475 Bay Street Tax Block 488, Lot 9

STATEN ISLAND, NEW YORK

Remedial Action Plan

AKRF Project Number: 12461

Prepared for:

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FIGURES

Figure 1 – Site Location

APPENDICES

Appendix A – Construction Health and Safety Plan

1.0 INTRODUCTION

This Remedial Action Plan (RAP) was prepared for the approximately 54,000-square foot Site located at 475 Bay Street in Staten Island, New York (the Site). The Site is also identified as Block 119, Lot 143. The Site consists of a partially asphalt-paved parking lot currently used for vehicle and construction equipment storage. A Site location map is provided as Figure 1. The purpose of this RAP is to present procedures for managing soil and groundwater (if necessary) during any future subsurface disturbance in accordance with applicable federal, state, and local requirements, including guidelines for temporary onsite stockpiling and off-site transportation and disposal of soil. This RAP was prepared in response to the findings of the previous investigations summarized in Section 2.3.

All work outlined within this RAP is subject to the Construction Health and Safety Plan (CHASP) developed for the Site, provided as Appendix A.

2.0 SITE BACKGROUND

2.1 Site Characterization

The Site consists of a partially asphalt-paved parking lot currently used for vehicle and construction equipment storage. Surface topography is generally level. Based on reports compiled by the U.S. Geological Survey (Central Park Quadrangle), the Site is approximately 16 feet above mean sea level.

Soil at the Site generally consists of fill material (sand with silt, gravel, concrete, brick, and asphalt) down to approximately 10 feet below grade underlain by apparent native sand with clay, gravel, and silt. Groundwater was first encountered during AKRF's August 2013 Subsurface (Phase II) Investigation at between approximately 6 and 15 feet below grade. Groundwater is expected to flow towards the harbor, located approximately 600 feet to the east. However, groundwater flow direction can be affected by many factors including subsurface openings or obstructions such as basements, utilities, and other factors.

2.2 Proposed Project

Although there are currently no development plans for the Site, it is assumed that limited subsurface disturbance could occur (e.g., for utility repairs) prior to the more extensive disturbance that would likely be associated with redevelopment.

2.3 **Previous Environmental Investigations**

Phase I Environmental Site Assessment (ESA), 475 Bay Street, Staten Island, New York, ATV Enterprises, 2000

ATV Enterprises (ATV) performed a Phase I ESA of the Site in 2000. According to the report, the Site historically included a coal yard and a filling station with three gasoline underground storage tanks (USTs). Based on these findings, ATV recommended a magnetometer survey and a Subsurface (Phase II) Investigation.

Phase I Environmental Site Assessment (ESA), 475 Bay Street, Staten Island, New York, URS Corporation, April 2013

URS Corporation (URS) performed a Phase I ESA of the Site in April 2013. According to the report, a coal yard with coal pockets and a gasoline filling station with three USTs were shown on

the western portion of the Site in 1937. Nearby off-site uses included a gasoline filling station with several open- and closed-status spills, dry cleaners, and various industrial properties. URS recommended a Subsurface (Phase II) Investigation including the collection and laboratory analysis of soil and groundwater samples.

Ground Penetrating Radar (GPR) Survey, 475 Bay Street, Staten Island, New York, Hager Richter Geoscience, Inc., April 2013

Hager Richter Geoscience, Inc. (HRG) conducted a geophysical investigation across the southwestern and eastern portions of the Site in April 2013. The survey was conducted to investigate the potential presence of underground storage tanks (USTs), underground utilities, vaults, or other subsurface features. A suspected buried concrete pad, buried metal and unidentified objects, and subsurface utilities were identified during the survey.

Subsurface (Phase II) Investigation Report, 475 Bay Street, Staten Island, New York, AKRF, Inc., September 2013

AKRF, Inc. (AKRF) conducted a Subsurface (Phase II) Investigation at the Site in September 2013. The investigation included the advancement of eight soil borings with the collection and laboratory analysis of sixteen soil samples; the installation of four temporary groundwater monitoring wells with the collection and laboratory analysis of four groundwater samples; and the installation of four soil vapor points with the collection and laboratory analysis of four soil vapor samples. Fill materials (including sand with silt, gravel, asphalt, and brick) were observed to depths ranging between 5 and 10 feet below grade, underlain by apparent native material. Groundwater was first encountered at between 6 and 15 feet below grade. The identified fill materials were found to contain somewhat elevated concentrations of pesticides and metals in soil, low levels of semivolatile organic compounds (SVOCs) and metals in groundwater, and low levels of volatile organic compounds (VOCs) in soil vapor.

3.0 CONSTRUCTION MEASURES

Although anomalies consistent with a UST were not identified during the GPR survey, the reliability of geophysical investigations may vary depending on subsurface conditions. Therefore, it is possible that tanks in the anomaly areas or other areas may be encountered during subsurface disturbance. A contingency plan for removal of petroleum storage tanks is provided in Section 3.1.

Soil and fill materials containing somewhat elevated concentrations of metals and pesticides in soil, low levels of SVOCs and metals in groundwater, and low levels of VOCs in soil vapor were identified during AKRF's 2013 investigation. Section 3.2 includes measures for appropriate handling, testing, and disposal of soil including potentially contaminated soil during excavation.

Depending on the depth of the proposed disturbance, groundwater may also be encountered. To the extent that dewatering is required, NYC Department of Environmental Protection permit/approval requirements must be followed, as discussed in Section 3.6.

Following completion of subsurface work, a report should be prepared compiling any manifests/bills of lading, etc. associated with off-site disposal of material, photographs of the work in progress, and any laboratory data conducted for characterization or off-site disposal purposes.

3.1 Petroleum Tank Removal

If encountered, petroleum storage tank(s) and any appurtenances will be cleaned, removed and disposed of in accordance with accepted industry standards and applicable federal, state, and local

regulatory agency requirements. The tank and soil removal from the vicinity of the storage tank(s) will be conducted in accordance with the NYSDEC CP-51 Soil Cleanup Guidance, October 2010. Laboratory analysis of both characterization samples and of samples obtained from the excavation areas will include the CP-51 list of VOCs and SVOCs.

Any tanks encountered at the Site will be registered with NYSDEC and the New York City Fire Department, if necessary. Tank removal activities and any associated petroleum-contaminated soil removal must be documented in a Tank/Spill Closure Report, which will be submitted to NYSDEC.

Typical tank removal procedures are summarized below:

- 1. Open fill cap or vent pipe and measure for product. Collect a sample of the product. Tank contents will be sampled in accordance with applicable federal, state, and local requirements and tested in accordance with the requirements of the receiving facility. Proper disposal of tank contents at an approved facility will be dictated by sample results.
- 2. Excavate to expose the tank. Vacuum liquid tank contents and pumpable tank bottom residue.
- 3. Excavate around the tank with care to avoid release of tank and piping contents. Hand excavation around the tank may be necessary. The sides of all excavated areas will be properly stabilized in accordance with Occupational Health and Safety Administration (OSHA) regulations. Continuously monitor the excavated areas in the worker breathing zone for the presence of flammable, toxic, or oxygen deficient atmosphere with a photoionization detector (PID), a combustible gas indicator (CGI), and an oxygen meter.
- 4. Inert the tank of flammable vapors using dry ice and verify using an oxygen meter (less than seven percent). An access hole will be cut in the tank and the tank will be thoroughly cleaned of residual liquids and sludges.
- 5. Entry of the tank, if necessary, will be conducted in conformance with OSHA confined space requirements.
- 6. Remaining fuels, loose slurry, sludge materials and wastewater will be collected in Department of Transportation (DOT)-approved drums, sampled and analyzed for disposal characterization. After disposal characterization, waste material will be removed and disposed of in accordance with applicable regulations.
- 7. Remove the tank and all associated piping from the ground and clean the outside of the tank. The tank and piping will be rendered "not reusable," removed from the Site and disposed of according to applicable regulations with proper documentation. Remove and dispose of all concrete tank support structures or vaults as encountered.
- 8. Spill reporting to the NYSDEC Spill Hotline (800-457-7362) will be conducted, as necessary.
- 9. After tank removal, examine for evidence of petroleum releases. If there is evidence of a petroleum release, follow procedures for Soil Contamination Plan in addition to the procedures below.
- 10. Suspect materials will be field-screened with a PID. If soil contamination is present, excavate and remove contaminated soil from the tank areas in accordance with the stockpiling and/or direct-loading procedures presented in Sections 3.2.1 and 3.2.2. Material will be excavated until field screening with a PID yields concentrations of less than 20 parts per million (ppm) and until there are no remaining visible signs of contamination or odors. After contaminated soil removal, collect endpoint samples at each sidewall and at the bottom

of the excavation for analytical testing as specified in the NYSDEC, CP-51 Soil Cleanup Guidance, October 2010.

- 11. Photo-document all procedures and record all procedures in a bound field notebook.
- 12. Copies of all testing results, correspondence with disposal facilities concerning classification of materials, and permits/approvals will be maintained by the project manager and will be submitted to the NYSDEC in a Tank Closure Report.
- 13. A signed affidavit will be prepared by the licensed tank installation (removal) contractor and submitted to the New York City Fire Department (FDNY) certifying proper removal of the tank(s).

3.2 Soil Disposal

Soil disposal will be in accordance with federal, state, and local requirements, including those for hazardous waste, industrial waste, petroleum contaminated soil, construction and demolition debris, etc., as applicable. Waste characterization sampling should be conducted to characterize soil for disposal in accordance with receiving facility requirements.

If sludge, soil, or sediment known to be contaminated or showing evidence of potential contamination, such as discoloration, staining, or odors are encountered during excavation activities, the following procedures will be implemented:

- 1. Spill reporting to the NYSDEC Spill Hotline (800-457-7362) will be conducted, as necessary.
- 2. The suspect soil will be sampled for laboratory analyses. Soil samples will be analyzed at a minimum for parameters required by the intended disposal facility.
- 3. If the suspect soil is contaminated based on sampling results, it will be excavated and removed in accordance with the stockpiling and/or direct-loading procedures presented below. Soils intended for off-site disposal will be disposed of in accordance with applicable federal, state, and local requirements and tested in accordance with the requirements of the receiving facility. Additional sample analysis may be required by alternative disposal facilities. Additional analysis may be run on existing sample material at the laboratory as long as all holding time and preservation requirements have not been exceeded. If there are exceedances to these required analysis, additional sampling material is required by the laboratory to complete the required analysis, additional samples may be collected.
- 4. The excavated soil will then be disposed of in accordance with all applicable federal, state, and local regulations.
- 5. The excavation will continue vertically until no evidence of contamination is noted in the base of the excavation or until groundwater or bedrock is encountered. The excavation will continue horizontally until no evidence of contamination is noted in the sidewalls of the excavation. Post-excavation endpoint samples will be collected from the sides and bottom of the excavated area, as required by the NYSDEC. Analytical parameters for post excavation soil samples will be determined based on consultation with the NYSDEC. If post excavation samples exceed action levels, then additional excavation will be performed, as warranted.
- 6. Copies of correspondence with disposal facilities concerning classification of materials, testing results, and permits/approvals will be maintained by the project manager and will be submitted to NYSDEC in a Spill Closure Report.

When applicable, hazardous waste manifest forms and/or non-hazardous waste records will be completed as required by the appropriate regulatory agencies for verifying the material and quantity of each load in units of volume and weight.

3.2.1 Stockpiling Procedures

Any contaminated material intended for off-site disposal may be stockpiled temporarily or loaded directly onto trucks for off-site disposal, if pre-approved by the receiving facility. No petroleum-contaminated soil, hazardous waste, or deleterious materials will be re-used on-site for filling, grading, or other purposes.

Soil for disposal with known contamination or exhibiting evidence of contamination will be stockpiled on polyethylene sheeting. If the soil is expected to remain on-site overnight or longer, the stockpile will be covered with similar polyethylene sheeting and be secured with large rocks or other appropriate weights to protect against leaching or runoff of contaminants into groundwater or stormwater. The surface surrounding the stockpile will be graded to provide for positive drainage away from the pile. Stockpiles will be managed to minimize dust generation, run-off, and erosion using water, plastic covers, silt fences, and/or hay bales, as necessary.

Soil will be segregated and stockpiled based on its known or anticipated type and/or level of contamination (based on analytical data, PID readings, odor, staining, etc.). Stockpiles will be separated by a sufficient distance to ensure that mixing of dissimilar or potentially dissimilar materials does not occur. The location and classification of on-site stockpiles will be tracked with drawings and updated, if necessary, at the end of each workday according to the following categories:

- Soil intended for reuse on-site;
- Hazardous waste for off-site disposal;
- Non-petroleum contaminated non-hazardous soil for off-site disposal;
- Petroleum-contaminated soil for off-site disposal; and
- Soil pending analysis.

Copies of Site drawings will be kept in the field log book. Stockpiles intended for offsite disposal may be mixed with other compatible stockpiles on-site (compatibility will be determined by the requirements of the receiving disposal facility), but hazardous wastes will not be mixed with non-hazardous wastes.

3.2.2 Alternatives to Stockpiling

Alternative procedures to stockpiling could include, but are not limited to, agreement(s) from the intended disposal or treatment facilities to accept boring data and/or analytical data previously obtained so that materials may be directly loaded into trucks for shipment to the disposal facility.

3.3 Waste Management and Transportation

Surplus material will be properly disposed of off-site.

• Any material showing evidence of petroleum contamination from a spill (such as odors, staining, and/or elevated PID readings) will be properly disposed of or recycled off-site in accordance with applicable regulatory requirements and facility requirements.

• Material including historic fill and construction and demolition (C&D) material showing no evidence of petroleum contamination or hazardous waste may be properly disposed of, or alternatively may be reused on-site provided it is beneath the new building's foundation or the Site cap (see Section 4.1).

Transportation of all material leaving the Site for off-site disposal will be in accordance with federal, state, and local requirements (including 6 NYCRR Part 364 and U.S. DOT regulations) covering licensing of haulers and trucks, placarding, truck routes, manifesting, etc.

The schedule for truck arrival will be coordinated to meet the approved project schedule. The schedule will be compatible with the availability of equipment and personnel for material handling operations at the job Site. Trucks will be protected against contamination by properly covering and lining truck beds with compatible material (such as polyethylene) or by decontaminating them prior to any use other than hauling contaminated materials.

All vehicles leaving the Site will be inspected to ensure that soil adhering to the wheels or undercarriage is removed prior to the vehicle leaving the Site. Any situations involving material spilled in transit or mud and dust tracked off-site will be remedied. The truck access routes will be evaluated for road conditions, overhead clearance, and weight restrictions.

Contaminated materials from other projects will not be combined with material from the construction area. The transporter will not deliver waste to any facility other than the facility listed on the shipping manifest.

3.4 Dust Control

To prevent the potential migration of dust that may contain above-background levels of contaminants, the following measures will be implemented during redevelopment (smaller projects should also be conducted in a manner so as to minimize the generation and migration of dust):

- Water will be available (and used) for sprinkling/wetting to suppress dust in dry weather or as necessary.
- All haul trucks will have tarp covers.
- Stabilized construction entrances (e.g., gravel pads) and wash stations will be placed at access points to prevent tracking out of or dispersion of dust.

All work that involves soil disturbance or otherwise generates dust will be performed utilizing methods to minimize dust generation to the extent practicable. Particulate air monitoring requirements will be conducted as discussed in Section 3.5 of this document.

3.5 Air Monitoring

In the event that evidence of soil or groundwater contamination (e.g., sampling indicates hazardous waste, a petroleum-like or organic odor, sheen, or staining) is discovered, an air monitoring program will be implemented during the disturbance of that contamination to avoid or minimize exposure of the field personnel and the public. Results of this air monitoring will be used to determine appropriate response actions. A DustTrak[®] or equivalent would be used to measure real-time concentrations of total particulates 10 micrometers or less (PM_{10}) and a PID would be used to perform air monitoring for VOCs. The PID would be calibrated with isobutylene in accordance with the manufacturer's recommendations.

