INTRODUCTION LCCC SAFE 225 PP 1 Marc Snitzer RS, CSP, CIH



COURSE DESCRIPTION

- OSHA Regulations involving Industrial Hygiene
- Recognition of Workplace Health Hazards
- Avoid, Minimize or Eliminate these Hazards
- Occupational Exposure Limits
- Workplace Sampling Procedures



WHAT IS INDUSTRIAL HYGIENE

"Industrial Hygiene (IH) is a science and art devoted to the anticipation, recognition, evaluation, prevention, and control of those environmental factors or stresses arising in or from the workplace which may cause sickness, impaired health and well being, or significant discomfort among workers or among citizens of the community."

American Industrial Hygiene Association



IH PRACTICE

- Workplace Analysis
- Environmental Monitoring
- Review of Occupational Exposure limits
- Determination of Control Methods
- <u>Robert Kirkby, Michigan State Police</u>



EARLY HISTORY

4 BCE (BC) – Hippocrates (Greek)
Lead Exposure in Mining
2 BCE – Galen (Greek)
Lead Poisoning, Copper workers acid exposure
1 CE (AD) – Pliny the Elder (Rome)
Zinc, Sulfur, Lead, Dust



COMMON ERA (AD) HISTORY

- 1556 Agricola (German)
 - Book on Miners Diseases and Recommendations

1700 - Bernado Ramazzini (Italian)

• Book on Diseases of Workmen

1743 (1473) – Ulrich Ellenborg

• Miners Exposure to Mercury, Lead, Nitric acid



RECENT HISTORY

1788 – Percival Pott

• "Soot – Wart" (testicular cancer)

1869-1970 – Dr. Alice Hamilton

- Showed Relationship illness/workplace Exposure
- 1911 Workers Compensation
- 1913 NY Dept. of Labor, Ohio Health Dept.
 - IH programs



CONGRESSIONAL ACTION

- Mine Safety and Health Act of 1966
- Coal Mine Safety and Health Act or 1969
- Occupational Safety and Health Act of 1970



OSH ACT

"To assure safe and healthful working conditions for working men and women; by authorizing enforcement of the standards developed under the Act; by assisting and encouraging the States in their efforts to assure safe and healthful working conditions; by providing for research, information, education, and training in the field of occupational safety and health; and for other purposes."



HAZARDS ADDRESSED BY IH

- Air Contaminants
- Chemical Hazards
- Physical Hazards
- Biological Hazards
- Ergonomic Hazards

Can you give examples of each type of hazard?



ROUTES OF ENTRY

- Inhalation Lungs
- Absorption Skin
- Ingestion Eating, Drinking, Smoking
- Injection Punctures

Examples?

More Common



HIERARCHY OF CONTROLS

Most Effective



Elimination/Substitution

Engineering Controls

Requires a physical change to the workplace

Administrative Controls Including Work Practices

Requires Worker or Employer to do Something

Personal Protective Equipment Requires Worker to Wear Something

EXPOSURES

- Acute Effects short time interval after exposure
- Chronic Effects Long period after exposure

	Acute	Chronic
Substance	Effects	Effects
	Narcois,	
Benzene	irritation	Cancer
Carbon		Heart
monoxide	Headache	damage
Formaldehyde	Irritation	Cancer
		Brain
Tolune	Narcosis	damage



AIR CONTAMINANTS



AIR CONTAMINANTS EXAMPLES

- Dust Silica, Metals, PNOC
- Fume Metals Melting or Welding
- Mist Acids, Water Solutions
- Fibers Asbestos, Glass Fibers, Cellulose
- Gases Carbon Monoxide, Ammonia
- Vapors Gasoline, Solvents



MEASURES OF CONCENTRATION

- PPM Parts per Million Parts of Air
- Mg/m³ Milligrams per cubic meter of air
- $\mu g/m^3$ Micrograms per cubic meter of air
- f/cc Fibers per cubic centimeter of air
- mppcf millions of particles per cubic foot of air Former silica standard – obsolete



OSHA EXPOSURE LIMITS

- Occupational Safety and Health Administration
- PEL Permissible Exposure Limit
- AL-Action Level
- Legally Enforceable



NIOSH

- National Institute for Occupational Safety and Health
- REL Recommended Exposure Limit
- Possibly Legally Enforceable Under 5(a)(1)



ACGIH

- American Conference of Governmental Hygienists
- TLV Threshold Limit Value
- Possibly Legally Enforceable Under 5(a)(1)



TIME OF EXPOSURE

- TWA 8 Hour, Time Weighted Average
- STEL Short Term Exposure Limit- 15 minutes
- Ceiling Maximum Exposure –Never Exceeded



OSHA PELS 29 CFR 1910.1000

- <u>29 CFR 1910 Table Z-1</u>
- <u>29 CFR 1910.1000 Table Z-2</u>
- <u>29 CFR 1910.1000 Z-3</u>



