MEMORANDUM

From: Industrial Hygienist, Naval Medical Administrative Unit, Monterey
To: Officer in Charge, Naval Medical Administrative Unit, Monterey, 473 Cabrillo Street, Suite A1A, Monterey CA 93944

Subj: PERIODIC INDUSTRIAL HYGIENE SURVEY OF NAVAL MEDICAL ADMINISTRATIVE UNIT, MONTEREY

Ref: (a) OPNAVINST 5100.23G, Chapter 8, Section 0803.a

Encl: (1) Industrial Hygiene Survey Report ET-0354

1. As required by reference (a), the periodic industrial hygiene survey of the Naval Medical Administrative Unit (NMAU), Monterey, was conducted on from 27 April to 1 May 2006 by the NMAU Monterey Industrial Hygienist. The survey report ET-0354 is forwarded as enclosure (1).

2. This survey is not an inspection report but is designed to assist the unit’s Occupational Safety and Health Program by identifying and evaluating actual and potential occupational health hazards and the status of their controls. A copy of this report will be forwarded to the Naval Hospital, Lemoore, Safety Office for their use and records.

3. There were no formal findings that require action, and as such, a response to this report is unnecessary.

4. I am available for further clarification or consultation with respect to these findings and recommendations as requested.

Signed/
S.E. THURSTON

Copy to:
Director of Branch Clinics, NAVHOSP Lemoore
Head, Industrial Hygiene Dept, NAVHOSP Lemoore
INDUSTRIAL HYGIENE SURVEY

of

NAVAL MEDICAL ADMINISTRATIVE UNIT, MONTEREY

SURVEY #ET-0354

27 April to 1 May 2006

Survey Conducted By: Eric Thurston,
Industrial Hygienist
# TABLE OF CONTENTS

Executive Summary.................................................................2  
Glossary/Common Abbreviations..................................................3  
Section I. INTRODUCTION.............................................................5  
  Report Organization...............................................................5  
  Survey Schedule.......................................................................6  
  Change of Operation Notification.............................................6  
Section II. Navy Occupational Safety and Health Program Reviews........7  
Section III. Industrial Hygiene Assessment......................................9  
Section IV. Industrial Hygiene Survey Data .....................................13  
Section V. Medical Surveillance Matrix.........................................14  
Section VI. Workplace Monitoring Program...................................16  
Appendix A. Industrial Hygiene Assessment OPNAV 5100/14 Form.........17  
Appendix B. Change of Operation Notification Form........................20
EXECUTIVE SUMMARY

- There were no formal findings.
- Ensure that the hospital corpsmen continue to receive annual bloodborne pathogens hazard training.

Specific details of information gained during the survey can be found in sections II and III of this report. The cooperation of LT Brady Dubois and HMC Andrew Molina was greatly appreciated.
COMMON ABBREVIATIONS AND GLOSSARY

(The following abbreviations may be used in this report)

