

UCOR BLUE SHEET COVER PAGE


Blue Sheet Review

ID Number:	BS-0095			
UCOR Level 1 Mgr:	Clint Wolfley			
Topical Area or Facility Name:	Industrial Hygiene			
Blue Sheet Classification:	<input checked="" type="checkbox"/>	Status 1: Document(s) adopted as is		
	<input type="checkbox"/>	Status 2: Document(s) adopted with minor changes		
	<input type="checkbox"/>	Status 3: Document(s) not adopted; major changes required		
	<input type="checkbox"/>	Status 4: Document(s) superseded	Superseding Doc #:	
	<input type="checkbox"/>	Status 5: Document(s) retired		
Needed Updates/Revisions	See the latest revision of Management Directive DIR-UCOR-600 for a crosswalk of non-intent terminology changes (e.g., company name and logo, organization titles)			

Unreviewed Safety Question (USQ) (if applicable)

USQ Review	<input checked="" type="checkbox"/>	Excluded	Reason for Exclusion:	Non-intent changes do not require USQ screening
	<input type="checkbox"/>	Required	Screening #:	

Approvals

Blue Sheet Reviewer:	ROBERT DEVOL (Affiliate)	Digitally signed by ROBERT DEVOL (Affiliate) Date: 2022.03.28 10:34:34 -04'00'
	Robert J. Devol /	Date
Level 1 Manager:	Clint Wolfley / 	3/30/22
	Print / Sign	Date

Documents covered by this Blue Sheet (or indicate attachment with information)

Document #:	Document Title	Rev
POL-UCOR-041	URS CH2M Oak Ridge LLC Provided Prescription Safety Glasses and Safety Footwear	6
PPD-IH-3345	Chemical Safety Management Program	9
PPD-IH-5101	Reproductive Health Protection	3
PPD-IH-5133	Ergonomics Program	8
PPD-IH-5140	Hazard Communication	5
PPD-IH-5151	Respiratory Protection Program	10
Continued on Next Page		

Documents covered by this Blue Sheet (or indicate attachment with information)		
Document #:	Document Title	Rev
PPD-IH-5205	Airborne Silica Hazard Assessment and Control	4
PPD-IH-5418	Industrial Hygiene Program	8
PROC-EH-1012	Development and Approval of Safety and Health Plans	3
PROC-IH-5110	Biological Monitoring for Industrial Chemicals	3
PROC-IH-5121	Occupational Noise Exposure and Hearing Conservation	7
PROC-IH-5122	Safe Use of Lasers	0
PROC-IH-5134	Temperature Extremes	11
PROC-IH-5135	Bloodborne Pathogens	3
PROC-IH-5138	Confined Space Entry	10
PROC-IH-5161	Hazardous Waste Operations and Emergency Response	7
PROC-IH-5162	UCOR Spill or Release Response Process	0
PROC-IH-5172	Indoor Air Quality	4
PROC-IH-5177	Asbestos and Other Fibrous Materials	6
PROC-IH-5181	Hazardous Materials Information System	3
PROC-IH-5201	Airborne Asbestos Sampling	7
PROC-IH-5203	Bulk Sampling of Material Suspected of Containing Asbestos	6
PROC-IH-5204	Clearance Criteria for Asbestos Abatement	4
PROC-IH-5206	Generation and Use of Industrial Hygiene Work Permits	3
PROC-IH-5416	Industrial Ventilation-Laboratory Hoods	3
PROC-IH-5558	Industrial Hygiene Equipment Control and Calibration	7
PROC-IH-5560	Workplace Industrial Hygiene Sampling	12
PROC-IH-5567	Respirator Fit-Testing	5

OWNER: Chief of Staff	DIR-UCOR-600	REVISION: 0
SUBJECT MATTER AREA: Contract Transition	PREPARER: Samantha Dolynchuk	Page 1 of 3
DIRECTIVE	CONCURRENCE/DATE: LINDA RAULSTON (Affiliate)	Digitally signed by LINDA RAULSTON (Affiliate) Date: 2022.05.11 09:19:37 -04'00'
TITLE: TRANSITION OF UCOR PERFORMANCE DOCUMENTS	APPROVED BY/DATE: SAMANTHA DOLYNCHUK (Affiliate)	Digitally signed by SAMANTHA DOLYNCHUK (Affiliate) Date: 2022.05.10 09:08:12 -04'00'
USQD <input checked="" type="checkbox"/> UCD <input type="checkbox"/> CAT X <input type="checkbox"/> EXEMPT <input type="checkbox"/>	EFFECTIVE DATE:	5/23/22
USQD/UCD/CAT X No: USQD-MS-DIRUCOR600-1807	REQUIRED REVIEW DATE:	5/23/25

PURPOSE

This directive formalizes the adoption of UCOR LLC, an Amentum-led partnership with Jacobs, performance documents by United Cleanup Oak Ridge LLC (UCOR). It also serves as an authorizing change mechanism for documents that require administrative, non-intent changes to reflect the new contractual relationship between new UCOR and the U.S. Department of Energy Oak Ridge Office of Environmental Management (DOE OREM) eliminating the need for individual change records for each document. The following statement will be added to the Performance Document Database ([Forms and Procedures \(ettip.gov\)](http://formsandprocedures.ettip.gov)) to notify document users that performance documents have been blue sheeted and accepted:

All performance documents have been accepted per Management Directive
DIR-UCOR-600.

The Blue Sheeting process, including this Management Directive, will be briefed at key meetings including the President’s Accident Prevention Council (PAPC), Executive Plan of the Week, Chief Operating Officer’s Morning Operations Calls, and an Expanded Staff Meeting that will be held on May 11, 2022. This Management Directive will be flowed down to the entire UCOR workforce during the Safety Start that will be held on May 23, 2022. Additionally, this Management Directive will be assigned as required reading for the entire UCOR workforce.

