



DEPARTMENT OF THE NAVY  
NAVAL HOSPITAL  
2080 CHILD STREET  
JACKSONVILLE, FLORIDA 32214-5000

IN REPLY REFER TO:

6200.2

Ser 06IHZZ/ 0633

MAY 17 2016

From: Commanding Officer, Naval Hospital Jacksonville  
To: Commanding Officer, Marine Corps Logistics Base Albany Headquarters and Special Staff, Albany, GA

Subj: PERIODIC INDUSTRIAL HYGIENE SURVEY OF THE MARINE CORPS LOGISTICS BASE ALBANY HEADQUARTERS AND SPECIAL STAFF

Ref: (a) OPNAVINST 5100.23G  
(b) NAVMC DIR 5100.8

Encl: (1) Executive Summary  
(2) Industrial Hygiene Survey Report (AL16008)

1. A periodic Industrial Hygiene Survey of the Marine Corps Logistics Base Albany Headquarters and Special Staff offices was conducted 6-7 April 2016 as required by reference (a). Enclosures (1) and (2) are provided for your information.

2. Point of contact is Ms. Tamara Walker, Industrial Hygiene Department, at 904-546-7114 or [tamara.r.walker2.civ@mail.mil](mailto:tamara.r.walker2.civ@mail.mil).

A handwritten signature in black ink, appearing to read "B. L. Sharpe".

B. L. SHARPE  
By direction

Copy to:  
Risk Management Office, MCLB Albany  
Occupational Health Division, NBHC Albany

## EXECUTIVE SUMMARY

A periodic industrial hygiene survey of the Marine Corps Logistics Base Albany Headquarters and Special Staff offices was conducted on 6 through 7 April 2016 by Alan Dooley, Industrial Hygienist, Naval Hospital, Jacksonville. The purpose of this survey was to identify health hazards present, assess actual health risk, and recommend controls where needed, as well as to assess your Occupational Health program status. No formal response to Industrial Hygiene is needed, although the MDMC Risk Management Office or the unit's Safety representative may specify recommendations made in this report as items for mandatory corrective action. Following is a summary of major findings and recommendations. Detailed findings, observations and recommendations are provided in enclosure (2) and its associated attachments.

**Item: Hazard Assessments.** Since the previous industrial hygiene (IH) survey dated 30 November 2011, there have been no major operational changes. This survey consisted of a walk-through evaluation of the work areas, sampling as required and employee interviews, as appropriate, to assist in the industrial hygiene assessment.

**Recommended Action:** Please review the program summaries in Attachment (1) and the individual work center hazard assessments in Attachment (2) for more details on all identified hazards. If there are any changes in work operation from what is described in this report, or if a focused health hazard evaluation of a specific work operation or new project is needed, as the industrial hygienist position at Naval Branch Health Clinic Albany is currently vacant please contact Ms. Tamara Walker, Industrial Hygiene Department, Naval Hospital Jacksonville at 904-546-7114.

**Item: Respirator Protection Program (RPP).** The Mission Assurance office indicated respirator use was required for emergent chemical-biological-nuclear-radiological-explosive (CBRNE) response. This use was not properly documented and individuals were neither fit tested nor medically cleared, per the installation's Respirator Protection Program Manager (RPPM), Mr. Stacey Williams (Risk Management Office at [Stacey.williams@usmc.mil](mailto:Stacey.williams@usmc.mil)). Discussions with the shop POC, Mr. Williams, and a review of various references indicated additional discussions between Mission Assurance personnel and Mr. Williams are necessary to determine the proper enrollment into the RPP.

**Recommended Action:** Conduct the following actions and/or actions with the RPPM:

- 1) Determine the appropriate disposition and use of powered air-purifying respirators by the Mission Assurance's fusion cell;
- 2) If fusion cell personnel are authorized to use respirators, ensure the appropriate operating instructions, training, and medical clearances are provided. Additionally, request that the Industrial Hygiene Department POC, Ms. Tamara Walker, be contacted so appropriate notifications to Occupational Medicine, Naval Branch Health Clinic Albany can be provided and documented.

**Reference:** OPNAVINST 5100.23G, Chapter 15, Para 1503; DoD 4525.8-M., DoD Official Mail Manual, 26 December 2001.

**Item:** *Medical Certification.* Personnel in Mission Assurance utilize a forklift to properly carry and maintain the CBRNE supplies in warehouse building 1351, bay 2. Personnel who operate a forklift are required to maintain appropriate certification and medical clearance.

**Recommended Action:** Obtain medical clearance to operate a forklift through the Branch Health Clinic Albany.

**Reference:** NMCPHC Medical Matrix 12<sup>th</sup> Ed 2015, pg. 260

**PERIODIC INDUSTRIAL HYGIENE SURVEY**  
**MARINE CORPS LOGISTICS BASE ALBANY HEADQUARTERS AND SPECIAL STAFF**  
**MARINE CORPS LOGISTICS BASE ALBANY, GEORGIA**  
**REPORT NUMBER: AL16008**

Ref: (a) OPNAVINST 5100.23G, *Navy Safety and Occupational Health Program Manual*  
(b) NAVMC 5100.8, *Marine Corps Occupational Safety and Health (OSH) Program Manual*  
(c) Navy and Marine Corps Public Health Center (NMCPHC) Industrial Hygiene Field Operations Manual (IHFOM)

Att: (1) Program Evaluation Summary  
(2) Individual Hazard Assessment  
(3) Medical Surveillance Summary  
(4) Exposure Monitoring Plan  
(5) Neutral Posture for Computer Use/Computer Breaks  
(6) Customer Satisfaction Survey

1. **Introduction.** Per reference (a), a periodic industrial hygiene survey of the Marine Corps Logistics Base Albany Headquarters and Special Staff offices was conducted 6-7 April 2016 by Alan Dooley, Industrial Hygienist, Naval Hospital, Jacksonville. This survey consisted of a walk-through evaluation of the work areas, a review of the operations and the hazards associated and employee interviews, as appropriate, to assist in the industrial hygiene assessment.

