

Heinz , Bruce

From: Trantham, Ellen (EG)
Sent: Saturday, May 24, 1997 2:02 PM
To: Phillips, Betty (ME); James, Dora (DN); Randolph, Nancy (NE); Paul, Jackie; Marchant, Maralee; Heinz, Bruce
Cc: Albert, Dave (DL); Norwood, Samuel (SK)
Subject: FW: Butadiene

Gulf Coast buta group,

Below is a message from Dick Olson.

We had discussed this as a group, so here is our answer. This is a bit better than looking at it as a 10 ppm ceiling.

Nancy, can our form you made for us be changed to match this?

We as a Gulf Coast group need to do a process check. There is another NA meeting next week to discuss where we are, so please reply back to this message how you are coming along with your search, and if you will be finished before our end of June deadline.

Please use the form in Access created by Nancy, so that we can all provide this data to medical in the same format.

Also, if you have your tables completed from your initial monitoring for buta, please send them to me electronically. Our business product steward, and other business leaders would like to see the data in one grouping instead of separate reports.

Thank you,
Ellen

From: Olson, Dick (RD)
Sent: Thursday, May 22, 1997 2:02 PM
To: Beekman, Mitchell; Cikalo, John (JP); Trantham, Ellen (EG); Egedahl, Ronald (RD); Gondek, Michael (MR)
Cc: Taylor, Susan; Albert, Dave; Dommer, Rich; Dombrowski, Stan; Spadacene, Nanette; Hunt, David (DG); Kern, Marshall
Subject: Butadiene

This will confirm the discussions I've had with some of you. As some of us have discussed in the past, a previous exposure of "above 10 ppm on 30 or more days in any past year" qualifies an employee for inclusion in a medical monitoring program until he/she leaves our employment. A question was raised by Scott Hoag and others as to whether the 10 ppm was a Time-Weighted-Average exposure or a Short-Term-Exposure. I've discussed this and looked at the record and there is presently no OSHA interpretation of which the 10 ppm is. Therefore, we can make our own determination. If we consider the 10 ppm to be a STEL, virtually everyone in our units would be eligible for the medical monitoring. The individuals who worked on the standard did not intend to include everyone in the medical monitoring program, therefore we should consider the 10 ppm to be a TWA. This should help narrow the search for employees who might have been exposed.

Dick Olson

E & H RA