OSHA Z-1 TABLE -EXAMPLES

Substance	PPM	Mg/m ³
Acetone	1000	2400
Respirable fraction [dust]		5
Ammonia	50	35
Carbon Monoxide	50	55
Copper Fume		0.1
2-Butanone (MEK)	200	590
Stoddard Solvent	500	2900
Sulfuric Acid		1

Lorain County Community College

EXPANDED HEALTH STANDARDS Lead as an Example



EXPANDED HEALTH STANDARDS

- .1001 Asbestos
- .1025 Lead
- .1026 Chromium VI
- .1027 Cadmium
- .1048 Formaldehyde
- .1052 Methylene chloride

- .1053 Respirable crystalline silica
- See handout for complete list



EXPANDED STANDARDS I.E. LEAD

- Scope
- Definitions
- Exposure Limits
- Monitoring
- Methods of Compliance
 - Work Practices
 - Engineering Controls
- Respirators

- Clothing & Equipment
- Housekeeping
- Hygiene Facility, Practices
- Medical Surveillance
- Medical Removal
- Training
- Communication of Hazard
- Recordkeeping
- Observation of Samples



.1025(a) SCOPE AND APPLICATION

- Applies to all occupational exposure
- Does not apply to agriculture and construction



.1025(b) DEFINITIONS

- Action level 30 $\mu g/m^3$ (micrograms per cubic meter of air)
- Lead includes metallic lead, inorganic lead compounds



.1025(b) PEL

- 50 μ g/m³ 8-Hour TWA
- Calculation for longer exposure



CALCULATION FOR SHIFTS > 8 HOURS

8 hour PEL is 50 μ g/m³

Examples

Calculate PEL formula:

PEL = 400 / hours

10 hour shift: 40 μ g/m³

12 hour shift: 33 μ g/m³



RESPIRATORS SUPPLEMENTING ENGINEERING CONTROLS

- Must meet all requirements for respirator use
- Allows accounting for compliance with PEL by use of respirator protection factors
 - Must meet all respirator requirements



.1025(d) EXPOSURE MONITORING

- Minimum 7 hour sample
- Initial monitoring representative number
- When monitoring shows >AL all monitored
- Changes made repeat monitoring
- >AL repeat 6 months
- >PEL repeat 3 months
- Notify employees



AIR MONITORING

- <u>OSHA Technical</u> <u>Manual</u>
- <u>Introduction to air</u> <u>sampling</u>
- <u>Introduction to air</u> <u>sampling media</u>





.1025(e) METHODS OF COMPLIANCE

- Above the PEL for more than 30 days/year
 - Engineering controls required
- Above the PEL for less than 30 days per year
 - Controls to reduce to 200 μg/m³ required

- Respiratory protection where controls not sufficient
- Requirements for compliance program, ventilation maintenance and administrative controls



.1025(f) RESPIRATORY PROTECTION

- When respirators are required
- Comply with 29 CFR 1910.134 with exceptions
- Respirator selection







images: OSHA



.1025(f) MUST COMPLY WITH 1910.134

1910.134(b) through (d) and (f) through (m)Except (d)(1)(iii)



.1025(g) PROTECTIVE WORK CLOTHING AND EQUIPMENT

- Provided at no cost
- Intervals for cleaning or replacement
- Handling soiled clothing
- Prohibition on shaking or air pressure



.1025(h) HOUSEKEEPING

- Surfaces as clean as possible
- Cleaning prohibitions: air pressure, shoveling
- Vacuums prevent reentry of dust into work area



.1025(i) HYGIENE FACILITIES AND PRACTICES

- Eating and drinking
- Change rooms
- Showers
- Lunchrooms





.1025(j) MEDICAL SURVEILLANCE

- Provide for employees above AL 30 days/year
- Blood lead monitoring
- Medical examinations
- Examination content
- Multiple physician review
- Chelation prohibition



.1025(k) MEDICAL REMOVAL PROTECTION

- Employees with High blood lead levels
 - Temporary or final determination
 - No loss of pay or benefits



.1025(1) EMPLOYEE INFORMATION AND TRAINING

- Training program
- Training content
- Access to training materials



.1025(m) COMMUNICATION OF HAZARDS

- Hazard communication
- Signs







.1025(n) RECORDKEEPING

- Exposure monitoring
- Medical Surveillance
- Medical removals
- Availability
- Transfer of records



.1025(o) OBSERVATION OF MONITORING; APPENDICES

Employees able to see monitoring

Appendix A: Substance Data SheetAppendix B: Summary of StandardAppendix C: Medical Surveillance Guidelines



1010.134 SECTIONS

- a) Permissible Practice
- b) Definitions
- c) Respiratory Program
- d) Selection of Respirators
- e) Medical Evaluation
- f) Fit Testing
- g) Use of respirators

- h) Maintenance and Care
- i) Breathing Air
- j) Identification of Cartridges
- k) Training and information
- 1) Program evaluation
- m) Recordkeeping
- n) Effective Date



RESPIRATORY PROTECTION

OSHA Respirator Video



ASBESTOS & SILICA

- See Asbestos PPT
- See Silica PPT





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