2. **Report Contents.** Reference (a) requires that each Navy workplace, or naval base supported DOD workplace, be thoroughly evaluated in order to accurately identify and quantify all potential health hazards. This report fulfills that requirement. An evaluation summary of Safety and Occupational Health (SOH) programs, control measures, and hazard evaluations is provided in attachment (1). The updated Individual Hazard Assessments for surveyed workcenters are provided in attachment (2). Medical surveillance recommendations are provided in attachment (3). The Exposure Monitoring Plan, provided in attachment (4), details the operations/processes on which more information is required in the form of periodic sampling. Attachment (5), the Neutral Posture for Computer Use/Computer Breaks, can be used for training personnel in utilizing their computer workstations ergonomically. Attachment (6) is a Customer Satisfaction Survey, so that you may critique the services provided.

3. **Design Reviews.** Per reference (a), industrial hygienists should participate in the review of plans and specifications for local projects, standard operating procedures, purchasing transactions, and contracts which involve, or could create, exposure to potential health hazards, such as toxic materials, radiation, noise, or other health hazards. Cognizant facilities management and/or occupational health and safety personnel should ensure that the supporting industrial hygienist is made aware of such plans and specifications and that they are made available for his/her review.

4. **Re-evaluation Schedule and Changes in the Workplace.** Please retain this report on file and post a copy in a common work area for personnel to review. IH surveys had historically

been accomplished with an established survey frequency based on the nature of operations at the Activity/Command in accordance with reference (a). Survey periodicity is now scheduled at the command or shop level in accordance with reference (c).

Ratings and associated survey frequency are now listed on individual work center assessment(s) within this report and reflect as High (annual), Moderate (biennial), or Low (quadrennial) hazard category. Shop periodicity will be continually re-assessed during future IH surveys. The following table provides the shop hazard category and re-evaluation schedule for the SDR work centers.

| <b>Work Center</b>                                       | <b>Hazard Category<sup>(1)</sup></b> | <b>Next Survey Due (Mon/Yr)</b> |
|--|--------------------------------------|---------------------------------|
| Operations and Training Division - Public Affairs Office | 3 (Low)                              | APR 2020                        |
| Operations and Training Division - Mission Assurance     | 2 (Medium)                           | APR 2018                        |
| Operations and Training Division - Operations Branch     | 3 (Low)                              | APR 2018                        |
| Office of Comptroller                                    | 3 (Low)                              | APR 2020                        |
| Civilian Personnel Branch                                | 3 (Low)                              | APR 2020                        |
| Business Performance Office                              | 3 (Low)                              | APR 2020                        |

(1) Hazard categories are based on a consideration of health risk of identified chemical stressors and potential of these stressors to exceed Navy occupational exposure limits, ACGIH Threshold Limit Values, or OSHA substance-specific standards. Hazard category determination protocol is spelled out in reference (b), Chapter 2. Industrial Hygiene has discretion to conduct surveys more often than the minimum frequencies listed above.

Any significant changes in the type of operations currently performed, current workplace setting, new equipment acquired, or change in the kinds or amounts of chemical used, as identified in the survey, will result in a need for an immediate re-evaluation of the affected area. Industrial Hygiene Department, Naval Hospital, Jacksonville should be notified in the event of any significant operational changes as described above so that a prompt re-evaluation can be completed.

**PERIODIC INDUSTRIAL HYGIENE SURVEY  
PROGRAM EVALUATION SUMMARY  
HEADQUARTERS AND SPECIAL STAFF  
MARINE CORPS LOGISTICS BASE ALBANY, GEORGIA  
REPORT NUMBER: AL16008  
APRIL 2016**

New or Significantly Modified Work Center Operations/Processes?

Comments:

- Numerous shops and processes were identified, assessed, and added as compared to the last survey conducted December 2014.
- All operations identified for each of the shops are provided in the Individual Hazard Assessments (attachment (2)).

**Safety and Occupational Health (SOH) Program Findings and Recommendations**

Ref: OPNAVINST 5100.23G

1. Medical Surveillance Program Status.

- No Medical Surveillance is Recommended.  
 Medical Surveillance is Recommended.

Comments:

- The Medical Surveillance Program Summary, attachment (3) summarizes medical surveillance requirements.

2. Hazardous Material Control and Management (HMC&M) Program (Chapter 7):

- |                               |                            |                                       |   |          |                                       |   |
|-------------------------------|----------------------------|---------------------------------------|---|----------|---------------------------------------|---|
| AUL                           | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input checked="" type="checkbox"/> N/A | Accurate | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N (where spot checked) |
| SDS Files                     | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input checked="" type="checkbox"/> N/A | Accurate | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N (where spot checked) |
| HAZMAT Training Required?     | <input type="checkbox"/> Y | <input checked="" type="checkbox"/> N |   |          |                                       |   |
| Other (lead, asbestos, etc.): | <input type="checkbox"/> Y | <input checked="" type="checkbox"/> N |   |          |                                       |   |

Comments:

- None.

3. Respiratory Protection Program (Chapter 15):

- |   |                                       |                                       |  |
|---|---------------------------------------|---------------------------------------|--|
| Are respirators used to control workplace exposures?    | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N            | <input type="checkbox"/> Voluntary Use                         |
| Are they effective?                                     | <input checked="" type="checkbox"/> Y | <input type="checkbox"/> N            | <input type="checkbox"/> N/A                                   |
| Is the Respiratory Protection Program satisfactory?     | <input type="checkbox"/> Y            | <input checked="" type="checkbox"/> N | <input type="checkbox"/> Marginal <input type="checkbox"/> N/A |
| ESAMS agrees with medical surveillance recommendations? | <input type="checkbox"/> Y            | <input type="checkbox"/> N            | <input checked="" type="checkbox"/> N/A                        |

Comments:

- The Mission Assurance office indicated respirator use was required for emergent chemical-biological-nuclear-radiological-explosive (CBRNE) response. This use was not properly documented and individuals were neither fit tested nor medically cleared, per the installation's Respirator Protection Program Manager (RPPM), Mr. Stacey Williams (Risk Management Office at [Stacey.williams@usmc.mil](mailto:Stacey.williams@usmc.mil)). Discussions with the shop POC, Mr. Williams, and a review of various references indicated additionally discussions between Mission Assurance personnel and Mr. Williams is necessary to determine the proper enrollment into the RPP.
- Conduct the following actions with the RPPM:
  - 1) If fusion cell personnel are authorized to use respirators, ensure the appropriate operating instructions, training, and medical clearances are provided.
  - 2) Additionally, request that the Industrial Hygiene Department POC, Ms. Tamara Walker, be contacted so appropriate notifications to Occupational Medicine, Naval Branch Health Clinic Albany can be provided and documented.

