

## ATV + Inexperience = Pain

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This face brought to you by an ATV colliding with a tree.



Last summer, I took my wife and kids to Arkansas to visit my family. Since part of my job at the Naval Safety Center is teaching risk management to Sailors and Marines, I'm familiar with the process. During the drive, I got a chance to practice my own personal risk management. We switched drivers, maintained speed limits, and stopped for the night. The trip went well.

Once we arrived, my 14-year-old daughter spied my brother's four-wheeled ATV and was eager to take a ride. She asked my brother if she could ride it. He said, "Sure."

He never thought to ask her if she was familiar with this type of machine, since his own kids ride it frequently. She climbed on and went zooming down the driveway.

My daughter made it to the end of the drive, but when she tried to stop, she turned the throttle instead of squeezing the hand brake. The four-wheeler slammed into a tree and threw her into it. The rough bark scraped her face. We took her to the hospital where doctors gave us salve to put on her wounds to prevent scarring.

As we were returning from the hospital, we realized we were very lucky. If my daughter had taken the force of the blow against the tree instead of the ATV, she could have been killed.

My daughter (and the rest of my family) learned that day how important it is to assess risks before doing something new. If we had considered these points before she climbed on that ATV, she may never have taken that ride and made that sudden stop:

- Before this incident, my daughter had been on an ATV for only two hours of riding time. And no one had ever really shown her how to ride one.
- She had no idea that she needed protective equipment. She was wearing flip-flops and didn't have on a helmet.
- She had the gas and brake confused, which shows how unfamiliar she was with the ATV.
- My brother just assumed that everyone knew how to ride an ATV and didn't supervise his niece's efforts.

Even though we knew the hazards of riding a four-wheeler, we never gave them much thought until our daughter was hurt. Lesson learned: Risk management doesn't just apply in the military. You need to use it all the time.

## How One Army Base Handles Its Drinking Problems

When December rolls around, the Fort Dix Counseling Center wields a lot of power on this Army base in central New Jersey. Jeanne Glogowski, Alcohol-Drug Control Officer for the base, must give her approval for any parties, whether held by the military or catered by a civilian contractor, on or off base.

She assigns personal responsibility for alcohol use at the function to the officer requesting permission, including providing alternative transportation for impaired attendees and upholding the state's minimum drinking age. The responsibility is such that some officers eventually decide not to include alcohol at the function.

Why such strict rules? The people at Fort Dix feel that alcohol is part of most military social functions, and younger soldiers may want to emulate their officers and older comrades-in-arms, even though they may be under the national drinking age of 21. Glogowski believes that without this kind of intervention, the Fort Dix community might not think as seriously about impaired-driving issues.

The base also sends all military managers and civilian supervisors to federal, drug-free-workplace training where they learn to detect alcohol abuse. Thanks in part to the program, many military personnel who have been able to hide alcoholism for years are now getting the treatment they need.

The Counseling Center tries not to make the program punitive, but focuses on educating and protecting the soldiers, their families and the entire community. They say they want the military population, as well as the civilians who use the county roads that run through the base, to "watch out for drunk drivers, and take care of your friends and family."

For more information on the Fort Dix program, contact Jeanne Glogowski, ADCO; Fort Dix Counseling Center; Attn: AFRC-FA-CFD; Fort Dix, NJ 08640-5140. Her phone number is (609) 562-4011.

## OSHA Information on Lyme Disease

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On April 25, 2000, OSHA issued a Hazard Information Bulletin that advises employers how to carry out an effective protection program on reducing the risk of Lyme disease to outdoor workers.

According to OSHA, Lyme disease (a tick-borne illness) affected more than 16,000 people in 1998. It may cause chronic arthritis, heart disease or neuralgic disorders if undiagnosed and untreated. Lyme disease is treated successfully with standard antibiotic and nutritional therapy—but only if it is recognized in an early stage.

The areas in the United States with the highest risk for Lyme disease are in the Northeast, from Massachusetts to Maryland; the north-central region, including Wisconsin and Minnesota; and an area in northern California in the Pacific-coastal area.

Outdoor workers in occupations such as construction, landscaping and forestry, who work in heavily wooded or grassy areas, are at increased risk of exposure to Lyme-disease-bearing ticks.

Some steps, such as avoiding tick habitats, wearing clothing that keeps ticks from reaching the skin, using insect repellants, and getting a protective vaccine, are ways to reduce the risk of Lyme disease.

According to OSHA, the Hazard Information Bulletin is not a new standard or regulation and creates no legal obligations. It is advisory in nature, informational in content, and is intended for use by employers seeking to provide a safe and healthful workplace (i.e., OSHA's General Duty Clause).

For more information on Lyme disease and its prevention, visit the OSHA's web site at <http://www.osha.gov> or go to the Center for Disease Control's website at <http://www.cdc.gov>.

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