# HOW TO TREAT WORKPLACE INJURIES

### STAPLED FINGER

Determine where the staple entered the finger.

If the staple is embedded in the fleshy pad of the fin-

ger, proceed to step 2. If the staple entered through the nail or the side of the finger, see Be Aware, page 120.

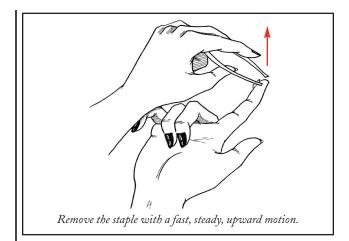
- Obtain strong tweezers or needle-nose pliers.

  If neither tool is available, use a flat-head screwdriver.
- Place one side of the tip of the tool between the staple and the skin.

  If using a screwdriver, place the tip under the staple.
- 4 Lift or pry the staple out.

With a fast, steady motion, close the tweezers or pliers and pull upward. The staple should be pulled straight out in the direction that it entered the finger. The staple will be in its original shape: The ends will be straight and should not cause further injury upon removal.

- Wash the wound with soap and warm water.
- 6 Apply isopropyl alcohol or hydrogen peroxide.
  Use a sterile cotton ball or a clean cloth to wipe on the disinfectant.



- Apply pressure to the wound to stop residual bleeding.
- 8 Dress the wound with a bandage.
- 9 Examine the staple.

If the staple is not intact, a piece may still be in the wound and can cause pain, swelling, and infection. Seek medical help if any part of the staple remains in the finger.

10 Monitor the wound.

With or without a piece of the staple in it, a deep puncture wound may cause an infection. If the finger swells or remains painfully sore for more than 24 hours, see a healthcare professional.

#### Be Aware

- A staple that enters the finger through the nail can cause a small bone fracture or a bone infection (osteomyelitis). If the staple has punctured the nail, seek medical attention to rule out either of these conditions.
- A staple that enters the side of the finger can damage nerves, tendons, or blood vessels. If the staple is in the side of the finger, is especially deep, or causes numbness, it is best to seek professional help before removal.
- Tetanus bacteria, *Clostridium tetani*, can enter the body through a cut or puncture even if the penetrating object is not dirty or rusty. If you experience painful muscle spasms, lockjaw, difficulty swallowing, or difficulty breathing, seek medical attention immediately. To be safe, get a tetanus booster if you have not had one within five years.

### DEEP-FRYER BURN

1 Take your hand out of the hot oil.

If the burn was caused by splattering oil, stand back from the deep fryer. Avoid touching the burned area.

2 Watch for flames.

Grease is highly combustible. Any oil above 400° to 600°F (200° to 300°C) may burst into flames and set fire to clothing. Smother any flames with wet oven mitts or wet towels to extinguish.

3 Plunge the burned area into cold running water.

Immerse the burn immediately and keep the hand or other body part under water until you are ready to apply the dressing.

4 Apply a dressing.

When the area is cool, cover it with a dry clean sheet or towel. Use a clean apron if nothing else is available.

5 Call emergency services.

While any burn the size of a dime or larger on the hands, feet, or face should be checked by a healthcare professional, a burn larger than a few inches across requires an immediate visit to the emergency room. Burn victims should always be transported by ambulance: Tell the emergency phone operator and emergency room attendant that you have a burn injury. If there is a burn center within 30 minutes, bypass other hospitals and seek specialized care.

#### Be Aware

- Because of the risk of damage to nerves and blood vessels, any circumferential burn (around an arm, leg, finger, or the entire body) should be treated at an emergency room immediately.
- Infection is not an immediate concern: Hot grease sterilizes the area temporarily.
- Do not put oils or other petroleum-based products on the burn.

## FINGER CUT ON DELI SLICER

1 Turn off the slicer.

Use the power switch or yank out the cord. Yell for help if necessary.

2 Control the bleeding.

Locate a large, clean, absorbent cloth (a shirt or an apron is effective). Wrap the cloth around the injured finger and apply steady pressure with your other hand to stop the bleeding. Sit down and elevate the injured hand above the level of your heart. The fingers have a large number of blood vessels, so the blood loss may appear significant, but it probably is not.

3 Determine if part of the finger is missing.

Check (or ask a co-worker to check) the slicer for any missing piece of the finger. If part of the finger has been cut off, perform the following steps, then see "If Part of the Finger Has Been Amputated," page 124.

4 Maintain pressure.

Apply pressure on the finger for 5 minutes, then check the wound. If blood continues to spurt from the laceration, continue to apply pressure for 15 additional minutes. As the cloth becomes saturated, remove and replace it with a new one.

5 Clean the wound.

When the bleeding has slowed or stopped, examine the wound while gently rinsing it in a stream of cool tap water, taking care not to dislodge any visible blood clots.

6 Determine severity.

If the wound is through a finger joint or the nail bed, if part of the finger is attached to the hand by only skin, or if bone is visible, go to an emergency room; have a co-worker drive you. Bring additional towels and continue to apply pressure.

**7** Cover and close the wound.

If the wound is less than half an inch in length, if you can move your finger normally, and if you can feel your fingertip, try to bring the skin edges of the wound together with pressure. Continue washing the wound under running tap water. Pat dry and re-apply direct pressure with a clean cloth to absorb any blood. Use an adhesive bandage to cover the wound and maintain the contact of the edges of the skin.

8 Get a tetanus shot.

If you have not had a tetanus booster in the last five years, get one as soon as possible.

- If Part of the Finger Has Been Amputated Do not submerge the severed part.
- The severed piece should not be placed in water, milk, or any other liquid.
- Do not attempt to clean the severed part.

  Cleaning the amputated piece may alter the character of the skin and other tissue that may be re-attached.
- Prepare for transport.
  Get a clean cloth or paper towel and soak it in cold running water. Wring to remove excess water and gently wrap the severed part in the towel.
- 4 Chill.

  Place the bundled piece in a small bowl filled with ice. Cover the bundle with more ice. Do not let the part come into direct contact with ice.
- Call emergency services.

  Driving yourself, or having someone drive you, is not advisable if you or the driver are prone to fainting.

  Call an ambulance and bring the bowl containing the amputated part with you.