Measurements for particulate and VOCs would be taken prior to commencement of the work and during the work in areas where contaminated soil would be disturbed. The action levels below

are based on 15-minute averages of the monitoring data. The measurements will be made at the breathing height of the workers, as close to their location as practicable. The Site Safety Officer (SSO) will set up the equipment and confirm that it is working properly. His/her qualified designee may oversee the air measurements during the day. The initial measurement for the day will be performed before the start of work and will establish background levels. The final measurement for the day will be performed after the end of work. The action levels and required responses are listed in Table 1.

Instrument	Action Level (Note 1)	Besnanse Action
Instrument	Action Level (Note 1)	Kesponse Action
	Less than 5 μ g/m ³	Level D or D-Modified (Requires coveralls and steel toe boots) (As applicable: Chemical resistant gloves, chemical resistant boot covers, hard hat, safety glasses, face shield, or escape mask)
Particulate Monitoring	Between 5 μ g/m ³ and 150 μ /m ³	Level C. (Requires full face or half face respirator, hooded chemical resistant two piece Tyvek suit or overalls, chemical resistant inner and outer gloves, chemical resistant boot covers, steel toe and shank boots) (As applicable: hard hat, face shield, or escape mask) Apply dust suppression measures. If less than 2.5 μg/m ³ , resume work using Level D. Otherwise, upgrade Level C.
	Above 150 µg/m ³	Stop work. Apply additional dust suppression measures. Resume work when less than $150 \ \mu g/m^3$ and maintain Level C.
	Less than 5 ppm in breathing zone.	Level D or D-Modified
Volatile Organic Compound	Between 5 and 20 ppm	Level C
Monitoring	More than 20 ppm	Stop work. Resume work when source of vapors is abated and readings are less than 20 ppm above background.

Table 1
Action Levels and Required Responses

3.6 Groundwater Management Plan

Depending on the proposed development plans, dewatering during the proposed project may be necessary. If dewatering is necessary, it will be conducted in accordance with a NYCDEP Bureau of Wastewater Treatment (BWT) Wastewater Quality Control Permit. Groundwater testing, and possibly pre-treatment (dependent upon the testing results), will be necessary to comply with NYCDEP requirements.

4.0 **PROJECT DESIGN MEASURES**

4.1 Site Cap

To the extent that excavated areas are not to be repaved, i.e., when landscaped areas are created, these areas will be covered with a Site soil cap. The cap will consist of two feet (as measured from top of final grade) of either imported clean fill or existing Site soil meeting the criteria for imported clean fill. Soil/fill to be used in the soil cap will be tested at the source facility (for imported fill) or on-site (for excavated Site soil) for Target Compound List (TCL) VOCs, SVOCs, pesticides, PCBs, Target Analyte List (TAL) metals, and hexavalent chromium, and

must meet appropriate 6 NYCRR Part 375 Soil Cleanup Objectives based on the planned use of that area. The clean soil/fill layer will be underlain by a demarcation layer such as orange snow fence to indicate the top of the original soil/fill. In addition to the criteria above, reuse procedures in Section 3.3 of this RAP shall also be followed.

4.2 Vapor Controls

To reduce the potential for vapor intrusion, vapor controls will be incorporated into the foundations of new occupied structures.

5.0 QUALITY ASSURANCE/QUALITY CONTROL

All necessary analyses will be performed by a laboratory that has received approval from the New York State Department of Health's Environmental Laboratory Approval Program (ELAP) for the methods that require analysis.

5.1 Sample Collection

Samples will be collected in accordance with the following procedures:

- Record sample observations (evidence of contamination, PID readings, soil classification) in field log book.
- Collect an aliquot of soil or groundwater using a dedicated and disposable plastic sample spoon or sample bailer and place in laboratory-supplied sample jars. One grab sample will be collected for VOC analysis, if applicable. One composite sample will be collected for all other analyses.
- Seal and label the sample jars as described in Section 5.6 and place in a chilled cooler.

5.2 Decontamination Procedures

To avoid contamination and cross-contamination of samples, only dedicated or disposable sampling equipment may be used to collect these samples. All non-disposable equipment involved in field sampling must be decontaminated before being brought to the sampling location, and must be properly decontaminated after use.

5.3 Sample Identification

All samples will be consistently identified in all field documentation, chain-of-custody (COC) documents and laboratory reports using an alpha-numeric or alpha-alpha code with the date of collection in "yyyy-mm-dd" format. For stockpiled soil, the alpha prefix will be "SP" and the numbers following the alpha prefix will correspond to excavated stockpiles, beginning with "1, 2, 3…etc." For example, the sample collected from the first stockpile on May 1, 2016 will be labeled "SP-1 20160501" and the sample collected from the second stockpile on May 1, 2016 will be labeled "SP-2 20160501".

For groundwater samples, the alpha prefix will be "GW" and the number following the prefix will correspond to the sample number with the date of collection in "yyyy-mm-dd" format. For example, the first groundwater sample collected for sample analysis on May 1, 2016 will be labeled "GW-1 20160501" and the second sample collected on May 1, 2016 will be "GW-2 20160501".

5.4 Sample Labeling and Shipping

All sample containers will be labeled with the following information:

- Site identification
- Sample identification
- Date and time of collection
- Analysis(es) to be performed
- Sampler's initials

Once the samples are collected and labeled, they will be placed in chilled coolers and stored in a cool area away from direct sunlight to await shipment to the laboratory. Soil samples will be shipped to the laboratory at a frequency that will not result in an exceedance of applicable holding times for sample methods. At the start and end of each workday, field personnel will add ice to the coolers as needed.

The samples will be prepared for shipment by placing each sample jar in a sealable plastic bag, then wrapping each bag in bubble wrap to prevent breakage, adding freezer packs and/or fresh ice in sealable plastic bags and the COC form. Samples will be shipped overnight (e.g., Federal Express) or transported by a laboratory courier. All coolers shipped to the laboratory will be sealed with mailing tape and a COC seal to ensure that the coolers remain sealed during delivery.

5.5 Sample Custody

Field personnel will be responsible for maintaining the sample coolers in a secured location until they are picked up and/or sent to the laboratory. The record of possession of samples from the time they are obtained in the field to the time they are delivered to the laboratory or shipped offsite will be documented on COC forms. The COC forms will contain the following information: project name; names of sampling personnel; sample number; date and time of collection and matrix; and signatures of individuals involved in sample transfer, and the dates and times of transfers. Laboratory personnel will note the condition of the custody seal and sample containers at sample check-in at the laboratory.

5.6 Documentation

A sample log book will be maintained. The following information, at a minimum, will be recorded to the log:

- Sample identification number
- Sample location
- Field Observations
- Sample Type
- Analyses
- Date/Time of collection
- Collector's name
- Sample procedures and equipment utilized
- Date sent to laboratory/name of laboratory
- Copies of Site drawings indicating stockpile numbers and locations

FIGURE



APPENDIX A Construction Health and Safety Plan

475 Bay Street Tax Block 488, Lot 9

STATEN ISLAND, NEW YORK

Construction Health and Safety Plan

AKRF Project Number: 12461

Prepared for:

BFC Partners 150 Myrtle Avenue, Suite 2 Brooklyn, New York 11201



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Figure 1 – Site Location

Figure 2 – Hospital Location Map

APPENDICES

Appendix A – Potential Health Effects from On-site Contaminants

Appendix B – Report Forms

- Appendix C Emergency Hand Signals
- Appendix D Vapor Barrier Specifications

1.0 PURPOSE

This Construction Health and Safety Plan (CHASP) was prepared for the approximately 54,000-square foot parcel located at 475 Bay Street in Staten Island, New York ("the Site"), also identified as Tax Block 119, Lot 143. The Site consists of a partially asphalt-paved parking lot currently being used for vehicle and construction equipment storage. A location map is provided as Figure 1.

The purpose of this CHASP is to assign responsibilities, establish personnel protection standards and mandatory safety practices and procedures, and provide for contingencies that may arise during construction at the Site. The CHASP is intended to minimize health and safety risks resulting from the known or potential presence of subsurface hazardous materials.

This plan is not designed to address geotechnical, mechanical, or general construction safety concerns, nor to supersede or replace any Occupation Safety and Health Administration (OSHA) regulation, and/or local and state construction codes or regulations.

2.0 APPLICABILITY

Work subject to this CHASP includes all activities that disturb the existing soil on-site. The contractors and their subcontractors involved in the disturbance will provide a copy of this CHASP to their employees whose work involves any potential exposure to on-site soil, and will complete all work in accordance with this CHASP.

3.0 SITE DESCRIPTION

3.1 General Information

The Site is an approximately 54,000-square foot, partially asphalt-paved parking lot currently being used for vehicle and construction equipment storage. The surface topography of the Site is generally level. The Site is approximately 16 feet above mean sea level.

Soil at the Site generally consists of fill material (sand with silt, gravel, concrete, brick, and asphalt) down to approximately 10 feet below grade underlain by apparent native sand with clay, gravel, and silt. Groundwater was first encountered during AKRF's August 2013 Subsurface (Phase II) Investigation at between approximately 6 and 15 feet below grade. Groundwater is expected to flow towards the harbor, located approximately 600 feet to the east. However, groundwater flow direction can be affected by many factors.

3.2 Hazard Potential

The hazard potential was evaluated based on the findings of the 2000 Phase I Environmental Site Assessment (ESA) by ATV Enterprises, 2000; the April 2013 *Phase I Environmental Site Assessment (ESA)* by URS Corporation, the April 2013 *Ground Penetrating Radar (GPR) Survey* by Hager Richter Geoscience, Inc., and the September 2013 *Subsurface (Phase II) Investigation Report* by AKRF, Inc.

3.3 Hazard Evaluation

The most likely routes of exposure are breathing of VOCs and/or SVOCs or particulate-laden air released during soil disturbing activities, dermal contact, and accidental ingestion. Appendix A includes Site-specific health effects from chemicals present or potentially present on-site.

Although some of the chemicals of concern listed in the sections below were not detected during the Subsurface Investigation, they are included here as a precaution. The remaining sections of this CHASP address procedures (including training, air monitoring, work practices, and emergency response) to reduce the potential for unnecessary and unacceptable exposure to these contaminants.

The potential adverse health effects from these detected contaminants are diverse. Many of these compounds are known or suspected to result in chronic illness from long-term exposures. However, due to the limited nature of the proposed construction, only acute effects are a potential concern.

This CHASP addresses potential environmental hazards from the presence of hazardous materials. It is not intended to address the normal hazards of construction work, which are separately covered by OSHA regulations and/or local and state construction codes and regulations.

3.3.1 Hazards of Concern

Check all that apply

11.5		
(×) Organic Chemicals	(×) Inorganic Chemicals	() Radiological
() Biological	() Explosive/Flammable	() Oxygen Deficient Atm.
(×) Heat Stress	(×) Cold Stress	() Other
Comments:		

Comments:

No personnel are permitted to enter permit confined spaces

3.3.2 Physical Characteristics

Check all that apply				
(×) Liquid	(×) Solid	() Sludge		
(×) Vapors	() Unknown	() Other		

3.3.3 Hazardous Materials

Check all that apply					
Chemicals	Solids	Sludges	Solvents	Oils	Other
() Acids	() Ash	() Paints	(x) Halogens	() Transformer	() Lab
() Caustics	() Asbestos	() Metals	(x) Petroleum	() Other DF	() Pharm.
(x) Pesticides	() Tailings	() POTW	() Other	() Motor or	() Hospital
				Hydraulic Oil	
(x) Petroleum	(x) Other:	() Other – Tars		() Gasoline	() Rad.
	Fill Material	& Other NAPL			
() Inks				(X) Fuel Oil	() MGP
() PCBs					() Mold
(x) Metals					() Cyanide
(x) Other:					
VOCs, SVOCs					

Chemicals	REL/PEL/STEL (ppm)	Health Hazards
Arsenic	$PEL = 0.5 mg/m^3$	Irritation skin, possible dermatitis; respiratory distress; diarrhea; kidney damage; muscle tremor, convulsions; possible gastrointestinal tract, reproductive effects; possible liver damage.
Barium	$\begin{aligned} \text{REL} &= 0.5 \text{ mg/m}^3 \\ \text{PEL} &= 0.5 \text{ mg/m}^3 \end{aligned}$	Irritation eyes, skin, upper respiratory system; skin burns; gastroenteritis; muscle spasm; slow pulse, extrasystoles; hypokalemia.
Benzene	REL = 0.1 ppm PEL = 1 ppm STEL = 5 ppm	Irritation eyes, skin, nose, respiratory system; dizziness; headache, nausea, staggered gait; anorexia, lassitude, dermatitis; bone marrow depression, potential occupational carcinogen.
Chromium	$REL = 0.5 mg/m^3$ $PEL = 1 mg/m^3$	Irritation eyes, skin; lung fibrosis (histologic).
Copper	$REL = 1 mg/m^3$ $PEL = 1 mg/m^3$	Irritation eyes, nose, pharynx; nasal septum perforation; metallic taste; dermatitis; in animals: lung, liver, kidney damage; anemia
Ethylbenzene	REL = 100 ppm PEL = 100 ppm	Irritation eyes, skin, mucous membrane; headache; dermatitis; narcosis, coma
Fuel Oils	$REL = 350 \text{ mg/m}^3$ $PEL = 400 \text{ ppm}$	Nausea, irritation – eyes, hypertension, headache, light- headedness, loss of appetite, poor coordination; long-term exposure – kidney damage, blood clotting problems; potential carcinogen.
Lead	$REL = 0.05 \text{ mg/m}^3$ $PEL = 0.05 \text{ mg/m}^3$	Lassitude (weakness, exhaustion), insomnia; facial pallor; anorexia, weight loss, malnutrition; constipation, abdominal pain, colic; anemia; gingival lead line; tremor; paralysis wrist, ankles; encephalopathy; kidney disease; irritation eyes; hypertension.
Mercury	REL = 0.05 mg/m^3 PEL = 0.1 mg/m^3	Irritation eyes, skin; cough, chest pain, dyspnea (breathing difficulty), bronchitis, pneumonitis; tremor, insomnia, irritability, indecision, headache, lassitude (weakness, exhaustion); stomatitis, salivation; gastrointestinal disturbance, anorexia, weight loss; proteinuria.
Nickel	$REL = 0.015 \text{ mg/m}^3$ $PEL = 1 \text{ mg/m}^3$	Sensitization dermatitis, allergic asthma, pneumonitis; [potential occupational carcinogen].
Tetrachloroethylene	PEL = 100 ppm	Irritation eyes, skin, nose, throat, respiratory system; nausea; flush face, neck; dizziness, incoordination; headache, drowsiness; skin erythema (skin redness); liver damage; [potential occupational carcinogen].
Polycyclic Aromatic Hydrocarbons (PAHs)	$PEL = 5 mg/m^3$	Harmful effects to skin, bodily fluids, and ability to fight disease, reproductive problems; [potential occupational carcinogen]
Polychlorinated Biphenyls (PCBs)	$\begin{array}{c} PCB-1242: REL = 1 mg/m^{3} \\ PEL = 0.001 mg/m^{3} \\ PCB-1254: REL = 0.5 mg/m^{3} \\ PEL = 0.001 mg/m^{3} \end{array}$	Rash; anemia, liver, stomach, thyroid damage; reduced ability to fight disease; impaired reproduction.
Xylenes	REL = 100 ppm PEL = 100 ppm	Irritation eyes, skin, nose, throat; dizziness, excitement, drowsiness, poor coordination, staggering gait; corneal vacuolization; anorexia, nausea, vomiting, abdominal pain; dermatitis.
Zinc	$REL = 5 mg/m^{3}$ $PEL = 15 mg/m^{3}$	Metal fume fever: chills, muscle ache, nausea, fever, dry throat, cough; lassitude (weakness, exhaustion); metallic

3.3.4 Chemicals of Concern

Chemicals	REL/PEL/STEL (ppm)	Health Hazards		
		taste; headache; blurred vision; low back pain; vomiting; malaise (vague feeling of discomfort); chest tightness; dyspnea (breathing difficulty), rales, decreased pulmonary function.		
Comments:				
STEL = Short Term Exposure Limit				
REL = National Institute for Occupational Safety and Health (NIOSH) Recommended Exposure Limit				

PEL = OSHA Permissible Exposure Limit

4.0 HEALTH AND SAFETY OFFICER

The contractor or engineer will designate one of its personnel as the Site Safety Officer (SSO). The SSO will be a competent person responsible for the implementation of this plan. The SSO will have completed a 40-hour training course (updated by an annual refresher) that meets OSHA requirements of 29 CFR Part 1910, Occupational Safety and Health Standards. The SSO has stop-work authorization, which he/she will execute on his/her determination of an imminent safety hazard, emergency situation, or other potentially dangerous situation. If the SSO must be absent from the Site, he/she will designate a suitably qualified replacement that is familiar with the CHASP.

