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U.S. Consumer Product Safety Commission

Ann Brown, *Chairman*
Mary Sheila Gall, *Commissioner*
Thomas H. Moore, *Commissioner*

SPECIAL FOCUS

Preventing Children's Injuries

Children's safety is one of the highest priorities at the U.S. Consumer Product Safety Commission (CPSC). In a recent year, about 6,500 children under age 15 died of unintentional injuries. U.S. hospital emergency rooms treated an estimated 4.3 million children for consumer product-related injuries.

CPSC works to ensure that products used by children are as safe as possible. These include toys, nursery furniture, children's clothing, playground equipment, sports gear, and poison prevention packaging. Here are some actions CPSC has taken to make these products safer.

New Actions on Lead

CPSC has long been involved in protecting children from exposure to lead. In January 1998, CPSC issued guidance to manufacturers, importers, distributors, and retailers regarding lead in consumer products. CPSC requested manufacturers to eliminate lead that may be accessible to children from products used in or around households, schools, or in recreation.

In addition, CPSC recommended that before importers, distributors, and retailers purchase products for resale, they obtain assurances from manufacturers that those products do not contain lead that may be accessible to children. This could include obtaining the relevant information from manufacturers or conducting the evaluations themselves. (See *Getting Out the Lead*, page 2.)

Reducing Lead Poisoning

Lead poisoning in young children may result in neurological damage, delayed mental and physical growth, and cause behavior and learning problems. Approximately 930,000 children between the ages of 1 and 5 have blood lead levels that are of concern.

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Welcome NHTSA!

We're delighted to be working with the National Highway Traffic Safety Administration (NHTSA) to provide American consumers with lifesaving information about consumer products and motor vehicles. Beginning with this issue of *Consumer Product Safety Review*, NHTSA recalls will be published opposite the CPSC recall page. We hope this makes it easier for you, our readers, to get the timely safety information you need.

Ann Brown
Chairman, U.S. Consumer Product Safety Commission

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Includes recalls from the National Highway Traffic Safety Administration

Getting Out the Lead

CPSC enforces the Federal Hazardous Substances Act (FHSA). Under the FHSA, toys or other articles that expose children to hazardous amounts of lead under reasonable foreseeable conditions of use are banned hazardous substances. A household product not intended for children, but which poses a lead poisoning risk, requires precautionary labeling.

CPSC does not have the authority to require companies to stop using lead in consumer products if the levels released are not hazardous. However, CPSC recently encouraged companies to voluntarily eliminate lead to preclude the possibility it might be released or become accessible to children through reasonable use.

If a manufacturer believes the addition of lead is necessary, the manufacturer is encouraged to do the "requisite analysis" to see if the lead exposure causes the product to be hazardous. If so, the product is banned (if it is intended for children) or requires labeling.

Young children are most commonly exposed to lead in consumer products from direct mouthing of objects or handling the objects and then putting their hands in their mouth. Determining whether children can be exposed to hazardous amounts of lead in a product requires special tests and evaluation.

For example, CPSC staff screens children's products for lead by measuring total lead concentrations. When levels are above the screening threshold, CPSC staff will conduct further testing on the product to determine if lead could be released in amounts hazardous to children during handling or use. Consideration is given in the test selection and the hazard evaluation to the ages of the children who are expected to play with the product and the way the product is likely to be used.

If children are likely to handle a product, staff wipes accessible surfaces with moist filter papers, which are then analyzed for lead. If children are likely to put a product in their mouth, saline extraction tests are used as a surrogate for this mouthing behavior.

For a complete copy of CPSC's *Guidance on Lead (Pb) in Consumer Products*, contact: Office of the Secretary, U.S. Consumer Product Safety Commission, Washington, DC 20207 (301-504-0800) or visit CPSC's web site at: www.cpsc.gov/businfo/leadguid.html.

— *Lori E. Saltzman, M.S., Directorate for Epidemiology and Health Sciences, and Laura Washburn, Office of Compliance*

In 1978, CPSC banned the sale of paint, intended for consumer use, that contained more than 0.06% lead. CPSC's efforts, along with others, have significantly reduced blood lead levels in the U.S.

CPSC also took several other actions involving lead and young children. In 1996, CPSC discovered that imported non-glossy vinyl miniblinds can present a lead poisoning hazard for young children. At CPSC's urging, manufacturers are now making new miniblinds without intentionally-added lead.

That same year, CPSC released a major study revealing that many school, park, and community playgrounds across the country have older playground equipment with deteriorating paint that presents a potential lead paint poisoning hazard. CPSC staff alerted state and local officials about how to identify and control lead paint hazards on their playground equipment.

Recent CPSC action resulted in stopping the production of children's jewelry containing lead. In addition, several years ago, CPSC issued recalls of about one million leaded crayons from 11 importers.

Nursery Equipment

CPSC also has taken an active role to prevent injuries and deaths associated with infant and toddler equipment.

For example, CPSC conducted and released a two-year study on the possible hazards associated with soft bedding for infants. The study found that up to 1,800 babies whose deaths were attributed to SIDS (Sudden Infant Death Syndrome) each year may have suffocated when placed to sleep on their stomachs on top of soft bedding. These infants may have died of rebreathing their carbon dioxide trapped in the bedding.

