Hydration – The Importance of Water Fatality File

At approximately 7:00 a.m. on August 21, 2007, Employee #1, a construction worker, began his workday using a 90-lb jackhammer to remove a 4-ft by 8-ft section of concrete from around metal posts. He and his coworker were working in direct sunlight with a temperature of 82 degrees and 60 percent relative humidity. They took two breaks, one for 15 minutes at 10:00 a.m. and another one for 5 minutes at 11:15 a.m. Employee #1 and his coworkers ate lunch at noon for an hour. At 1:20 p.m. he asked for a drink of water and ten minutes later, told coworkers that he felt weak and shaky. At 2:00 p.m., Employee #1 stopped working, went down on one knee, and then passed out. He was immediately transported by ambulance to a local hospital, where he was diagnosed with vasovagal syncope, dehydration, and low potassium levels. He received IV fluids and was released at 4:55 p.m. Employee #1 had not eaten breakfast, only drank coffee before work. His only water intake had been two small Dixie cups at 10:00 a.m. and a small Gatorade at lunch. Employee #1 and the coworker both had water bottles with them and a source of water nearby for refills, but Employee #1 used his bottle to pour over his head to keep cool. A review of his ambulatory and hospital records by the DOSH Medical Unit indicated that his symptoms were consistent with heat syncope induced by mild heat exhaustion with dehydration.