SCOPE

This directive applies to all performance documents controlled by the UCOR Performance Documents Group. This directive also applies to the UCOR nuclear facilities’ safety basis documents controlled by Nuclear and Criticality Safety, Security documents controlled by Security and Emergency Services, and any UCOR-numbered documents that were submitted as Transition Deliverables.

DIRECTIVE

This directive is effective at the start of Task Order 2, Contract Implementation. Existing documents will be updated to reflect the elements herein within one year of the start of Task Order 1 Transition (February 28, 2023). Procedures and documents are to be considered suitable and useable for the safe accomplishment of assigned work until that time.

While the technical content of a performance document remains accurate, references within a given document may not immediately match newly assigned UCOR titles, UCOR logo’s, company names, or other contractually-

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related information. This directive provides direction for using incumbent UCOR terminology compared to new UCOR terminology in order to allow employees to achieve verbatim compliance without work stoppage.

INTERPRETATIONS

The crosswalk in Attachment A lists the previous UCOR organization structure with the new UCOR organizational equivalent. Document users encountering an incumbent UCOR organization name shall interpret it as if the organizational names in Attachment A have been updated in the document.

Some performance documents refer to forms that contain UCOR LLC, an Amentum-led partnership with Jacobs, or URS | CH2M Oak Ridge LLC. These forms are acceptable for continued use until changes can be made by the form owners, and incumbent UCOR references shall be interpreted as if they refer to United Cleanup Oak Ridge LLC or UCOR.

Some performance documents may refer to other performance documents by number and title. Some of these references may be affected by the contract transition or a previous organizational restructuring. These cases shall be interpreted by their current number and title.

CHANGE PROCESS

Performance documents requiring administrative changes only (i.e., those identified in Interpretations) will be processed under a blanket administrative change and authorized by this directive as change authorization.

Changes to documents other than the administrative changes listed in Attachment A will be performed in accordance with *Performance Document Process* (PROC-OS-1107).

Changes to safety basis documents controlled by Nuclear and Criticality Safety will be changed in accordance with *Safety Documentation for Hazard Category 2 & 3 Nuclear Facilities* (PROC-NS-1002) and *Safety Documentation for Less than Hazard Category 3 Nuclear and Non-Nuclear Facilities* (PROC-NS-1009).

POINTS OF CONTACT

Contact the appropriate functional or line manager for guidance related to the content of a procedure or document or the information on Attachment A. For questions related specifically to the performance document process, contact the Information, Technical Editing & Records Manager.

REVISION LOG			
Revision	Effective Date	Description of Changes	Pages Affected
0	5/23/22	Initial release.	All

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Attachment A
Crosswalk of Organizational Terminology for UCOR Transition

UCOR TRANSITION REPLACEMENT TERMINOLOGY TABLE	
UCOR (current) Organization Terminology	New UCOR Organization Terminology
UCOR an Amentum-led partnership with Jacobs	United Cleanup Oak Ridge LLC
URS CH2M Oak Ridge LLC	United Cleanup Oak Ridge LLC
East TN Technology Park (ETTP) contract	Oak Ridge Reservation Cleanup contract (ORRCC)
Contract number: DE-SC-0004645	Contract number: 89303322DEM000067
Oak Ridge Reservation (ORR) Environmental Cleanup	ORRCC Site Integration & Cleanup
President and Project Manager	President and Chief Executive Officer (CEO)
Environmental Services	Environmental Services & Regulatory Management
Heritage Center Enterprise	Heritage Center Area Project
Field Characterization	Characterization Services
D&D Waste Integration	Waste Integration
Waste Management Enterprise	Waste Disposition
Nuclear Operations	ORNL Waste Operations
Waste Disposition and TRU Operations	ORNL TRU Operations
Shipping and Receiving	Shipping & Receiving/Logistics
Technical Services	Technical, Engineering, & Nuclear Safety
Nuclear Services	Technical Programs
Nuclear Safety	Nuclear and Criticality Safety
Mercury Projects	Mercury Projects & Technology Development
End State & Federal Land Reuse	Chief Program & Sustainability Office
Reindustrialization and Closure	Beneficial Reuse and End State Management
Diversity & Workforce Development Program	Equity, Environmental & Regulatory Programs
Project Services and Support	Project Integration & Business Services
Project Integration	Project Integration & Business Services
Project Mgmt and Integration Services	Enterprise Project Management



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PERFORMANCE DOCUMENT COVER PAGE

NOTE: If the following document is printed, this cover page must be attached to the front and the required information filled in below.

Date Printed: _____

Dates Rev. No. Checked:

Document Number: _____

Revision Number: _____

Title: _____

Person Checking Revision Number: _____

The attached document was printed from the online Performance Document System. The user must check that the hard copy revision number matches the revision number of the controlled document in the online Performance Document System. For future use, confirm the revision number's accuracy online and record dates that the revision number was checked.