CPSC worked with pediatricians and other public health organizations to alert the public to the importance of putting babies to sleep on their backs and to warn against the dangers of soft bedding in cribs. In addition, CPSC staff developed a national program, called Baby Safety Showers, which emphasized these and other important safety measures for infants and young children. (See *Baby Safety Showers*, page 5.)

CPSC has taken an active role in crib safety for more than 20 years. Cribs, especially older used ones, are associated with more infant deaths than any other piece of nursery furniture. (See *A Safer Nursery*, page 3.) These incidents occur in several ways. For example, if a crib has loose or broken slats, a child's body may slide through, entrapping the head. If a crib mattress is too small, a child may suffocate when her head becomes wedged in the space between the mattress and the end or side of a crib. Or, if the crib has cornerposts, a child may strangle when her clothing becomes caught on one.

To address these and other crib-related issues, CPSC is-

sued mandatory safety standards in the 1970s and worked on voluntary standards with industry in the 1980s and 1990s. Over this period, CPSC obtained many product recalls affecting thousands of cribs. In 1996, CPSC initiated a rulemaking to address the hazard of crib slats falling out. This rulemaking could result in mandatory requirements that would prevent additional crib-related deaths.

Because cribs are now safer, infant deaths associated with these nursery products have dropped to fewer than 50 a year. This compares with 200 deaths a year before the standards took effect.

A Safer Nursery

Fewer young children received injuries connected to nursery products in 1996 than in years past.

Each year, CPSC staff compiles injury and death data related to nursery products for children under age 5. These products include baby walkers, strollers, cribs, high chairs, changing tables, playpens, and other items. (See below).

For the most recent year of complete data, 1996, an estimated 77,600 children under age 5 were treated in U.S. hospital emergency rooms for injuries associated with nursery products. This estimate represents a statistically significant drop in injuries when compared with the previous four years.

From 1990 through 1994 (the latest year of complete data), an annual average of 63 children died in incidents involving nursery products. This number does not include all nursery product-related deaths, but provides a minimum figure.

— Joyce McDonald, Directorate for Epidemiology and Health Sciences

Nursery Product-Related Injuries and Deaths to Children Under Age Five

Product Category	Estimated Injuries '96	Average Annual Deaths '90-'94
Total	77,600	62.8
Baby Walkers or Jumpers	18,600	0.2
Strollers and Carriages	14,000	2.4
Infant Carriers and Car Seats (Excludes Motor Vehicle Incidents)	12,700	5.4
Cribs, Bassinets and Cradles (Including Crib Mattresses & Pads)	9,400	45.4
High Chairs	9,200	2.4
Changing Tables	2,100	0.2
Baby Gates or Barriers	1,600	0.0
Playpens	1,500	4.4
Other	8,400	2.4

CPSC also warned the public about possible hazards associated with infant bathtub seats. In a recent article in the American Academy of Pediatric's electronic journal, *Pediatrics* (October 1997), a CPSC researcher pointed out that bathtub seats may increase the drowning risk for infants and toddlers by increasing the likelihood the child will be left alone in the tub. CPSC has reports of more than 45 young children who drowned in these seats since 1983. In over 90% of the cases, caregivers left the children unattended.

Child-Resistant Packaging

For more than two decades, CPSC has enforced the Poison Prevention Packaging Act (PPPA). This requires child-resistant packaging for various drugs and household chemical products that can poison young children. Since the passage of PPPA, CPSC estimates that more than 800 children's lives have been saved from accidental poisonings by prescription drugs and aspirin alone.

CPSC recently added ketoprofen to the list of drugs that must be in child-resistant packaging. Ketoprofen is an over-the-counter painkiller. CPSC took similar action for other related drugs, such as ibuprofen and naproxen.

CPSC also routinely reviews products that may require child-resistant packaging. In fiscal year 1997, CPSC initiated a rulemaking that could result in requiring child-resistant packaging for common household cleaners and products containing ingredients refined from crude oil. More recently, CPSC initiated a rulemaking on products, other than dental products, that contain fluoride (like rust removers or toilet cleaners).

In recent years, CPSC revised the PPPA regulations to ensure that child-resistant packaging is also adult-friendly. This action was taken to reduce child poisonings in homes where adults had removed or altered the child-resistant packaging. In about 20% of toxic drug poisonings to children, for example, the drug belonged to grandparents. By January 1998, the new child-resistant, adult-friendly packaging was readily available throughout the country.

Reducing Fire Injuries and Deaths

Young children have twice the risk of dying in a fire than the population as a whole. About 800 children under age 5 die each year in residential fires. This represents 20% of the total residential fire-related deaths in this country. More than 1,700 young children are injured in these fires.

CPSC staff works on many projects to prevent fires and reduce fire deaths and injuries. These projects include smoke detectors, electric and gas appliances and heaters, fireworks, disposable and multi-purpose lighters, clothing, mattresses, and upholstered furniture.