4. Noise and Hearing Conservation Program (HCP) (Chapter 18):

- |   |                            |                                       |   |   |
|---|----------------------------|---------------------------------------|---|---|
| Are personnel recommended for the HCP?                  | <input type="checkbox"/> Y | <input checked="" type="checkbox"/> N |   |   |
| Are personnel receiving audiograms?                     | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input type="checkbox"/> Not All        | <input checked="" type="checkbox"/> N/A |
| Is hearing protection readily available?                | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input checked="" type="checkbox"/> N/A |   |
| Is hearing protection used?                             | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input checked="" type="checkbox"/> N/A | <input type="checkbox"/> Not observed   |
| Are hearing protection devices adequate?                | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input checked="" type="checkbox"/> N/A |   |
| ESAMS agrees with medical surveillance recommendations? | <input type="checkbox"/> Y | <input type="checkbox"/> N            | <input checked="" type="checkbox"/> N/A |   |

Comments:

- None.

5. Personal Protective Equipment (PPE) (Chapter 20).

Is PPE required for the job?  Y  N  
Is PPE provided?  Y  N  Not All  N/A

Comments:

- Forklift operations require the use of safety glasses.

6. Lead Control Program (Chapter 21).

Is lead used in the workplace?  Y  N  
Is exposure to lead in excess of the action level (AL)?  Y  N  N/A

Comments:

- None.

7. Ergonomics (Chapter 23):

Ergonomic risk factors were identified pertaining to:

Shop work

Office/Computer work

Available equipment/furniture incorporates good ergonomic design?  Y  N  N/A

Ergonomic training recommended?  Y  N

Comments:

- Office areas in each shop was typically equipped with cubicle or executive styled desks. In general, the desks had round edges and keyboards and mice were placed on the desktop. Most of the keyboards had gel pads or wrist rests in front of them to help maintain the wrists in the optimal neutral position and prevent a pressure point between the wrists and desk edge. A more detailed assessment is documented in each shop's IHA.
- Reinforce proper lifting technique when storing and management warehouse supplies.
- Attachment (5) illustrates the optimum computer station setup and placement of the screen, hands, wrists, etc.

8. Management of Reproductive hazards (Chapter 29):

Reproductive Hazards Present?  Y  N

Comments: Reproductive hazards listed in OPNAVINST 6000.1C or NMCPHC-TM-OEM 6260.01C have been identified in this workcenter. It is recommended that, wherever possible, the workcenter reduce, minimize, and/or eliminate the reproductive hazards and personnel exposure. Reproductive hazards are specifically identified for all operations addressed in attachment (2) and is summarized below:

- Personnel in the Operations and Training Division Mission Assurance Office use forklifts and are potentially exposed to carbon monoxide, a recognized developmental reproductive hazard.
- Personnel in the Operations and Training Division Mission Assurance and Operations Offices have the potential to perform heavy lifting which is a recognized developmental reproductive hazard.

9. Management of Carcinogenic hazards:

Cancer Causing Hazards Present?  Y  N

Comments: None.

10. Other Applicable Programs:

- Asbestos Control (Chapter 17)
- Non-ionizing radiation (Chapter 22)
- Ventilation
- PCBs (Chapter 25)
- Bloodborne Pathogens (Chapter 28)
- Other

Comments: None.

11. Exposure Monitoring Plan (EMP):

- Exposure Monitoring needs were identified.
- No Exposure Monitoring needs were identified.

Comments:

- Attachment (5) provides the current Exposure Monitoring Plan.

Additional Comments: None.

**TABLE OF CONTENTS**  
**INDUSTRIAL HYGIENE SURVEY**  
**WORKCENTER SPECIFIC EVALUATIONS FOR**  
**MARINE CORPS LOGISTICS BASE ALBANY HEADQUARTERS AND SPECIAL STAFF**  
**MARINE CORPS LOGISTICS BASE ALBANY, GA**

| <b>DEPARTMENTS/WORKCENTERS</b>                           | <b>Page</b> |
|--|-------------|
| Operations and Training Division - Public Affairs Office | 2           |
| Operations and Training Division - Mission Assurance     | 3           |
| Operations and Training Division - Operations Branch     | 5           |
| Office of Comptroller                                    | 6           |
| Civilian Personnel Branch                                | 7           |
| Business Performance Office                              | 8           |

| <b>INDIVIDUAL HAZARD ASSESSMENT</b>   |                |                                 | DATE: 6 April 2016  |  |
|---|----------------|---------------------------------|---|--|
| RECORDED BY: Alan Dooley<br>COMMAND: Marine Corps Logistics Base Albany Headquarters and Special Staff<br>BLDG: 3500<br>SHOP: Operations and Training Division - Public Affairs Office<br>SHOP HAZARD PRIORITY RATING: 3  |                |                                 | POC: Mr. Robert James<br>PHONE: 229-639-7489<br>TOTAL PERSONNEL: 4 (Civ: 4)<br>MALE: 1<br>FEMALE: 3 |  |
| SHOP OPERATIONS: Personnel provide administrative and leadership support by reporting events and opportunities on the facilities to the public.   |                |                                 |   |  |
| OPERATIONS AND POTENTIAL HEALTH HAZARDS   | NUMBER OF WKRS | FREQUENCY /DURATION OF EXPOSURE | CONTROLS (1)  | EXPOSURE ASSESSMENT (2)  |
| Administrative type duties, computer use including keyboarding and using mouse: Work-related musculoskeletal disorders (WMSD)<br><br>Personnel worked at desks where the keyboards and mice are placed on top of the desks. Keyboards were equipped with wrist rest or a gel pad in front of the keyboard.  | All            | Daily<br>6-8 hours              | ADM: Stretch breaks to avoid long periods in the same posture.                                      | WMSD RISK FACTORS: No ergonomic-related injuries/problems directly related to work were reported during the survey walkthrough.<br><br>Personnel should ensure that workstations are set up correctly (example included in attachment (5)) to help prevent WMSD issues from occurring.<br><br>Any ergonomic-related injury should be reported to the command safety officer. |
| 1. USE THE FOLLOWING CONTROL CODES:<br>ADM – Administrative Controls                      PPE – Personal Protective Equipment                      ISO – Isolation<br>DV – Dilution Ventilation                              ENG – Engineering Controls    LV – Local Ventilation   |                |                                 |   |  |
| 2. EXPOSURE ASSESSMENT refers to "Potential" exposure and does not take PPE such as respiratory protection or hearing protection into account. Use the following exposure codes:<br>ACCEPTABLE – One where the IH will not expect the similar exposure group (SEG), on average, to be above the selected occupational exposure limit (OEL).<br>UNCERTAIN – Additional data needs to be collected to clarify the exposure assessment. The IH should make an interim exposure assessment based on observation of the process and/or professional judgment.<br>UNACCEPTABLE – One where the IH will expect the SEG, on average, to be exposed above the selected OEL.<br>WMSD RISK FACTORS – Work-related musculoskeletal disorder (WMSD) risks include but are not limited to force, repetition, awkward or static postures, vibration and contact stress.<br>SKIN – The material poses a skin absorption hazard.<br>REPRO HAZARD – The material is a Navy-recognized reproductive hazard.<br>CARCINOGEN – The material contains greater than 0.1% of an OSHA, ACGIH, IARC, OR NTP-recognized carcinogen. |                |                                 |   |  |

