>45. DISTRACTING, TEASING, ABUSING, STARTLING, ETC. (Quarreling, horseplay, etc.)</p> </div> <div style="width: 33%;"> <p>46. FAILURE TO USE SAFE CLOTHING OR PERSONAL PROTECTIVE DEVICES. (Hats, goggles, etc.)</p> <p>47. NO UNSAFE ACT.</p> <p>48. UNSAFE ACT NOT OTHERWISE CLASSIFIED (Explain) _____</p> </div> </div>						
SECTION 13 UNSAFE PERSONAL FACTOR	<p>Check (x) and explain the unsafe personal factor chiefly responsible for the accident. One check (x) MUST be entered in this section.</p>						
	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <p>49. IMPROPER ATTITUDE (Disregard of instructions, failure to understand instructions, nervous, excitable, etc.)</p> <p>50. LACK OF KNOWLEDGE OR SKILL (Unaware of safe practice, unskilled, etc.)</p> </div> <div style="width: 33%;"> <p>51. BODILY DEFECTS (Defective eyesight, hearing; fatigue, intoxicated, existing hernia, weak heart, etc.)</p> <p>52. NO UNSAFE PERSONAL FACTOR:</p> </div> <div style="width: 33%;"> <p>53. UNSAFE PERSONAL FACTOR NOT ELSEWHERE CLASSIFIED (Explain): _____</p> </div> </div>						
SECTION 14 TYPE OF INJURY	<p>Check (x) type of injury, one check (x) MUST be entered in this section.</p>						
	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <p>54. WOUNDS (Concussion, abrasion, incision, laceration)</p> <p>55. SPRAINS</p> <p>56. STRAINS (Muscular)</p> <p>57. HERNIA</p> <p>58. FRACTURES</p> </div> <div style="width: 33%;"> <p>59. AMPUTATIONS (Loss of bony substance)</p> <p>60. AVULSION (Loss of non-bony substance by shearing or tearing away)</p> <p>61. BURNS AND SCALDS</p> <p>62. FOREIGN BODY IMBEDDED</p> <p>63. FOREIGN BODY, LOOSE (Dust, etc.)</p> </div> <div style="width: 33%;"> <p>64. FLASHES</p> <p>65. FUMES AND GASES</p> <p>66. POISONS</p> <p>67. SKIN DISEASE (Occupational)</p> <p>68. TYPE OF INJURY NOT OTHERWISE CLASSIFIED: (Drowning, Electrocution, Heat Exhaustion, etc.)</p> </div> </div>						
SECTION 15 PART OF BODY	<p>Check (x) part of body. Part of body chiefly identified with injury MUST be checked (x).</p>						
	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 33%;"> <p>69. HEAD FACE</p> <p>70. BACK</p> </div> <div style="width: 33%;"> <p>71. EYES</p> <p>72. TRUNK</p> </div> <div style="width: 33%;"> <p>73. ARMS</p> <p>74. HANDS</p> </div> <div style="width: 33%;"> <p>75. FINGERS</p> <p>76. LEGS</p> </div> <div style="width: 33%;"> <p>77. FEET</p> <p>78. TOES</p> </div> <div style="width: 33%;"> <p>79. SYSTEMIC (Stomach, intestines, lungs, heart, nerves, etc.)</p> <p>80. PART OF BODY NOT ELSEWHERE CLASSIFIED: (Explain) _____</p> </div> </div>						