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACGIH</td>
<td>American Conference of Governmental Industrial Hygienists</td>
</tr>
<tr>
<td>ACM</td>
<td>Asbestos Containing Material.</td>
</tr>
<tr>
<td>AL</td>
<td>Action Level. Normally ½ PEL. Exposure level at which air sampling, employee training, medical surveillance are required.</td>
</tr>
<tr>
<td>ANSI</td>
<td>American National Standards Institute. A national consensus standards developing organization.</td>
</tr>
<tr>
<td>Ceiling</td>
<td>A toxic material exposure level which cannot be exceeded for any length of time.</td>
</tr>
<tr>
<td>CFM</td>
<td>Cubic feet per minute. Air flow rate.</td>
</tr>
<tr>
<td>dBA</td>
<td>A sound level reading in decibels as measured on the A-weighted network of a sound level meter.</td>
</tr>
<tr>
<td>EL</td>
<td>Excursion Limit. Is a concentration limit which cannot be exceeded at any time.</td>
</tr>
<tr>
<td>EPA</td>
<td>Environmental Protection Agency.</td>
</tr>
<tr>
<td>f/cc</td>
<td>Fibers per cubic centimeter. A means for expressing airborne asbestos fiber concentrations.</td>
</tr>
<tr>
<td>FPM</td>
<td>Feet per minute.</td>
</tr>
<tr>
<td>HAZCOM</td>
<td>Hazard communication. A system for training employees about job hazards through the use of chemical inventories, MSDSs, labels, and personnel training.</td>
</tr>
<tr>
<td>HCP</td>
<td>Hearing Conservation Program. A program to prevent hearing loss from exposure to noise through the use of hearing protection, training, and medical surveillance.</td>
</tr>
<tr>
<td>HEPA</td>
<td>High-efficiency particulate air filter. A filter capable of trapping and retaining 99.97% of 0.3 micron diameter, or larger, particles.</td>
</tr>
<tr>
<td>HM</td>
<td>Hazardous material. A material which is a physical or health hazard per 29 CFR 1910.1200.</td>
</tr>
<tr>
<td>HW</td>
<td>Hazardous waste. Any discarded or abandoned hazardous substance as defined in 40 CFR 261.</td>
</tr>
<tr>
<td>LEV</td>
<td>Local exhaust ventilation. Exhaust system at source of contamination.</td>
</tr>
<tr>
<td>mg/m³</td>
<td>Milligrams per cubic meter of air. A means for expressing concentrations of dust and metal fumes in air.</td>
</tr>
<tr>
<td>MMVF</td>
<td>Man made vitreous fibers. (Fiberglass, mineral wool, ceramics)</td>
</tr>
<tr>
<td>MSAL</td>
<td>Medical Surveillance Action Level. A concentration of an air contaminant at which medical surveillance examinations must be provided to exposed personnel.</td>
</tr>
<tr>
<td>MSDS</td>
<td>Material Safety Data Sheet. A form used by manufacturers to communicate to users the chemical and physical properties of their products.</td>
</tr>
<tr>
<td>NAVOSH</td>
<td>Navy Occupational Safety and Health</td>
</tr>
<tr>
<td>NFPA</td>
<td>National Fire Protection Association</td>
</tr>
<tr>
<td>NIOSH</td>
<td>National Institute for Occupational Safety and Health. Recommends safety and health standards for OSHA.</td>
</tr>
<tr>
<td>NPEL</td>
<td>Navy Permissible Exposure Limit.</td>
</tr>
<tr>
<td>OSHA</td>
<td>Occupational Safety and Health Administration.</td>
</tr>
<tr>
<td>OV</td>
<td>Organic vapors.</td>
</tr>
<tr>
<td>PCB</td>
<td>Polychlorinated Biphenyl</td>
</tr>
</tbody>
</table>
### COMMON ABBREVIATIONS AND GLOSSARY

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>PEL</td>
<td>Permissible Exposure Limit. The maximum permissible allowable exposure level of a toxic chemical or harmful physical agent (normally averaged over 8 hours) to which an employee may be exposed.</td>
</tr>
<tr>
<td>PPE</td>
<td>Personal Protective Equipment. Clothing or devices furnished to protect employees in performance of work in potentially hazardous areas or conditions.</td>
</tr>
<tr>
<td>ppm</td>
<td>Parts per million. A means for expressing the concentration of gases and vapors in air.</td>
</tr>
<tr>
<td>RFR</td>
<td>Radiofrequency/Microwave Radiation.</td>
</tr>
<tr>
<td>RPPM</td>
<td>Respiratory Protection Program Manager.</td>
</tr>
<tr>
<td>SCBA</td>
<td>Self Contained Breathing Apparatus.</td>
</tr>
<tr>
<td>SOP</td>
<td>Standard Operating Procedures.</td>
</tr>
<tr>
<td>STEL</td>
<td>Short term exposure limit. A 15 minute time weighted average exposure which should not be exceeded at any time during a workday.</td>
</tr>
<tr>
<td>Stressor</td>
<td>Potential Hazard (e.g. Noise, Chemicals, Dusts)</td>
</tr>
<tr>
<td>TLV</td>
<td>Threshold Limit Value. Established by ACGIH as levels of airborne contaminants or physical hazards under which it is believed workers may be exposed on a day after day basis without adverse effect.</td>
</tr>
<tr>
<td>TWA</td>
<td>Time Weighted Average. A method for averaging varying concentrations over a specified period of time (usually 8 hours).</td>
</tr>
<tr>
<td>WC</td>
<td>Work Center</td>
</tr>
<tr>
<td>WMP</td>
<td>Workplace Monitoring Program. A program to evaluate workplace health hazards through surveys and exposure measurement.</td>
</tr>
</tbody>
</table>
SECTION I

References:  (a) OPNAVINST 5100.23G, Chapter 8, Section 0803.f
(b) OPNAVINST 5100.23G, Chapter 8, Sections 0803.b and c
(c) OPNAVINST 5100.23G, Chapter 8, Paragraph 0803.g

INTRODUCTION

The Naval Medical Administrative Unit, Monterey provides oversight of medical examinations and procedures performed for Naval and Marine Corps personnel by the Presidio of Monterey, Medical Clinic, and performs administrative control of records and programs. Preventive medical technician services and medical coordination services are also provided. The Industrial Hygienist provides industrial hygiene services primarily for the Naval Postgraduate School, Monterey and Naval Support Detachment, Monterey, but also to other Naval and Marine Corps activities located in the Monterey Bay area.