| INDIVIDUAL HAZARD ASSESSMENT  |                |                                 | DATE: 7 April 2016  |  |
|---|----------------|---------------------------------|---|--|
| RECORDED BY: Alan Dooley<br>COMMAND: Marine Corps Logistics Base Albany Headquarters and Special Staff<br>BLDG: 3500<br>SHOP: Operations and Training Division - Mission Assurance<br>SHOP HAZARD PRIORITY RATING: 2  |                |                                 | POC: Mr. Myles Baer<br>PHONE: 229-639-8735<br>TOTAL PERSONNEL: 2 (Civ: 2)<br>MALE: 2<br>FEMALE: 0 |  |
| SHOP OPERATIONS: Personnel support the fusion cell (emergency ops center Rm 110) for antiterrorist and emergency management, critical infrastructure protection with Chemical, Biological, Radiation, and Nuclear (CBRN) Defense involving military police, fire, and emergency service, and maintain/manage CBRN supplies in building 1351 warehouse, Bay 2. Mission Assurance activities are 90% administrative in nature, e.g. conducting assessments. |                |                                 |   |  |
| Note: Shop Hazard Priority Rating may change to 1 pending final determination about placing this shop on the respiratory protection program for emergent CBRNE response. See Executive Summary (Enclosure 1) and Program Evaluation Summary (Attachment 1) of the 2016 IH Survey for more details.  |                |                                 |   |  |
| OPERATIONS AND POTENTIAL HEALTH HAZARDS   | NUMBER OF WKRS | FREQUENCY /DURATION OF EXPOSURE | CONTROLS (1)  | EXPOSURE ASSESSMENT (2)  |
| Supply Maintenance: Carbon monoxide*<br><br>Personnel operate diesel forklifts to move CBRN supplies. The diesel forklifts are used in and out of the warehouse.  | 1              | Infrequent                      | ENG: Warehouse doors remain open.   | ACCEPTABLE. No significant exposure expected based on the nature of exposure as described, large open bays, and infrequent use.<br><br><i>*Carbon monoxide is a developmental reproductive hazard.</i>   |
| Supply Maintenance: Work-related musculoskeletal disorders (WMSD)<br>Heavy lifting*<br><br>Personnel inspect, manage, stock, and ship CBRN required supplies on an as needed basis. Inspection is conducted once a week. Movement of supplies is infrequent.  | 1              | Infrequent                      | PPE: Safety glasses.<br><br>ENG: Forklift.<br><br>ADM: Training on proper lifting technique.      | ACCEPTABLE: Personnel perform infrequent movement of supplies. Items are generally moved using a forklift to transfer any received pallets to the CBRN cage in Bldg. 1351, Bay 2.<br><br><b>Medical surveillance for Forklift Operator (710) is required.</b><br><br><i>*Heavy lifting is a recognized developmental reproductive hazard.</i>                                |
| Administrative type duties, computer use including keyboarding and using mouse: Work-related musculoskeletal disorders (WMSD)<br><br>Personnel worked at desks where the keyboards and mice are placed on top of the desks. Keyboards were equipped with wrist rest or a gel pad in front of the keyboard.  | All            | Daily<br>6-8 hours              | ADM: Stretch breaks to avoid long periods in the same posture.                                    | WMSD RISK FACTORS: No ergonomic-related injuries/problems directly related to work were reported during the survey walkthrough.<br><br>Personnel should ensure that workstations are set up correctly (example included in attachment (5)) to help prevent WMSD issues from occurring.<br><br>Any ergonomic-related injury should be reported to the command safety officer. |

| <b>INDIVIDUAL HAZARD ASSESSMENT</b>   |                      |  | DATE: 7 April 2016  |                               |
|---|----------------------|--|---|-------------------------------|
| RECORDED BY: Alan Dooley<br>COMMAND: Marine Corps Logistics Base Albany Headquarters and Special Staff<br>BLDG: 3500<br>SHOP: Operations and Training Division - Mission Assurance<br>SHOP HAZARD PRIORITY RATING: 2  |                      |  | POC: Mr. Myles Baer<br>PHONE: 229-639-8735<br>TOTAL PERSONNEL: 2 (Civ: 2)<br>MALE: 2<br>FEMALE: 0 |                               |
| SHOP OPERATIONS: Personnel support the fusion cell (emergency ops center Rm 110) for antiterrorist and emergency management, critical infrastructure protection with Chemical, Biological, Radiation, and Nuclear (CBRN) Defense involving military police, fire, and emergency service, and maintain/manage CBRN supplies in building 1351 warehouse, Bay 2. Mission Assurance activities are 90% administrative in nature, e.g. conducting assessments.   |                      |  |   |                               |
| Note: Shop Hazard Priority Rating may change to 1 pending final determination about placing this shop on the respiratory protection program for emergent CBRNE response. See Executive Summary (Enclosure 1) and Program Evaluation Summary (Attachment 1) of the 2016 IH Survey report for more details.   |                      |  |   |                               |
| OPERATIONS AND<br>POTENTIAL HEALTH<br>HAZARDS   | NUMBER<br>OF<br>WKRS | FREQUENCY<br>/DURATION<br>OF<br>EXPOSURE | CONTROLS<br>(1)   | EXPOSURE<br>ASSESSMENT<br>(2) |
| 1. USE THE FOLLOWING CONTROL CODES:<br>ADM – Administrative Controls      PPE – Personal Protective Equipment      ISO – Isolation<br>DV – Dilution Ventilation      ENG – Engineering Controls      LV – Local Ventilation   |                      |  |   |                               |
| 2. EXPOSURE ASSESSMENT refers to "Potential" exposure and does not take PPE such as respiratory protection or hearing protection into account. Use the following exposure codes:<br>ACCEPTABLE – One where the IH will not expect the similar exposure group (SEG), on average, to be above the selected occupational exposure limit (OEL).<br>UNCERTAIN – Additional data needs to be collected to clarify the exposure assessment. The IH should make an interim exposure assessment based on observation of the process and/or professional judgment.<br>UNACCEPTABLE – One where the IH will expect the SEG, on average, to be exposed above the selected OEL.<br>WMSD RISK FACTORS – Work-related musculoskeletal disorder (WMSD) risks include but are not limited to force, repetition, awkward or static postures, vibration and contact stress.<br>SKIN – The material poses a skin absorption hazard.<br>REPRO HAZARD – The material is a Navy-recognized reproductive hazard.<br>CARCINOGEN – The material contains greater than 0.1% of an OSHA, ACGIH, IARC, OR NTP-recognized carcinogen. |                      |  |   |                               |

