



## Prevent Injuries



**Remove Your Jewelry**



# Jewelry Safety (in Production Areas)



## INTRODUCTION & IMPORTANCE

Jewelry includes watches, wedding rings, bracelets, necklaces, body piercings and facial jewelry.

Jewelry at work is a major safety hazard and can cause serious injuries.

Jewelry can get caught in power tools or stuck against objects, conveyors, and moving parts of machinery.

## CONSEQUENCES

Wearing jewelry at work could result in:

- torn earlobes
- injured fingers, hands, wrists, neck
- amputated fingers or limbs
- electric shock
- lost-time from work
- the need for medical care

## PROCEDURE/ PRACTICE

Remove all jewelry and store it or do not bring it to work.

## APPLICATION OR FOLLOW-UP

Continue training with other *Policy & Work Rules* posters.

## SUMMARY

Do not wear jewelry when you work with power tools and machinery.

Accidents and injuries are harmful and could be life threatening to you and your co-workers.

## NOTE

*Caught jewelry can drag you into machinery. You could lose your fingers, hands, arms or even your life if your jewelry gets caught.*

## ASK

*Do you know anyone who has been injured at work from wearing jewelry?*





**LeClasp Safety Products and Solutions:**

**Item #1350 - LeClasp Medical Alert ID Key Holder (Personalized)**

MSG # A B C D E F G

1352 - LeClasp Key Holder with choice of PERSONALIZED Medical Alert ID Symbols. Choice 36+ conditions, allergies, meds, etc.)

**Medical Conditions**



**Allergies**



**Prescribed Medications**



**Implants - Donors - Others**



**Medical Alert - Special Needs**



*If your medical alert identification symbols are not found above, simply supply us the details and we'll custom imprint it.*

**LeClasp Safety Products and Solutions:**

**Item #1352154 - LeClasp Medical Alert ID Key Holder (Generic)**

MSG # A B C D E F

1352 - LeClasp Key Holder with choice of GENERIC Medical Alert ID Symbol and comes with one (1) wallet card



1354 - Emergency Contact and Medical Information Wallet Card

**Emergency Contact (personne à rejoindre en cas d'urgence)**  
 Emergency contact (personne à rejoindre en cas d'urgence):  
 1. Physician (médecin) - Spécifier (spécifier) - 30/00 (30/00)  
 2. \_\_\_\_\_  
 1. Family/Physician/Doctor (famille/médecin/travaill) - 30/00 (30/00)  
 2. \_\_\_\_\_

**Emergency Wallet Card (Carte Portefeuille d'urgence)**  
 Emergency wallet card (carte portefeuille d'urgence):  
 Date (date): \_\_\_\_\_  
 Signature: \_\_\_\_\_

1360 - NEW Larger-Sized Medical Alert ID Card  
 com for Employee Badges

60



Actual Size - 2.5" X 4.25"

- Designed to be **CLIPPED ON** with  
 1) Employee Photo ID/ Access/  
 Security swipe badges, or 2)  
 when applicable, near equipment  
 where employee works. (Also  
 compliant with Membership/  
 School/child ID/Trade Show/  
 Event/etc. passes & cards.)
- Worker confidentially fills in  
 personal Contact and Medical  
 Information
- Recommended for workers with  
 three (3) or more issues
- Seven lines for worker to fill in  
 medical info including conditions,  
 allergies, prescribed meds, etc.
- Comes with bull dog hole,  
 compliant to ALL badge holders,  
 incl. popular retractable clip  
 holders, polypropylene neck  
 wallets, vinyl badge holders, neck  
 secure and breakaway lanyards.
- Larger size card makes emergency  
 info easily visible (accessible)  
 beneath badges, cards and passes  
 by medic/sdoctor/snurses.

# This Little Piggy...

**SFC DAVID ALAN MELANCON**  
3rd Brigade, 1st Cavalry Division  
Fort Hood, TX



**H**ave you ever noticed most accidents happen when you least expect them? Well, there I was, just coming in from a field training exercise (FTX) and about to perform a simple task when an accident happened to me. I certainly wasn't expecting to wind up in the hospital that January day.

I'm a Bradley systems maintainer and maintenance platoon sergeant for a forward-support company. We'd just completed the FTX in preparation for a deployment to the Joint Readiness Training Center and, after that, possibly Iraq. We were tired after spending 3 weeks in the field, but it was almost over—all we had left to do was clean our vehicles. At about 1700, the last of the vehicles were staged at the wash rack, so we went to work.