5.0 TRAINING

All those who enter the work area while intrusive activities are being performed must recognize and understand the potential hazards to health and safety. All construction personnel upon entering the Site must attend a brief training meeting, its purpose being to:

- Make workers aware of the potential hazards they may encounter;
- Instruct workers on how to identify potential hazards,
- Provide the knowledge and skills necessary for them to perform the work with minimal risk to health and safety;
- Make workers aware of the purpose and limitations of safety equipment; and
- Ensure that they can safely avoid or escape from emergencies.

Each member of the construction crew will be instructed in these objectives before he/she goes onto the Site. Construction personnel will be responsible for identifying potential hazards in the work zone. The SSO or other suitably trained individual will be responsible for conducting the training program. Others who enter the Site must be accompanied by a suitably-trained construction worker.

6.0 GENERAL WORK PRACTICES

To protect the health and safety of the field personnel, all field personnel will adhere to the guidelines listed below during activities involving subsurface disturbance in contaminated areas.

• Eating, drinking, chewing gum or tobacco, and smoking are prohibited, except in designated areas on the Site. These areas will be designated by the SSO.

- Workers must wash their hands and face thoroughly on leaving the work area and before eating, drinking, or any other such activity. The workers should shower as soon as possible after leaving the Site.
- Contact with contaminated or suspected surfaces should be avoided.
- The buddy system should always be used; each buddy should watch for signs of fatigue, exposure, and heat stress.

7.0 PERSONAL PROTECTIVE EQUIPMENT & AIR MONITORING

7.1 Personal Protective Equipment

The personal protection equipment required for various kinds of Site investigation tasks are based on 29 CFR 1910.120, Hazardous Waste Operations and Emergency Response, Appendix B, "General Description and Discussion of the Levels of Protection and Protective Gear."

During the implementation of air monitoring, if deemed appropriate by the SSO, Site personnel will wear, at a minimum, Level D personal protective equipment. The protection will be based on the air monitoring described in Section 7.2.

LEVEL OF PROTECTION	& PPE	1 – Excavation	2 – Other Earth Moving Activities
Level D (×) Steel Toe Shoes (×) Hard Hat (×) Work Gloves	 (×) Safety Glasses () Face Shield (×) Ear Plugs (within 25 ft of excavator) (×) Latex Gloves 	Yes	Yes
Level D – Modified (<i>in addition to Level D</i>) (×) Tyvek Coveralls	(×) Nitrile Gloves() Overboots() Saranex(Coveralls	As Necessary	As Necessary
Level C (in addition to Level D – Modified) (×) Half-Face Respirator & (×) Safety Glasses OR (×) Full Face Respirator () Full-Face PAPR	 () Particulate Cartridge () Organic Cartridge (×) Dual Organic/ Particulate Cartridge 	If PID > 5 ppm (breathing zone)	If PID > 5 ppm (breathing zone)

Level of Protection Summary

Cartridges to be changed out at least once per shift unless warranted beforehand (e.g., more difficult to breathe or any odors detected).

PID = photoionization detector ppm = parts per million

7.2 Work Zone Air Monitoring

Monitoring with a particulate air monitor will be conducted during excavation and other earth moving activities only in the event that contamination is encountered. Real time air monitoring will be performed with a PID during sampling and excavation work in areas where petroleum or other VOCs are detected. Measurements would be taken prior to commencement of work and continuously during the work as outlined in the following table. Measurements will be made as close to the workers as practicable and at the breathing height of the workers. The SSO will set up the equipment and confirm that it is working properly. His/her designee may oversee the air measurements during the day. The initial measurement for the day will be performed before the start of work and will establish the background level for that day. The final measurement for the day will be performed after the end of work. The action levels and required responses are listed in the following table:

	Task to be		
Instrument	Monitored	Action Level	Response Action
	Excavation	Less than 5 ppm in breathing zone.	Level D or D-Modified
(Minirae 2000 or	disturbing	Between 5 and 20 ppm	Level C
equivalent)	contaminated soil	More than 20 ppm	Stop work. Resume work when readings are less than 20 ppm.
		Less than 5 μ g/m ³	Level D
Particulate monitor (MIE 1000 Personal	Excavation activities disturbing contaminated soil	Between 5 μ g/m ³ and 150 μ g/m ³	Level C. Apply dust suppression measures. If < 2.5 µg/m ³ , resume work using Level D. Otherwise, use Level C.
DataRam or equivalent)		Above 150 µg/m ³	Stop work. Apply additional dust suppression measures. Resume work when less than 150 μg/m ³ .
Notes: PID = photoionization detector ppm = parts per million $\mu g/m^3$ = micrograms per cubic meter			

Action Levels and Required Safety Response Actions

Field personnel will be trained in the proper operation of all field instruments at the start of the field program. Instruction manuals for the equipment will be on file at the Site for referencing proper operation, maintenance, and calibration procedures.

The equipment will be calibrated according to manufacturer specifications at the start of each day of fieldwork. If an instrument fails calibration, the project manager will be contacted immediately to obtain a replacement instrument and arrange for repairs. A calibration log will be maintained to record the date of each calibration, any failure to calibrate and corrective actions taken. The PID will be calibrated each day using 100 ppm isobutylene standard gas.

8.0 DECONTAMINATION PROCEDURES

8.1 Personnel Decontamination

Personnel decontamination, if deemed necessary by the SSO, will take place in a designated decontamination area. This area will be delineated during each stage of work. Personnel decontamination will consist of the following steps:

- Soap and potable water wash and potable water rinse of gloves;
- Coverall removal (if applicable);
- Glove removal;
- Disposable clothing removal; and
- Field wash of hands and face.

8.2 Sampling Equipment Decontamination

Any non-disposable sampling equipment for confirmatory sampling or other equipment that is in contact with contaminated materials will be decontaminated in accordance with the following procedure:

- Double wash with solution of Simple Green[®] and clean tap water;
- Double rinse with clean tap water;
- Rinse with clean distilled water; and
- Allow equipment to air dry.

8.3 Heavy Equipment Decontamination

If heavy equipment comes in contact with contaminated materials, it will be decontaminated prior to being relocated to a clean area or leaving the Site. A designated decontamination pad will be constructed, where soil, dust, and/or oil will be washed off the exterior, undercarriage, and wheels or tracks of the equipment. Wash water will be collected for treatment and/or disposal.

9.0 EMERGENCY RESPONSE

9.1 Emergency Procedures

In the event that an emergency develops at the Site, the procedures delineated herein are to be immediately followed. Emergency conditions are considered to exist if:

- Any member of the field crew is involved in an accident or experiences any adverse effects or symptoms of exposure while on-site.
- A condition is discovered that suggests the existence of a situation creating a higher health hazard than anticipated.
- A spill of oil or other hazardous materials.

General emergency procedures and specific procedures for personal injury and chemical exposure are described below. In the event of an accident or emergency, an Incident Report form should

be filled out and placed in the project file. An example Incident Report form is provided in Appendix B. Information on emergency hand signals is provided in Appendix C.

9.1.1 Chemical Exposure

If a member of the field crew demonstrates symptoms of chemical exposure the procedures outlined below should be followed:

- Another team member (buddy) should remove the individual from the immediate area of contamination. The buddy should communicate to the SSO (via voice and hand signals) of the chemical exposure. The SSO should contact the appropriate emergency response agency.
- Precautions should be taken to avoid exposure of other individuals to the chemical.
- If the chemical is on the individual's clothing, the chemical should be neutralized or removed if it is safe to do so.
- If the chemical has contacted the skin, the skin should be washed with copious amounts of water.
- In case of eye contact, an emergency eye wash should be used. Eyes should be washed for at least 15 minutes.
- All chemical exposure incidents must be reported in writing to the project manager. The SSO is responsible for completing the Incident Report Form.

9.1.2 Personal Injury

In case of personal injury at the Site, the following procedures should be followed:

- Another team member (buddy) should signal the SSO that an injury has occurred.
- A field team member trained in first aid can administer treatment to an injured worker.
- If deemed necessary, the victim should then be transported to the nearest hospital or medical center. If necessary, an ambulance should be called to transport the victim.
- The SSO is responsible for making certain that an Incident Report Form is completed. This form is to be submitted to the AKRF Health and Safety Officer. Follow-up action should be taken to correct the situation that caused the accident.
- Any incident (near miss, Site damage, first aid, medical treatment, etc.) must be reported.

A first-aid kit, eye-wash, and blood-borne pathogens kit will be kept on-site during the field activities.

9.1.3 Evacuation Procedures

- The SSO will initiate evacuation procedures by signaling to leave the Site or containment structure.
- All personnel in the work area should evacuate the area and meet in the common designated area.

- All personnel suspected to be in or near the contract work area should be accounted for and the whereabouts or missing persons determined immediately.
- The SSO will then give further instruction.

9.1.4 Procedures Implemented in the Event of a Major Fire, Explosion, or Emergency

- Notify the paramedics and/or fire department, as necessary;
- Signal the evacuation procedure previously outlined and implement the entire procedure;
- Isolate the area;
- Stay upwind of any fire;
- Keep the area surrounding the problem source clear after the incident occurs; and
- Complete accident report for and distribute to appropriate personnel.

9.1.5 Spill Response

All personnel must take every precaution to minimize the potential for spills during Site operations. Any spill will be reported immediately to the SSO. The SSO will then determine and report any required spills to the NYCDEP and/or NYSDEC Hotlines. Spill control apparatus (sorbent materials) will be located on-site. All materials used for the cleanup of spills will be containerized and labeled separately from other wastes. The SSO, in consultation with the project manager, will determine if additional spill response measures are required.

9.2 Hospital Directions

The **Richmond University Medical Center** is located at 355 Bard Avenue, Staten Island, New York 10310, as shown on Figure 2.

Hospital Name:	Richmond University Medical Center		
Phone Number:	(718) 818-1234		
Address/Location:	355 Bard Avenue, Staten Island, New York 10310		
Directions:	1. Head north on Bay Street toward William Street.		
	2. Turn left onto Clinton Street.		
	3. Turn left onto St. Paul's Avenue.		
	4. Turn right onto Cebra Avenue.		
	5. Continue onto Castleton Avenue.		
	6. Turn right onto Bard Avenue.		
	7. The emergency room will be on the right.		

Hospital Information and Directions

9.3 CHASP Contact Information

AKRF Project Manager – Deborah Shapiro	(646) 388-9544 (office)
Site Safety Officer (SSO) – Amy Jordan	
AKRF Project Principal – Marcus Simons	

AKRF Project Manager Alternate – Stephen Malinowski	(631) 574-3724 (office)
Site Safety Officer (SSO) Alternate – Drew Lewis	(201) 841-8479 (cell)
Ambulance, Fire, and Police Departments	
Local Poison Control	(212) 764-7667 pm/weekend (212) 340-4494
NYSDEC Spill Response Team	
NYCDEP Hotline	(718) DEP-HELP

10.0 APPROVAL & ACKNOWLEDGMENTS OF CHASP

APPROVAL

Signed:		Date:	
	Project Manager		
Signed:		Date:	

Health and Safety Officer

Below is an affidavit that must be signed by all workers who enter the Site. A copy of the CHASP must be on-site at all times and will be kept by the SSO.

AFFIDAVIT

I, ______ (name), of ______ (company name), have read the Construction Health and Safety Plan (CHASP) for 475 Bay Street in Staten Island, New York. I agree to conduct all on-site work in accordance with the requirements set forth in this CHASP and understand that failure to comply with this CHASP could lead to my removal from the Site.

Signed:	Company:	Date:
Signed:	Company:	Date:

CONSTRUCTION HEALTH AND SAFETY PLAN FIGURES





CONSTRUCTION HEALTH AND SAFETY PLAN APPENDIX A POTENTIAL HEALTH EFFECTS FROM ON-SITE CONTAMINANTS

ARSENIC CAS # 7440-38-2

Division of Toxicology ToxFAQsTM

This fact sheet answers the most frequently asked health questions (FAQs) about arsenic. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It's important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Exposure to higher than average levels of arsenic occurs mostly in the workplace, near hazardous waste sites, or in areas with high natural levels. At high levels, inorganic arsenic can cause death. Exposure to lower levels for a long time can cause a discoloration of the skin and the appearance of small corns or warts. Arsenic has been found at 1,014 of the 1,598 National Priority List sites identified by the Environmental Protection Agency (EPA).

What is arsenic?

Arsenic is a naturally occurring element widely distributed in the earth's crust. In the environment, arsenic is combined with oxygen, chlorine, and sulfur to form inorganic arsenic compounds. Arsenic in animals and plants combines with carbon and hydrogen to form organic arsenic compounds.

Inorganic arsenic compounds are mainly used to preserve wood. Organic arsenic compounds are used as pesticides, primarily on cotton plants.

What happens to arsenic when it enters the environment?

 \Box Arsenic cannot be destroyed in the environment. It can only change its form.

 \Box Arsenic in air will settle to the ground or is washed out of the air by rain.

□ Many arsenic compounds can dissolve in water.

 \Box Fish and shellfish can accumulate arsenic, but the arsenic in fish is mostly in a form that is not harmful.

How might I be exposed to arsenic?

□ Eating food, drinking water, or breathing air containing arsenic.

Breathing contaminated workplace air.

□ Breathing sawdust or burning smoke from wood treated with arsenic.

Living near uncontrolled hazardous waste sites containing arsenic.

Living in areas with unusually high natural levels of arsenic in rock.

How can arsenic affect my health?

Breathing high levels of inorganic arsenic can give you a sore throat or irritated lungs. Ingesting high levels of inorganic arsenic can result in death. Lower levels of arsenic can cause nausea and vomiting, decreased production of red and white blood cells, abnormal heart rhythm, damage to blood vessels, and a sensation of "pins and needles" in hands and feet.

Ingesting or breathing low levels of inorganic arsenic for a long time can cause a darkening of the skin and the

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, Public Health Service Agency for Toxic Substances and Disease Registry



December 2003

ToxFAQs[™] Internet address is http://www.atsdr.cdc.gov/toxfaq.html

appearance of small "corns" or "warts" on the palms, soles, and torso.

Skin contact with inorganic arsenic may cause redness and swelling.

Organic arsenic compounds are less toxic than inorganic arsenic compounds. Exposure to high levels of some organic arsenic compounds may cause similar effects as inorganic arsenic.

How likely is arsenic to cause cancer?

Several studies have shown that inorganic arsenic can increase the risk of lung cancer, skin cancer, bladder cancer, liver cancer, kidney cancer, and prostate cancer. The World Health Organization (WHO), the Department of Health and Human Services (DHHS), and the EPA have determined that inorganic arsenic is a human carcinogen.

How can arsenic affect children?

We do not know if exposure to arsenic will result in birth defects or other developmental effects in people. Birth defects have been observed in animals exposed to inorganic arsenic.

It is likely that health effects seen in children exposed to high amounts of arsenic will be similar to the effects seen in adults.

How can families reduce the risk of exposure to arsenic?

□ If you use arsenic-treated wood in home projects, you should wear dust masks, gloves, and protective clothing to decrease exposure to sawdust.

