

FOR28048

UNIROYAL CHEMICAL
Division of UNIROYAL, Inc.

Painesville, Ohio
February 11, 1982

J. D. Forbes, M.D.
Corporate Medical Director
World Headquarters

Subject: INDUSTRIAL HYGIENE Information

As per your request received on 2/10/82, you will find
attached the information re Industrial Hygiene.

If there are any questions regarding the attachments,
please do not hesitate to contact me.



R. T. Shearer
Industrial Relations Manager

RTS:mhh
attachments

URL 20687

INTRACOMPANY CORRESPONDENCE

INDUSTRIAL HYGIENE

1. A list of all industrial hygiene equipment immediately available at each plant. Example: Sound level meter, detector tubes, velometer, wet globe thermometer, sampling pumps.
1. 2 Century OVA Analyzers

2. Bendix Gastec Hand Pump & Detector Tubes

3. 4 DuPont Constant Flow Sampling Pumps 0-25cc

4. 2 DuPont Constant Flow Sampling Pumps 0-125cc

5. 1 MSA Portable Pump Model "S"

6. 1 Bendix Sampling Pump

7. 2 MSA Dust Samplers and Cassettes

8. 4 Impinger Samplers

9. 1 Cold Trap Samplers

10. 1 Quest Sound Dosimeter and Calibrator

11. 1 Sound Level Meter (General Radia-USA)

12. 1 Applied Automation Fixed Point Monitoring System (30 sample points)

13. 1 Bendix Automated Fixed Point Monitoring System (10 sample points)

14. 30 Gasbadge Dosimeters Personnel Monitors

15. Respirator Test Fit Booth

2. A description of all environmental monitoring performed on a regular basis at each plant. This would include the name of the chemical monitored, the work area(s) monitored and how often the monitoring is repeated.

<u>Chemical</u>	<u>Work Areas Monitored</u>	<u>Frequency of Monitorin</u>
(Gas Badge)	(Gas Badge)	(Gas Badge)
Acrylonitrile Butadiene Styrene	All Production Areas	Monthly/Annually
(Fixed Point System)	(Fixed Point System)	(Fixed Point System)
Acrylonitrile Styrene	All Production Areas	40 Points every 30 minutes
TDI/MDI	Loading Station	As required by Production

UPL 20688

3. Plant Medical Examinations -- Medical Surveillance Performed (cont.)

TYPE OF EXAMINATION (Note: If you have no exams in some of these categories, so indicate in the 3rd column. If you perform additional examinations, please add under Other.)	EMPLOYEE GROUPS COVERED BY EXAM (For example: all employees, all applicants, forklift operators, banbury operators, compound weighers, drivers, etc.)	FREQUENCY OF EXAM (Give interval -- such as every 6 months, yearly, as needed, etc.)	ESTIMATED % OF EMPLOYEES IN EACH EXAM CATEGORY who by reason of the specific exam are placed on restricted work, transferred, placed on S. & A. or recommended for disability retirement.
I. Pre-Employment Exams (Pre-Placement)	All employees	Upon employment	None
II. General Periodic Exams (as opposed to Category IV - Specific Occupational Exams)	Over age 40 Under age 40	Every year Every other year	None
III. Special Health Evaluations			
A. Transfer Examinations (before employee transfers to another job)			None
B. Termination Examinations (e.g.: in employees who are about to leave company or retire)			None
C. Sickness Absence Examinations (in employees who are on S&A)		As necessary	
D. Return to work Examinations.	All employees	As necessary	
E. Disability Retirement Examinations.		As necessary	
F. Other			

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3. Plant Medical Examinations -- Medical Surveillance Performed (cont.)

TYPE OF EXAMINATION (Note: If you have no exams in some of these categories, so indicate in the 3rd column. If you perform additional examinations, please add under Other.)	EMPLOYEE GROUPS COVERED BY EXAM (For example: all employees, all applicants, forklift operators, banbury operators, compound weighers, drivers, etc.)	FREQUENCY OF EXAM (Give interval -- such as every 6 months, yearly, as needed, etc.)	ESTIMATED % OF EMPLOYEES IN EACH EXAM CATEGORY who by reason of the specific exam are placed on restricted work, transferred, placed on S. & A. or recommended for disability retirement.
IV. Occupational Examinations			
A. OSHA Required (Please list, for example: 1. Asbestos, 2. Vinyl Chloride 3. Lead, etc. 4. Hearing (OSHA Noise Standard)	All employees with plant exposure	Yearly	1. None 2. None 3. None 4. None
1. Acrylonitrile	All employees	Yearly	None
2.			
3.			
4.			

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3. Plant Medical Examinations -- Medical Surveillance Performed (cont.)

<u>TYPE OF EXAMINATION</u> (Note: If you have no exams in some of these categories, so indicate in the 3rd column. If you perform additional examinations, please add under Other.)	<u>EMPLOYEE GROUPS COVERED BY EXAM</u> (For example: all employees, all applicants, forklift operators, banbury operators, compound weighers, drivers, etc.)	<u>FREQUENCY OF EXAM</u> (Give interval -- such as every 6 months, yearly, as needed, etc.)	<u>ESTIMATED % OF EMPLOYEES IN EACH EXAM CATEGORY</u> who by reason of the specific exam are placed on restricted work, transferred, placed on S. & A. or recommended for disability retirement.
IV. Occupational Examinations (cont.) B. Special Occupational Examinations Categories (for example: Banbury Operators, Mill Operators, Fork Lift Drivers, etc.) -- For each category give # performed per year and content. 1. Category: # Per Year: Content of Exam: 2. Category: # Per Year: Content of Exam:			B. None

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3. Plant Medical Examinations -- Medical Surveillance Performed (cont.)