If an operation has been overlooked or significant changes made which are believed to put personnel at serious risk, the Industrial Hygienist should be contacted, and an evaluation requested.

REPORT ORGANIZATION

Section I - contains the background information associated with this report and the schedule for follow-up surveys.

Section II - addresses the status of the command's occupational health programs and contains a short overview of each program's status.

Section III - Contains industrial hygiene assessments of specific work areas.

Section IV - contains the results of all the sampling/monitoring data conducted in support of this survey.

Section V - identifies the occupational health medical surveillance requirements for the unit based on survey findings.

Section VI - details the sampling required to be conducted for OSHA or NAVOSH regulated stressors or stressors which have been found to result in personnel exposures equal to or in excess of the MSAL, PEL-STEL, or PEL-Ceiling.

Appendix A - contains the OPNAV 5100/14 forms which are required by reference (a). These forms detail the occupational exposures of employees by work center or functional group.

Appendix B - is a copy of the Change In Operation Notification form, which should be filled out whenever a major operational change occurs. By returning the completed forms to the Industrial Hygienist, all new operations can be evaluated as required by reference (a). This form can be copied as needed for your use.
SURVEY SCHEDULE

In accordance with reference (b), each workplace must be thoroughly evaluated to identify and quantify potential occupational hazards. To document these evaluations, an initial comprehensive (baseline) survey is needed, followed by periodic updated surveys. Reference (c) requires workplaces with recognized potential health hazards to be evaluated annually, and other workplaces to be evaluated periodically. Medical surveillance recommendations and a workplace monitoring plan are developed from the findings of these surveys. Any comments or suggestions regarding these survey schedules should be forwarded to the Industrial Hygienist. The year of the last survey appears after each work center listing.

WORKPLACE SURVEY SCHEDULE

<table>
<thead>
<tr>
<th>Annual Required</th>
<th>2 Year Schedule</th>
<th>4 Year Schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Bloodborne Pathogens</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Control Program(2006)</td>
<td></td>
</tr>
</tbody>
</table>

Change of Operations Notification:

Reference (c) requires an industrial hygiene re-evaluation when workplace changes occur. Please notify the Industrial Hygienist whenever major changes occur in a workplace. Examples of major changes include:

- Exposure times have changed.
- New types of equipment are used.
- New chemical/chemical product usage.
- New operations are performed.
- Increase in major chemical usage.
- Changes in exhaust ventilation.

A "CHANGE OF OPERATIONS NOTIFICATION" form is provided in Appendix B and can be used for this purpose. Copy the form as needed for your use.
SECTION II
NAVY OCCUPATIONAL SAFETY AND HEALTH
PROGRAM REVIEWS

The following programs are not required to be maintained by the Naval Medical Administrative Unit, Monterey because these hazards are not present or control programs are unnecessary:

- Asbestos Control
- Hazardous Material Control
- Hearing Conservation
- Lead Control
- Man-Made Vitreous Fiber Control
- Non-Ionizing Radiation Control
- Polychlorinated Biphenyls (PCB’s) Control
- Process Control Ventilation
- Respiratory Protection

BLOODBORNE PATHOGENS CONTROL PROGRAM

Potential exposure to bloodborne pathogens can occur when hospital corpsmen draw blood samples or when administering influenza vaccines. Personnel no longer collect bone marrow samples as indicated in the 2002 industrial hygiene survey report.

- The unit is using NAVHOSPLEMOOREINST 6260.7D as the exposure control plan.

- All hospital corpsmen receive Hepatitis B vaccines as part of the required military service vaccination series.

- Personal protective equipment is basically limited to latex or similar gloves during the procedures outlined above. Used or contaminated gloves are disposed of in red biohazard bags, and sharps are disposed of in red biohazard sharps containers.

- The Hospital Corpsmen received Bloodborne Pathogens hazard training that is documented in their training jackets.