For example, CPSC required most disposable butane and novelty cigarette lighters to be child-resistant. This regulation is expected to prevent 100 to 130 fire deaths each year associated with children under age 5 playing with lighters. CPSC also initiated a rulemaking that may result in requiring multi-purpose butane lighters (e.g., grill and fireplace lighters) to be child-resistant.

In addition, CPSC enforces regulations dealing with fireworks and prevents shipments of hazardous fireworks from entering this country. For firework-related injuries, U.S. hospital emergency room admissions for children under age 5 dropped from 1,100 to 500 injuries for the 10-year period between 1987 and 1996. CPSC and the U.S. Customs Office work together to keep millions of potentially dangerous imported fireworks from reaching American consumers.

CPSC staff also contributed to a recently-released national fire education campaign for young children entitled *Be Cool About Fire Safety.* Produced in cooperation with several groups, including the National Consumers League, Advertising Council, U.S. Fire Administration, Allstate Insurance, and others, the campaign includes videos, coloring books, posters, and parents' guides on fire prevention.

Playing with Toys

An estimated 140,700 children were treated in U.S. hospital emergency rooms for toy-related injuries in 1996, according to CPSC's annual report on toys. This represents a statistically significant drop in injuries from previous years. No specific toy or hazard pattern appears to be responsible for the decline.

Almost one-half of the injuries in 1996 were to children under age 5. Almost 80% were to children under age 15. Over 60% of the victims were male.

The patterns of injury were similar to those of previous years. Most injuries appeared to be minor, with 1.2% of the victims hospitalized. Lacerations, contusions, and abrasions were involved in the majority (62%) of the injuries. The head and face area was involved in 58% of the injuries. The leg/foot and arm/hand areas were each associated with about 15% of the injuries.

Where specifically identified, riding toys were associated with more injuries than any other toy group. This was consistent with previous years. Riding toys accounted for more than 30,000 injuries in 1996. The greatest number of these injuries occurred with wagons (8,800) and tricycles (6,800). Most children were hurt when they fell from the toys.

CPSC received reports of 13 toy-related deaths in 1996. The victims ranged in age from ages 1 to 11. Seven of the deaths, including that of the 11 year-old, were attributed to choking on balloons.

— Deborah Tinsworth, Directorate of Epidemiology and Health Sciences

Toys

Every year, tens of thousands of children are treated in U.S. hospital emergency rooms with injuries associated with toys. (See *Playing with Toys.*)

CPSC enforces several regulations covering toy safety, including those that safeguard young children against choking hazards (like small parts). The recently-enacted Child Safety Protection Act is intended to further reduce toy-related choking deaths and injuries to young children. The Act requires warning labels on balloons and marbles; small balls less than 1.75 inches in diameter; and toys or games that contain these items or small parts and are marketed for children ages 3 through 5. Small balls less than 1.75 inches are banned for children under age 3.

CPSC also regularly obtains recalls of dangerous toys and children's products with small parts, other choking hazards, and/or lead in paint. In fiscal year 1997, for example, CPSC staff obtained 239 recalls for toys and other children's products, such as cribs, playground equipment, bunk beds, and infant swings.

To ensure the safety of imported toys, CPSC staff works with the U.S. Customs Office to inspect toys as they arrive at shipping docks around the country. In fiscal year 1997, CPSC sampled 414 shipments of toys. Of these, 211 shipments were seized or detained for safety violations. This amounted to a total of two million toys, with a retail value of $3 million.

Preventing Drownings

Each year, about 300 children under age 5 drown in residential swimming pools nationwide. Usually the pool is owned by the child's family. In addition, more than 2,000 children in that age group are treated in U.S. hospital emergency rooms for submersion injuries.

A CPSC study of drowning and submersion incidents involving young children revealed that about 75% of the victims were between 1 and 3 years old. Two-thirds of the victims were boys. Most victims had been out of sight for five minutes or less. Almost half the children were last seen in the house before being found in the pool.

CPSC developed safety barrier guidelines for home pools to help prevent these incidents. Although CPSC has not mandated the guidelines, some localities have

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Baby Safety Showers

To help new parents and parents-to-be provide a safe home environment for their young children, CPSC launched a nationwide grassroots program entitled "Baby Safety Showers."

Baby safety showers are parties with a serious purpose — participants learn how to safeguard their children. The showers revolve around games, like "Safety Bingo", which are based on a 12-point baby safety checklist. (See *Baby Safety Checklist*.)

Thousands of baby safety showers have been held around the country since the program's inception in 1995. Child care centers, hospitals, health departments, churches, schools, and other organizations have used this program to help reach their constituencies.

The program easily can be used in combination with other organizations' materials and messages, such as the importance of immunizations or using child safety seats in cars. Local businesses often provide door prizes and giveaways.

Baby safety showers, while held in all kinds of settings, have been particularly effective in working with hard-to-reach populations. The following organizations are examples of groups that have held baby safety showers.

- The Healthy Mothers, Healthy Babies Coalition of San Benito County (California), the March of Dimes Stork Program, and the San Benito County Health and Human Services Agency recently held their second annual baby safety shower for first-time mothers-to-be.
- The Hill Air Force Base (Utah) New Parent Program held a baby safety shower for about 300 military and civilian first-time and high-risk parents-to-be.
- The Shenandoah (Virginia) Interagency Health Council held a baby safety shower for high school teen parents and parents-to-be. A second shower is planned soon.
- The Wisconsin Department of Health and Social Services' child injury prevention section has actively promoted the program and is using CPSC's baby safety shower material in statewide training for local health departments.