<u>TYPE OF EXAMINATION</u> (Note: If you have no exams in some of these categories, so indicate in the 3rd column. If you perform additional examinations, please add under Other.)	<u>EMPLOYEE GROUPS COVERED BY EXAM</u> (For example: all employees, all applicants, forklift operators, banbury operators, compound weighers, drivers, etc.)	<u>FREQUENCY OF EXAM</u> (Give interval -- such as every 6 months, yearly, as needed, etc.)	<u>ESTIMATED % OF EMPLOYEES IN EACH EXAM CATEGORY</u> who by reason of the specific exam are placed on restricted work, transferred, placed on S. & A. or recommended for disability retirement.
IV. Occupational Examinations (cont.) 3. Category: # Per Year: Content of Exam: 4. Category: # Per Year: Content of Exam: 5. Category: # Per Year: Content of Exam:			

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3. Plant Medical Examinations -- Medical Surveillance Performed (cont.)

TYPE OF EXAMINATION (Note: If you have no exams in some of these categories, so indicate in the 3rd column. If you perform additional examinations, please add under Other.)	EMPLOYEE GROUPS COVERED BY EXAM (For example: all employees, all applicants, forklift operators, banbury operators, compound weighers, drivers, etc.)	FREQUENCY OF EXAM (Give interval -- such as every 6 months, yearly, as needed, etc.)	ESTIMATED % OF EMPLOYEES IN EACH EXAM CATEGORY who by reason of the specific exam are placed on restricted work, transferred, placed on S. & A. or recommended for disability retirement.
I. Pre-Employment Exams (Pre-Placement)	All employees	Upon Employment	100%
II. General Periodic Exams (as opposed to Category IV - Specific Occupational Exams)	Over Age 40 Under " 40	every year every other year	100%
III. Special Health Evaluations			
A. Transfer Examinations (before employee transfers to another job)			None
B. Termination Examinations (e.g.: in employees who are about to leave company or retire)			None
C. Sickness Absence Examinations (in employees who are on S&A)		as necessary	
D. Return to work Examinations.	All employees	as necessary	100%
E. Disability Retirement Examinations.		as necessary	
F. Other			

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3. Plant Medical Examinations -- Medical Surveillance Performed (cont.)

TYPE OF EXAMINATION (Note: If you have no exams in some of these categories, so indicate in the 3rd column. If you perform additional examinations, please add under Other.)	EMPLOYEE GROUPS COVERED BY EXAM (For example: all employees, all applicants, forklift operators, banbury operators, compound weighers, drivers, etc.)	FREQUENCY OF EXAM (Give interval -- such as every 6 months, yearly, as needed, etc.)	ESTIMATED % OF EMPLOYEES IN EACH EXAM CATEGORY who by reason of the specific exam are placed on restricted work, transferred, placed on S. & A. or recommended for disability retirement.
IV. Occupational Examinations			
A. OSHA Required (Please list, for example: 1. Asbestos, 2. Vinyl Chloride 3. Lead, etc. 4. Hearing (OSHA Noise Standard)			1 - None 2 - None 3 - None 4 - 95%
1. Acrylonitrile	All employees with plant exposure	yearly	
2.	All employees	yearly	100%
3.			
4.			

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3. Plant Medical Examinations -- Medical Surveillance Performed (cont.)

TYPE OF EXAMINATION	EMPLOYEE GROUPS COVERED BY EXAM	FREQUENCY OF EXAM	ESTIMATED % OF EMPLOYEES IN EACH EXAM CATEGORY who by reason of the specific exam are placed on restricted work, transferred, placed on S. & A. or recommended for disability retirement.
(Note: If you have no exams in some of these categories, so indicate in the 3rd column. If you perform additional examinations, please add under Other.)	(For example: all employees, all applicants, forklift operators, banbury operators, compound weighers, drivers, etc.)	(Give interval -- such as every 6 months, yearly, as needed, etc.)	B- N04-
IV. Occupational Examinations (cont.)			
B. Special Occupational Examinations Categories (for example: Banbury Operators, Mill Operators, Fork Lift Drivers, etc.)			
-- For each category give # performed per year and content.			
1. Category: # Per Year: Content of Exam:			
2. Category: # Per Year: Content of Exam:			

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3. Plant Medical Examinations -- Medical Surveillance Performed (cont.)

<u>TYPE OF EXAMINATION</u> (Note: If you have no exams in some of these categories, so indicate in the 3rd column. If you perform additional examinations, please add under Other.)	<u>EMPLOYEE GROUPS COVERED BY EXAM</u> (For example: all employees, all applicants, forklift operators, banbury operators, compound weighers, drivers, etc.)	<u>FREQUENCY OF EXAM</u> (Give interval -- such as every 6 months, yearly, as needed, etc.)	<u>ESTIMATED % OF EMPLOYEES IN EACH EXAM CATEGORY</u> who by reason of the specific exam are placed on restricted work, transferred, placed on S. & A. or recommended for disability retirement.
IV. Occupational Examinations (cont.) 3. Category: # Per Year: Content of Exam: 4. Category: # Per Year: Content of Exam: 5. Category: # Per Year: Content of Exam:			

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