| INDIVIDUAL HAZARD ASSESSMENT   |                |                                 | DATE: 6 April 2016  |   |
|--|----------------|---------------------------------|---|---|
| RECORDED BY: Alan Dooley<br>COMMAND: Marine Corps Logistics Base Albany Headquarters and Special Staff<br>BLDG: 3500<br>SHOP: Operations and Training Division - Operations Branch<br>SHOP HAZARD PRIORITY RATING: 3   |                |                                 | POC: Mr. Robert James<br>PHONE: 229-639-7489<br>TOTAL PERSONNEL: 5 (Civ: 5)<br>MALE: 2<br>FEMALE: 3 |   |
| SHOP OPERATIONS: Personnel provide event support, monitor training, and financial management. Event support includes the physical setup, e.g. tents, chairs, and vehicle support.  |                |                                 |   |   |
| OPERATIONS AND POTENTIAL HEALTH HAZARDS  | NUMBER OF WKRS | FREQUENCY /DURATION OF EXPOSURE | CONTROLS (1)  | EXPOSURE ASSESSMENT (2)   |
| Site Preparation: Work-related musculoskeletal disorders (WMSD)<br>Heavy lifting*<br><br>Personnel provide physical support to properly setup and breakdown equipment for special events.  | 2              | Infrequent                      | PPE: Safety glasses.<br><br>ADM: Training on proper lifting technique.                              | <b>WMSD RISK FACTORS:</b> Personnel perform infrequent setup of chairs and tents. No ergonomic related injuries/problems directly related to work were reported during the survey walkthrough.<br><br>Any ergonomic-related injury should be reported to the command safety officer.<br><br><i>*Heavy lifting is a recognized developmental reproductive hazard.</i>                |
| Administrative type duties, computer use including keyboarding and using mouse: Work-related musculoskeletal disorders (WMSD)<br><br>Personnel worked at desks where the keyboards and mice are placed on top of the desks. Keyboards were equipped with wrist rest or a gel pad in front of the keyboard.   | All            | Daily<br>6-8 hours              | ADM: Stretch breaks to avoid long periods in the same posture.                                      | <b>WMSD RISK FACTORS:</b> No ergonomic-related injuries/problems directly related to work were reported during the survey walkthrough.<br><br>Personnel should ensure that workstations are set up correctly (example included in attachment (5)) to help prevent WMSD issues from occurring.<br><br>Any ergonomic-related injury should be reported to the command safety officer. |
| 1. USE THE FOLLOWING CONTROL CODES:<br>ADM - Administrative Controls                      PPE - Personal Protective Equipment                      ISO - Isolation<br>DV - Dilution Ventilation                      ENG - Engineering Controls                      LV - Local Ventilation  |                |                                 |   |   |
| 2. EXPOSURE ASSESSMENT refers to "Potential" exposure and does not take PPE such as respiratory protection or hearing protection into account. Use the following exposure codes:<br>ACCEPTABLE - One where the IH will not expect the similar exposure group (SEG), on average, to be above the selected occupational exposure limit (OEL).<br>UNCERTAIN - Additional data needs to be collected to clarify the exposure assessment. The IH should make an interim exposure assessment based on observation of the process and/or professional judgment.<br>UNACCEPTABLE - One where the IH will expect the SEG, on average, to be exposed above the selected OEL.<br><b>WMSD RISK FACTORS</b> - Work-related musculoskeletal disorder (WMSD) risks include but are not limited to force, repetition, awkward or static postures, vibration and contact stress.<br>SKIN - The material poses a skin absorption hazard.<br>REPRO HAZARD - The material is a Navy-recognized reproductive hazard.<br>CARCINOGEN - The material contains greater than 0.1% of an OSHA, ACGIH, IARC, OR NTP-recognized carcinogen. |                |                                 |   |   |