Recommendations: None. Provided for your information and records only.

ERGONOMICS PROGRAM

Personnel regularly use personal computers to type correspondence and other paperwork. Intermittent typing and minimal heavy lifting has not resulted in repetitive stress or musculoskeletal injuries. Heavy lifting is limited to boxes of copy paper, and two-man teams are used for lifting of other rare items exceeding 40 pounds.

Recommendations: None. Provided for your information and records.
Material that contains reproductive hazards as defined in OPNAVINST 500.23F, Chapter 29, Appendix 29-B is not present or used during performance of duties by Naval Medical Administrative Unit, Monterey personnel except for the Industrial Hygienist, whose exposure is minimal as discussed in the assessment and Appendix A sections of this report.
SECTION III

INDUSTRIAL HYGIENE ASSESSMENTS
INDUSTRIAL HYGIENE ASSESSMENT


DEPARTMENT: All personnel  POC: LT Brady Dubois

LOCATION: Trailer adjacent to POM Medical Clinic  IND. HYG: Eric Thurston

FUNCTION:

Provides oversight of medical examinations and procedures performed for Naval and Marine Corps personnel by the Army Medical Clinic. Most duties are administrative in nature. Personnel rarely draw blood samples. Influenza vaccinations are administered to Naval and Marine Corps personnel and dependents in the Monterey Bay area. The unit’s Preventive Medicine Technician (PMT) conducts food, habitability, and playground inspections, and collects periodic water samples, as well as assisting in occupational health program including Child Development Center exams and asbestos medical surveillance program surveillance. One civilian is the Tricare Coordinator and Health Benefits Advisor (HBA). One Administrative Assistant provides secretarial and administrative support to unit personnel. The Industrial Hygienist assesses potential exposures to health hazards during performance of regular workplace surveys, conducts workplace monitoring of operations suspected of posing significant exposure or as directed by specific instructions, provides occupational health (currently only bloodborne pathogens) training classes to Naval Support Detachment (NSD), Monterey employees, reviews construction or building renovation plans for inclusion of OSH requirements and procedures, and serves as a consultant to NSD Monterey, the Naval Postgraduate School (NPS), and other Naval or Marine Corps activities’ Safety Offices.

INDUSTRIAL HYGIENE ASSESSMENT

There are no operations that potentially expose personnel to hazardous occupational stressors.

The following operations will not expose personnel to hazardous occupational stressors in excess of established health standards:

1. Preventive Medicine Technician (PMT) duties, including conducting inspections, preparing reports, assisting the POM Medical Clinic Occupational Health Department in provision of Child Care Worker medical exams and assessing personnel for enrollment in the asbestos medical surveillance program, and serving on limited duty and medical fitness boards. These duties do not involve exposure to chemical, noise, non-ionizing radiation, or biological hazards.

2. Hospital corpsmen duties, including administrative tasks and processes, conducting medical security and overseas screenings, conducting Periodic Health Assessment (PHA) exams for military personnel, and maintaining the supply program for the unit. These duties do not involve exposure to chemical, noise, non-ionizing radiation, or biological hazards.

3. Bloodborne pathogens when drawing blood sampling or administering influenza vaccines by the hospital corpsmen. Significant exposure is unlikely because proper procedures are followed and appropriate protective equipment is worn.
The following operations will not expose personnel to hazardous occupational stressors in excess of established health standards (con’d):

4. Ergonomics during heavy lifting. No repetitive stress or musculoskeletal injuries have occurred during intermittent performance of these duties, and two-man teams are used to lift anything over 40 pounds.

5. Administrative and management (Officer In Charge and Chief Petty Officer) duties do not involve exposure to chemical, noise, non-ionizing radiation, or biological hazards.

6. Ergonomics during Administrative Assistant duties, including use of computers to type correspondence and reports. No repetitive stress or musculoskeletal injuries have occurred during intermittent performance of these duties, which do not involve exposure to chemical, noise, non-ionizing radiation, or biological hazards.

7. Handling of outside medical care bills, and serving as the Tricare coordinator and Health Benefits Advisor, does not involve exposure to significant chemical, noise, non-ionizing radiation, or biological hazards.

8. Noise when the Industrial Hygienist is measuring noise levels of workplace equipment. Calculated exposure levels based on measured noise levels and duration of exposure are insignificant. The Industrial Hygienist wears appropriate hearing protection when collecting such measurements.