□ If you live in an area with high levels of arsenic in water or soil, you should use cleaner sources of water and limit contact with soil.

Is there a medical test to show whether I've been exposed to arsenic?

There are tests to measure the level of arsenic in blood, urine, hair, or fingernails. The urine test is the most reliable test for arsenic exposure within the last few days. Tests on hair and fingernails can measure exposure to high levels or arsenic over the past 6-12 months. These tests can determine if you have been exposed to above-average levels of arsenic. They cannot predict how the arsenic levels in your body will affect your health.

Has the federal government made recommendations to protect human health?

EPA has set limits on the amount of arsenic that industrial sources can release to the environment and has restricted or canceled many uses of arsenic in pesticides. EPA has set a limit of 0.01 parts per million (ppm) for arsenic in drinking water.

The Occupational Safety and Health Administration has set limits of 10 μ g arsenic per cubic meter of workplace air (10 μ g/m³) for 8 hour shifts and 40 hour work weeks.

Source of Information

Agency for Toxic Substances and Disease Registry (ATSDR). 2000. Toxicological Profile for Arsenic. Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology, 1600 Clifton Road NE, Mailstop F-32, Atlanta, GA 30333. Phone: 1-888-422-8737, FAX: 770-488-4178. ToxFAQsTM Internet address is http://www.atsdr.cdc.gov/toxfaq.html . ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.





BARIUM AND COMPOUNDS CAS # 7440-39-3

Division of Toxicology and Environmental Medicine ToxFAQsTM

This fact sheet answers the most frequently asked health questions (FAQs) about barium and barium compounds. For more information, call the ATSDR Information Center at 1-800-232-4636. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It is important you understand this information because these substances may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Exposure to barium occurs mostly in the workplace or from drinking contaminated water. Ingesting drinking water containing levels of barium above the EPA drinking water guidelines for relatively short periods of time can cause gastrointestinal disturbances and muscle weakness. Ingesting high levels for a long time can damage the kidneys. Barium and barium compounds have been found in at least 798 of the 1,684 National Priority List sites identified by the Environmental Protection Agency (EPA).

What is barium?

Barium is a silvery-white metal which exists in nature only in ores containing mixtures of elements. It combines with other chemicals such as sulfur or carbon and oxygen to form barium compounds.

Barium compounds are used by the oil and gas industries to make drilling muds. Drilling muds make it easier to drill through rock by keeping the drill bit lubricated. They are also used to make paint, bricks, ceramics, glass, and rubber.

Barium sulfate is sometimes used by doctors to perform medical tests and to take x-rays of the gastrointestinal tract.

What happens to barium when it enters the environment?

□ Barium gets into the air during the mining, refining, and production of barium compounds, and from the burning of coal and oil.

□ The length of time that barium will last in air, land, water, or sediments depends on the form of barium released.

□ Barium compounds, such as barium sulfate and barium carbonate, which do not dissolve well in water, can last a long time in the environment.

□ Barium compounds, such as barium chloride, barium nitrate, or barium hydroxide, that dissolve easily in water usually do not last in these forms for a long time in the environment. The barium in these compounds that is dissolved in water quickly combines with sulfate or carbonate that are naturally found in water and become the longer lasting forms (barium sulfate and barium carbonate).

□ Fish and aquatic organisms can accumulate barium.

How might I be exposed to barium?

□ Ingesting small amounts present in your food and water or breathing air containing very low levels of barium.

Living in areas with unusually high natural levels of barium in the drinking water.

U Working in a job that involves barium production or use.

 \Box Living or working near waste sites where barium has been disposed of.

How can barium affect my health?

The health effects of the different barium compounds depend on how well the compound dissolves in water or in the stomach contents. Barium compounds that do not dissolve well, such as barium sulfate, are not generally harmful.

August 2007

BARIUM AND COMPOUNDS CAS # 7440-39-3

ToxFAQs[™] Internet address is http://www.atsdr.cdc.gov/toxfaq.html

Barium has been found to potentially cause gastrointestinal disturbances and muscular weakness when people are exposed to it at levels above the EPA drinking water standards for relatively short periods of time. Some people who eat or drink amounts of barium above background levels found in food and water for a short period may experience vomiting, abdominal cramps, diarrhea, difficulties in breathing, increased or decreased blood pressure, numbness around the face, and muscle weakness. Eating or drinking very large amounts of barium compounds that easily dissolve can cause changes in heart rhythm or paralysis and possibly death. Animals that drank barium over long periods had damage to the kidneys, decreases in body weight, and some died.

How likely is barium to cause cancer?

The Department of Health and Human Services (DHHS) and the International Agency for Research on Cancer (IARC) have not classified barium as to its carcinogenicity. The EPA has determined that barium is not likely to be carcinogenic to humans following ingestion and that there is insufficient information to determine whether it will be carcinogenic to humans following inhalation exposure.

How can barium affect children?

We do not know whether children will be more or less sensitive than adults to barium toxicity. A study in rats that swallowed barium found a decrease in newborn body weight; we do not know if a similar effect would be seen in humans.

How can families reduce the risks of exposure to barium?

The greatest potential source of barium exposure is through food and drinking water. However, the amount of barium in foods and drinking water are typically too low to be of concern.

Is there a medical test to determine whether I've been exposed to barium?

There is no routine medical test to determine whether you have been exposed to barium. Doctors can measure barium in body tissues and fluids, such as bones, blood, urine, and feces, using very complex instruments. These tests cannot be used to predict the extent of the exposure or potential health effects.

The geometric mean barium level measured in the U.S. general population aged 6 and older is reported by the Centers for Disease Control and Prevention (CDC) as $1.44 \,\mu$ g/g creatinine (measured in urine).

Has the federal government made recommendations to protect human health?

The EPA has set a limit of 2.0 milligrams of barium per liter of drinking water (2.0 mg/L), which is the same as 2 ppm.

The Occupational Safety and Health Administration (OSHA) has set Permissible Exposure Limits (PELs) of 0.5 milligrams of soluble barium compounds per cubic meter of workplace air (0.5 mg/m³) for 8 hour shifts and 40 hour work weeks. The OSHA limits for barium sulfate dust are 15 mg/m³ of total dust and 5 mg/m³ for respirable fraction.

The National Institute for Occupational Safety and Health (NIOSH) has set Recommended Exposure Limits (RELs) of 0.5 mg/m³ for soluble barium compounds. The NIOSH has set RELs of 10 mg/m^3 (total dust) for barium sulfate and 5 mg/m^3 (respirable fraction).

References

Agency for Toxic Substances and Disease Registry (ATSDR). 2007. Toxicological Profile for Barium and Compounds (Update). Atlanta, GA: U.S. Department of Public Health and Human Services, Public Health Service.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology and Environmental Medicine, 1600 Clifton Road NE, Mailstop F-32, Atlanta, GA 30333. Phone: 1-800-232-4636, FAX: 770-488-4178. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html. ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.



Agency for Toxic Substances and Disease Registry ToxFAQs

This fact sheet answers the most frequently asked health questions (FAQs) about benzene. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. This information is important because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Benzene is a widely used chemical formed from both natural processes and human activities. Breathing benzene can cause drowsiness, dizziness, and unconsciousness; long-term benzene exposure causes effects on the bone marrow and can cause anemia and leukemia. Benzene has been found in at least 813 of the 1,430 National Priorities List sites identified by the Environmental Protection Agency (EPA).

What is benzene?

(Pronounced bĕn'zēn')

Benzene is a colorless liquid with a sweet odor. It evaporates into the air very quickly and dissolves slightly in water. It is highly flammable and is formed from both natural processes and human activities.

Benzene is widely used in the United States; it ranks in the top 20 chemicals for production volume. Some industries use benzene to make other chemicals which are used to make plastics, resins, and nylon and synthetic fibers. Benzene is also used to make some types of rubbers, lubricants, dyes, detergents, drugs, and pesticides. Natural sources of benzene include volcanoes and forest fires. Benzene is also a natural part of crude oil, gasoline, and cigarette smoke.

What happens to benzene when it enters the environment?

- □ Industrial processes are the main source of benzene in the environment.
- □ Benzene can pass into the air from water and soil.
- □ It reacts with other chemicals in the air and breaks down within a few days.
- □ Benzene in the air can attach to rain or snow and be carried back down to the ground.

- □ It breaks down more slowly in water and soil, and can pass through the soil into underground water.
- Benzene does not build up in plants or animals.

How might I be exposed to benzene?

- Outdoor air contains low levels of benzene from tobacco smoke, automobile service stations, exhaust from motor vehicles, and industrial emissions.
- Indoor air generally contains higher levels of benzene from products that contain it such as glues, paints, furniture wax, and detergents.
- Air around hazardous waste sites or gas stations will contain higher levels of benzene.
- □ Leakage from underground storage tanks or from hazardous waste sites containing benzene can result in benzene contamination of well water.
- People working in industries that make or use benzene may be exposed to the highest levels of it.
- □ A major source of benzene exposures is tobacco smoke.

How can benzene affect my health?

Breathing very high levels of benzene can result in death, while high levels can cause drowsiness, dizziness, rapid heart rate, headaches, tremors, confusion, and unconsciousness. Eating or drinking foods containing high levels of benzene can cause vomiting, irritation of the stomach, dizziness, sleepiness, convulsions, rapid heart rate, and death.

September 1997

BENZENE

CAS # 71-43-2



ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html

The major effect of benzene from long-term (365 days or longer) exposure is on the blood. Benzene causes harmful effects on the bone marrow and can cause a decrease in red blood cells leading to anemia. It can also cause excessive bleeding and can affect the immune system, increasing the chance for infection.

Some women who breathed high levels of benzene for many months had irregular menstrual periods and a decrease in the size of their ovaries. It is not known whether benzene exposure affects the developing fetus in pregnant women or fertility in men.

Animal studies have shown low birth weights, delayed bone formation, and bone marrow damage when pregnant animals breathed benzene.

How likely is benzene to cause cancer?

The Department of Health and Human Services (DHHS) has determined that benzene is a known human carcinogen. Long-term exposure to high levels of benzene in the air can cause leukemia, cancer of the blood-forming organs.

Is there a medical test to show whether I've been exposed to benzene?

Several tests can show if you have been exposed to benzene. There is test for measuring benzene in the breath; this test must be done shortly after exposure. Benzene can also be measured in the blood, however, since benzene disappears rapidly from the blood, measurements are accurate only for recent exposures.

In the body, benzene is converted to products called metabolites. Certain metabolites can be measured in the urine. However, this test must be done shortly after exposure and is not a reliable indicator of how much benzene you have been exposed to, since the metabolites may be present in urine from other sources.

Has the federal government made recommendations to protect human health?

The EPA has set the maximum permissible level of benzene in drinking water at 0.005 milligrams per liter (0.005 mgL). The EPA requires that spills or accidental releases into the environment of 10 pounds or more of benzene be reported to the EPA.

The Occupational Safety and Health Administration (OSHA) has set a permissible exposure limit of 1 part of benzene per million parts of air (1 ppm) in the workplace during an 8-hour workday, 40-hour workweek.

Glossary

Anemia: A decreased ability of the blood to transport oxygen.

Carcinogen: A substance with the ability to cause cancer.

CAS: Chemical Abstracts Service.

Chromosomes: Parts of the cells responsible for the development of hereditary characteristics.

Metabolites: Breakdown products of chemicals.

Milligram (mg): One thousandth of a gram.

Pesticide: A substance that kills pests.

References

This ToxFAQs information is taken from the 1997 Toxicological Profile for Benzene (update) produced by the Agency for Toxic Substances and Disease Registry, Public Health Service, U.S. Department of Health and Human Services, Public Health Service in Atlanta, GA.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology, 1600 Clifton Road NE, Mailstop E-29, Atlanta, GA 30333. Phone: 1-888-422-8737, FAX: 404-498-0093. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.



Division of Toxicology and Environmental Medicine $ToxFAQs^{\mbox{\tiny TM}}$

This fact sheet answers the most frequently asked health questions (FAQs) about chromium. For more information, call the ATSDR Information Center at 1-800-232-4636. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It is important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Exposure to chromium occurs from ingesting contaminated food or drinking water or breathing contaminated workplace air. Chromium(VI) at high levels can damage the nose and cause cancer. Ingesting high levels of chromium(VI) may result in anemia or damage to the stomach or intestines. Chromium(III) is an essential nutrient. Chromium has been found in at least 1,127 of the 1,669 National Priorities List sites identified by the Environmental Protection Agency (EPA).

What is chromium?

Chromium is a naturally occurring element found in rocks, animals, plants, and soil. It can exist in several different forms. Depending on the form it takes, it can be a liquid, solid, or gas. The most common forms are chromium(0), chromium(III), and chromium(VI). No taste or odor is associated with chromium compounds.

The metal chromium, which is the chromium(0) form, is used for making steel. Chromium(VI) and chromium(III) are used for chrome plating, dyes and pigments, leather tanning, and wood preserving.

What happens to chromium when it enters the environment?

□ Chromium can be found in air soil, and water after release from the manufacture, use, and disposal of chromium-based products, and during the manufacturing process.

□ Chromium does not usually remain in the atmosphere, but is deposited into the soil and water .

□ Chromium can easily change from one form to another in water and soil, depending on the conditions present.

□ Fish do not accumulate much chromium in their bodies from water.

How might I be exposed to chromium?

□ Eating food containing chromium(III).

□ Breathing contaminated workplace air or skin contact during use in the workplace.

Drinking contaminated well water.

Living near uncontrolled hazardous waste sites containing chromium or industries that use chromium.

How can chromium affect my health?

Chromium(III) is an essential nutrient that helps the body use sugar, protein, and fat.

Breathing high levels of chromium(VI) can cause irritation to the lining of the nose, nose ulcers, runny nose, and breathing problems, such as asthma, cough, shortness of breath, or wheezing. The concentrations of chromium in air that can cause these effects may be different for different types of chromium compounds, with effects occurring at much lower concentrations for chromium(VI) compared to chromium(III).

The main health problems seen in animals following ingestion of chromium(VI) compounds are irritation and ulcers in the stomach and small intestine and anemia. Chromium(III) compounds are much less toxic and do not appear to cause these problems.

Sperm damage and damage to the male reproductive system have also been seen in laboratory animals exposed to chromium(VI).

September 2008

ATSDR AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY

CHROMIUM CAS # 7440-47-3

CHROMIUM CAS # 7440-47-3

ToxFAQs[™] Internet address is http://www.atsdr.cdc.gov/toxfaq.html

Skin contact with certain chromium(VI) compounds can cause skin ulcers. Some people are extremely sensitive to chromium(VI) or chromium(III). Allergic reactions consisting of severe redness and swelling of the skin have been noted.

How likely is chromium to cause cancer?

The Department of Health and Human Services (DHHS), the International Agency for Reseach on Cancer (IARC), and the EPA have determined that chromium(VI) compounds are known human carcinogens. In workers, inhalation of chromium(VI) has been shown to cause lung cancer. Chromium(VI) also causes lung cancer in animals. An increase in stomach tumors was observed in humans and animals exposed to chromium(VI) in drinking water.

How can chromium affect children?

It is likely that health effects seen in children exposed to high amounts of chromium will be similar to the effects seen in adults.

We do not know if exposure to chromium will result in birth defects or other developmental effects in people. Some developmental effects have been observed in animals exposed to chromium(VI).

How can families reduce the risks of exposure to chromium?

□ Children should avoid playing in soils near uncontrolled hazardous waste sites where chromium may have been discarded.

Chromium is a component of tobacco smoke. Avoid smoking in enclosed spaces like inside the home or car in order to limit exposure to children and other family members.
 Although chromium(III) is an essential nutrient, you should avoid excessive use of dietary supplements containing chromium.

Is there a medical test to determine whether I've been exposed to chromium?

Since chromium(III) is an essential element and naturally occurs in food, there will always be some level of chromium in your body. Chromium can be measured in hair, urine, and blood.

Higher than normal levels of chromium in blood or urine may indicate that a person has been exposed to chromium. However, increases in blood and urine chromium levels cannot be used to predict the kind of health effects that might develop from that exposure.