Section Below Completed by the Performance Document Group Only

Document Type: Administrative Technical Emergency
 Standard Practice Alarm Response

Required Review Date: _____ Date Required Review Completed: _____

Document Status: Maintain As Is Revise Delete

If "Maintain As Is," Next Required Review Date: _____

If "Revise" or "Delete," Due Date: _____



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OWNER: Industrial Hygiene	PPD-IH-5205	REVISION: 4
SUBJECT MATTER AREA: Respirable Silica	PREPARER: Robert J. Devol	Page 1 of 22
PROCESS/PROGRAM DESCRIPTION	CONCURRENCE/DATE: A. J. Reed 12/15/21 [Approval Signature on File]	
TITLE: AIRBORNE SILICA HAZARD ASSESSMENT AND CONTROL	APPROVED BY/DATE: Graham Theobald for Stephanie Miller 12/14/21 [Approval Email/Signature on File]	
USQD <input checked="" type="checkbox"/> UCD <input type="checkbox"/> CAT X <input type="checkbox"/> EXEMPT <input type="checkbox"/>	EFFECTIVE DATE: 1/10/22	
USQD/UCD/CAT X No: PSW-MS-PPDIH5205-1968	REQUIRED REVIEW DATE: 1/10/25	
Exhibit L Mandatory Contractor Document: No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>	If an Interim Procedure, Expiration Date:	

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This document is approved for public release per review by:

David Lannom 11/30/21

UCOR Classification and Information Control Office Date

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REVISION LOG			
Revision	Effective Date	Description of Changes	Pages Affected
4	1/10/22	Intent change. Revised to clarify use of terms “Exposure Control Plan” verses “Compliance Plan”. Clarify when a “Control Plan” is required. Replaced Section B, Industrial Hygienist, with Section B, Silica Exposure Control Plan. Added a definition for a “Silica Exposure Control Plan” (CAMS Issue IF-2022-0004). Deleted company tagline “an Amentum-led partnership with Jacobs”.	4, 13
3	4/19/21	Intent change. Clarified that exposure levels are measured as 8-hour TWAs. Clarified silica medical surveillance requirements.	All
2	11/22/18	Intent change. Complete rewrite due to significant changes in silica regulations.	All
1	1/22/18	Intent change. Incorporate initial experience with implementation. Correct nonconservative medical surveillance trigger, CAMS item IF-2018-0044.	3-5, 8-12, 14-17
0	9/25/17	Initial Release. Flow-down of industrial hygiene program requirements from recently promulgated OSHA regulations 29 CFR 1910.1053 and 29 CFR 1926.1153.	All

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PURPOSE This Process/Program Description (PPD) communicates work requirements for identification and control of respirable crystalline silica as required by 29 Code of Federal Regulations (CFR) 1926.1153, Respirable Crystalline Silica, 10 CFR 851, Worker Protection Program, PPD-EH-1745, *Worker Safety and Health Program*, PPD-EH-1400, *Integrated Safety Management System*, and applicable UCOR LLC contract commitments.

SCOPE This PPD applies to UCOR self-performed work as well as UCOR subcontractor operations when nature of required work involves potential for workers to be exposed to airborne respirable crystalline silica at or above American Conference of Governmental Industrial Hygienists (ACGIH) Threshold Limit Value (TLV) and Occupational Health and Safety Administration (OSHA) Regulatory Action Level of 8-hour Time-Weighted-Average (TWA) of 25 micrograms per cubic meter of air ($\mu\text{g}/\text{m}^3$) under any foreseeable conditions.

This PPD applies to occupational sources of silica. It should be noted that in addition to common activities potentially involving silica such as drilling, chipping, building demolition, etc. it applies to sorptive clays involved with construction activities, such as bentonite, that are incorporated in groundwater well stabilization and construction of disposal site liner/cap design.

This PPD does **NOT** apply to other Prime Contractor work performed in UCOR facilities, nor does this PPD apply to exposures resulting from processing of sorptive clays, e.g., addition of adsorbents incorporating silica-bearing clays to limit free liquid content of waste containers. Subcontractors shall contact their responsible Subcontract Coordinator (SCC)/Subcontract Technical Representative (STR) for assistance in understanding and complying with this procedure.

EXPECTATIONS AND STRATEGY Provide requirements for safely working with respirable crystalline silica at UCOR locations.

OTHER DOCUMENTS NEEDED

- 29 CFR 1926.33, Access to Employee Medical Records
- 29 CFR 1926.57, Ventilation
- 29 CFR 1926.1153, Respirable Crystalline Silica
- PPD-IH-5151, *Respiratory Protection Program*
- PPD-IH-5418, *Industrial Hygiene Program*
- PROC-IH-5560, *Workplace Industrial Hygiene Sampling*
- Form-288, Medical Surveillance and Qualification Programs
- Form-1027, Job Hazard Analysis
- Form-2972, Competent Person Designation Form
- Form-3061, Industrial Hygiene Work Permit
- ACGIH, *TLVs for Chemical Substances and Physical Agents & Biological Exposure Indices (BEIs)*
- LEARN Module 31835, Silica Hazard Awareness
- LEARN Module 31836, Silica Competent Person Designation

ROLES AND RESPONSIBILITIES

A. Silica Competent Person

Silica Competent Person's Manager/ Supervisor

1. Designate Silica Competent Person on Form-2972, Competent Person Designation Form (LEARN Module 31836, Silica Competent Person Designation).
2. Silica Competent Person Qualification Requirements:
 - a. Capable of identifying existing and foreseeable respirable crystalline silica hazards in workplace and has authorization to take prompt corrective measures to eliminate or minimize identified hazards.
 - b. Possess knowledge and ability necessary to evaluate implementation of Silica Exposure Control Plan.

Competent Person

3. Perform frequent and regular inspections of job sites, materials, and equipment to verify implementation of Silica Exposure Control Plan.

B. Silica Exposure Control Plan

NOTE: The term "Exposure Control Plan" is synonymous with "Compliance Plan" as used by OSHA in standards for cadmium, inorganic arsenic, and lead. The term Exposure Control Plan is used throughout this document to better align with the language used in the OSHA Silica Standard.

Industrial Hygienist

1. A Silica Exposure Control Plan is required whenever expected or actual personal exposures are at or above 25 µg/m³ as an 8-hour TWA.
2. Develop a Silica Exposure Control Plan when needed. A Silica Exposure Control Plan must contain the following information as a minimum:
 - a. A description of tasks that involve exposure to respirable crystalline silica;
 - b. A description of engineering controls, work practices, and respiratory protection used to limit exposure to respirable crystalline silica for each task; and
 - c. A description of housekeeping procedures used to limit employee exposure to respirable crystalline silica.
3. An Industrial Hygiene Work Permit (IHWP) may meet the content requirements of and serve as an exposure control plan.
4. Review and evaluate effectiveness of Silica Exposure Control Plan at least annually and update as necessary.

