



March 13, 1970

Office of the President

MAR 16 1970

Mr. Charles E. Van Horne
Pittsburgh Corning Corporation
P. O. Box 3057
Tyler, Texas 75705

Subject: Environmental Health Staff Visit Report
- Tyler Plant, Pittsburgh Corning Corporation,
March 4-5, 1970

I. WALSH-HEALEY INSPECTION AND SUBSEQUENT ACTIONS

Mr. Wendell R. Blair, Regional Director, Bureau of Labor Standards, U. S. Department of Labor, by a letter dated April 8, 1969, indicated that a Walsh-Healey Inspection performed on February 13, 1969, showed non-compliance with Walsh-Healey Health and Safety Standards. See Attachment 1. The company reaction is shown in the following correspondence:

1. A letter to Mr. Blair from Mr. Bryl Stout dated April 11, 1969 (Attachment 2)
2. A letter to Mr. Blair from Dr. Morton Corn dated May 1, 1969 (Attachment 3)
3. A letter to Mr. Blair from Dr. Morton Corn dated June 6, 1969 (Not Available)

The essence of the above-referenced correspondence was that Mr. Stout, using Dr. Corn's name, indicated that no violation existed. Dr. Corn first advised that he had no knowledge of the Tyler Plant but that arrangements were made for him to perform an environmental survey there, and finally that the survey was completed.

Mr. Blair then, in a letter dated June 16, 1969, requested a copy of the Corn Report and a report on corrections, if any, to be made (See Attachment 4), to which, on July 2, Mr. Stout sent a copy of the Corn Report to Mr. Blair and advised that the dust control system recommended by Dr. Corn would be installed by mid February, 1970 (See Attachment 5). On July 9, 1969, in a letter to Mr. Blair, the completion of First Aid training to meet Walsh-Healey Standards was announced by Mr. Stout.

During my present visit I learned that 44 plant employees with 5 or more years service were x-rayed by the Medical and Surgical Clinic in Tyler. No recommendations for further study were made, based on the x-ray findings. Time did not permit the undersigned to discuss these x-rays with the Doctor who read them, however, a review of the findings reported did indicate a need

for medical follow-up on several employees. On the subject of medical examinations, early in 1967 we had talked with Dr. George A. Hurst, the Clinical Director of the East Texas Tuberculosis Hospital located near the plant, about performing periodic medical examinations on our employees. Dr. Hurst developed an excellent protocol for such an examination program and got permission from the Texas State Department of Health to perform the examinations. He sent the protocol and estimated cost for the study to me in a letter dated February 3, 1967. Implementation of this study was held off pending information from the USPHS as to whether they were going to medically study our employees as part of their industry-wide asbestos study in which the Tyler plant participated. The undersigned does not believe that we should hold off any longer on the medical studies in view of the present Walsh-Healey situation. These studies would be further evidence of the quality of the plant's environmental health program and concern for the health and well-being of their employees. Whenever Walsh-Healey Environmental Standards are exceeded, temporary variances may be granted if appropriate personal protective equipment is used and a medical examination program indicates no biological effect from the excessive concentrations. Bureau of Mines approved respirators have been worn in the raw material feed area and the finishing area since August, 1969; however, Dr. Corn's and/or the USPHS Study show that respiratory protection should be worn in the following additional areas: forming builder, packing packer, weigher, scrap grinder and sealer. The possibility of implementing Dr. Hurst's medical examination program in a somewhat revised form were discussed with Dr. Hurst. He is still interested and will submit a revised protocol and cost estimate for our consideration; however, he advised that implementation will be delayed for an undetermined time because of personnel shortages at the hospital.

There have been no revisits by, or further correspondence with, Mr. Blair's office since Mr. Stout's July 2, 1969 letter, referred to above. Mr. Van Horne was not familiar with the present status for the dust control system that was to be installed by mid-February, 1970.

Some progress was made at Tyler to substitute mineral fiber for a portion of the asbestos, although this was not in operation at the time of the visit (i.e., asbestos fiber 41% and mineral wool 10% by weight of the finished product). Mr. Van Horne understood that complete replacement of asbestos with mineral wool appeared feasible at the R & D phase. He did not know if or when this might become a production reality.