Has the federal government made recommendations to protect human health?

The EPA has determined that exposure to chromium in drinking water at concentrations of 1 mg/L for up to 10 days is not expected to cause any adverse effects in a child.

The FDA has determined that the chromium concentration in bottled drinking water should not exceed 1 mg/L.

The Occupational Health and Safety Administration (OSHA) has limited workers' exposure to an average of 0.0005 mg/m³ chromium(VI), 0.5 mg/m³ chromium(III), and 1.0 mg/m³ chromium(0) for an 8-hour workday, 40-hour workweek.

References

Agency for Toxic Substances and Disease Registry (ATSDR). 2008. Toxicological Profile for Chromium (Draft for Public Comment). Atlanta, GA: U.S. Department of Public Health and Human Services, Public Health Service.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology and Environmental Medicine, 1600 Clifton Road NE, Mailstop F-32, Atlanta, GA 30333. Phone: 1-800-232-4636, FAX: 770-488-4178. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html. ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental 1 quality department if you have any more questions or concerns.



COPPER CAS # 7440-50-8

September 2002



AGENCY FOR TOXIC SUBSTANCES AND DISEASE BEGISTRY

Division of Toxicology ToxFAQsTM

This fact sheet answers the most frequently asked health questions (FAQs) about copper. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It is important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Copper is a reddish metal that occurs naturally in the environment. It also occurs naturally in plants and animals. Low levels of copper are essential for maintaining good health. High levels can cause harmful effects such as irritation of the nose, mouth and eyes, vomiting, diarrhea, stomach crumps, and nausea. Copper has been found in at least 884 of the 1,613 National Priorities List sites identified by the Environmental Protection Agency (EPA).

What is copper?

Copper is a reddish metal that occurs naturally in rocks, soil, water, and air. Copper also occurs naturally in plants and animals.

Metallic copper can be easily molded or shaped. Metallic copper can be found in the U.S. penny, electrical wiring, and some water pipes. Metallic copper is also found in mixtures (called alloys) with other metals such as brass and bronze. Copper is also found as part of other compounds forming salts. Copper salts occur naturally, but are also manufactured. The most common copper salt is copper sulfate. Most copper compounds are blue-green in color. Copper compounds are commonly used in agriculture to treat plant diseases like mildew, for water treatment and, as preservatives for wood, leather, and fabrics.

What happens to copper when it enters the environment?

□ Copper can enter the environment from the mining of copper and other metals and from factories that make or use metallic copper or copper compounds.

□ It can also enter the environment through domestic waste water, combustion of fossil fuels and wastes, wood production, phosphate fertilizer production, and natural sources (e.g., windblown dust from soils, volcanoes, decaying vegetation, forest fires, and sea spray). □ Copper in soil strongly attaches to organic material and minerals.

□ Copper that dissolves in water becomes rapidly bound to particles suspended in the water.

□ Copper does not typically enter groundwater.

□ Copper carried by particles emitted from smelters and ore processing plants is carried back to the ground by gravity or in rain or snow.

□ Copper does not break down in the environment.

How might I be exposed to copper?

□ Breathing air, drinking water, eating food, and by skin contact with soil, water, or other copper-containing substances.

 \Box Some copper in the environment can be taken up by plants and animals.

□ Higher exposure may occur if your water is corrosive and you have copper plumbing and brass water fixtures. □ You may be exposed to higher amounts of copper if you drink water or swim in lakes or reservoirs recently treated with copper to control algae or receive cooling water from a power plant that may have high amounts of dissolved copper.

Using some garden products (e.g., fungicides) to control plant diseases.

Living near bronze and brass production facilities may expose you to higher copper levels in soil.

□ You may breathe copper-containing dust or have skin contact if you work in the industry of mining copper or

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, Public Health Service Agency for Toxic Substances and Disease Registry

COPPER CAS # 7440-50-8

ToxFAQsTM Internet address is http://www.atsdr.cdc.gov/toxfaq.html

processing the ore. You may breathe high levels if you grind or weld copper metal.

How can copper affect my health?

Copper is essential for good health, but high amounts can be harmful. Long-term exposure to copper dust can irritate your nose, mouth, and eyes, and cause headaches, dizziness, nausea, and diarrhea.

Drinking water with higher than normal levels of copper may cause vomiting, diarrhea, stomach cramps, and nausea. Intentionally high intakes of copper can cause liver and kidney damage and even death.

How likely is copper to cause cancer?

We do not know whether copper can cause cancer in humans. The EPA has determined that copper is not classifiable as to carcinogenicity.

How can copper affect children?

Exposure to high levels of copper will result in the same type of effects in children and adults. Studies in animals suggest that the young children may have more severe effects than adults; we do not know if this would also be true in humans. There is a very small percentage of infants and children who are unusually sensitive to copper.

We do not know if copper can cause birth defects or other developmental effects in humans. Studies in animals suggest that ingestion of high levels of copper may cause a decrease in fetal growth.

How can families reduce the risk of exposure to copper?

□ The greatest potential source of copper exposure is through drinking water, especially in water that is first drawn in the morning after sitting in copper pipes and brass faucets overnight.

 \Box To reduce exposure, run the water for at least 15-30 seconds before using it.

□ If you are exposed to copper at work, you may carry

copper home on your skin, clothes, or tools. You can avoid this by showering, and changing clothing before leaving work, and your work clothes should be kept separate from other clothes and laundered separately.

Is there a medical test to show whether I've been exposed to copper?

Copper is normally found in all tissues of the body, blood, urine, feces, hair, and nails. High levels of copper in these samples can show that you have been exposed to higher than normal levels of copper. Tests to measure copper levels in the body are not routinely available at the doctor's office because they require special equipment. These tests cannot tell the extent of exposure or whether you will experience harmful effects.

Has the federal government made recommendations to protect human health?

The EPA has determined that drinking water should not contain more than 1.3 milligrams of copper per liter of water (1.3 mg/L).

The Occupational Safety and Health Administration (OSHA) has set a limit of 0.1 mg per cubic meter (0.1 mg/m³) of copper fumes (vapor generated from heating copper) and 1 mg/m³ of copper dusts (fine metallic copper particles) and mists (aerosol of soluble copper) in workroom air during an 8-hour work shift, 40-hour workweek.

The Food and Nutrition Board of the Institute of Medicine recommends dietary allowances (RDAs) of 340 micrograms (340 μ g) of copper per day for children aged 1-3 years, 440 μ g/day for children aged 4-8 years, 700 μ g/day for children aged 9-13 years, 890 μ g/day for children aged 14-18 years, and 900 μ g/day for adults.

References

Agency for Toxic Substances and Disease Registry (ATSDR). 2002. Toxicological Profile for Copper (Draft for Public Comment). Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology, 1600 Clifton Road NE, Mailstop F-32, Atlanta, GA 30333. Phone: 1-888-422-8737, FAX: 770-488-4178. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html. ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.



ETHYLBENZENE CAS # 100-41-4

Agency for Toxic Substances and Disease Registry ToxFAQs

This fact sheet answers the most frequently asked health questions (FAQs) about ethylbenzene. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It's important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Ethylbenzene is a colorless liquid found in a number of products including gasoline and paints. Breathing very high levels can cause dizziness and throat and eye irritation. Ethylbenzene has been found in at least 731 of the 1,467 National Priorities List sites identified by the Environmental Protection Agency (EPA).

What is ethylbenzene?

(Pronounced ĕth' əl bĕn' zēn')

AGENCY FOR TOXIC SUBSTANCES AND DISEASE REGISTRY

Ethylbenzene is a colorless, flammable liquid that smells like gasoline. It is found in natural products such as coal tar and petroleum and is also found in manufactured products such as inks, insecticides, and paints.

Ethylbenzene is used primarily to make another chemical, styrene. Other uses include as a solvent, in fuels, and to make other chemicals.

What happens to ethylbenzene when it enters the environment?

- Ethylbenzene moves easily into the air from water and soil.
- □ It takes about 3 days for ethylbenzene to be broken down in air into other chemicals.
- □ Ethylbenzene may be released to water from industrial discharges or leaking underground storage tanks.
- □ In surface water, ethylbenzene breaks down by reacting with other chemicals found naturally in water.
- □ In soil, it is broken down by soil bacteria.

How might I be exposed to ethylbenzene?

- □ Breathing air containing ethylbenzene, particularly in areas near factories or highways.
- Drinking contaminated tap water.
- □ Working in an industry where ethylbenzene is used or made.
- Using products containing it, such as gasoline, carpet glues, varnishes, and paints.

How can ethylbenzene affect my health?

Limited information is available on the effects of ethylbenzene on people's health. The available information shows dizziness, throat and eye irritation, tightening of the chest, and a burning sensation in the eyes of people exposed to high levels of ethylbenzene in air.

Animals studies have shown effects on the nervous system, liver, kidneys, and eyes from breathing ethylbenzene in air.

How likely is ethylbenzene to cause cancer?

The EPA has determined that ethylbenzene is not classifiable as to human carcinogenicity.

June 1999

ETHYLBENZENE CAS # 100-41-4

ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html

No studies in people have shown that ethylbenzene exposure can result in cancer. Two available animal studies suggest that ethylbenzene may cause tumors.

How can ethylbenzene affect children?

Children may be exposed to ethylbenzene through inhalation of consumer products, including gasoline, paints, inks, pesticides, and carpet glue. We do not know whether children are more sensitive to the effects of ethylbenzene than adults.

It is not known whether ethylbenzene can affect the development of the human fetus. Animal studies have shown that when pregnant animals were exposed to ethylbenzene in air, their babies had an increased number of birth defects.

How can families reduce the risk of exposure to ethylbenzene?

Exposure to ethylbenzene vapors from household products and newly installed carpeting can be minimized by using adequate ventilation.

Household chemicals should be stored out of reach of children to prevent accidental poisoning. Always store household chemicals in their original containers; never store them in containers children would find attractive to eat or drink from, such as old soda bottles. Gasoline should be stored in a gasoline can with a locked cap.

Sometimes older children sniff household chemicals, including ethylbenzene, in an attempt to get high. Talk with your children about the dangers of sniffing chemicals.

Is there a medical test to show whether I've been exposed to ethylbenzene?

Ethylbenzene is found in the blood, urine, breath, and

some body tissues of exposed people. The most common way to test for ethylbenzene is in the urine. This test measures substances formed by the breakdown of ethylbenzene. This test needs to be done within a few hours after exposure occurs, because the substances leave the body very quickly.

These tests can show you were exposed to ethylbenzene, but cannot predict the kind of health effects that might occur.

Has the federal government made recommendations to protect human health?

The EPA has set a maximum contaminant level of 0.7 milligrams of ethylbenzene per liter of drinking water (0.7 mg/L).

The EPA requires that spills or accidental releases into the environment of 1,000 pounds or more of ethylbenzene be reported to the EPA.

The Occupational Safety and Health Administration (OSHA) has set an occupational exposure limit of 100 parts of ethylbenzene per million parts of air (100 ppm) for an 8-hour workday, 40-hour workweek.

References

Agency for Toxic Substances and Disease Registry (ATSDR). 1999. Toxicological profile for ethylbenzene. Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology, 1600 Clifton Road NE, Mailstop F-32, Atlanta, GA 30333. Phone: 1-888-422-8737, FAX: 770-488-4178. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.





FUEL OILS CAS # 8008-20-6, 70892-10-3, 68476-30-2, 68476-34-6, 68476-31-3

Agency for Toxic Substances and Disease Registry ToxFAQs

September 1996

This fact sheet answers the most frequently asked health questions (FAQs) about fuel oils. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It's important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

SUMMARY: Fuel oils are liquid mixtures produced from petroleum, and their use mostly involves burning them as fuels. Drinking or breathing fuel oils may cause nausea or nervous system effects. However, exposure under normal use conditions is not likely to be harmful. Fuel oils have been found in at least 26 of the 1,430 National Priorities List sites identified by the Environmental Protection Agency (EPA).

What are fuel oils?

(Pronounced fyoo/əl oilz)

Fuel oils are a variety of yellowish to light brown liquid mixtures that come from crude petroleum. Some chemicals found in fuel oils may evaporate easily, while others may more easily dissolve in water.

Fuel oils are produced by different petroleum refining processes, depending on their intended uses. Fuel oils may be used as fuel for engines, lamps, heaters, furnaces, and stoves, or as solvents.

Some commonly found fuel oils include kerosene, diesel fuel, jet fuel, range oil, and home heating oil. These fuel oils differ from one another by their hydrocarbon compositions, boiling point ranges, chemical additives, and uses.

What happens to fuel oils when they enter the environment?

- □ Some chemicals found in fuel oils may evaporate into the air from open containers or contaminated soil or water.
- □ Some chemicals found in fuel oils may dissolve in water after spills to surface waters or leaks from underground storage tanks.

- □ Some chemicals found in fuel oils may stick to particles in water, which will eventually cause them to settle to the bottom sediment.
- □ Some of the chemicals found in fuel oils may be broken down slowly in air, water, and soil by sunlight or small organisms.
- □ Some of the chemicals found in fuel oils may build up significantly in plants and animals.

How might I be exposed to fuel oils?

- □ Using a home kerosene heater or stove, or using fuel oils at work.
- □ Breathing air in home or building basements that has been contaminated with fuel oil vapors entering from the soil.
- Drinking or swimming in water that has been contaminated with fuel oils from a spill or a leaking underground storage tank.
- □ Touching soil contaminated with fuel oils.
- □ Using fuel oils to wash paint or grease from skin or equipment.

How can fuel oils affect my health?

Little information is available about the health effects that may be caused by fuel oils. People who use kerosene

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stoves for cooking do not seem to have any health problems related to their exposure.

Breathing some fuel oils for short periods may cause nausea, eye irritation, increased blood pressure, headache, lightheadedness, loss of appetite, poor coordination, and difficulty concentrating. Breathing diesel fuel vapors for long periods may cause kidney damage and lower your blood's ability to clot.

Drinking small amounts of kerosene may cause vomiting, diarrhea, coughing, stomach swelling and cramps, drowsiness, restlessness, painful breathing, irritability, and unconsciousness. Drinking large amounts of kerosene may cause convulsions, coma, or death. Skin contact with kerosene for short periods may cause itchy, red, sore, or peeling skin.

How likely are fuel oils to cause cancer?

The International Agency for Research on Cancer (IARC) has determined that some fuel oils (heavy) may possibly cause cancer in humans, but for other fuel oils (light) there is not enough information to make a determination. IARC has also determined that occupational exposures to fuel oils during petroleum refining are probably carcinogenic in humans.

Some studies with mice have suggested that repeated contact with fuel oils may cause liver or skin cancer. However, other mouse studies have found this not to be the case. No studies are available in other animals or in people on the carcinogenic effects of fuel oils.

Is there a medical test to show whether I've been exposed to fuel oils?

There is no medical test that shows if you have been exposed to fuel oils. Tests are available to determine if some of

the chemicals commonly found in fuel oils are in your blood. However, the presence of these chemicals in blood may not necessarily mean that you have been exposed to fuel oils.

Has the federal government made recommendations to protect human health?

The Occupational Safety and Health Administration (OSHA) and the Air Force Office of Safety and Health (AFOSH) have set a permissible exposure level (PEL) of 400 parts of petroleum distillates per million parts of air (400 ppm) for an 8-hour workday, 40-hour workweek.

The National Institute for Occupational Safety and Health (NIOSH) recommends that average workplace air levels not exceed 350 milligrams of petroleum distillates per cubic meter of air (350 mg/m³) for a 40-hour workweek.

The Department of Transportation (DOT) lists fuel oils as hazardous materials and, therefore, regulates their transportation.

Glossary

Carcinogenic: Able to cause cancer.

CAS: Chemical Abstracts Service.

Evaporate: To change into a vapor or a gas.

Hydrocarbon: Any compound made up of hydrogen and carbon.

Milligram (mg): One thousandth of a gram.

ppm: Parts per million.