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C. Exposure Limits

1. ACGIH:

- a. TLV: 8-hour TWA of 25 micrograms per cubic meter ($\mu\text{g}/\text{m}^3$) respirable (r)
- b. Transient peak: 75 $\mu\text{g}/\text{m}^3$ (r)
- c. Short Term Exposure Limit (STEL)/Peak Max: 125 $\mu\text{g}/\text{m}^3$ (r)

2. OSHA:

- a. Permissible Exposure Limit (PEL): 8-hour TWA of 50 $\mu\text{g}/\text{m}^3$ (r) without regard to respiratory protection
- b. Regulatory Action Level (RAL): 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (r) without regard to respiratory protection

3. National Institute for Occupational Safety and Health (NIOSH):

- a. Immediately Dangerous to Life and Health (IDLH): 250 $\mu\text{g}/\text{m}^3$ (cristobalite, tridymite); 500 $\mu\text{g}/\text{m}^3$ (quartz, tripoli)

D. Training

Training Department

- 1. Address health hazards of respirable crystalline silica in hazard communications training including:
 - a. Kidney effects,
 - b. Cancer,
 - c. Lung effects,
 - d. Immune system effects (i.e., association with lung infections such as Tuberculosis).

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- Silica Worker / Silica Competent Person / Workers with potential exposure at or above 8-hour TWA of 25 µg/m³ (OSHA RAL)
2. Complete LEARN Module 31835, Silica Hazard Awareness, covering:
 - a. Respirable crystalline silica health hazards,
 - b. Work tasks potentially resulting in exposure to respirable crystalline silica,
 - c. Measures to protect workers from exposure to respirable crystalline silica including:
 - i. Engineering controls,
 - ii. Administrative controls,
 - iii. Respirators to be used.
 - d. Identity of Silica Competent Persons.
 - e. Purpose and description of medical surveillance program for Silica Workers.
- Silica Competent Person
3. Have a designation letter on file, Form-2972, with Training Department (LEARN Module 31836).
- E. Medical Surveillance**
- Worker Supervisor and Industrial Hygienist
1. Enroll Silica Workers in Medical Surveillance on UCOR Form-288, Medical Surveillance and Qualification Programs, or subcontractor equivalent within 30 days after initial assignment where respirators will be required for protection against silica for 30 or more days per year or when exposure will be at or above 8-hour TWA of 25 µg/m³ 30 or more days per year.
- NOTE:** Wearing a respirator for protection against silica at any time during a shift constitutes one day.
- Worker Supervisor
2. Make initial (baseline) medical exam specific to requirements of this procedure available at no cost to worker within 30 days after initial assignment where respirators will be required for 30 or more days per year.
 - a. Silica medical exam in previous three years is acceptable in place of baseline exam.
 3. Make medical exam specific to requirements of this procedure available at no cost to workers upon:
 - a. Upon receipt of Industrial Hygiene (IH) sample results showing unprotected exposure to silica in exceedance of 8-hour TWA of 25 µg/m³ (TLV).
 - b. Notification by employee of potentially work related signs, symptoms, or illness associated with exposure to silica.

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|--|---|
| Worker Supervisor and Industrial Hygienist | <p>4. Ensure Physician or other Licensed Health Care Professional (PLHCP) has a copy of 29 CFR 1926.1153, Respirable Crystalline Silica.</p> <p>5. Provide PLHCP with:</p> <ul style="list-style-type: none"> a. Description of employee's former, current, and anticipated duties related to respirable crystalline silica exposure. b. Former, current, and anticipated levels of occupational exposure to respirable crystalline silica. c. Description of personal protective equipment (PPE) used or to be used by employee, including when and for how long employee used or will use PPE. d. Information from records of employment-related medical examinations previously provided to employee and currently within control of employer. |
| Physician/PLHCP | <p>6. Perform medical exam in accordance with 29 CFR 1926.1153, Respirable Crystalline Silica. See Attachment B, Medical Requirements.</p> <p>7. Re-examine Silica Workers a minimum of every three years, or more frequently per PLHCP recommendation.</p> |
| Worker Supervisor | <p>8. Obtain written medical opinion from PLHCP meeting 29 CFR 1926.1153, Respirable Crystalline Silica, requirements within 30 days of medical exam. See Attachment B, Medical Requirements.</p> <p>9. Ensure employee receives a copy of written medical opinion from PLHCP meeting 29 CFR 1926.1153, Respirable Crystalline Silica, requirements from PLHCP within 30 days of medical exam. See Attachment B, Medical Requirements.</p> <p>10. If PLHCP's written medical opinion indicates additional exam by specialist, then employer make medical exam by specialist available within 30 days after receiving PLHCP's written opinion.</p> <p>11. Provide specialist with information 29 CFR 1926.1153, Respirable Crystalline Silica requirements. See Attachment B, Medical Requirements.</p> <p>12. Ensure specialist explains results of medical exam to employee and provides employee and employer with written medical report within 30 days of exam. See Attachment B, Medical Requirements.</p> |

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F. Exposure Assessment and Sampling

Industrial Hygienist

1. Assess exposure of each employee who is or may reasonably be expected to be exposed at or above 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (OSHA RAL), without regard to respiratory protection, using:

- a. Air sampling data.

AND/OR

- b. Objective data sufficient to accurately characterize employee exposure. Objective data must include:

- i. Crystalline silica content of subject material.
- ii. Source of objective data.
- iii. Testing protocol and analytical results.
- iv. Description of process, task, or activity in sufficient detail to demonstrate data reflects comparable scope.
- v. Other data relevant to process, task, activity, material, or exposure on which objective data was based.