The Baby Safety Showers program was developed in conjunction with Gerber Products Company. The first shower, in October 1995, was kicked off by CPSC and First Lady Hillary Rodham Clinton at a Washington, DC child care center.

For a free copy of the *Baby Safety Shower How-to Kit* or the *Baby Safety Checklist Growth Chart* (also available in Spanish), write: Publications Request, U.S Consumer Product Safety Commission, Washington, DC 20207 or visit CPSC's web site at www.cpsc.gov, click on "What's Happening" and look for "Organizing a Baby Safety Shower."

— Lynn Barclay, Office of Planning and Evaluation

Baby Safety Checklist

In the bedroom

- Put your baby to sleep on her back in a crib with a firm, flat mattress and no soft bedding underneath her.
- Make sure your baby's crib is sturdy and has no loose or missing hardware.
- Never place your baby's crib or furniture near window blind or curtain cords.

In the bathroom

- Keep medicines and cleaning products in containers with safety caps and locked away from children.
- Always check bath water temperature with your wrist or elbow before putting your baby in to bathe.
- Never, ever, leave your child alone in the bathtub or near any water.

In the kitchen

- Don't leave your baby alone in a highchair; always use all safety straps.
- Use your stove's back burners. Keep pot handles turned to the back of the stove.
- Lock household cleaning products, knives, matches, and plastic bags away from children.

In other living areas

- Install smoke detectors on each floor of your home, especially near sleeping areas; change the batteries each year.
- Use safety gates to block stairways and safety plugs to cover electrical outlets.
- Keep all small objects, including tiny toys and balloons, away from young children.

done so. The guidelines describe how to prevent children from getting over, under, or through pool barriers, such as fences and gates. In addition, CPSC recommends self-closing and self-latching fence gates, door alarms, and power safety covers.

CPSC also recently issued guidelines for addressing potential entrapment hazards associated with swimming pools and spas. These guidelines deal with preventing body entrapment and hair entanglement in pool and spa drains, as well as disembowelments of small children in public wading pools.

Play Injuries

Protecting children while they are at play is an important part of CPSC's agenda. For example, each year more than 200 children are killed in bike-related incidents. In 1996, an estimated 356,000 children under age 15 were treated in U.S. hospital emergency rooms for bike-related injuries. Many of these injuries, and most of the fatal ones, involved the child's head.

Bike helmets can reduce the risk of head injury by up to 85%. The U.S. Consumer Product Safety Commission recently voted to issue a new federal safety standard for bike helmets. The new standard will provide, for the first time, one uniform mandatory safety standard that all bike helmets must meet.

The new standard ensures that bike helmets will adequately protect the head and that chin straps will be strong enough to help keep a helmet on the head during a collision or fall. In addition, the standard also provides for more head protection for children ages 1 to 5. (See the upcoming Spring 1998 issue of *Consumer Product Safety Review* for more on the new CPSC bike helmet safety standard.)

Playgrounds also can be hazardous. Each year, about 200,000 children go to U.S. hospital emergency rooms with injuries associated with playground equipment. Most injuries occur when a child falls from the equipment onto the ground.

CPSC has taken an active role to ensure that the nation's playgrounds are safe. It accomplishes this by helping develop voluntary safety standards, obtaining recalls on playground equipment, and widely distributing information on this issue.

CPSC recently updated and expanded its *Handbook for Public Playground Safety*. Hundreds of public and private organizations around the country use these guidelines to help build and maintain safer playgrounds.

Preventing Strangulations

Hidden hazards exist for children in everyday settings. For example, since 1981, nearly 200 children, most under age 4, have strangled to death when they became entangled in window covering pull-cords. The younger children who died, usually between 8 and 23 months old, were often in cribs that were placed near the window cords.

At CPSC's urging, beginning in 1994, the window covering industry agreed to eliminate the loop on all new two-corded miniblinds and provide free repair kits to consumers for their existing pull-cords at home. In addition, CPSC worked with industry to develop a voluntary safety standard addressing this issue for all window covering pull-cords.

Children also have strangled when the drawstrings on the hoods and necks of their jackets, for example, caught on such things as playground equipment and cribs. Since 1985, there were 20 deaths and 43 nonfatal incidents caused by drawstring entanglement.

Because of CPSC's intervention, the children's clothing industry voluntarily agreed to remove the neck and hood drawstrings from most of the 20 million children's outerwear garments manufactured annually in the United States. The industry also developed a voluntary standard to help prevent these injuries.

Keeping in Touch

To help identify new and evolving hazards associated with children's consumer products, CPSC relies on information from many sources, including the public at-large. To report a hazardous product, contact CPSC via its toll-free Hotline at 1-800-638-2772 or its web site at www.cpsc.gov or use the report form on the next page.

