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U.S. Department of Labor

Occupational Safety and Health Administration
Washington, D.C. 20210

OSHA Instruction CPL 2-2.21A
February 18, 1981
Office of Compliance Programming

Subject: 29 CFR 1910.1001(j)(2), (3) or (4), Minimum Airborne Fiber Concentration for Initiating and Continuing Asbestos Medical Examinations

A. Purpose. This instruction provides uniform inspection and compliance procedures for the medical examination requirement in the asbestos standard.

B. Scope. This instruction applies OSHA-wide.

C. Cancellation. OSHA Instruction CPL 2-2.21, October 11, 1978, is canceled.

D. Action. OSHA Regional Administrators and Area Directors shall assure that enforcement of 29 CFR 1910.1001(j)(2), (3) or (4) is consistent with the guidelines in G. of this instruction.

E. Federal Program Change. This instruction describes a Federal program change which affects State programs. Each Regional Administrator shall:

1. Ensure that this change is forwarded to each State designee.

2. Explain the technical content of the change to the State designee as requested.

3. Ensure that State designees are asked to acknowledge receipt of this Federal program change in writing, within 30 days of notification, to the Regional Administrator. This acknowledgment should include a description either of the State's plan to implement the change or the reasons why the change should not apply to that State.

4. Review policies, instructions and guidelines issued by the State to determine that this change has been communicated to State program personnel. Routine monitoring activites (accompanied inspections and case file reviews) shall also be used to determine if this change has been implemented in actual performance.

F. Background. OSHA has determined that generally citations should, as a matter of policy, be issued for violations of 29 CFR 1910.1001 (j)(2), (3) or (4), only when employees are exposed to a minimum of 0.1 asbestos fibers longer than 5 micrometers per cubic centimeter of air, as determined by the sampling method prescribed in section G.2. of this instruction. [The phrase "fibers longer than 5 micrometers per cubic centimeter of air" shall hereafter be abbreviated as "fibers/cc."] However, for situations in which sampling of exposure is infeasible, citations may be issued as provided in G.5. of this instruction.

G. Enforcement Guidelines.

1. Medical examinations as per 29 CFR 1910.1001 (j)(2), (3) or (4) will be required for any 7- to 8-hour time-weighted average concentration of 0.1 fibers/cc, or for a greater concentration.

2. Sampling procedures will follow Chapter X of the IHFOM with the additional guidelines of G.3 and 4. of this instruction.

3. Sampling for Exposures to Asbestos Dust with Low Levels of Contamination (e.g., Mixed with Other Minerals).

   a. For exposure to dust that is mostly asbestos and is expected to be below the permissible exposure limit, the same filter should be used for the entire shift, but no longer than 8 hours.

   b. For exposure expected to be at or above the permissible exposure limit, several samples may be required during the shift to avoid overloading the filters.

4. Sampling for Exposure to Asbestos Dust with High Levels of Contamination.

   a. Several samples of exposure may be required during the shift to avoid overloading the filter.

b. Filters should be changed only after a minimum of 1 hour of sampling time for exposures expected to be close to 0.1 fibers/cc. Seven or eight 1-hour samples can be collected during the day.

5. Past Exposures. When employees have been exposed to asbestos but air samples cannot be taken on the day of the inspection or thereafter, citations for serious violation of 29 CFR 1910.1001(j)(2), (3) or (4) should be issued according to the following procedures:

a. Determine that employees were exposed to airborne concentrations of asbestos, and that the use or handling of asbestos was performed on a regular basis; or that the use or handling of asbestos was performed on an irregular basis, but employees were exposed to significant amounts of dust containing asbestos.

NOTE: Compliance officers shall obtain monitoring results from the employer (contractor) or other source (e.g., insurance company; company or plant for whom contracting work is being done; building owner/building management; other Federal, State or local agency), and shall indicate exposure levels above 0.1 fibers/cc of asbestos.

b. Document, by employee, employee representative, and union interviews, that this work was performed routinely, on a repeated basis; or that the use or handling of asbestos was performed on an irregular basis, but employees were exposed to significant amounts of dust containing asbestos. In addition, obtain documentation from written employer information on these routine operations, if it exists.

c. The violative conditions must have occurred at least within the previous 6 months to meet the requirements of Section 9(c) of the Occupational Safety and Health Act.

6. Types of Violations.

a. A "serious" violation of 29 CFR 1910.1001(j)(2), (3) or (4) would exist where an employer does

not provide the required medical examinations, and an employee is exposed to 0.1 or more fibers/cc.

b. For definitions and guidance on "repeated", "willful" or a "failure to correct" violation, see the FOM, Chapter VIII.

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