2. Perform air sampling:

- a. Per PROC-IH-5560, *Workplace Industrial Hygiene Sampling*.
- b. Per NIOSH Method 7500, Crystalline Silica by XRD.

3. Initial exposure assessment.

- a. Assess exposure for each employee on the basis of one or more personal samples that reflect exposures of employees on each shift, each job classification, and each work area involving respirable crystalline silica.
- b. Where several employees perform the same tasks on the same shift and in the same work area, Project Industrial Hygienist (PIH) may opt to only collect samples representative of worst case scenario exposure.
- c. Samples below 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (OSHA RAL) should be considered for Negative Exposure Assessment (See PPD-IH-5418, *Industrial Hygiene Program*).
- d. **IF** samples are greater than or equal to 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (OSHA RAL) **AND** work is ongoing, **THEN** repeat sampling within three months or more frequently per direction of PIH.

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- Industrial Hygienist
4. Ongoing Exposure Assessment.
 - a. **IF** most recent samples are less than 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (OSHA RAL), **AND** work is ongoing, **THEN** repeat sampling within six months until two consecutive measurements, taken seven or more days apart, are less than 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (OSHA RAL)
 - b. Reassess exposure when:
 - i. A change in production, process, control equipment, or work practices is reasonably expected to result in new or additional exposure at or above 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (OSHA RAL).
 - ii. There is reason to believe new or additional exposures at or above 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (OSHA RAL) have occurred.
 - iii. Improvements in production, process, control equipment, or work practices reduce exposure to below 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (OSHA RAL).

G. Sample Analysis and Employee Notification

- Industrial Hygienist
1. Analyze samples per NIOSH 7500.
 2. Employee Notification.
 - a. Provide written employee notification or post sample results in accessible location within 5 days of completion of assessment and per PROC-IH-5560.
 - b. Include corrective action to reduce employee exposure below 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (OSHA RAL).

H. Implementation of Control Measures

- Silica Competent Person/Work Supervisor
1. Implement controls per:
 - a. PPD-IH-5418, *Industrial Hygiene Program*.
 - b. PPD-IH-5151, *Respiratory Protection Program*.
 - c. Job Hazard Analysis (Form-1027).
 - d. Industrial Hygiene Work Permit (Form-3061).
 2. Implement Engineering and Work Practice Controls to reduce and maintain employee exposure below 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (TLV). See Section I, Required Controls, and Attachment C, Recommended Controls.
 3. **IF** Engineering and Work Practice Controls are insufficient to reduce exposure to or below 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (TLV), **THEN** continue use to reduce exposure to lowest feasible level and, if necessary, supplement with respiratory protection.

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I. Required Controls

1. Implementation required for exposures greater than or equal to 8-hour TWA of 25 $\mu\text{g}/\text{m}^3$ (OSHA RAL).
 - a. High-Efficiency Particulate Air (HEPA) filtered vacuuming or wet methods for cleanup.
 - b. Silica Exposure Control Plan:
 - i. An IHWP that contains these elements can serve as Silica Exposure Control Plan.
 - ii. Reviewed and updated annually by PIH.
 - iii. Includes at a minimum:
 - Description of tasks in workplace that involve exposure to respirable crystalline silica.
 - Required engineering controls, work practices, respiratory protection, and PPE used to limit employee exposure to respirable crystalline silica for each task.
 - Required housekeeping measures used to limit employee exposure to respirable crystalline silica.
 - Requirements for posting restricted access to work areas, when necessary, to minimize number of employees exposed to respirable crystalline silica and their level of exposure.

J. Prohibited Activities

Workers

1. Abrasive blasting with crystalline silica containing blasting agents, and abrasive blasting on substrates containing crystalline silica where other methods exist. Exemptions to this prohibition must be approved by IH Program Manager. If exemptions are approved, controls are required in accordance with 29 CFR 1926.57, Ventilation.
2. Dry sweeping or brushing crystalline silica-containing materials.
3. Use of compressed air for movement of potential crystalline silica-containing materials unless used in conjunction with a ventilation system that effectively captures dust created by compressed air.

K. Implementation Verification

Silica Competent Person

1. Perform frequent and regular inspection of job sites, material/debris, housekeeping, and equipment to verify implementation and compliance with Silica Exposure Control Plan requirements.

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L. Record Keeping

- | | |
|----------------------|--|
| Physician/PLHCP | <ol style="list-style-type: none"> 1. Maintain the following records per 29 CFR 1926.33, Access to Employee Exposure and Medical Records. <ol style="list-style-type: none"> a. Medical records. <ol style="list-style-type: none"> i. Medical surveillance data for each employee covered by medical surveillance including: <ul style="list-style-type: none"> • Name and social security number. • Copy of written medical opinions by PLHCP and specialist. |
| Industrial Hygienist | <ol style="list-style-type: none"> b. Information provided to PLHCPs and specialists. c. Air monitoring data including: <ol style="list-style-type: none"> i. Date of measurement for each sample taken. ii. Task monitored. iii. Sampling and analytical methods used. iv. Number, duration, and results of samples taken. v. Identity of laboratory that performed analysis. vi. Type of PPE worn by employees monitored. vii. Name, social security number, and job classification of all employees represented by monitoring. d. Objective data used to characterize employee exposure. |
| Training | <ol style="list-style-type: none"> 2. Maintain Silica Competent Person designation information (Form-2972). |

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Attachment A
Definitions/Acronyms
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ACGIH – American Conference of Governmental Industrial Hygienists

CFR – Code of Federal Regulations

Exposure – The exposure to airborne respirable crystalline silica that would occur if a worker was not using respiratory protection.