For More Information

CPSC publishes information about many of the issues discussed above. For a complete list of CPSC publications, write: Publications Request, U.S. Consumer Product Safety Commission, Washington, DC 20207. Or visit CPSC's web site at www.cpsc.gov/cpscpub/pubs/ gen_pub.html.

References

Most injury statistics come from CPSC's National Electronic Injury Surveillance System (NEISS). For deaths related to consumer products, CPSC relies on death certificates obtained from the 50 states and the District of Columbia and on the Medical Examiners and Coroners Alert Project (MECAP). MECAP is a national voluntary reporting system for about 2,500 coroners and medical examiners nationwide. In addition, CPSC staff tracks newspaper stories and collects information from other sources. Fire statistics are from the U.S. Fire Administration and the National Fire Protection Association.

Consumer Product Incident Report

Please contact us about any injury or death involving consumer products. Call us toll free at: 1-800-638-8095. Visit our web site at www.cpsc.gov. Or, fill out the form below. Send it to: U.S. Consumer Product Safety Commission/EHDS, Washington, DC 20207 or fax it to: 1-800-809-0924. We may contact you for further details. Please provide as much information as possible. Thank you.

YOUR NAME

YOUR ADDRESS

CITY STATE ZIP

YOUR TELEPHONE

NAME OF VICTIM (IF DIFFERENT FROM ABOVE)

ADDRESS

CITY STATE ZIP

TELEPHONE

DESCRIBE THE INCIDENT OR HAZARD, INCLUDING DESCRIPTION OF INJURIES

VICTIM'S AGE SEX DATE OF INCIDENT

DESCRIBE PRODUCT INVOLVED

PRODUCT BRAND NAME/MANUFACTURER

IS PRODUCT INVOLVED STILL AVAILABLE? ☐ YES ☐ NO PRODUCT MODEL AND SERIAL NUMBER

WHEN WAS THE PRODUCT PURCHASED?

U.S. Consumer Product Safety Commission
Washington, DC 20207

TC-49

PLEASE DUPLICATE THIS FORM FOR FUTURE USE. CPSC FORM 175A (6/96) OMB CLEARANCE NO. 3041-0029

MECAP NEWS

Medical Examiners and Coroners Alert Project and Emergency Physicians Reporting System

The MECAP-EPRS Project is designed to collect timely information on deaths and injuries involving consumer products. Please contact us whenever you encounter a death or situation that you believe should be considered during a safety evaluation of a product.

To report a case or ask for information about MECAP, please call our toll-free number, 1-800-638-8095, or our toll-free fax number, 1-800-809-0924, or send a message via Internet to AMCDONAL@CPSC.GOV.

*Indicates cases selected for CPSC follow-up investigations. Cases reported but not selected for follow-up also are important to CPSC. Every MECAP report is included in CPSC's injury data base and will be used to assess the hazards associated with consumer products.

During the months of July through October 1997, 853 cases were reported to CPSC. Included here are samples of cases to illustrate the type and nature of the reported incidents.

ASPHYXIATIONS/ SUFFOCATIONS

*A male, 8 months, was put in a playpen/portable crib for a nap. The crib railing collapsed on the victim. He was found trapped with the top rail on his upper chest and neck. The cause of death was positional asphyxia. (Rose Perrizo for Kim Kiraly, Deputy Coroner, and Mark Witeck, Chief Medical Examiner, Kenosha County, Kenosha, WI)

*A male, 9 months, was left unattended in a stroller by his mother for a short time. When the mother returned, she found the victim with his head wedged between the front end of the seat and the armrest. The cause of death was mechanical asphyxia. (Sunandan Singh, M.D., Medical Examiner, Paramus, NJ)

*A male, 9 months, became trapped between the mattress of his crib and one of the crib's frame supports. The cause of death was positional asphyxia. (Chris Leja for Thomas Gilcrist, M.D., Medical Examiner, Farmington County, Farmington, CT)

*A male, 2, was found by a teenage babysitter in a standing position near his bedroom window. The child had the cord from a damaged miniblind wrapped around his neck. The victim had broken the cord several days before, and his mother had raised the blind to its full "up" position and looped the drapery cord on top of the blind. The babysitter was unaware of the problem, put the victim to bed, and lowered the blind. The cause of death was asphyxia. (Diane Stephans for Jeffrey A. McLennan, Medical Investigator, Clackamas County, OR)

A male, 4 months, was placed to sleep on a waterbed between his parents. The father awoke and found the victim face down and not breathing. The cause of death was positional suffocation. (Jon White for John E. Stanley, Coroner, and Raymond W. Wosepka, Medical Examiner, Dane County, Madison, WI)

A male, 75, was riding a lawn mower on a steep slope when the mower overturned, pinning the victim underneath. The cause of death was mechanical asphyxiation. (Samantha L. Berlin, M.D., Medical Examiner, Central District, Richmond, VA)

POISONINGS

A male, 44, was living in a mobile home without electricity. The victim borrowed a gasoline-operated electrical generator to supply the home with electricity. He placed the generator outside, but positioned it so that the exhaust fumes flowed into the crawl space under the mobile home. The mobile home's air conditioning and heating ducts needed repair and had openings that allowed carbon monoxide from the fumes to enter the vent to the victim's bedroom. The cause of death was carbon monoxide poisoning. (Henry Middleton, Deputy Coroner and Rae H. Wooten, Chief Deputy Coroner, Charleston County, SC)

A male, 41, was spray painting his truck in a garage with the garage door closed. He was using a generator to produce electricity for the sprayer and the lights. The victim was sitting on a stool, painting. He became disoriented and collapsed on the floor. The cause of death was carbon monoxide poisoning. (Julie L. Rarick for Thomas L. Bennett, M.D., Medical Examiner, Des Moines, IA)

*A male, 37, was using a propane heater to keep warm in a small structure. He was found unresponsive by a friend. The cause of death was carbon monoxide poisoning. (Eugene E.