Sediment: Mud and debris that have settled to the bottom of a body of water.

References

Agency for Toxic Substances and Disease Registry (ATSDR). 1995. Toxicological profile for fuel oils. Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service.

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Division of Toxicology and Environmental Medicine ToxFAQsTM

This fact sheet answers the most frequently asked health questions (FAQs) about lead. For more information, call the ATSDR Information Center at 1-800-232-4636. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It is important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Exposure to lead can happen from breathing workplace air or dust, eating contaminated foods, or drinking contaminated water. Children can be exposed from eating lead-based paint chips or playing in contaminated soil. Lead can damage the nervous system, kidneys, and reproductive system. Lead has been found in at least 1,272 of the 1,684 National Priority List sites identified by the Environmental Protection Agency (EPA).

What is lead?

Lead is a naturally occurring bluish-gray metal found in small amounts in the earth's crust. Lead can be found in all parts of our environment. Much of it comes from human activities including burning fossil fuels, mining, and manufacturing.

Lead has many different uses. It is used in the production of batteries, ammunition, metal products (solder and pipes), and devices to shield X-rays. Because of health concerns, lead from paints and ceramic products, caulking, and pipe solder has been dramatically reduced in recent years. The use of lead as an additive to gasoline was banned in 1996 in the United States.

What happens to lead when it enters the environment?

□ Lead itself does not break down, but lead compounds are changed by sunlight, air, and water.

□ When lead is released to the air, it may travel long distances before settling to the ground.

□ Once lead falls onto soil, it usually sticks to soil particles.

□ Movement of lead from soil into groundwater will depend on the type of lead compound and the characteristics of the soil.

How might I be exposed to lead?

□ Eating food or drinking water that contains lead. Water pipes in some older homes may contain lead solder. Lead can leach out into the water.

□ Spending time in areas where lead-based paints have been used and are deteriorating. Deteriorating lead paint can contribute to lead dust.

❑ Working in a job where lead is used or engaging in certain hobbies in which lead is used, such as making stained glass.

□ Using health-care products or folk remedies that contain lead.

How can lead affect my health?

The effects of lead are the same whether it enters the body through breathing or swallowing. Lead can affect almost every organ and system in your body. The main target for lead toxicity is the nervous system, both in adults and children. Long-term exposure of adults can result in decreased performance in some tests that measure functions of the nervous system. It may also cause weakness in fingers, wrists, or ankles. Lead exposure also causes small increases in blood pressure, particularly in middle-aged and older people and can cause anemia. Exposure to high lead levels can severely damage the brain and kidneys in adults or children and ultimately cause death. In pregnant women, high levels of exposure to lead may cause miscarriage. Highlevel exposure in men can damage the organs responsible for sperm production.

How likely is lead to cause cancer?

We have no conclusive proof that lead causes cancer in humans. Kidney tumors have developed in rats and mice that had been given large doses of some kind of lead compounds. The Department of Health and Human Services

August 2007



LEAD CAS # 7439-92-1

ToxFAQsTM Internet address is http://www.atsdr.cdc.gov/toxfaq.html

(DHHS) has determined that lead and lead compounds are reasonably anticipated to be human carcinogens and the EPA has determined that lead is a probable human carcinogen. The International Agency for Research on Cancer (IARC) has determined that inorganic lead is probably carcinogenic to humans and that there is insufficient information to determine whether organic lead compounds will cause cancer in humans.

How can lead affect children?

Small children can be exposed by eating lead-based paint chips, chewing on objects painted with lead-based paint, or swallowing house dust or soil that contains lead. Children are more vulnerable to lead poisoning than adults. A child who swallows large amounts of lead may develop blood anemia, severe stomachache, muscle weakness, and brain damage. If a child swallows smaller amounts of lead, much less severe effects on blood and brain function may occur. Even at much lower levels of exposure, lead can affect a child's mental and physical growth.

Exposure to lead is more dangerous for young and unborn children. Unborn children can be exposed to lead through their mothers. Harmful effects include premature births, smaller babies, decreased mental ability in the infant, learning difficulties, and reduced growth in young children. These effects are more common if the mother or baby was exposed to high levels of lead. Some of these effects may persist beyond childhood.

How can families reduce the risks of exposure to lead?

Avoid exposure to sources of lead.

□ Do not allow children to chew or mouth surfaces that may have been painted with lead-based paint.

□ If you have a water lead problem, run or flush water that has been standing overnight before drinking or cooking with it.

□ Some types of paints and pigments that are used as make-up or hair coloring contain lead. Keep these kinds of products away from children

□ If your home contains lead-based paint or you live in an area contaminated with lead, wash children's hands and faces

often to remove lead dusts and soil, and regularly clean the house of dust and tracked in soil.

Is there a medical test to determine whether I've been exposed to lead?

A blood test is available to measure the amount of lead in your blood and to estimate the amount of your recent exposure to lead. Blood tests are commonly used to screen children for lead poisoning. Lead in teeth or bones can be measured by X-ray techniques, but these methods are not widely available. Exposure to lead also can be evaluated by measuring erythrocyte protoporphyrin (EP) in blood samples. EP is a part of red blood cells known to increase when the amount of lead in the blood is high. However, the EP level is not sensitive enough to identify children with elevated blood lead levels below about 25 micrograms per deciliter (μ g/dL). These tests usually require special analytical equipment that is not available in a doctor's office. However, your doctor can draw blood samples and send them to appropriate laboratories for analysis.

Has the federal government made recommendations to protect human health?

The Centers for Disease Control and Prevention (CDC) recommends that states test children at ages 1 and 2 years. Children should be tested at ages 3–6 years if they have never been tested for lead, if they receive services from public assistance programs for the poor such as Medicaid or the Supplemental Food Program for Women, Infants, and Children, if they live in a building or frequently visit a house built before 1950; if they visit a home (house or apartment) built before 1978 that has been recently remodeled; and/or if they have a brother, sister, or playmate who has had lead poisoning. CDC considers a blood lead level of 10 μ g/dL to be a level of concern for children.

EPA limits lead in drinking water to 15 µg per liter.

References

Agency for Toxic Substances and Disease Registry (ATSDR). 2007. Toxicological Profile for lead (Update). Atlanta, GA: U.S. Department of Public Health and Human Services, Public Health Service.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology and Environmental Medicine, 1600 Clifton Road NE, Mailstop F-32, Atlanta, GA 30333. Phone: 1-800-232-4636, FAX: 770-488-4178. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html. ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.



Agency for Toxic Substances and Disease Registry ToxFAQs

This fact sheet answers the most frequently asked health questions (FAQs) about mercury. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It's important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Exposure to mercury occurs from breathing contaminated air, ingesting contaminated water and food, and having dental and medical treatments. Mercury, at high levels, may damage the brain, kidneys, and developing fetus. This chemical has been found in at least 714 of 1,467 National Priorities List sites identified by the Environmental Protection Agency.

What is mercury?

(Pronounced mūr/kyə-rē)

Mercury is a naturally occurring metal which has several forms. The metallic mercury is a shiny, silver-white, odorless liquid. If heated, it is a colorless, odorless gas.

Mercury combines with other elements, such as chlorine, sulfur, or oxygen, to form inorganic mercury compounds or "salts," which are usually white powders or crystals. Mercury also combines with carbon to make organic mercury compounds. The most common one, methylmercury, is produced mainly by microscopic organisms in the water and soil. More mercury in the environment can increase the amounts of methylmercury that these small organisms make.

Metallic mercury is used to produce chlorine gas and caustic soda, and is also used in thermometers, dental fillings, and batteries. Mercury salts are sometimes used in skin lightening creams and as antiseptic creams and ointments.

What happens to mercury when it enters the environment?

- □ Inorganic mercury (metallic mercury and inorganic mercury compounds) enters the air from mining ore deposits, burning coal and waste, and from manufacturing plants.
- □ It enters the water or soil from natural deposits, disposal of wastes, and volcanic activity.

- □ Methylmercury may be formed in water and soil by small organisms called bacteria.
- □ Methylmercury builds up in the tissues of fish. Larger and older fish tend to have the highest levels of mercury.

How might I be exposed to mercury?

- **□** Eating fish or shellfish contaminated with methylmercury.
- □ Breathing vapors in air from spills, incinerators, and industries that burn mercury-containing fuels.
- □ Release of mercury from dental work and medical treatments.
- Breathing contaminated workplace air or skin contact during use in the workplace (dental, health services, chemical, and other industries that use mercury).
- □ Practicing rituals that include mercury.

How can mercury affect my health?

The nervous system is very sensitive to all forms of mercury. Methylmercury and metallic mercury vapors are more harmful than other forms, because more mercury in these forms reaches the brain. Exposure to high levels of metallic, inorganic, or organic mercury can permanently damage the brain, kidneys, and developing fetus. Effects on brain functioning may result in irritability, shyness, tremors, changes in vision or hearing, and memory problems.

Short-term exposure to high levels of metallic mercury vapors may cause effects including lung damage, nausea,

April 1999



MERCURY CAS # 7439-97-6

ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html

vomiting, diarrhea, increases in blood pressure or heart rate, skin rashes, and eye irritation.

How likely is mercury to cause cancer?

There are inadequate human cancer data available for all forms of mercury. Mercuric chloride has caused increases in several types of tumors in rats and mice, and methylmercury has caused kidney tumors in male mice. The EPA has determined that mercuric chloride and methylmercury are possible human carcinogens.

How can mercury affect children?

Very young children are more sensitive to mercury than adults. Mercury in the mother's body passes to the fetus and may accumulate there. It can also can pass to a nursing infant through breast milk. However, the benefits of breast feeding may be greater than the possible adverse effects of mercury in breast milk.

Mercury's harmful effects that may be passed from the mother to the fetus include brain damage, mental retardation, incoordination, blindness, seizures, and inability to speak. Children poisoned by mercury may develop problems of their nervous and digestive systems, and kidney damage.

How can families reduce the risk of exposure to mercury?

Carefully handle and dispose of products that contain mercury, such as thermometers or fluorescent light bulbs. Do not vacuum up spilled mercury, because it will vaporize and increase exposure. If a large amount of mercury has been spilled, contact your health department. Teach children not to play with shiny, silver liquids.

Properly dispose of older medicines that contain mercury. Keep all mercury-containing medicines away from children. rooms where liquid mercury has been used.

Learn about wildlife and fish advisories in your area from your public health or natural resources department.

Is there a medical test to show whether I've been exposed to mercury?

Tests are available to measure mercury levels in the body. Blood or urine samples are used to test for exposure to metallic mercury and to inorganic forms of mercury. Mercury in whole blood or in scalp hair is measured to determine exposure to methylmercury. Your doctor can take samples and send them to a testing laboratory.

Has the federal government made recommendations to protect human health?

The EPA has set a limit of 2 parts of mercury per billion parts of drinking water (2 ppb).

The Food and Drug Administration (FDA) has set a maximum permissible level of 1 part of methylmercury in a million parts of seafood (1 ppm).

The Occupational Safety and Health Administration (OSHA) has set limits of 0.1 milligram of organic mercury per cubic meter of workplace air (0.1 mg/m³) and 0.05 mg/m³ of metallic mercury vapor for 8-hour shifts and 40-hour work weeks.

References

Agency for Toxic Substances and Disease Registry (ATSDR). 1999. Toxicological profile for mercury. Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service.

Pregnant women and children should keep away from

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology, 1600 Clifton Road NE, Mailstop F-32, Atlanta, GA 30333. Phone: 1-888-422-8737, FAX: 770-488-4178. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.



Agency for Toxic Substances and Disease Registry ToxFAQs

This fact sheet answers the most frequently asked health questions (FAQs) about nickel. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. This information is important because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Nickel is a hard, silvery-white metal used to make stainless steel and other metal alloys. Skin effects are the most common effects in people who are sensitive to nickel. Workers who breathed very large amounts of nickel compounds have developed lung and nasal sinus cancers. Nickel has been found in at least 709 of the 1,430 National Priorities List sites identified by the Environmental Protection Agency (EPA).

What is nickel?

(Pronounced nĭk/əl)

Nickel is a very abundant element. In the environment, it is found primarily combined with oxygen (oxides) or sulfur (sulfides). It is found in all soils and is emitted from volcanos.

Pure nickel is a hard, silvery-white metal that is combined with other metals to form mixtures called alloys. Some of the metals that nickel can be alloyed with are iron, copper, chromium, and zinc. These alloys are used in the making of metal coins and jewelry and in industry for making metal items.

Nickel compounds are also used for nickel plating, to color ceramics, to make some batteries, and as substances known as catalysts that increase the rate of chemical reactions. Nickel and its compounds have no characteristic odor or taste.

What happens to nickel when it enters the environment?

- □ Small nickel particles in the air settle to the ground or are taken out of the air in rain.
- Much of the nickel in the environment is found with soil and sediments because nickel attaches to particles that contain iron or manganese, which are often present in soil and sediments.

□ Nickel does not appear to collect in fish, plants, or animals used for food.

How might I be exposed to nickel?

- □ By breathing air or smoking tobacco containing nickel.
- □ By eating food containing nickel, which is the major source of exposure for most people.
- □ By drinking water which contains small amounts of nickel.
- □ By handling coins and touching other metals containing nickel, such as jewelry.

How can nickel affect my health?

Nickel is required to maintain health in animals. A small amount of nickel is probably essential for humans, although a lack of nickel has not been found to affect the health of humans.

The most common adverse health effect of nickel in humans is an allergic reaction. People can become sensitive to nickel when jewelry or other things containing it are in direct contact with the skin. Once a person is sensitized to nickel, further contact with it will produce a reaction. The most common reaction is a skin rash at the site of contact.

Less frequently, some people who are sensitive to nickel

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NICKEL CAS # 7440-02-0

ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html

have asthma attacks following exposure to nickel. People who are sensitive to nickel have reactions when it is in contact with the skin, and some sensitized persons react when they eat nickel in food, drink it in water, or breathe dust containing it.

Lung effects, including chronic bronchitis and reduced lung function, have been observed in workers who breathed large amounts of nickel. Current levels of nickel in workplace air are much lower than in the past, and today few workers show symptoms of nickel exposure.

People who are not sensitive to it must eat very large amounts of nickel to show adverse health effects. Workers who accidently drank water containing very high levels of nickel (100,000 times more than in normal drinking water) had stomachaches and effects on their blood and kidneys.

Animal studies show that breathing high levels of nickel compounds may result in inflammation of the respiratory tract. Eating or drinking large amounts of nickel has been reported to cause lung disease in dogs and rats and to affect the stomach, blood, liver, kidneys, immune system, and reproduction and development in rats and mice.

How likely is nickel to cause cancer?

The Department of Health and Human Services (DHHS) has determined that nickel and certain nickel compounds may reasonably be anticipated to be carcinogens. Cancers of the lung and nasal sinus have resulted when workers breathed dust containing high levels of nickel compounds while working in nickel refineries or nickel processing plants.

When rats and mice breathed nickel compounds for a lifetime, nickel compounds that were hard to dissolve caused cancer, while a soluble nickel compound did not cause cancer.

Is there a medical test to show whether I've been exposed to nickel?

Measurements of the amount of nickel in your blood, feces, and urine can be used to estimate your exposure to nickel. These measurements are most useful if the type of nickel compound you have been exposed to is known. However, these tests cannot predict whether you will experience any health effects.

Has the federal government made recommendations to protect human health?

The EPA recommends that children drink water containing no more than 0.04 milligrams of nickel per liter of water (0.04 mg/L) for 1-10 days of exposure.

The Occupational Safety and Health Administration (OSHA) has set an occupational exposure limit of 1 milligram of nickel per cubic meter of air (l mg/m³) for an 8-hour work-day, 40-hour workweek.

Glossary

Carcinogen: A substance with the ability to cause cancer.

CAS: Chemical Abstracts Service.

Milligram (mg): One thousandth of a gram.

Sediments: Mud and debris that have settled to the bottom of a body of water.

Soluble: Dissolves in water.