| <b>INDIVIDUAL HAZARD ASSESSMENT</b>  |                |                                 | DATE: 6 April 2016  |   |
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| RECORDED BY: Alan Dooley<br>COMMAND: Marine Corps Logistics Base Albany Headquarters and Special Staff<br>BLDG: 3500, Rm 5<br>SHOP: Office of Comptroller<br>SHOP HAZARD PRIORITY RATING: 3  |                |                                 | POC: Mr. Phil Millerd<br>PHONE: 229-639-7008<br>TOTAL PERSONNEL: 12 (Civ: 12)<br>MALE: 4<br>FEMALE: 8 |   |
| SHOP OPERATIONS: Personnel provide the administrative and leadership support related to funding authorization and execution.   |                |                                 |   |   |
| OPERATIONS AND POTENTIAL HEALTH HAZARDS  | NUMBER OF WKRS | FREQUENCY /DURATION OF EXPOSURE | CONTROLS (1)  | EXPOSURE ASSESSMENT (2)   |
| Administrative type duties, computer use including keyboarding and using mouse: Work-related musculoskeletal disorders (WMSD)<br><br>Personnel worked at desks where the keyboards and mice are placed on top of the desks. Keyboards were equipped with wrist rest or a gel pad in front of the keyboard.   | All            | Daily<br>6-8 hours              | ADM: Stretch breaks to avoid long periods in the same posture.  | <b>WMSD RISK FACTORS:</b> No ergonomic-related injuries/problems directly related to work were reported during the survey walkthrough.<br><br>Personnel should ensure that workstations are set up correctly (example included in attachment (5)) to help prevent WMSD issues from occurring.<br><br>Any ergonomic-related injury should be reported to the command safety officer. |
| 1. USE THE FOLLOWING CONTROL CODES:<br>ADM -- Administrative Controls                      PPE -- Personal Protective Equipment                      ISO -- Isolation<br>DV -- Dilution Ventilation                              ENG -- Engineering Controls    LV -- Local Ventilation  |                |                                 |   |   |
| 2. EXPOSURE ASSESSMENT refers to "Potential" exposure and does not take PPE such as respiratory protection or hearing protection into account. Use the following exposure codes:<br>ACCEPTABLE -- One where the IH will not expect the similar exposure group (SEG), on average, to be above the selected occupational exposure limit (OEL).<br>UNCERTAIN -- Additional data needs to be collected to clarify the exposure assessment. The IH should make an interim exposure assessment based on observation of the process and/or professional judgment.<br>UNACCEPTABLE -- One where the IH will expect the SEG, on average, to be exposed above the selected OEL.<br>WMSD RISK FACTORS -- Work-related musculoskeletal disorder (WMSD) risks include but are not limited to force, repetition, awkward or static postures, vibration and contact stress.<br>SKIN -- The material poses a skin absorption hazard.<br>REPRO HAZARD -- The material is a Navy-recognized reproductive hazard.<br>CARCINOGEN -- The material contains greater than 0.1% of an OSHA, ACGIH, IARC, OR NTP-recognized carcinogen. |                |                                 |   |   |

| OPERATIONS AND POTENTIAL HEALTH HAZARDS   |  |  | NUMBER OF WKRS | FREQUENCY /DURATION OF EXPOSURE | CONTROLS (1)   | EXPOSURE ASSESSMENT (2)  |
|---|--|--|----------------|---------------------------------|--|--|
| Administrative type duties, computer use including keyboarding and using mouse: Work-related musculoskeletal disorders (WMSD)<br><br>Personnel worked at desks where the keyboards and mice are placed on top of the desks. Keyboards were equipped with wrist rest or a gel pad in front of the keyboard.  |  |  | All            | Daily<br>6-8 hours              | ADM: Stretch breaks to avoid long periods in the same posture. | <p><b>WMSD RISK FACTORS:</b> No ergonomic-related injuries/problems directly related to work were reported during the survey walkthrough.</p> <p>Personnel should ensure that workstations are set up correctly (example included in attachment (5)) to help prevent WMSD issues from occurring.</p> <p>Any ergonomic-related injury should be reported to the command safety officer.</p> |
| <p><b>I. USE THE FOLLOWING CONTROL CODES:</b><br/> ADM – Administrative Controls                      PPE – Personal Protective Equipment                      ISO – Isolation<br/> DV – Dilution Ventilation                      ENG – Engineering Controls                      LV – Local Ventilation</p> <p><b>2. EXPOSURE ASSESSMENT</b> refers to "Potential" exposure and does not take PPE such as respiratory protection or hearing protection into account. Use the following exposure codes:<br/> ACCEPTABLE – One where the IH will not expect the similar exposure group (SEG), on average, to be above the selected occupational exposure limit (OEL).<br/> UNCERTAIN – Additional data needs to be collected to clarify the exposure assessment. The IH should make an interim exposure assessment based on observation of the process and/or professional judgment.<br/> UNACCEPTABLE – One where the IH will expect the SEG, on average, to be exposed above the selected OEL.<br/> WMSD RISK FACTORS – Work-related musculoskeletal disorder (WMSD) risks include but are not limited to force, repetition, awkward or static postures, vibration and contact stress.<br/> SKIN – The material poses a skin absorption hazard.<br/> REPRO HAZARD – The material is a Navy-recognized reproductive hazard.<br/> CARCINOGEN – The material contains greater than 0.1% of an OSHA, ACGIH, IARC, OR NTP-recognized carcinogen.</p> |  |  |                |                                 |  |  |

| <b>INDIVIDUAL HAZARD ASSESSMENT</b>   |                |                                 | DATE: 6 April 2016   |   |
|---|----------------|---------------------------------|--|---|
| RECORDED BY: Alan Dooley<br>COMMAND: Marine Corps Logistics Base Albany Headquarters and Special Staff<br>BLDG: 3500, Rm 309<br>SHOP: Business Performance Office<br>SHOP HAZARD PRIORITY RATING: 3   |                |                                 | POC: Mr. Ali Tillman<br>PHONE: 229-639-5800<br>TOTAL PERSONNEL: 2 (Civ: 2)<br>MALE: 2<br>FEMALE: 0 |   |
| SHOP OPERATIONS: Personnel provide the administrative and leadership support to manage and support agreements, the continuous process improvement program, and the customer complaint program.  |                |                                 |  |   |
| OPERATIONS AND POTENTIAL HEALTH HAZARDS   | NUMBER OF WKRS | FREQUENCY /DURATION OF EXPOSURE | CONTROLS (1)   | EXPOSURE ASSESSMENT (2)   |
| Administrative type duties, computer use including keyboarding and using mouse: Work-related musculoskeletal disorders (WMSD)<br><br>Personnel worked at desks where the keyboards and mice are placed on top of the desks. Keyboards were equipped with wrist rest or a gel pad in front of the keyboard.  | All            | Daily<br>6-8 hours              | ADM: Stretch breaks to avoid long periods in the same posture.                                     | <b>WMSD RISK FACTORS:</b> No ergonomic-related injuries/problems directly related to work were reported during the survey walkthrough.<br><br>Personnel should ensure that workstations are set up correctly (example included in attachment (5)) to help prevent WMSD issues from occurring.<br><br>Any ergonomic-related injury should be reported to the command safety officer. |
| 1. USE THE FOLLOWING CONTROL CODES:<br>ADM – Administrative Controls                      PPE – Personal Protective Equipment                      ISO – Isolation<br>DV – Dilution Ventilation                              ENG – Engineering Controls    LV – Local Ventilation   |                |                                 |  |   |
| 2. EXPOSURE ASSESSMENT refers to "Potential" exposure and does not take PPE such as respiratory protection or hearing protection into account. Use the following exposure codes:<br>ACCEPTABLE – One where the IH will not expect the similar exposure group (SEG), on average, to be above the selected occupational exposure limit (OEL).<br>UNCERTAIN – Additional data needs to be collected to clarify the exposure assessment. The IH should make an interim exposure assessment based on observation of the process and/or professional judgment.<br>UNACCEPTABLE – One where the IH will expect the SEG, on average, to be exposed above the selected OEL.<br>WMSD RISK FACTORS – Work-related musculoskeletal disorder (WMSD) risks include but are not limited to force, repetition, awkward or static postures, vibration and contact stress.<br>SKIN – The material poses a skin absorption hazard.<br>REPRO HAZARD – The material is a Navy-recognized reproductive hazard.<br>CARCINOGEN – The material contains greater than 0.1% of an OSHA, ACGIH, IARC, OR NTP-recognized carcinogen. |                |                                 |  |   |

