

OUTDOOR HEAT ILLNESS PREVENTION PLAN

This form is one part of the Production's Plan to reduce heat related illnesses. This form is required to be completed and posted at the work location every day the temperature is forecasted to be 80 degrees Fahrenheit

LOCATION ADDRESS

TODAY'S DATE

For emergency notification, be specific including zip code and building number.

NEAREST HOSPITAL TO THIS LOCATION	
Name	
Address	
Phone	

METHOD OF COMMUNICATION WITH EMERGENCY RESPONSE	
Medic Name	
Radio Channel	
Cell Phone	

LOCATION(S) OF SHADED REST AREAS

LOCATION(S) OF WATER
WATER REPLENISHED BY

CONSIDER YOUR PERSONAL RISK FACTORS						
HYDRATION	AVOID ALCOHOL & CAFFIENE	GENERAL HEALTH	AGE	WEIGHT	MEDICINES	PAST HEAT ILLNESSES

SAFETY HOTLINE 818-560-7391