HEPA (High-Efficiency Particulate Air) filter – A filter that is at least 99.97% efficient in removing mono-dispersed particles of 0.3 micrometers (μm) in diameter.

IH – Industrial Hygiene

IHWP – Industrial Hygiene Work Permit

ISO – International Organization for Standardization

LEARN – Local Education Administrative Requirements Network

MERV (Minimum Efficiency Reporting Value) – A consensus standard that rates the overall effectiveness of air filters. A higher MERV rating equates to finer filtration/greater retention. MERV range is from 1-to-16.

NIOSH – National Institute for Occupational Safety and Health

Objective Data – Information, such as air monitoring data from industry-wide surveys or calculations based on the composition of a substance, demonstrating worker exposure to respirable crystalline silica associated with a particular product or material, or a specific process, task, or activity. The data must reflect workplace conditions closely resembling or having a higher exposure potential than the processes, types of material, control methods, work practices, and environmental conditions in current operations.

Occupational Exposure Limit (OEL) – A general term referring to the maximum allowable airborne concentration of a hazard to which an individual can be occupationally exposed without defining the promulgating organization (OSHA, ACGIH, NIOSH, etc.).

OSHA – Occupational Safety and Health Administration

OSHA Regulatory Action Level (RAL) – A concentration of airborne respirable crystalline silica of 8-hour TWA of $25 \mu\text{g}/\text{m}^3$, without regard to respiratory protection, calculated as an 8-hour TWA.

PPD – process/program description

Peak Max – Default short-term exposure limits (STEL) that apply to TLV-TWAs which do not have a TLV-STEL. Peak exposure is a 15-minute STEL, represented by 5 times the TLV-TWA value, should not be exceeded at any time during a workday.

Permissible Exposure Limit (PEL) – The OSHA-established allowable concentration in air of a substance to which nearly all workers may be repeatedly exposed 8 hours a day, 40 hours a week, for a 30-year working lifetime without experiencing adverse health effects. 29 CFR 1926.1153 establish the PEL for respirable crystalline silica as $50 \mu\text{g}/\text{m}^3$, without regard to respiratory protection, as an 8-hour TWA.

Physician or licensed health care professional (PLHCP) – An individual whose legally permitted scope of practice (i.e., license, registration, or certification) allows him or her to independently provide or be delegated the responsibility to provide some or all of the particular health care services required by this PPD.

PPE – personal protective equipment

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Project Industrial Hygienist (PIH) – A professional qualified by education, training, and experience to anticipate, recognize, evaluate, and develop controls for occupational health hazards. This individual is either certified in the practice of industrial hygiene (IH) by the American Board of Industrial Hygiene (ABIH) or is current in all requirements of the UCOR Training Position Description (TPD) entitled “Project Industrial Hygienist.”

Respirable Crystalline Silica – Quartz, cristobalite, and/or tridymite contained in airborne particles that are determined to be respirable by a sampling device designed to meet the characteristics for respirable-particle-size-selective samplers specified in ISO 7708:1995: Air Quality-Particle Size Fraction Definitions for Health-Related Sampling.

Short-Term Exposure Limit (STEL) – A 15-minute TWA exposure that should not be exceeded at any time during a workday, even if the 8-hour TWA is within the TLV-TWA.

Silica Competent Person – An individual who is capable of identifying existing and foreseeable respirable crystalline silica hazards in the workplace and who has authorization to take prompt corrective measures to eliminate or minimize them, and possesses the knowledge and ability necessary to evaluate implementation of a Silica Exposure Control Plan.

Silica Exposure Control Plan – Provides a systematic approach for ensuring proper function of engineering controls and effective work practices that can prevent overexposures from occurring. OSHA expects a written exposure control plan will be instrumental in ensuring that employers comprehensively and consistently protect their employees. An Exposure Control Plan is roughly synonymous to an OSHA Compliance Plan.

Silica Worker – Workers required to wear respiratory protection for potential exposure to respirable crystalline silica for 30 or more days per year.

Specialist – An American Board Certified Specialist in Pulmonary Disease or an American Board Certified Specialist in Occupational Medicine.

Threshold Limit Value (TLV) – The occupational exposure limits promulgated by the ACGIH. The TLV is the airborne concentration under which it is believed that nearly all workers may be repeatedly exposed, day after day, over a working lifetime, without adverse health effects. In accordance with 10 CFR 851, UCOR is contractually obligated to comply with ACGIH TLVs. The TLV for Respirable Crystalline Silica is 8-hour TWA of 25 µg/m³.

Transient Peak – Default short-term exposure limits (STEL) that apply to TLV-TWAs which do not have a TLV-STEL. Transient increases in workers’ exposure levels may exceed 3 times the TLV-TWA level for no more than 15 minutes at a time, on no more than 4 occasions spaced 1 hour apart during a workday.

TWA – time-weighted-average

Worker – Term used to identify sections of the program description that apply to individuals who perform work solely under UCOR’s direction such as staff augmentation subcontractors, contractually designated subcontractors, and UCOR employees.

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29 CFR 1926.1153

(h) Medical surveillance—(1) General. (i) The employer shall make medical surveillance available at no cost to the employee, and at a reasonable time and place, for each employee who will be required under this section to use a respirator for 30 or more days per year.

(ii) The employer shall ensure that all medical examinations and procedures required by this section are performed by a PLHCP as defined in paragraph (b) of this section.

