FILE NAME: Allied Signal Bendix (ASB)

DATE: 1989 Sept 25

DOC#: ASB104

DOCUMENT DESCRIPTION: Letter from Allied Signal to UAW RE Info Requested by UAW on Bendix Asbestos Control Programs

Allied Signal

Allied-Signal Inc.
Automotive Sector World Headquarters
20650 Civic Center Drive
P.O. Box 5029
Southfield, MI 48086-5029
Telephone (313) 827-5000



September 25, 1989

Mr. Russell L. Craig
International Representative
UAW Allied-Signal Department
Solidarity House
8000 East Jefferson Avenue
Detroit, MI 48214

Dear Mr. Craig:

This will respond to your letter of August 15, 1989, in which you requested information on the asbestos control programs at the Bendix Friction Materials Division facilities in Green Island, New York, and Cleveland, Tennessee. Enclosed, please find the following information:

1. Asbestos-in-air monitoring data for calendar year 1988 for both the Green Island and Cleveland plants.

2. A copy of the Methods of Compliance Program for each plant, consistent with paragraph (f)(2) of the OSHA asbestos standard.

You also requested information concerning the number of workers with abnormal chest x-rays, pulmonary function tests and the number referred to their personal physicians for any medical findings.

As you are aware, Bendix Friction Materials Division provides a comprehensive medical surveillance program which not only meets but exceeds the requirements of the OSHA asbestos standard. This program is offered annually to all employees and consists of a physical examination, pulmonary function test, and periodic chest x-ray. The results of these medical screening tests, along with the OSHA-mandatory medical questionnaire, are reviewed by a team of medical consultants and a confidential written assessment is provided to each employee. Should one or more medical screening tests indicate a result outside the expected normal range, the employee is referred to their personal physician for follow-up examination.

It is important to recognize that referrals do not represent a diagnosis of any medical condition. The referral process is very conservative by design to ensure prompt review/evaluation by the employee's personal physician. As a conservative process, referrals typically also include general medical conditions such as high blood pressure, suspected abnormal electrocardiogram, colds, infections, and other non-occupationally related conditions.

Green Island and Cleveland offered the following medical surveillance screening tests (the percentages of employees accepting the tests are indicated in parentheses):

BFMD MEDICAL SCREENING TESTS OFFERED AND % PARTICIPATION SUMMARY[1]

Screening Test	Green Island	Cleveland
Physical Examination	382 (96%)	505 (97%)
Chest X-Ray	368 (94%)	287 (95%)
Pulmonary Function Test	382 (94%)	505 (98%)

It should be noted here that, with the exception of one individual, all union representatives at Green Island refused the medical surveillance screening tests. Two of eight union officials rejected the tests at Cleveland. The reason(s) for their refusals are unclear to us; however, I'm sure you will agree that these refusals are inconsistent with the objective of supporting the employee health/medical surveillance program. Overall, however, the rate of employee participation in the program is encouraging.

Of those individuals who participated, the numbers of persons referred to their personal physician because of a medical screening test result beyond the normal range were as follows:

BFMD MEDICAL SURVEILLANCE SCREENING TEST REFERRAL SUMMARY[1]

Category	Green Island	Cleveland
Respiratory System Referrals[2]	31	46
Non-Respiratory System Referrals[3]	21	72
Total Referrals	52	118

[1] Data represents 1987 experience (first year following new OSHA medical surveillance requirements per the revised asbestos standard).

[2] Includes referrals for suspected abnormal chest x-ray or pulmonary function test.

[3] Includes referrals for suspected abnormal electrocardiogram (EKG), blood pressure and coughs/wheezing due to colds/infection.

It is also significant to note that of the above referrals, 61% (Green Island) and 56% (Cleveland) have a history of cigarette smoking.

Should you or Dr. Mirer have any questions or wish to discuss this information further, please do not hesitate to call me at 827-6358.

Sincerely,

Thomas P. Rancour

Thomas P. Rancour, CSP, CIH
Manager, Occupational Health & Safety

TPR:bmm

Attachment

cc: E. Bocik
K. Macon

bc: C. Larson
C. Marks
L. Paul, M.D.
H. Scott
M. Semeyn
T. Stewart
K. Wainwright

B:BMM199.TPR