9. Various airborne chemical stressors during monitoring of jobs to determine exposure levels of involved workers. The Industrial Hygienist stands at least 20 feet from the point of operation so significant levels are unlikely based on measured levels to date.

The following operation potentially exposes personnel to stressors identified by OPNAVINST 5100.23F, Chapter 29, Appendix 29-B as reproductive hazards:

9. Benzene, cadmium, carbon monoxide, lead, mercury and toluene, which pose male, female, and developmental reproductive hazards, during workplace monitoring duties performed by the Industrial Hygienist. Exposures are expected to be minimal as discussed above.
RECOMMENDATIONS:

8. The Industrial Hygienist will continue use of hearing protection to control noise exposure during measurement procedures as required by reference (a).

REFERENCES / NOTES:

(a) OPNAVINST 5100.23G, Chapter 18, paragraph 1807c

FINDINGS: None. Provided for your information and records only.
SECTION VI
INDUSTRIAL HYGIENE SURVEY DATA

This Section contains the sampling/monitoring conducted in support of this survey. It should be noted that the measured levels of chemical and physical hazards are compared to the standards without regard to any personal protective equipment that may be worn or the protection afforded by it. The goal of the NAVOSH Program is to reduce workplace hazard levels by other means so that personal protective equipment is not required.

The sampling and analyses performed in support of this survey follow methods approved and validated by OSHA, NIOSH, or by other appropriate Naval instructions. When such methods are either unavailable or not applicable, other consensus methods may be used. In all cases, accepted professional industrial hygiene practices are followed. Documentation concerning the types of instruments used and their calibration records are held by the Naval Medical Admin Unit, Monterey Bay industrial hygienist.

No survey data was collected in support of this survey.
SECTION V

MEDICAL SURVEILLANCE MATRIX

The Medical Surveillance Matrix is provided to assist commands in assigning personnel to required medical surveillance. Medical surveillance for exposure to chemical or physical agents must be based on exposure levels at or above the MSAL and exposure frequency of ten days per quarter or thirty days per year or as required by regulations or instruction.
The attached Workplace Monitoring Plan presents stressors and/or systems which need to be evaluated periodically during the coming year. Items included on the plan are based on regulations, professional knowledge and information obtained from supervisors. The plan should be reviewed to ensure operational information is correct. The Industrial Hygienist will have to be contacted when operations are scheduled so your Command’s sampling can be completed. Changes or deletions of operations should also be communicated to the industrial hygienist so that the Workplace Monitoring Plan can be amended.

Naval Medical Administrative Unit, Monterey

WORKPLACE MONITORING PLAN

Date prepared: 1 May 2006

<table>
<thead>
<tr>
<th>LOCATION/JOB</th>
<th>STRESSOR</th>
<th># MEAS. REQUIRED</th>
<th>MEAS. METHOD¹</th>
<th>FREQUENCY PER YEAR</th>
<th>MEASURING MAN HRS.</th>
</tr>
</thead>
</table>

None required.


1: Use the following codes to indicate sampler and sampling location:

**SAMPLER:**
- DR-direct reading instrument
- DT-detector tube
- AT-adsorption tube
- IM-impinger/bubbler
- FI-filter
- ND-noise dosimeter
- PD-personal dosimeter
- OT-other (specify)

**SAMPLING LOCATION:**
- GA-general area
- BZ-breathing zone
- HZ-hearing zone
- SZ-source zone
- OT-other (specify)
This appendix contains the OPNAV 5100/14 forms which are required by reference (a). These forms detail the occupational exposures of employees by work center or functional group. These forms are used to develop the workplace monitoring program in Section VI. They also describe the type of work done in each area and can be used to verify that all work areas were included in the survey.
WORKPLACE INFORMATION

Activity: NMAU Monterey  Supervisor: LT Brady Dubois  Phone: (831)242-7542
Bldg#: Trailer adjacent to POM Medical Clinic  POC: HM2 Sample
Total Personnel: 11  Male: 7  Female: 4

Shop Operation:

Provides oversight of medical examinations and procedures performed for Naval and Marine Corps personnel by the Army Medical Clinic. Most duties are administrative in nature. Personnel rarely assist Medical Clinic personnel by drawing blood samples. Influenza vaccinations are administered to Naval and Marine Corps personnel and dependents in the Monterey Bay area. The unit’s Preventive Medicine Technician (PMT) conducts food, habitability, and playground inspections, and collects periodic water samples, as well as assisting in occupational health program including Child Development Center exams and asbestos medical surveillance program surveillance. One civilian is the Tricare Coordinator and Health Benefits Advisor (HBA). One Administrative Assistant provides secretarial and administrative support to unit personnel. The Industrial Hygienist assesses potential exposures to health hazards during performance of regular workplace surveys, conducts workplace monitoring of operations suspected of posing significant exposure or as directed by specific instructions, provides occupational health (currently only bloodborne pathogens) training classes to Naval Support Detachment (NSD), Monterey employees, reviews construction or building renovation plans for inclusion of OSH requirements and procedures, and serves as a consultant to NSD Monterey, the Naval Postgraduate School (NPS), and other Naval or Marine Corps activities’ Safety Offices.

<table>
<thead>
<tr>
<th>Potential Hazard</th>
<th>Inter or Cont.</th>
<th># Workers Exposed</th>
<th>Exposure &gt; MSAL?</th>
<th>Controls in Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ergonomics, computer use</td>
<td>Daily, varies, intermittent</td>
<td>11</td>
<td>N/A</td>
<td>None</td>
</tr>
<tr>
<td>Bloodborne pathogens, drawing blood samples</td>
<td>Once/year, 5 minutes</td>
<td>6</td>
<td>N/A</td>
<td>Latex exam gloves, sharps containers</td>
</tr>
<tr>
<td>Bloodborne pathogens, influenza vaccines</td>
<td>Once/year, 2 weeks, 4-8 hours/day</td>
<td>6</td>
<td>N/A</td>
<td>Latex exam gloves, sharps containers</td>
</tr>
<tr>
<td>Noise, Industrial Hygienist noise measurements</td>
<td>Varies, no more than 15 minutes/day</td>
<td>1</td>
<td>No</td>
<td>Appropriate ear plugs and/or muffs</td>
</tr>
<tr>
<td>Airborne chemical stressors during workplace monitoring, Industrial</td>
<td>Varies, rare, up to 6 hrs/day</td>
<td>1</td>
<td>No</td>
<td>None</td>
</tr>
<tr>
<td>* Reproductive hazard</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(See I. H. assessment)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------</td>
<td>-------</td>
<td>-------</td>
<td>-------</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
If no exposure > MSAL, provide rationale:

Noise exposure calculations based on measured noise levels and duration of exposure indicate that 8-hour TWA exposure will be less than the NOEL of 84 dBA. Significant exposure to airborne chemical stressors is unlikely because the Industrial Hygienist stands back at least 20 feet from the point of operation during any jobs that are monitored.

Signature/Title: Signed/Date: 1 May 2006
S.E. Thurston,
Industrial Hygienist

| MONITORING PLAN |
|------------------|------------------|------------------|------------------|------------------|------------------|
| Stressor to be Sampled | # of Meas. Required | * Measure. | **Measure. Method | Location | Frequency per Yr. | Man Hrs. per. Yr. |
| None | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

* Use the following Codes: DR-direct reading instrument
** Use the following Codes: GA-general area
DT-detector tube BZ-breathing zone
AT-adsorption tube HZ-hearing zone
IM-impinger/bubbler SZ-source zone
FI-filter OT-other (specify)
PD-personal dosimeter
ND-noise dosimeter
OT-other (specify)
APPENDIX B

CHANGE OF OPERATION NOTIFICATION

Please use this form to notify the Industrial Hygienist of any changes to operations conducted by your department. The notification form may be copied as needed. The completed forms can be returned to:

NAVAL SUPPORT DETACHMENT, MONTEREY
CODE N22G, SAFETY OFFICE (ATTN: INDUSTRIAL HYGIENIST)
1870 MORSE DRIVE
MONTEREY CA 93943

FOREMAN/SUPERVISOR: EXT:
BLDG: COMMAND/SHOP: Naval Medical WORK AREA:
             Administrative Unit, Monterey
SURVEY REPORT: ET-0354

INSTRUCTIONS TO FOREMAN/SUPERVISOR:

The industrial hygiene survey evaluated the potential hazards to your employees based on the operations existing at the time. When your operations change, the potential hazards can also change, and these new conditions must be evaluated. Please contact the Industrial Hygienist if any of the following occur:

a. Exposure times have changed.
b. New operations are performed.
c. New types of equipment are used.
d. An increase in major chemical usage.
e. New chemicals or chemical products are used.
f. A change in existing exhaust ventilation.

List any changes below.

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

Date Forwarded: __________

21