(2) Initial examination. The employer shall make available an initial (baseline) medical examination within 30 days after initial assignment, unless the employee has received a medical examination that meets the requirements of this section within the last three years. The examination shall consist of:

(i) A medical and work history, with emphasis on: past, present, and anticipated exposure to respirable crystalline silica, dust, and other agents affecting the respiratory system; any history of respiratory system dysfunction, including signs and symptoms of respiratory disease (e.g., shortness of breath, cough, wheezing); history of tuberculosis; and smoking status and history;

(ii) A physical examination with special emphasis on the respiratory system;

(iii) A chest X-ray (a single posteroanterior radiographic projection or radiograph of the chest at full inspiration recorded on either film (no less than 14 x 17 inches and no more than 16 x 17 inches) or digital radiography systems), interpreted and classified according to the International Labour Office (ILO) International Classification of Radiographs of Pneumoconioses by a NIOSH-certified B Reader;

(iv) A pulmonary function test to include forced vital capacity (FVC) and forced expiratory volume in one second (FEV1) and FEV1/FVC ratio, administered by a spirometry technician with a current certificate from a NIOSH-approved spirometry course;

(v) Testing for latent tuberculosis infection; and

(vi) Any other tests deemed appropriate by the PLHCP.

(3) Periodic examinations. The employer shall make available medical examinations that include the procedures described in paragraph (h)(2) of this section (except paragraph (h)(2)(v)) at least every three years, or more frequently if recommended by the PLHCP.

(4) Information provided to the PLHCP. The employer shall ensure that the examining PLHCP has a copy of this standard, and shall provide the PLHCP with the following information:

(i) A description of the employee's former, current, and anticipated duties as they relate to the employee's occupational exposure to respirable crystalline silica;

(ii) The employee's former, current, and anticipated levels of occupational exposure to respirable crystalline silica;

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(iii) A description of any personal protective equipment used or to be used by the employee, including when and for how long the employee has used or will use that equipment; and

(iv) Information from records of employment-related medical examinations previously provided to the employee and currently within the control of the employer.

(5) *PLHCP's written medical report for the employee.* The employer shall ensure that the PLHCP explains to the employee the results of the medical examination and provides each employee with a written medical report within 30 days of each medical examination performed. The written report shall contain:

(i) A statement indicating the results of the medical examination, including any medical condition(s) that would place the employee at increased risk of material impairment to health from exposure to respirable crystalline silica and any medical conditions that require further evaluation or treatment;

(ii) Any recommended limitations on the employee's use of respirators;

(iii) Any recommended limitations on the employee's exposure to respirable crystalline silica; and

(iv) A statement that the employee should be examined by a specialist (pursuant to paragraph (h)(7) of this section) if the chest X-ray provided in accordance with this section is classified as 1/0 or higher by the B Reader, or if referral to a specialist is otherwise deemed appropriate by the PLHCP.

(6) *PLHCP's written medical opinion for the employer.* **(i)** The employer shall obtain a written medical opinion from the PLHCP within 30 days of the medical examination. The written opinion shall contain only the following:

(A) The date of the examination;

(B) A statement that the examination has met the requirements of this section; and

(C) Any recommended limitations on the employee's use of respirators.

(ii) If the employee provides written authorization, the written opinion shall also contain either or both of the following:

(A) Any recommended limitations on the employee's exposure to respirable crystalline silica;

(B) A statement that the employee should be examined by a specialist (pursuant to paragraph (h)(7) of this section) if the chest X-ray provided in accordance with this section is classified as 1/0 or higher by the B Reader, or if referral to a specialist is otherwise deemed appropriate by the PLHCP.

(iii) The employer shall ensure that each employee receives a copy of the written medical opinion described in paragraph (h)(6)(i) and (ii) of this section within 30 days of each medical examination performed.

(7) *Additional examinations.* **(i)** If the PLHCP's written medical opinion indicates that an employee should be examined by a specialist, the employer shall make available a medical examination by a specialist within 30 days after receiving the PLHCP's written opinion.

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(ii) The employer shall ensure that the examining specialist is provided with all of the information that the employer is obligated to provide to the PLHCP in accordance with paragraph (h)(4) of this section.

(iii) The employer shall ensure that the specialist explains to the employee the results of the medical examination and provides each employee with a written medical report within 30 days of the examination. The written report shall meet the requirements of paragraph (h)(5) (except paragraph (h)(5)(iv)) of this section.

(iv) The employer shall obtain a written opinion from the specialist within 30 days of the medical examination. The written opinion shall meet the requirements of paragraph (h)(6) (except paragraph (h)(6)(i)(B) and (ii)(B)) of this section.

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1. Ventilation systems:
 - a. Designed and maintained to prevent accumulation and re-circulation of respirable crystalline silica dust.

2. Mobile equipment cab, Control booth:
 - a. Maintain as free as practicable from settled dust.
 - b. Door seals and closing mechanisms function properly.
 - c. Seals and gaskets intact and function properly.
 - d. Maintain positive pressure through continuous delivery of fresh air.
 - e. Air filter at least 95% efficient for particles in the 0.3-to-10 μm range (> MERV-16).
 - f. Functioning heating and cooling (as appropriate to season).

3. Wet methods:
 - a. Apply water at flow rates sufficient to minimize release of visible dust.
 - b. Maintain nozzles and piping to ensure adequate application of wetting agent.

4. Work practices:
 - a. Minimize generation of airborne respirable crystalline silica.
 - b. Position workers upwind of work.
 - c. Minimize accumulation of dust containing respirable crystalline silica.

5. Work area inspection criteria:
 - a. Visible indication that dust control measures are/are not functioning as intended.
 - b. Exhaust ventilation is present and preventing accumulation of visible airborne dust (indoors and/or enclosed areas).
 - c. Housekeeping is satisfactory.