Staebill for Dr. Harruff, Associate Medical Examiner, King County, Seattle, WA)

DROWNINGS

A female, 2, crawled out of her house through a doggie door and was found unresponsive in a swimming pool. The victim was taken to the hospital where she died. The cause of death was drowning. (Susan Gabriel for Shashi Gore, M.D., Chief Medical Examiner, Orlando, FL)

A male, 2, walked through a wire fence gate with a non-functioning gate lock and entered an in-ground swimming pool. The victim's father thought other adults in the house were watching the victim and went to take a shower. The cause of death was drowning. (Fred Benanti for Charles Wetli, M.D., Chief Medical Examiner, Suffolk County, NY)

A male, 1, was in the backyard of his aunt's house playing with eight other children. The victim's mother and aunt were on the patio overlooking an in-ground swimming pool and hot tub. The hot tub could not be seen well from where the adults were sitting. The children noticed that the victim was missing and a search was started. The victim was found floating unresponsive under the hot tub cover. The cause of death was drowning. (Rudi A. Riet for Todd Grey, M.D., Medical Examiner, Salt Lake City, UT)

A male, 3, was left unattended in a backyard with a swimming pool. The victim attempted to retrieve a new hat from the pool and fell in. The cause of death was drowning. (Rose Page for Ron Flud, Coroner, and G. Sheldon Green, M.D., Chief Medical Examiner, Clark County, Las Vegas, NV)

A male, 28, was scubadiving with a friend in the ocean. They were swimming toward their vessel when the victim stated he was tired. The friend continued toward the vessel to bring the boat around to pick up the victim. It took about 15 minutes, however, to start the engine. The friend lost sight of the victim and found him floating face down in the water. The Medical Examiner's office learned that the victim's tank had a leak in the service line. The cause of death was drowning. (Joshua A. Perper, M.D., Chief Medical Examiner, Ft. Lauderdale, FL)

FIRES

A male, 13, was attempting to repair a gasoline-powered lawn mower in a laundry room of an apartment building. A can of gasoline was placed near a hot-water heater. Flames suddenly appeared on the floor, and the victim's legs caught on fire. The cause of death was thermal burns. (Jacqueline Dobbins, for Nancy L. Jones, M.D., Medical Examiner, and Edmund R. Donoghue, M.D., Chief Medical Examiner, Cook County, Chicago, IL)

*Two females, ages 3 and 8, died when a dryer malfunctioned in their home. The dryer failed to shut off when the clothes were dry, and it ignited. The clothes subsequently ignited, causing a house fire. Two other siblings escaped the residence. The cause of death was inhalation of smoke. (Glen Sayler, M.D., Medical Examiner, and Edmund Wilson, Pathologist, Tillamook County, Portland, OR)

*A male, 40, died in a trailer fire caused by a malfunctioning heater. The cause of death was smoke inhalation. (David R. Schomburg for Keri Reiber, M.D., Medical Examiner, and Charles Hirsh, M.D., Chief Medical Examiner, New York, NY)

A male, 9 months, died in a fire caused by a faulty propane furnace in a mobile home. Four other persons escaped the home. The cause of death was carbon monoxide poisoning. (Sue Townsend, Coroner, Akins County, Akins, SC)

ELECTROCUTIONS

* Two females, ages 7 and 9, were electrocuted when they took a handheld hair dryer into the bathtub. The cause of death was electrocution. (Antoinette J. Tibbs for L. Sathyavagiswaran, M.D., Chief Medical Examiner, Los Angeles County, Los Angeles, CA)

MISCELLANEOUS

*A female, 6 months, was lying on the floor while her father was fixing a television set. The television fell on the victim. The cause of death was blunt force injuries to head and brain. (Rose Wilson for Geetha Natarajan, Medical Examiner, Newark, NJ)

A male, 3, was jumping on a couch and fell backwards through a glass end table. The glass shattered, causing some pieces of broken glass to pierce his neck. The cause of death was sharp force entry of neck. (M.W. Sands for Margarita Arruza, M.D., Medical Examiner, and Peter Lipkovic, M.D., Chief Medical Examiner, Jacksonville, FL)

*A male, 11, was playing baseball with a friend when the ball hit his head. The victim collapsed moments later. The cause of death was closed head injury. (Eugene E. Staebill for Dr. Harruff, Associate Medical Examiner, King County, Seattle, WA)

*A male, 8 months, was left unattended in a baby walker. The victim rolled toward the stairs, and the walker overturned and fell down the stairs to the lower level. The cause of death was blunt force trauma to the skull. (Mike Ridgely for Garry Peterson, M.D., Medical Examiner, Hennepin County, MN)

— Suzanne Newman, Directorate for Epidemiology and Health Sciences

CPSC Recalls

The following product recalls were conducted by firms in cooperation with CPSC. For more information about recalls, visit CPSC's web site at http://www.cpsc.gov.