**SUMMARY OF MEDICAL SURVEILLANCE RECOMMENDATIONS**  
**MARINE CORPS LOGISTICS BASE ALBANY HEADQUARTERS AND SPECIAL STAFF**  
**MARINE CORPS LOGISTICS BASE ALBANY, GA**  
**REPORT NO. AL16008**  
**APRIL 2016**

Ref: (a) Medical Surveillance Procedures Manual and Medical Matrix, Edition 12, NMCPHC-TM OM 6260 (<http://www.med.navy.mil/sites/nmcphc/occupational-and-environmental-medicine/oemd/Pages/medical-surveillance-certification.aspx>)

The following table summarizes identified medical surveillance/certification recommendations.

| WORK CENTER  | WORK PROCESSES  | MEDICAL SURVEILLANCE/ CERTIFICATION | ESTIMATED # OF PERSONS |
|--|---|-------------------------------------|------------------------|
| Operations and Training Division - Mission Assurance | Supply Maintenance. Personnel use a forklift to move CBRN supplies. | Forklift Operator (710)             | 1                      |

**1. Explanation of Medical Surveillance/Certification Recommendations:** Recommendation for inclusion in a hazard-based medical surveillance program for employees involved in a given operation is based on the industrial hygienist's judgment, either through observation or knowledge of the process or representative sampling, that these employees will be routinely exposed to workplace concentrations at or above 50% of applicable OSHA standards or action levels established by Navy instruction or Federal regulation. Medical certification is required by specific Navy or Federal directive where a certain degree of physical fitness has been judged as necessary for a component of the job (i.e. respirator use) or the job itself (i.e. forklift operators or security guards). Governing references regarding certifications should be followed. Scheduling of these personnel for examination is to be accomplished through Occupational Medicine.

**2. New Medical Surveillance Requirements:** The Supervisor's Medical Surveillance and Certification Exam Referral form (SECNAV 5100.1T) is required to be filled out prior to personnel visiting Occupational Medicine for medical surveillance/certification exams ([https://navalforms.documentservices.dla.mil/formsDir/ SECNAV\\_5100\\_1T\\_10914.pdf](https://navalforms.documentservices.dla.mil/formsDir/ SECNAV_5100_1T_10914.pdf)).

**UPDATED EXPOSURE MONITORING PLAN**  
**MARINE CORPS LOGISTICS BASE ALBANY HEADQUARTERS AND SPECIAL STAFF**  
**MARINE CORPS LOGISTICS BASE ALBANY, GA**  
**REPORT: AL16008**  
**APRIL 2016**

| COMMAND: Marine Corps Logistics Base<br>Albany Headquarters and Special Staff<br>UIC: M67004 | P.O.C: Ms. Cathy Belanger<br>PHONE: 229-639-7149 | SURVEY PERIOD: 2016<br>BY IHO: Alan Dooley<br>ASSIGNED TO IHT: TBD |  |              |              |
|--|--|--|--|--------------|--------------|
| <b>EXPOSURE MONITORING PLAN</b>  |  |  |  |              |              |
| OPERATION AND STRESSOR TO BE MONITORED   | NUMBER OF SAMPLES                                | I METHOD   | II AREA  | III FREQ     | IV MAN-HOURS |
| No monitoring requirements identified at this time.  |  |  |  |              |              |
| Action.  |  |  |  |              |              |
| Monitoring Plan Completion Reviewed By:  |  |  |  | TOTAL HOURS: | <b>0.0</b>   |
| I Method of Measurement  | II Area  | III Frequency  | IV Man-hours (Type/Number of Units/Hours)  |              |              |
| DR--DIRECT READING INSTRUMENT  | BZ--BREATHING ZONE                               | 1 - 1X/YEAR  | AIR: Full Shift for each area: Up to 3   |              | 9            |
| IT ---INDICATOR TUBE   | HZ--HEARING ZONE                                 | 2 - 2X/YEAR  | STEL: Up to 3 samples  |              | 1.5          |
| F ---- FILTER  | GA--GENERAL AREA                                 | 3 - 3X/YEAR  | HEAT STRESS: Full Shift  |              | 8            |
| PD --PERSONAL DOSIMETER  | SZ--SOURCE ZONE                                  | 4 - 4X/YEAR  | NOISE DOSIMETRY: Full Shift: Up to 5   |              | 9            |
| AT --ADSORPTION TUBE (CHARCOAL, SILICA GEL, ETC.)  | O - OTHER (SPECIFY)                              | 5 - 1X/2 YEARS   | NOISE SLM: All Sources: Up to 5  |              | 2.5          |
| W ----WIPE SAMPLE  |  | 6 - 1 X/4 YEARS  | VENTILATION: All Hoods, Tanks, or Exhausts: Up to 5                                |              | 3.5          |
| B ----BULK   |  | 7 - 12X/YEAR   | VENTILATION: Air Changes: Up to 3  |              | 2.5          |
|  |  |  | VENTILATION: Each Walk-In Booth  |              | 2.5          |
|  |  |  | VENTILATION: Operating Rooms: Each survey: 6 rooms (10 air supply/9 exhaust units) |              | 18           |