References

This ToxFAQs information is taken from the 1997 Toxicological Profile for Nickel (update) produced by the Agency for Toxic Substances and Disease Registry, Public Health Service, U.S. Department of Health and Human Services, Public Health Service in Atlanta, GA.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology, 1600 Clifton Road NE, Mailstop F-32, Atlanta, GA 30333. Phone: 1-888-422-8737, FAX: 770-488-4178. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.





POLYCYCLIC AROMATIC HYDROCARBONS (PAHs)

Agency for Toxic Substances and Disease Registry ToxFAQs

September 1996

This fact sheet answers the most frequently asked health questions (FAQs) about polycyclic aromatic hydrocarbons (PAHs). For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. This information is important because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

SUMMARY: Exposure to polycyclic aromatic hydrocarbons usually occurs by breathing air contaminated by wild fires or coal tar, or by eating foods that have been grilled. PAHs have been found in at least 600 of the 1,430 National Priorities List sites identified by the Environmental Protection Agency (EPA).

What are polycyclic aromatic hydrocarbons?

(Pronounced pŏl'ĭ-sī'klĭk ăr'ə-măt'ĭk hī'drəkar'bənz)

Polycyclic aromatic hydrocarbons (PAHs) are a group of over 100 different chemicals that are formed during the incomplete burning of coal, oil and gas, garbage, or other organic substances like tobacco or charbroiled meat. PAHs are usually found as a mixture containing two or more of these compounds, such as soot.

Some PAHs are manufactured. These pure PAHs usually exist as colorless, white, or pale yellow-green solids. PAHs are found in coal tar, crude oil, creosote, and roofing tar, but a few are used in medicines or to make dyes, plastics, and pesticides.

What happens to PAHs when they enter the environment?

- □ PAHs enter the air mostly as releases from volcanoes, forest fires, burning coal, and automobile exhaust.
- □ PAHs can occur in air attached to dust particles.
- □ Some PAH particles can readily evaporate into the air from soil or surface waters.
- □ PAHs can break down by reacting with sunlight and other chemicals in the air, over a period of days to weeks.

- □ PAHs enter water through discharges from industrial and wastewater treatment plants.
- □ Most PAHs do not dissolve easily in water. They stick to solid particles and settle to the bottoms of lakes or rivers.
- □ Microorganisms can break down PAHs in soil or water after a period of weeks to months.
- □ In soils, PAHs are most likely to stick tightly to particles; certain PAHs move through soil to contaminate underground water.
- □ PAH contents of plants and animals may be much higher than PAH contents of soil or water in which they live.

How might I be exposed to PAHs?

- Breathing air containing PAHs in the workplace of coking, coal-tar, and asphalt production plants; smokehouses; and municipal trash incineration facilities.
- Breathing air containing PAHs from cigarette smoke, wood smoke, vehicle exhausts, asphalt roads, or agricultural burn smoke.
- Coming in contact with air, water, or soil near hazardous waste sites.
- □ Eating grilled or charred meats; contaminated cereals, flour, bread, vegetables, fruits, meats; and processed or pickled foods.
- Drinking contaminated water or cow's milk.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, Public Health Service Agency for Toxic Substances and Disease Registry

POLYCYCLIC AROMATIC HYDROCARBONS (PAHs)

ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html

Nursing infants of mothers living near hazardous waste sites may be exposed to PAHs through their mother's milk.

How can PAHs affect my health?

Mice that were fed high levels of one PAH during pregnancy had difficulty reproducing and so did their offspring. These offspring also had higher rates of birth defects and lower body weights. It is not known whether these effects occur in people.

Animal studies have also shown that PAHs can cause harmful effects on the skin, body fluids, and ability to fight disease after both short- and long-term exposure. But these effects have not been seen in people.

How likely are PAHs to cause cancer?

The Department of Health and Human Services (DHHS) has determined that some PAHs may reasonably be expected to be carcinogens.

Some people who have breathed or touched mixtures of PAHs and other chemicals for long periods of time have developed cancer. Some PAHs have caused cancer in laboratory animals when they breathed air containing them (lung cancer), ingested them in food (stomach cancer), or had them applied to their skin (skin cancer).

Is there a medical test to show whether I've been exposed to PAHs?

In the body, PAHs are changed into chemicals that can attach to substances within the body. There are special tests that can detect PAHs attached to these substances in body tissues or blood. However, these tests cannot tell whether any health effects will occur or find out the extent or source of your exposure to the PAHs. The tests aren't usually available in your doctor's office because special equipment is needed to conduct them.

Has the federal government made recommendations to protect human health?

The Occupational Safety and Health Administration (OSHA) has set a limit of 0.2 milligrams of PAHs per cubic meter of air (0.2 mg/m³). The OSHA Permissible Exposure Limit (PEL) for mineral oil mist that contains PAHs is 5 mg/m³ averaged over an 8-hour exposure period.

The National Institute for Occupational Safety and Health (NIOSH) recommends that the average workplace air levels for coal tar products not exceed 0.1 mg/m^3 for a 10-hour workday, within a 40-hour workweek. There are other limits for workplace exposure for things that contain PAHs, such as coal, coal tar, and mineral oil.

Glossary

Carcinogen: A substance that can cause cancer.

Ingest: Take food or drink into your body.

References

Agency for Toxic Substances and Disease Registry (ATSDR). 1995. Toxicological profile for polycyclic aromatic hydrocarbons. Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology, 1600 Clifton Road NE, Mailstop F-32, Atlanta, GA 30333. Phone: 1-888-422-8737, FAX: 770-488-4178. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.





POLYCHLORINATED BIPHENYLS

Division of Toxicology ToxFAQsTM

February 2001

This fact sheet answers the most frequently asked health questions (FAQs) about polychlorinated biphenyls. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It's important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Polychlorinated biphenyls (PCBs) are a mixture of individual chemicals which are no longer produced in the United States, but are still found in the environment. Health effects that have been associated with exposure to PCBs include acne-like skin conditions in adults and neurobehavioral and immunological changes in children. PCBs are known to cause cancer in animals. PCBs have been found in at least 500 of the 1,598 National Priorities List sites identified by the Environmental Protection Agency (EPA).

What are polychlorinated biphenyls?

Polychlorinated biphenyls are mixtures of up to 209 individual chlorinated compounds (known as congeners). There are no known natural sources of PCBs. PCBs are either oily liquids or solids that are colorless to light yellow. Some PCBs can exist as a vapor in air. PCBs have no known smell or taste. Many commercial PCB mixtures are known in the U.S. by the trade name Aroclor.

PCBs have been used as coolants and lubricants in transformers, capacitors, and other electrical equipment because they don't burn easily and are good insulators. The manufacture of PCBs was stopped in the U.S. in 1977 because of evidence they build up in the environment and can cause harmful health effects. Products made before 1977 that may contain PCBs include old fluorescent lighting fixtures and electrical devices containing PCB capacitors, and old microscope and hydraulic oils.

What happens to PCBs when they enter the environment?

□ PCBs entered the air, water, and soil during their manufacture, use, and disposal; from accidental spills and leaks during their transport; and from leaks or fires in products containing PCBs.

□ PCBs can still be released to the environment from hazardous waste sites; illegal or improper disposal of industrial wastes and consumer products; leaks from old electrical transformers containing PCBs; and burning of some wastes in incinerators.

□ PCBs do not readily break down in the environment and thus may remain there for very long periods of time. PCBs can travel long distances in the air and be deposited in areas far away from where they were released. In water, a small amount of PCBs may remain dissolved, but most stick to organic particles and bottom sediments. PCBs also bind strongly to soil.

□ PCBs are taken up by small organisms and fish in water. They are also taken up by other animals that eat these aquatic animals as food. PCBs accumulate in fish and marine mammals, reaching levels that may be many thousands of times higher than in water.

How might I be exposed to PCBs?

□ Using old fluorescent lighting fixtures and electrical devices and appliances, such as television sets and refrigerators, that were made 30 or more years ago. These items may leak small amounts of PCBs into the air when they get hot during operation, and could be a source of skin exposure.

□ Eating contaminated food. The main dietary sources of PCBs are fish (especially sportfish caught in contaminated lakes or rivers), meat, and dairy products.

□ Breathing air near hazardous waste sites and drinking contaminated well water.

□ In the workplace during repair and maintenance of PCB transformers; accidents, fires or spills involving transformers, fluorescent lights, and other old electrical devices; and disposal of PCB materials.

How can PCBs affect my health?

The most commonly observed health effects in people exposed to large amounts of PCBs are skin conditions such as acne and rashes. Studies in exposed workers have shown changes in blood and urine that may indicate liver damage. PCB exposures in the general population are not likely to result in skin and liver effects. Most of the studies of health effects of PCBs in the general population examined children of mothers who were exposed to PCBs.

Animals that ate food containing large amounts of PCBs for short periods of time had mild liver damage and some died. Animals that ate smaller amounts of PCBs in food over several weeks or months developed various kinds of health effects, including anemia; acne-like skin conditions; and liver, stomach, and thyroid gland injuries. Other effects

Page 2 POLYCHLORINATED BIPHENYLS

ToxFAQsTM Internet address is http://www.atsdr.cdc.gov/toxfaq.html

of PCBs in animals include changes in the immune system, behavioral alterations, and impaired reproduction. PCBs are not known to cause birth defects.

How likely are PCBs to cause cancer?

Few studies of workers indicate that PCBs were associated with certain kinds of cancer in humans, such as cancer of the liver and biliary tract. Rats that ate food containing high levels of PCBs for two years developed liver cancer. The Department of Health and Human Services (DHHS) has concluded that PCBs may reasonably be anticipated to be carcinogens. The EPA and the International Agency for Research on Cancer (IARC) have determined that PCBs are probably carcinogenic to humans.

How can PCBs affect children?

Women who were exposed to relatively high levels of PCBs in the workplace or ate large amounts of fish contaminated with PCBs had babies that weighed slightly less than babies from women who did not have these exposures. Babies born to women who ate PCBcontaminated fish also showed abnormal responses in tests of infant behavior. Some of these behaviors, such as problems with motor skills and a decrease in short-term memory, lasted for several years. Other studies suggest that the immune system was affected in children born to and nursed by mothers exposed to increased levels of PCBs. There are no reports of structural birth defects caused by exposure to PCBs or of health effects of PCBs in older children. The most likely way infants will be exposed to PCBs is from breast milk. Transplacental transfers of PCBs were also reported In most cases, the benefits of breastfeeding outweigh any risks from exposure to PCBs in mother's milk.

How can families reduce the risk of exposure to PCBs?

You and your children may be exposed to PCBs by eating fish or wildlife caught from contaminated locations. Certain states, Native American tribes, and U.S. territories have issued advisories to warn people about PCB-contaminated fish and fish-eating wildlife. You can reduce your family's exposure to PCBs by obeying these advisories.
 Children should be told not play with old appliances,

electrical equipment, or transformers, since they may contain PCBs.

Children should be discouraged from playing in the dirt near hazardous waste sites and in areas where there was a transformer fire. Children should also be discouraged from eating dirt and putting dirty hands, toys or other objects in their mouths, and should wash hands frequently.
 If you are exposed to PCBs in the workplace it is possible to carry them home on your clothes, body, or tools. If this is the case, you should shower and change clothing before leaving work, and your work clothes should be kept separate from other clothes and laundered separately.

Is there a medical test to show whether I've been exposed to PCBs?

Tests exist to measure levels of PCBs in your blood, body fat, and breast milk, but these are not routinely conducted. Most people normally have low levels of PCBs in their body because nearly everyone has been environmentally exposed to PCBs. The tests can show if your PCB levels are elevated, which would indicate past exposure to above-normal levels of PCBs, but cannot determine when or how long you were exposed or whether you will develop health effects.

Has the federal government made recommendations to protect human health?

The EPA has set a limit of 0.0005 milligrams of PCBs per liter of drinking water (0.0005 mg/L). Discharges, spills or accidental releases of 1 pound or more of PCBs into the environment must be reported to the EPA. The Food and Drug Administration (FDA) requires that infant foods, eggs, milk and other dairy products, fish and shellfish, poultry and red meat contain no more than 0.2-3 parts of PCBs per million parts (0.2-3 ppm) of food. Many states have established fish and wildlife consumption advisories for PCBs.

References

Agency for Toxic Substances and Disease Registry (ATSDR). 2000. Toxicological profile for polychlorinated biphenyls (PCBs). Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology, 1600 Clifton Road NE, Mailstop E-29, Atlanta, GA 30333. Phone: 1-888-422-8737, FAX: 404-498-0093. ToxFAQsTM Internet address is http://www.atsdr.cdc.gov/toxfaq.html . ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.





TETRACHLOROETHYLENE CAS # 127-18-4

Agency for Toxic Substances and Disease Registry ToxFAQs

September 1997

This fact sheet answers the most frequently asked health questions (FAQs) about tetrachloroethylene. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It's important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

HIGHLIGHTS: Tetrachloroethylene is a manufactured chemical used for dry cleaning and metal degreasing. Exposure to very high concentrations of tetrachloroethylene can cause dizziness, headaches, sleepiness, confusion, nausea, difficulty in speaking and walking, unconsciousness, and death. Tetrachloroethylene has been found in at least 771 of the 1,430 National Priorities List sites identified by the Environmental Protection Agency (EPA).

What is tetrachloroethylene?

(Pronounced tĕt'rə-klôr' ō-ĕth'ə-lēn')

Tetrachloroethylene is a manufactured chemical that is widely used for dry cleaning of fabrics and for metal-degreasing. It is also used to make other chemicals and is used in some consumer products.

Other names for tetrachloroethylene include perchloroethylene, PCE, and tetrachloroethene. It is a nonflammable liquid at room temperature. It evaporates easily into the air and has a sharp, sweet odor. Most people can smell tetrachloroethylene when it is present in the air at a level of 1 part tetrachloroethylene per million parts of air (1 ppm) or more, although some can smell it at even lower levels.

What happens to tetrachloroethylene when it enters the environment?

- □ Much of the tetrachloroethylene that gets into water or soil evaporates into the air.
- □ Microorganisms can break down some of the tetrachloroethylene in soil or underground water.
- □ In the air, it is broken down by sunlight into other chemicals or brought back to the soil and water by rain.
- □ It does not appear to collect in fish or other animals that live in water.

How might I be exposed to tetrachloroethylene?

- □ When you bring clothes from the dry cleaners, they will release small amounts of tetrachloroethylene into the air.
- □ When you drink water containing tetrachloroethylene, you are exposed to it.

How can tetrachloroethylene affect my health?

High concentrations of tetrachloroethylene (particularly in closed, poorly ventilated areas) can cause dizziness, headache, sleepiness, confusion, nausea, difficulty in speaking and walking, unconsciousness, and death.

Irritation may result from repeated or extended skin contact with it. These symptoms occur almost entirely in work (or hobby) environments when people have been accidentally exposed to high concentrations or have intentionally used tetrachloroethylene to get a "high."

In industry, most workers are exposed to levels lower than those causing obvious nervous system effects. The health effects of breathing in air or drinking water with low levels of tetrachloroethylene are not known.

Results from some studies suggest that women who work in dry cleaning industries where exposures to tetrachloroethyl-

TETRACHLOROETHYLENE CAS # 127-18-4

ToxFAQs Internet home page via WWW is http://www.atsdr.cdc.gov/toxfaq.html

ene can be quite high may have more menstrual problems and spontaneous abortions than women who are not exposed. However, it is not known if tetrachloroethylene was responsible for these problems because other possible causes were not considered.

Results of animal studies, conducted with amounts much higher than those that most people are exposed to, show that tetrachloroethylene can cause liver and kidney damage. Exposure to very high levels of tetrachloroethylene can be toxic to the unborn pups of pregnant rats and mice. Changes in behavior were observed in the offspring of rats that breathed high levels of the chemical while they were pregnant.

How likely is tetrachloroethylene to cause cancer?

The Department of Health and Human Services (DHHS) has determined that tetrachloroethylene may reasonably be anticipated to be a carcinogen. Tetrachloroethylene has been shown to cause liver tumors in mice and kidney tumors in male rats.