Everything about this day was relatively normal, with one notable exception: that morning, I'd taken my wedding ring off my dog tags and slipped it back on my left-hand ring finger. I figured since our training was over, wearing my ring was no big deal. I say this is notable because I always wear my ring around my dog tags when I'm on duty, especially in the motor pool or in the field. I'd spent a year in Iraq during Operation Iraqi Freedom II, and the only times I put on my ring were when I left for R & R leave and when my unit redeployed home. That system worked well, and thankfully I came home not only alive but with all 10 fingers!

I needed to get my wet-weather gear, which was in a shelter on the back of an LMTV trailer. I climbed on the trailer, got my things, and grabbed the right side rail for balance as I prepared to climb back down. Unfortunately, my foot slipped as I stepped on the lower bumper, and I began to fall. My hand slid down the rail as I moved toward the ground, and my ring caught in one of the U-shaped grooves used for securing canvas covers on the trailer.

I was horrified as I looked at my finger. The skin and most of the tissue on my ring finger was completely gone, and the bone from the first joint just above my fingernail was missing. I called out to the other guys and said, among other choice words, "Hey, get a medic, get the aid bag—I've lost my finger!"

Needless to say, I was in a lot of pain. Another Soldier got a combat lifesaver bag and pulled out a pressure bandage, which I wrapped around what was left of my finger. The commanding officer dialed 911 and had a pickup truck brought off the roadway so I could sit down and take off my helmet, weapon, and vest. We were only about 4 minutes from main post, so the ambulance arrived fairly quickly, and took me to the emergency room at Darnell Army Community Hospital.

The doctors there told me the damage to my finger was so extensive they didn't know if any attempted repair would work. The tissue, nerves, and vessels were torn horizontally, and reattaching my finger would require 8 to 10

hours of surgery with no guarantee of success. In fact, there was only a 20-percent chance my finger wouldn't have to be amputated even with surgery due to the nerve and vessel damage, which reduced blood circulation in the injury to zero.

I faced a tough decision. The doctors told me my best course of action would be amputation because I would have a good chance of full recovery after rehabilitation. They let me decide, however, and after talking with my wife, I gave the doctors permission to amputate. They performed surgery that night, and my finger was amputated to the first joint—ironically, at the same place my wedding ring had rested just that morning.

It's been about 2 months since the accident, and I recently started rehab. I still feel a lot of pain, not just in my hand but all the way up my arm. The doctors explained some of the ligaments and tendons in my arm were pulled during the accident, and I'll experience phantom pain the rest of my life. I've lost about half the gripping power in my hand, which isn't good since I'm left-handed. I'll have to learn how to

write and type again, but I can shoot right-handed—a definite plus for a Soldier. My long-term prognosis is pretty good, though; the doctors tell me that after about 4 months of occupational therapy I should be back to normal.

I share this story in the hope I'll open another Soldier's eyes and prevent them from making the same mistake. The doctors predict I'll be able to deploy back to theater with my unit later this year, but I could just as easily have lost my career that winter afternoon. Believe me, I'll do everything in my power to make sure I deploy with the Soldiers I've trained because I know they need me. I think it'll be a morale booster if my Soldiers can look at me and say, "If he lost a finger and is still here with us, we can do anything."

I'll be wearing my wedding ring on my right hand from now on, but I promise you this: I'll take it off whenever I put my uniform

## Giving the Finger

This soldier injured his pinky finger while serving in Iraq during the first year of conflict. The injury itself isn't very remarkable and he made a full recovery, but notice the ring next to the injured finger. It's never safe to wear rings or other jewelry in a field or combat environment. If the ring gets caught on something, you risk either a degloving injury (i.e., all the skin peeled off) or total amputation. Both injuries hurt a lot, so keep your ring in a safe place—not on your hand—when you're on duty.

*Special thanks to LTC Roman Blynsky, MD, who submitted this photo from his time with the 4th Infantry Division in Iraq.*



on, no matter what's planned that day. You never know what might happen. I survived a year in Iraq unharmed only to come home and lose my finger because I was tired and wasn't thinking straight. Stay alert and realize even the simplest of tasks can hurt you in a big way. If it can happen to me, it can happen to you too!

*Editor's note: SFC Melancon would like to thank his team of doctors, led by LTC John J. Falliace at Darnell Army Community Hospital, for their outstanding care during his hospitalization and subsequent rehabilitation. He also would like to thank the Soldiers, NCOs, and officers of Delta Company, 215th BSB and 6th Squadron, 9th Cavalry for their continued support. "FIRST TEAM!"*

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COUNTERMASURE 04/06 <https://cnc.army.mil>

**A Finger or a Ring?  
The choice is Yours.**