Product: About 564,000 Graco **carriers and carrier/swing seats** made between August 1, 1993 and August 31, 1997. The recalled products are model numbers 1300, 1301, 1310, 1350, 1501, 1502, 1530, 1723, 2788, 5510, 8108 and 36264. The model number and manufacturing date are located on the label underneath the top of the carrier/swing or under the seat of the carrier. Juvenile product and major discount stores, such as Toys R Us and Service Merchandise, sold the carriers and carrier/swings for about $30 for the carrier alone and $100 for the carrier/swing combination.
Problem: The handle on the seats can unlock unexpectedly, causing an infant to fall and be injured. Graco has received 45 reports of handles unlocking, including reports of four skull fractures and two concussions.
What to do: Stop using the carrier and carrier/swing seats and call Graco 1-800-281-3676 for a free repair kit that can be installed easily by consumers without the use of tools. The repair will prevent the handle from unlocking.

Product: About 18,200 J. Mason brand **infant carriers** distributed by MTS Products, Inc. The white plastic infant carriers have matching fabric seat pads and removable sun canopies. "J. MASON" is on the handle that can convert for a feeding or rocking position. The carriers were sold with the following UPC codes: 0-26669-08249-2, 0-26669-08252-2, or 0-26669-08253-9 by Kmart, Rose, and State Enterprises stores from April 1996 through August 1997 for about $20.
Problem: The handle can break causing the carrier to fall and an infant in the carrier can be injured. MTS Products has seven reports of handles breaking, resulting in injuries such as bruises, scratches and cuts.
What to do: Stop using the carrier and call MTS at 1-800-242-1922 for a free replacement carrier.

Product: About 1.5 million sets of **curtain style indoor/outdoor holiday lights**. The sets of miniature clear or multicolored bulbs differ from other light sets because they use a horizontal electrical wire with vertical strings of 4 to 7 lights hanging down to give an icicle effect. The lights are called "Curtain," "Icicle" and "Wonder Lights" and may have either white or green wires. There is an unauthorized holographic UL label located on each string near the plug with one of these numbers: E115759, E126258, E127357, E127522, E48723, E64444, E65770, or E97593. The light sets were sold nationwide from September 1995 to November 1997 for between $6 and $19.
Problem: The electrical wiring can pull out from the splices where the vertical strings hang from the horizontal electrical wire, exposing live wires and presenting an electrocution hazard.
What to do: Stop using the light sets immediately and return them to the store where purchased for a refund.

Product: About 25,000 **batteries** sold with Safety 1st **nursery monitors**, Model 49226. The monitor has a parent's unit (receiver) with charging stand, baby's unit (transmitter), AC adaptor, and battery. The units with recalled batteries have date codes between 00097 and 03097 on a white sticker on the back of the receivers. Both the receiver and transmitter are labeled "Safety 1st." The monitors were sold nationwide from June 1997 through August 1997 for between $35 and $45.
Problem: The dry cell battery can rupture and irritate the skin. Safety 1st has 76 reports of batteries rupturing.
What to do: Stop using the monitor and call Safety 1st at 1-800-964-8489 for a free replacement battery and instructions for returning the recalled one.

Product: About 79,000 Brio Corporation wooden clown **stacking toys**, Model No. 30130. The toy is a 9-inch high wooden stacking clown of 12 brightly colored pieces. When assembled, the toy resembles a clown figure with a yellow cone-shaped hat. The words "BRIO...MADE IN SWEDEN" are on the base. Specialty stores and mail order catalogs sold the toy nationwide from 1977 through September 1997, most recently for $19.
Problem: The hat part of the toy presents a choking hazard to young children. Brio received one report of a child in Germany reportedly choking to death on the hat.
What to do: Take the clown hat away from children and send it to BRIO, Corp., Freistadt Road, Germantown, WI 53022 for a replacement and reimbursement for postage.

NHTSA and CPSC Recall

Product: About 800,000 Evenflo On My Way **infant car seats/carriers**. The recall includes model numbers 207 and 492, made from December 15, 1995 through July 27, 1997. Model 492 is the On My Way Travel System, which includes a stroller. Model 207 is the car seat/carrier without the stroller. The manufacture date and model number are located on the bottom of the seat. The car seats were sold beginning in January 1996 for about $60 to $70 and the car seat with stroller for $150 to $175.
Problem: The red push button assembly on each side of the carrier to latch the carrying handle can unexpectedly release and cause the seat to flip forward. There have been 176 reports where the carrying handle latch unexpectedly released, resulting in 89 injuries to children, including bruises, concussions, and skull fractures. The injuries occurred to both restrained and unrestrained children.
What to do: Continue using as rear-facing infant car seats, but do not use the carrying handle until new parts are installed to fix the problem. Call Evenflo at 1-800-203-2138 for a free repair kit with redesigned latch buttons to make the handle latch much stronger.

