



**Shell Oil Company**  
Interoffice Memorandum

DECEMBER 16, 1980

PLAINTIFF'S EXHIBIT

SH-1523

For info copy  
sent to:  
12/23 { D.E. Miller  
W.M. Stumpf  
H.V. Kuonety  
D.A. Revised  
C.F. Phillips  
12/24 { R.K. Jones  
A.F. Schmit

FROM: MANAGER, HEALTH & SAFETY, OPERATIONS, HEAD OFFICE  
TO: SEE ATTACHED DISTRIBUTION LIST  
SUBJECT: REVISED ASBESTOS MEDICAL SURVEILLANCE PROGRAM

Attached is a revised asbestos medical surveillance program. This is the second revision since the original 1972 program. The previous revision in December 1977 called for medical surveillance of all current employees who are regularly exposed to above 0.1 fiber/cc as an eight-hour TWA. While maintaining that guideline, this revision has been developed to:  
1) include employees who have had significant exposure in the past; and,  
2) define more precisely the frequency of exposure required for medical surveillance.

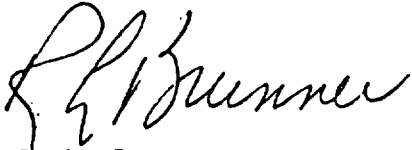
The current program includes mainly insulators. The new program includes other crafts where people have had or may have exposure in excess of 0.1 fiber/cc. Evaluations of various activities have shown that during rip-out or removal of asbestos-containing insulation, potential exposures could exceed 0.1 fiber/cc. As a result, we recommend that employees involved in this type of activity for the length of time specified in the policy be included in the medical surveillance program. Exceptions to this practice are possible if local monitoring data shows that potential exposure levels (without regard to respirators) are less than 0.1 fiber/cc.

I request that you provide Dr. Jerry G. Simpson, Corporate Medical Department, with a list of employees to be added to the special exam program. Note that those employees already participating in one of the other special exam programs (e.g., VCM, pesticides, etc.) will not require a separate examination. However, the separate Special Asbestos Medical Examination Record should be completed for those employees. We also remind you to document for OSHA compliance those employees who opt not to participate in the program. The Corporate Medical Department is also modifying the exam to be more specific for the potential health effects of asbestos. That modification is explained in the attachment.

LAM 028456

ABS-047346

Please contact me or Jerry Ransdell as questions or needs arise.



R. L. Brunner

RLB:PJW

Attachment

For information  
Shell Pipe Line Corporation - J. R. Hurley

LAM 028457

ABS-047347

## ASBESTOS MEDICAL SURVEILLANCE

The up-dated asbestos medical surveillance examination will consist of (1) a complete, comprehensive medical history to elicit symptoms of asbestos-related disease (especially respiratory) with a detailed review of this history by medical personnel; (2) a 14 x 17 P-A chest x-ray; (3) spirometry, including forced vital capacity (FVC) and forced expiratory volume in one second ( $FEV_{1.0}$ ) and (4) the balance of the Voluntary Periodic Examination every second (if 40 and above years old) or third year (if less than 40 years old).

The employee in an occupation regularly exposed (past or present) to airborne concentrations of asbestos fibers (as defined in the Shell Asbestos Medical Surveillance Policy) should have preplacement, annual and termination examinations. If adequate records show that an asbestos medical surveillance examination has been performed within the past one-year period, no medical examination should be done even though the employee retires, terminates or transfers. The Voluntary Periodic Examination or participation in another medical surveillance program may be used for the asbestos examination if it fulfills all the requirements of the asbestos medical program.

The modified program is in keeping with the emphasis of the OSHA regulation and is specific for asbestos-related health problems. In addition, the Voluntary Periodic Examination at two- to three-year intervals will enable the examining doctor to look for other conditions not related to asbestos exposure.