

REGULATORY HISTORY OF ASBESTOS
(Continued)

- May 28, 1971 — OSHA adopts a permissible exposure level (PEL) of 12 fibers per cubic centimeter averaged over an eight-hour day (12 f/cc). The PEL for asbestos was among the consensus standards then adopted in accordance with the OSH Act.
- Dec. 7, 1971 — OSHA issues an emergency temporary standard with a PEL of 5 f/cc and a peak exposure of 10 f/cc in response to a petition from the AFL-CIO.
- June 7, 1972 — OSHA promulgates a new final standard with a PEL of 5 f/cc and a ceiling limit of 10 f/cc. This was the agency's first comprehensive health standard.
- Oct. 9, 1975 — OSHA publishes proposal to revise the standard for general industry, lowering the PEL to 0.5 f/cc with a ceiling limit of 5 f/cc for 15 minutes. The PEL was proposed as the lowest technologically and economically feasible level then achievable. The Supreme Court decision on benzene caused the agency to withdraw the proposal.
- July 1, 1976 — The PEL was reduced to 2 f/cc as called for in the 1972 standard.
- May 24, 1983 -- The Advisory Committee for Construction Safety and Health endorsed OSHA's position that any new PEL adopted for general industry should also apply to the construction industry.
- Nov. 4, 1983 -- OSHA publishes an Emergency Temporary Standard lowering the PEL to 0.2 f/cc. The ETS, however, was held invalid by the U.S. Court of Appeals for the Fifth Circuit.
- Apr. 10, 1984 -- OSHA publishes a proposed rule covering occupational exposure to asbestos in all industries governed by the OSH Act (maritime, construction and general industry).
- Sep. 28, 1985 -- OSHA announces plans at a meeting of the Advisory Committee for Construction Safety and Health that it would be issuing a separate standard to cover asbestos exposure in the construction industry.

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1986 0.1 F/cc at least 30 days/yr, etc. (w/ pressure respirator, hygiene + controls, etc.)

LAM 024711

ABS-007889

SHELL OIL COMPANY

TO SEE ATTACHED LIST

DATE DECEMBER 6, 1977

FROM CORPORATE MEDICAL
DIRECTORSUBJECT MEDICAL SURVEILLANCE
UNDER ASBESTOS STANDARD

The memo on this subject dated November 13, 1972 from the Manager - Industrial Hygiene and the Corporate Medical Director recommended exposure levels at which medical surveillance should be instituted.

Since that time, recommendations for allowable exposures have been lowered. This fact, along with the recent decision in the GAF case (see attached legal opinion), leads me to reappraise the former recommendation.

On the basis of the legal opinion, Corporate Medical now believes it would be appropriate and prudent to include in the medical surveillance programs all employees in the following categories:

1. All employees whose jobs require them to work regularly with asbestos, or asbestos-containing insulation and other products. This would include, but not be limited to, employees recognized or assigned as insulators.
2. All other employees who may use or be in contact with asbestos or asbestos-containing materials where the level of exposure can be established as exceeding 0.1 fibers greater than 5 microns in length per cubic centimeter (TWA).

When appropriate air monitoring has established which employees are to be included in the medical surveillance program at each location, I would appreciate receiving a list of the names of employees so identified.

I would be happy to discuss this further should you have any questions.



R. E. Joyner, M.D.
Corporate Medical Director

Attachment

LAM 024712

ABS-007890