

STATE SAFETY OFFICE HEADQUARTERS, NEW YORK ARMY NATIONAL GUARD 330 OLD NISKAYUNA ROAD LATHAM, NEW YORK 12110



SAFETY MESSAGE 18-02 Cold Weather Injuries

ALARACT 105/2017 Cold Weather Injury Prevention for 2017-2018 Cold Weather Season

Army Leaders must be aware of the dangers the cold weather brings to their Soldiers. The ALARCT mentioned above was recently published, providing information and guidance on monitoring, preventing, treating, and reporting Cold Weather Injuries (CWI). Below are some key areas from the ALARACT. The complete message will be posted on the NYARNG Safety Office website.

Leaders and Soldiers should understand that the prevention of cold weather injuries is vital to sustain combat power. Cold weather – related injuries (CWI) remain a significant threat to individual health and unit performance during training and operations. Army medical providers have treated between 200 and 500 cases of CWI each year in the past five years. These preventable life- or limb – threatening conditions are armed forces reportable medical events (RMES). Each CWI has the potential to be a life or limb threatening condition. When CWI are not reported as RME they cannot be evaluated real – time, which hinders prevention efforts.

Commanders, supervisors, and service members (SM) at all levels will implement protective measures and utilize principles of risk management to prevent CWI to Soldiers and civilians during 2017 – 2018 cold weather season, now through 31May18.

CWI and other injuries related to cold weather include:

- Injuries due to decreased temperature (hypothermia, frostbite, nonfreezing cold injury).

- Injuries due to using heaters, engines, and stoves (e.g., burns from fire, carbon monoxide poisoning, etc.).

- Accidents (i.e., slips, trips, falls) due to impaired physical and mental function resulting from cold stress; snow blindness/photo keratitis and sunburns due to overexposure of eyes and skin to ultraviolet radiation, freezing temperatures and dryness.

Some symptoms that may be displayed are:

- unexplained shivering, exhaustion, memory loss, slurred speech, drowsiness, lack of coordination or mental status changes should be provided appropriate first aid and evacuated to the closest MTF as quickly as possible. If medical care is not available, begin active warming of the SM or civilian by getting them into a warm environment, removing wet clothing, and keeping them warm and dry until medical care is available.

Preventive measures include:

- Ensure all SM and civilians are trained on proper wear, utilization, care, and maintenance of issued cold weather clothing systems and equipment. Ensure all SM and civilian cold weather clothing is clean, dry and in serviceable condition (without holes or broken fasteners).

- Ensure personnel are briefed to avoid alcohol and tobacco use in cold environments. Both interfere with the body's adaptive response to cold.

- Ensure Soldiers pack sufficient quantities of protective clothing and equipment such as socks, proper headgear, eyewear (i.e., sunglasses, goggles, field expedient cardboard with narrow slits for the eyes), sunscreen, lip balm, and skin – care items to meet mission requirements.

- Ensure personnel are properly trained to recognize and prevent CWI. Ensure SM use the buddy system and evacuate personnel to the closest MTF if CWI symptoms develop.

- ensure commanders and leaders at all levels ensure that officers, NCOs, and supervisors execute appropriate risk management procedures when planning cold weather exercises or operations.



To find previously published Safety Messages go to our NYARNG Safety Website:

http://dmna.ny.gov/safety/

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