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Equipment/Task	Engineering Controls and Work Practice Control Methods
1. Stationary masonry saws	<p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade.</p> <p>Operate and maintain tool in accordance with the manufacturer's instructions to minimize dust emissions.</p>
2. Handheld power saws (any blade diameter)	<p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p>
3. Handheld power saws for cutting fiber-cement board (with blade diameter of 8 inches or less)	<p>Use saw equipped with commercially available dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector that provides the air flow recommended by the tool manufacturer, or greater, and a filter with 99% or greater efficiency and filter-cleaning mechanism.</p>
4. Walk-behind saws	<p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p>
5. Drivable saws	<p>Use saw equipped with integrated water delivery system that continuously supplies water to the blade.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p>
6. Rig-mounted core saws or drills	<p>Use saw equipped with integrated water delivery system that continuously supplies water to cutting surface.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p>

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Equipment/Task	Engineering Controls and Work Practice Control Methods
7. Handheld and stand-mounted drills (including impact and rotary hammer drills)	<p>Use drill equipped with commercially available shroud or cowling with dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector that provides the air flow recommended by the tool manufacturer, or greater, and a filter with 99% or greater efficiency and filter-cleaning mechanism.</p> <p>Use HEPA-filtered vacuum when cleaning holes.</p>
8. Dowel drilling rigs for concrete	<p>Use shroud around drill bit with a dust collection system. Dust collector equipped with a filter with 99% or greater efficiency and a filter-cleaning mechanism.</p> <p>Use HEPA-filtered vacuum when cleaning holes.</p>
9. Vehicle-mounted drilling rigs for rock and concrete	<p>Use dust collection system with close capture hood or shroud around drill bit with a low-flow water spray to wet dust at the discharge point from the dust collector.</p> <p style="text-align: center;">OR</p> <p>Operate from within an enclosed cab and use water for dust suppression on drill bit.</p>
10. Jackhammers and handheld powered chipping tools	<p>Use tool with water delivery system that supplies a continuous wet stream or spray of water at the point of impact.</p> <p style="text-align: center;">OR</p> <p>Use tool equipped with commercially available shroud and dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector that provides the air flow recommended by the tool manufacturer, or greater, and a filter with 99% or greater efficiency and filter-cleaning mechanism.</p>

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Equipment/Task	Engineering Controls and Work Practice Control Methods
11. Handheld grinders for mortar removal (i.e., tuckpointing)	<p>Use grinder equipped with commercially available shroud and dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer’s instructions to minimize dust emissions.</p> <p>Dust collector that provides 25 cubic feet per minute (CFM), or greater, airflow per inch of wheel diameter. Equipped with a filter 99% or greater in efficiency and a cyclonic pre-separator or filter-cleaning mechanism.</p>
12. Handheld grinders for uses other than mortar removal	<p>Use grinder equipped with integrated water delivery system that continuously feeds water to the grinding surface.</p> <p>Operate and maintain tool in accordance with manufacturer’s instructions to minimize dust emissions.</p> <p style="text-align: center;">OR</p> <p>Use grinder equipped with commercially available shroud and dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer’s instructions to minimize dust emissions.</p> <p>Dust collector that provides 25 cubic feet per minute (CFM), or greater, airflow per inch of wheel diameter. Equipped with a filter 99% or greater in efficiency and a cyclonic pre-separator or filter-cleaning mechanism.</p>
13. Walk-behind milling machines and floor grinders	<p>Use machine equipped with integrated water delivery system that continuously feeds water to the cutting surface.</p> <p>Operate and maintain tool in accordance with manufacturer’s instructions to minimize dust emissions.</p> <p style="text-align: center;">OR</p> <p>Use machine equipped with dust collection system recommended by the manufacturer.</p> <p>Operate and maintain tool in accordance with manufacturer’s instructions to minimize dust emissions.</p> <p>Dust collector that provides the air flow recommended by the tool manufacturer, or greater, and a filter with 99% or greater efficiency and filter-cleaning mechanism.</p> <p>When used indoors or in an enclosed area, use a HEPA-filtered vacuum to remove loose dust in-between passes.</p>

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Equipment/Task	Engineering Controls and Work Practice Control Methods
14. Small drivable milling machines (less than half-lane)	<p>Use a machine equipped with supplemental water sprays designed to suppress dust. Water combined with a surfactant.</p> <p>Operate and maintain machine to minimized dust emissions.</p>
15. Large drivable milling machines (half-lane and larger)	<p>For cuts of any depth on asphalt only:</p> <ul style="list-style-type: none"> • Use machine equipped with exhaust ventilation on drum enclosure and supplemental water sprays designed to suppress dust. • Operate and maintain machine to minimize dust emissions. <p>For cuts of four inches in depth or less on any substrate:</p> <ul style="list-style-type: none"> • Use machine equipped with exhaust ventilation on drum enclosure and supplemental water sprays designed to suppress dust. • Operate and maintain machine to minimize dust emissions. <p style="text-align: center;">OR</p> <p>Use a machine equipped with supplemental water spray designed to suppress dust. Water combined with a surfactant.</p> <p>Operate and maintain machine to minimize dust emissions.</p>
16. Crushing machines	<p>Use equipment designed to deliver water spray or mist for dust suppression at crusher and other points where dust is generated (e.g., hoppers, conveyors, sieves/sizing or vibrating components, and discharge points).</p> <p>Operate and maintain machine in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Use a ventilated booth that provides fresh, climate-controlled air to the operator, or a remote control station.</p>
17. Heavy equipment and utility vehicles used to abrade or fracture silica-containing materials (e.g., hoe-ramming, rock ripping) or used during demolition activities involving silica-containing materials	<p>Operate equipment from within an enclosed cab.</p> <p>When employees outside of the cab are engaged in the task, apply water and/or dust suppressants as necessary to minimize dust emissions.</p>

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Equipment/Task	Engineering Controls and Work Practice Control Methods
18. Heavy equipment and utility vehicles for tasks, such as grading and excavating, but not including: demolishing, abrading, or fracturing silica-containing materials	<p>Apply water and/or dust suppressants as necessary to minimize dust emissions.</p> <p>When the equipment operator is the only employee engaged in the task, operate equipment from within an enclosed cab.</p>