The USPHS made a revisit to the Tyler plant in November or December, 1969. A letter concerning this survey was sent to Mr. Van Horne by Mr. C. V. Oster indicating, in general, the results showed very high asbestos dust concentrations in some areas but that the complete report would be forthcoming. (See Attachment 6).

It is important to be aware of the fact that the Threshold Limit Value for asbestos was lowered in 1968 and that I have received notice that it will be lowered again in May, 1970, to 5 fibers per cubic centimeter from the present value of 12. This is principally to protect the worker against the lung cancer producing effects of asbestos, not its asbestosis producing effect, which the previous TLV protected against. This, of course, increases the

difficulty of engineer control by local exhaust ventilation. Therefore, Dr. Corn's opinion should be sought in regard to the question as to whether his recommendation for control will be valid in light of the 5 fibers per cubic centimeter T.L.V.

Other than advising certain employees that they must wear dust respirators, no information has been provided the employee on the health hazards associated with excessive and prolonged exposure to asbestos or the increased hazard to lung cancer associated with the worker who smokes cigarettes in addition to his exposure to asbestos. In my opinion you have an obligation under Walsh-Healey to provide the worker with such information. Further, the legal view is that if you don't do so you may be held negligent in case of an adverse health effect from such environmental exposure. I would also recommend that signs be prepared and posted where appropriate that read, "All Persons Entering This Area Must Wear Approved Respiratory Protection." This is evidence to all that you have a mandatory respirator protection program.

COMMENTS

Be worn in the following additional areas: portable dust mask, battery pack. In my opinion this plant is in violation of the Health Standards of the Walsh-Healey Law and are in jeopardy of being the cause for Pittsburgh Corning Corporation losing all government contracts.

RECOMMENDATIONS

1. An early meeting with Mr. Wendell Blair advising him that the ventilation controls have not been installed as promised and the reasons therefore. I would suggest some of the following reasons be considered:
 - a. The high cost of the ventilation control equipment, when considered against the possibilities of it being either obsolete or unnecessary in the near future. Dr. Corn's opinion would be necessary to judge the validity of the "obsolescence reason" because of the impending revision of the T.L.V. for asbestos. A Pittsburgh Corning management decision would be necessary to judge the validity of the "unnecessary reason", that is to say, an estimated date for complete replacement of asbestos by mineral wool in the product.
 - b. No evidence of biological effects from the exposure as judged by thorough medical evaluations. The reason for delay in obtaining this data and the proposal for having it done by the East Texas Tuberculosis Hospital could be explained.
 - c. The respiratory protection program will be continued in all areas showing excessive dust exposure, until such exposures are brought under control.

- d. A health education program will be put into effect to explain to the employees the health hazard associated with asbestos exposure and how they can protect themselves, and the nature of the medical examination program to be implemented for them.

II. PRE-EMPLOYMENT MEDICAL EXAMINATIONS

A review of 19 pre-employment medical examinations on all employees presently on the payroll, who were hired in the past twelve months, indicated that at the beginning of the period the new form obtained from PPG was used but was discontinued after a short time. It was obvious that the forms were not being used properly, nor were the Medical Standards for Employment and Medical Classification being used, either by the examining physicians or plant management. Mr. Van Horne also indicated that the physicians were complaining about the amount of time they had to spend completing the History portion and that they wanted to charge \$5 or \$10 more for the urinalysis that was required. The present charge for the old P.C. examination is \$35 and includes the doctor's examination and x-rays of the chest and back.

COMMENTS

The present examination being performed is not adequate, nor are the back x-rays needed if the back examination in the PPG Exam is performed. The labor turnover during the first few months of employment is high.

RECOMMENDATIONS

1. Return to use of the new medical examination procedures and standards after plant management first thoroughly understands them and can discuss them with the examining physician.
2. Because of the high labor turnover, do only the medical history of the new form until the employee is about to become a permanent employee, when the full examination would be accomplished. Only those applicants with a negative medical history would be handled in this way. Any significant medical finding would be cause for rejection of full medical examination before employment.
3. Eliminate routine back x-ray examinations when the new examination program is instituted.



Lee B. Grant, M.D.
Medical Director

LBG:lc

Enclosures 6

cc: E. W. Holman

J. H. Bierer

J. L. Hyde