— Marc Schoem and Terri Rogers, Office of Compliance

NHTSA Recalls

The National Highway Traffic Safety Administration (NHTSA) is the government agency responsible for improving safety on the nation's highways. As part of its efforts to achieve this goal, NHTSA is authorized to order manufacturers to recall and repair vehicles or items of motor vehicle equipment (including air bags, tires, and child safety seats).

The following safety recall campaigns are being conducted in cooperation with NHTSA. For more information about NHTSA recall activities, you can access NHTSA on the Internet at http://www.nhtsa.dot.gov or by calling the NHTSA Auto Safety Hotline at 1-888-DASH-2-DOT (1-888-327-4236).

Product: About 9,500 1997-1998 **Honda Civic** vehicles manufactured from June through August 1997.
Problem: Some of the front passenger air bag modules have been improperly assembled. The cloth flaps covering the folded air bag may have been tucked in too far. This condition could prevent proper deployment of the air bag. In a crash, an improper air bag deployment could increase the risk of injury to a front seat passenger.
What to do: Owners should contact Honda at 1-800-999-1009 (NHTSA Recall No. 97V193).

Product: 1.1 million 1991-1993 **Chrysler Town and Country, Dodge Caravan/Grand Caravan**, and **Plymouth Voyager/ Grand Voyager** model minivans manufactured from August 1990 through March 1993.
Problem: Covers on the solid stalk mounted seat belt buckles can dislodge causing the release button to stick inside the cover. The buckle would then be only partially latched. Also, the center rear seat, right outboard side safety belt anchor retaining clip can disconnect from the vehicle body anchorage position. In the event of a vehicle crash, the occupant may not be properly restrained, increasing the risk of personal injury.
What to do: Owners should contact Chrysler at 1-800-992-1997 (NHTSA Recall No. 97V148/97V149/Chrysler Recall No. 742).

Product: About 375,000 1995 **Dodge** and **Plymouth Neon** vehicles manufactured from January 1994 through August 1995.
Problem: The steering column coupler can become disconnected when the vehicle sustains an underbody impact. Loss of steering control can occur.
What to do: Owners should contact Chrysler at 1-800-992-1997 (NHTSA Recall No. 97V169/Chrysler Recall No. 741).

Product: 599,000 1995-1997 **Chrysler Cirrus, Sebring, Dodge Stratus**, and **Plymouth Breeze** model vehicles manufactured from July 1994 through July 1997.
Problem: The lower control arm ball joint can separate due to loss of lubrication. Separation of the ball joint could cause a loss of steering control, increasing the risk of a vehicle crash.
What to do: Owners should contact Chrysler at 1-800-992-1997 (NHTSA Recall No. 97V201/ Chrysler Recall No. 750).

Product: 866,000 1997-1998 **Ford Expedition** F150, F250 pickup trucks and 1998 **Navigator** model vehicles manufactured from July 1996 through August 1997.
Problem: If the automatic transmission shift cable assembly was not fully attached to the steering column bracket, the shift cable assembly can come out of the bracket. The vehicle operator would then not be able to shift the transmission from one of the drive gear positions into the park position even though the gear shift selector indicates "Park." The condition also would not allow shifting of the transmission from the park position. Unintended vehicle movement could occur if the parking brake was not set.
What to do: Owners should contact Ford at 1-800-392-3673 (NHTSA Recall No. 97V171/Ford Recall No. 97S86).

Product: 289,326 1997 **Toyota Camry** model vehicles manufactured from July 1996 through July 1997.
Problem: Due to a possible jamming of the lock pin of the key interlock solenoid, it is possible to remove the ignition key even when the shift lever of the automatic transmission is not in the "Park" position. Under such a condition, should a driver fail to move the shift lever to the "Park" position, and also fail to activate the parking brake, the vehicle could roll away.
What to do: Owners should contact Toyota at 1-800-331-4331 (NHTSA Recall No. 97V213).

Product: 54,800 1989-1993 **Volkswagen Audi** 80, 90, 100, 200, V8, Coupe, and S4 model vehicles manufactured from September 1988 through July 1993.
Problem: Some air bag sensors do not comply with Audi's durability standards over the lifetime of the vehicle. In the event the sensor should malfunction, the air bag restraint system can inadvertently deploy. Deployment of the air bag restraint system without warning could cause a driver to lose control of the vehicle.
What to do: Owners should contact Audi at 1-800-822-2834 (NHTSA Recall No. 97V172/Volkswagen Recall No. KF).

Product: 7,863 **Cosco Touriva** 5-point and Touriva Overhead Shield **child restraint seats** manufactured during August 1997.
Problem: When these seats were tested dynamically per the requirements of Federal Motor Vehicle Safety Standard No. 213, "Child Restraint Systems", structural failure occurred in the seat belt path area of the shell in the forward facing reclined position. In the event of a vehicle crash, the seat occupant may not be properly restrained, increasing the risk of personal injury to the occupant.
What to do: Owners who do not receive the free repair kit should contact Cosco at 1-800-221-6736 (NHTSA Recall No. 97E030).

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