**Sample Rationale:**

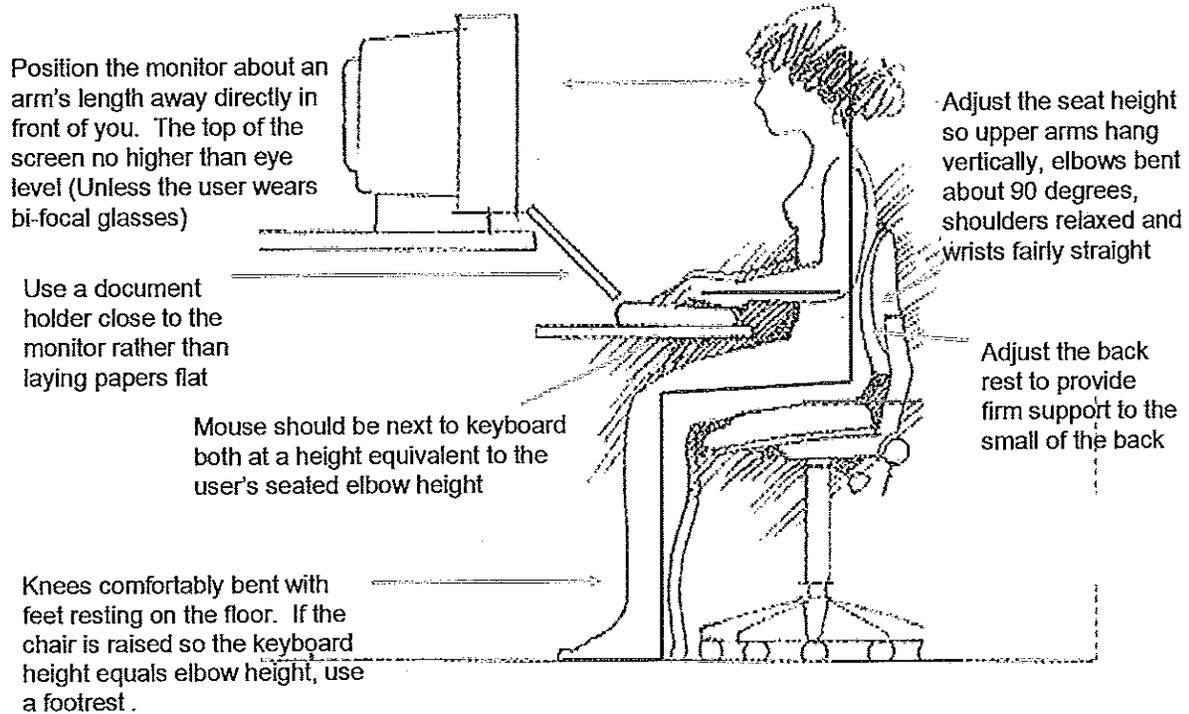
- A: Fulfill regulatory sampling requirements.
- B: Collect sufficient data to allow statistically valid exposure assessments.
- C: Track workplace exposures to determine trends.
- D: Validate professional judgments of unchanged exposure assessments.

**Priority Category:**

- Priority 1: Needed to fulfill regulatory/instructional requirements (Federal, Navy, BUMED, etc).
- Priority 2: Noise dosimetry and non-regulatory personal breathing zone sampling.
- Priority 3: Other sampling needed in order to provide a more accurate or statistically valid exposure assessment.
- Priority 4: Needed to validate professional judgments and/or to refresh existing data

Regardless of the Priority assigned, exposure monitoring is an essential part of the Industrial Hygiene Program for the command. Command and employee support for the sampling process is important. It is requested that every effort be given to cooperating with the personnel assigned to perform the exposure monitoring. Cooperation by both workers and supervisory personnel will expedite the sampling and minimize undue interference with work center operations.

# Neutral Posture for Computer Use



# TIME TO TAKE A COMPUTER BREAK

For every 20 minutes of computer use, look at an object 20 feet away for 20 seconds. This reduces eyestrain.

Move your eyes side to side from top to bottom while you work at your eyes and reduces eyestrain.

Cup your eyes with your hands and close your eyes. Do any direct pressure on your eyes. This relaxes your face and moistens your eyes.

Rotate your ankles. This promotes blood circulation in your legs.

While seated, slouch your neck by pretending there is a plate attached to your head. Tilt it slowly pulling upwards. This will promote good posture and relieve some low back pain.

Slowly pull your arms back as far as you can until you touch your shoulder blades together. This will reduce upper back stress.

As you save, do it gradually with your hands. This relaxes your hands and wrists.

Stretch your upper arm and fingers and wrists. This reduces stress and fatigue. This reduces stress and fatigue. This reduces stress and fatigue.

With your arms at your sides, spread your fingers. This relaxes your arms, hands and feet.

Stretch your shoulders. This eliminates stress from the shoulders and upper back.

**Tip:** Taking 20 second micro-breaks throughout the day to refocus your eyes will reduce fatigue at the end of the day. 20/20 rule: for every 20 minutes of work, rest the eyes 20 seconds.

## CUSTOMER SATISFACTION SURVEY

Industrial Hygiene Department  
Naval Branch Health Clinic, Albany

Command: \_\_\_\_\_ Date: \_\_\_\_\_

Please rate this survey and report by indicating the numbers below that reflect your level of satisfaction:

|   | Level of Satisfaction |   |   |   |      |
|---|-----------------------|---|---|---|------|
|   | Low                   |   |   |   | High |
|   | 1                     | 2 | 3 | 4 | 5    |
| 1. Coordination and/or response to request                  |                       |   |   |   |      |
| 2. Courtesy and professionalism of IH personnel             |                       |   |   |   |      |
| 3. IH personnel's ability to communicate clearly and openly |                       |   |   |   |      |
| 4. Clarity of Report  |                       |   |   |   |      |
| 5. Usefulness of Report                                     |                       |   |   |   |      |
| 6. Exposure Monitoring (if applicable)                      |                       |   |   |   |      |
| 7. Timeliness of Report                                     |                       |   |   |   |      |

7. How can we improve the services we are providing?

8. What other services would you like Industrial Hygiene Services to provide?

9. Additional Comments (add a separate sheet if necessary):

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Shop/Codes: \_\_\_\_\_

PLEASE RETURN THIS SURVEY TO:

Head, Industrial Hygiene Department  
Naval Hospital Jacksonville  
Tamara.r.walker2.civ@mail.mil

**THANKS!!!**