Is there a medical test to show whether I've been exposed to tetrachloroethylene?

One way of testing for tetrachloroethylene exposure is to measure the amount of the chemical in the breath, much the same way breath-alcohol measurements are used to determine the amount of alcohol in the blood.

Because it is stored in the body's fat and slowly released into the bloodstream, tetrachloroethylene can be detected in the breath for weeks following a heavy exposure.

Tetrachloroethylene and trichloroacetic acid (TCA), a breakdown product of tetrachloroethylene, can be detected in the blood. These tests are relatively simple to perform. These tests aren't available at most doctors' offices, but can be performed at special laboratories that have the right equipment.

Because exposure to other chemicals can produce the same breakdown products in the urine and blood, the tests for breakdown products cannot determine if you have been exposed to tetrachloroethylene or the other chemicals.

Has the federal government made recommendations to protect human health?

The EPA maximum contaminant level for the amount of tetrachloroethylene that can be in drinking water is 0.005 milligrams tetrachloroethylene per liter of water (0.005 mg/L).

The Occupational Safety and Health Administration (OSHA) has set a limit of 100 ppm for an 8-hour workday over a 40-hour workweek.

The National Institute for Occupational Safety and Health (NIOSH) recommends that tetrachloroethylene be handled as a potential carcinogen and recommends that levels in workplace air should be as low as possible.

Glossary

Carcinogen: A substance with the ability to cause cancer.

CAS: Chemical Abstracts Service.

Milligram (mg): One thousandth of a gram.

Nonflammable: Will not burn.

References

This ToxFAQs information is taken from the 1997 Toxicological Profile for Tetrachloroethylene (update) produced by the Agency for Toxic Substances and Disease Registry, Public Health Service, U.S. Department of Health and Human Services, Public Health Service in Atlanta, GA.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology, 1600 Clifton Road NE, Mailstop F-32, Atlanta, GA 30333. Phone:1-888-422-8737, FAX: 770-488-4178. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.



Agency for Toxic Substances and Disease Registry ToxFAQs

This fact sheet answers the most frequently asked health questions (FAQs) about xylene. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It's important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

SUMMARY: Exposure to xylene occurs in the workplace and when you use paint, gasoline, paint thinners and other products that contain it. People who breathe high levels may have dizziness, confusion, and a change in their sense of balance. This substance has been found in at least 658 of the 1,430 National Priorities List sites identified by the Environmental Protection Agency (EPA).

What is xylene?

(Pronounced zī/lēn)

Xylene is a colorless, sweet-smelling liquid that catches on fire easily. It occurs naturally in petroleum and coal tar and is formed during forest fires. You can smell xylene in air at 0.08–3.7 parts of xylene per million parts of air (ppm) and begin to taste it in water at 0.53–1.8 ppm.

Chemical industries produce xylene from petroleum. It's one of the top 30 chemicals produced in the United States in terms of volume.

Xylene is used as a solvent and in the printing, rubber, and leather industries. It is also used as a cleaning agent, a thinner for paint, and in paints and varnishes. It is found in small amounts in airplane fuel and gasoline.

What happens to xylene when it enters the environment?

- □ Xylene has been found in waste sites and landfills when discarded as used solvent, or in varnish, paint, or paint thinners.
- □ It evaporates quickly from the soil and surface water into the air.

- □ In the air, it is broken down by sunlight into other less harmful chemicals.
- □ It is broken down by microorganisms in soil and water.
- □ Only a small amount of it builds up in fish, shellfish, plants, and animals living in xylene-contaminated water.

How might I be exposed to xylene?

- □ Breathing xylene in workplace air or in automobile exhaust.
- □ Breathing contaminated air.
- □ Touching gasoline, paint, paint removers, varnish, shellac, and rust preventatives that contain it.
- □ Breathing cigarette smoke that has small amounts of xylene in it.
- Drinking contaminated water or breathing air near waste sites and landfills that contain xylene.
- $\hfill\square$ The amount of xylene in food is likely to be low.

How can xylene affect my health?

Xylene affects the brain. High levels from exposure for short periods (14 days or less) or long periods (more than 1 year) can cause headaches, lack of muscle coordination, dizziness, confusion, and changes in one's sense of balance. Exposure of

XYLENE CAS # 1330-20-7



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ToxFAQs Internet home page via WWW is http://www.atsdr.cdc.gov/toxfaq.html

people to high levels of xylene for short periods can also cause irritation of the skin, eyes, nose, and throat; difficulty in breathing; problems with the lungs; delayed reaction time; memory difficulties; stomach discomfort; and possibly changes in the liver and kidneys. It can cause unconsciousness and even death at very high levels.

Studies of unborn animals indicate that high concentrations of xylene may cause increased numbers of deaths, and delayed growth and development. In many instances, these same concentrations also cause damage to the mothers. We do not know if xylene harms the unborn child if the mother is exposed to low levels of xylene during pregnancy.

How likely is xylene to cause cancer?

The International Agency for Research on Cancer (IARC) has determined that xylene is not classifiable as to its carcinogenicity in humans.

Human and animal studies have not shown xylene to be carcinogenic, but these studies are not conclusive and do not provide enough information to conclude that xylene does not cause cancer.

Is there a medical test to show whether I've been exposed to xylene?

Laboratory tests can detect xylene or its breakdown products in exhaled air, blood, or urine. There is a high degree of agreement between the levels of exposure to xylene and the levels of xylene breakdown products in the urine. However, a urine sample must be provided very soon after exposure ends because xylene quickly leaves the body. These tests are not routinely available at your doctor's office.

Has the federal government made recommendations to protect human health?

The EPA has set a limit of 10 ppm of xylene in drinking water.

The EPA requires that spills or accidental releases of xylenes into the environment of 1,000 pounds or more must be reported.

The Occupational Safety and Health Administration (OSHA) has set a maximum level of 100 ppm xylene in workplace air for an 8-hour workday, 40-hour workweek.

The National Institute for Occupational Safety and Health (NIOSH) and the American Conference of Governmental Industrial Hygienists (ACGIH) also recommend exposure limits of 100 ppm in workplace air.

NIOSH has recommended that 900 ppm of xylene be considered immediately dangerous to life or health. This is the exposure level of a chemical that is likely to cause permanent health problems or death.

Glossary

Evaporate: To change from a liquid into a vapor or a gas.Carcinogenic: Having the ability to cause cancer.CAS: Chemical Abstracts Service.ppm: Parts per million.Solvent: A liquid that can dissolve other substances.

References

Agency for Toxic Substances and Disease Registry (ATSDR). 1995. Toxicological profile for xylenes (update). Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service.

Where can I get more information? For more information, contact the Agency for Toxic Substances and Disease Registry, Division of Toxicology, 1600 Clifton Road NE, Mailstop E-29, Atlanta, GA 30333. Phone:1-888-422-8737, FAX: 404-498-0093. ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html ATSDR can tell you where to find occupational and environmental health clinics. Their specialists can recognize, evaluate, and treat illnesses resulting from exposure to hazardous substances. You can also contact your community or state health or environmental quality department if you have any more questions or concerns.



Agency for Toxic Substances and Disease Registry ToxFAQs

This fact sheet answers the most frequently asked health questions (FAQs) about zinc. For more information, call the ATSDR Information Center at 1-888-422-8737. This fact sheet is one in a series of summaries about hazardous substances and their health effects. It's important you understand this information because this substance may harm you. The effects of exposure to any hazardous substance depend on the dose, the duration, how you are exposed, personal traits and habits, and whether other chemicals are present.

SUMMARY: Exposure to high levels of zinc occurs mostly from eating food, drinking water, or breathing workplace air that is contaminated. Exposure to large amounts of zinc can be harmful. However, zinc is an essential element for our bodies, so too little zinc can also be harmful. This chemical has been found in at least 801 of 1,416 National Priorities List sites identified by the Environmental Protection Agency.

What is zinc?

(Pronounced zĭngk)

Zinc is one of the most common elements in the earth's crust. It's found in air, soil, and water, and is present in all foods. Pure zinc is a bluish-white shiny metal.

Zinc has many commercial uses as coatings to prevent rust, in dry cell batteries, and mixed with other metals to make alloys like brass and bronze. A zinc and copper alloy is used to make pennies in the United States.

Zinc combines with other elements to form zinc compounds. Common zinc compounds found at hazardous waste sites include zinc chloride, zinc oxide, zinc sulfate, and zinc sulfide. Zinc compounds are widely used in industry to make paint, rubber, dye, wood preservatives, and ointments.

What happens to zinc when it enters the environment?

- □ Some is released into the environment by natural processes, but most comes from activities of people like mining, steel production, coal burning, and burning of waste.
- \Box It attaches to soil, sediments, and dust particles in the air.
- **□** Rain and snow remove zinc dust particles from the air.

- □ Zinc compounds can move into the groundwater and into lakes, streams, and rivers.
- □ Most of the zinc in soil stays bound to soil particles.
- □ It builds up in fish and other organisms, but it doesn't build up in plants.

How might I be exposed to zinc?

- □ Ingesting small amounts present in your food and water.
- Drinking contaminated water near manufacturing or waste sites.
- □ Drinking contaminated water or a beverage that has been stored in metal containers or flows through pipes that have been coated with zinc to resist rust.
- **□** Eating too many dietary supplements that contain zinc.
- □ Breathing zinc particles in the air at manufacturing sites.

How can zinc affect my health?

Zinc is an essential element in our diet. **Too** little zinc can cause health problems, but too much zinc is also harmful.

The recommended dietary allowance (RDA) for zinc is 15 milligrams a day for men (15 mg/day); 12 mg/day for women; 10 mg/day for children; and 5 mg/day for infants. Not enough zinc in your diet can result in a loss of appetite, a decreased sense of taste and smell, slow wound healing and

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ZINC CAS # 7440-66-6

ToxFAQs Internet address via WWW is http://www.atsdr.cdc.gov/toxfaq.html

skin sores, or a damaged immune system. Young men who don't get enough zinc may have poorly developed sex organs and slow growth. If a pregnant woman doesn't get enough zinc, her babies may have growth retardation.

Too much zinc, however, can also be damaging to your health. Harmful health effects generally begin at levels from 10-15 times the RDA (in the 100 to 250 mg/day range). Eating large amounts of zinc, even for a short time, can cause stomach cramps, nausea, and vomiting. Taken longer, it can cause anemia, pancreas damage, and lower levels of high density lipoprotein cholesterol (the good form of cholesterol).

Breathing large amounts of zinc (as dust or fumes) can cause a specific short-term disease called metal fume fever. This is believed to be an immune response affecting the lungs and body temperature. We do not know the long-term effects of breathing high levels of zinc.

It is not known if high levels of zinc affect human reproduction or cause birth defects. Rats that were fed large amounts of zinc became infertile or had smaller babies. Irritation was also observed on the skin of rabbits, guinea pigs, and mice when exposed to some zinc compounds. Skin irritation will probably occur in people.

How likely is zinc to cause cancer?

The Department of Health and Human Services, the International Agency for Research on Cancer, and the Environmental Protection Agency (EPA) have not classified zinc for carcinogenicity.

Is there a medical test to show whether I've been exposed to zinc?

Zinc can be measured in your blood or feces. This can tell you how much zinc you have been exposed to. Zinc can also be measured in urine, saliva, and hair. The amount of zinc in your hair tells us something about long-term exposure, but the relationship between levels in your hair and the amount that you were exposed to is not clear. These tests are not routinely performed at doctors' offices, but your doctor can take samples and send them to a testing laboratory.

Has the federal government made recommendations to protect human health?

EPA recommends that there be no more than 5 parts of zinc in 1 million parts of drinking water (5 ppm) because of taste. EPA also requires that releases of more than 1,000 (or in some cases 5,000) pounds of zinc or its compounds into the environment be reported.

The Occupational Safety and Health Administration (OSHA) has set a maximum concentration limit for zinc chloride fumes in workplace air of 1 milligram of zinc per cubic meter of air (1 mg/m³) for an 8-hour workday over a 40-hour work week and 5 mg/m³ for zinc oxide fumes. The National Institute for Occupational Safety and Health (NIOSH) has set the same standards for up to a 10-hour workday over a 40-hour workweek.

Glossary

Anemia: A decreased ability of the blood to transport oxygen. Carcinogenicity: Ability to cause cancer. Milligram (mg): One thousandth of a gram.

References

Agency for Toxic Substances and Disease Registry (ATSDR). 1994. Toxicological profile for zinc. Atlanta, GA: U.S. Department of Health and Human Services, Public Health Service.

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CONSTRUCTION HEALTH AND SAFETY PLAN APPENDIX B REPORT FORMS

WEEKLY SAFETY REPORT FORM

Week Ending:	Project Name/Number:			
Report Date:	Project Manager Name:			
Summary of any violations	of procedures occurring that week:			
Summary of any job relate	1 injuries, illnesses, or near misses that week:			
Summary of air monitorin actions taken):	g data that week (include and sample analyses, action levels exceeded, an			
Comments:				
Name:	Company:			
Signature:	Title:			

INCIDENT REPORT FORM

Date of Report:		
Injured:		
Employer:		
Site:	Site Lo	ocation:
Report Prepared By:		
Sign	ature	Title
ACCIDENT/INCIDENT (CATEGORY (check a	ll that applies)
Injury	Illness	Near Miss
Site Damage	Fire	Chemical Exposure
On-site Equipment	Motor Vehicle	Electrical
Mechanical	Spill	Other
actions following the accide	nt/incident.	
WITNESS TO ACCIDEN	T/INCIDENT:	
Name [.]		Company.
Address:		Address:
Phone No :		Phone No :
Name:		Company.
Address:		Address:
Dhone No :		Phone No ·

INJURED - ILL:		
Name:	SSN:	
Address:	Age:	
Length of Service:	Time on Pre	esent Job:
Time/Classification:		
SEVERITY OF INJURY OR	ILLNESS:	
Disabling	Non-disabling	Fatality
Medical Treatment	First Aid Only	
ESTIMATED NUMBER OF NATURE OF INJURY OR I	DAYS AWAY FROM JOB: LLNESS:	·
CLASSIFICATION OF INJU	JRY:	
ADIASIOIIS	Disiocations	Punctures
Dites	Fanil/Dizziness	Radiation Burns
Bruises	Fractures	Respiratory Anergy
Druises	Heat Burns	Toxic Besp. Exposure
Cold Exposure	Heat Exhaustion	Toxic Ingestion
Concussion	Heat Stroke	Dermal Allergy
Lacerations		
Part of Body Affected		
Degree of Disability:		
Date Medical Care was Receiv	ed:	
Where Medical Care was Rece	ived:	
Address (if off-site):	· · · · · ·	
(If two or more injuries, record	on separate sheets)	
5	▲	

SITE DAMAGE:

Description of Damage:	
Cost of Damage:	\$
ACCIDENT/INCIDENT LOC	CATION:
ACCIDENT/INCIDENT ANA (Object, substance, material, ma	ALYSIS: Causative agent most directly related to accident/incident chinery, equipment, conditions)
Was weather a factor?:	
Unsafe mechanical/physical/env	ironmental condition at time of accident/incident (Be specific):
Personal factors (Attitude, know	eledge or skill, reaction time, fatigue):
ON-SITE ACCIDENTS/INCH Level of personal protection equ	DENTS: ipment required in Site Safety Plan:
Modifications:	
Was injured using required equip	pment?:

If not, how did actual equipment use differ from plan?:

ACTION TAKEN TO PREVENT RECURRENCE: (Be specific. What has or will be done? When will it be done? Who is the responsible party to insure that the correction is made?

ACCIDENT/INCIDENT REPORT	REVIEWED BY	:	
SSO Name Printed		SSO Signature	
OTHERS PARTICIPATING IN IN	VESTIGATION	:	
Signature		Title	
Signature		Title	
Signature		Title	
ACCIDENT/INCIDENT FOLLOW	V-UP: Date:		
Outcome of accident/incident:			
Physician's recommendations:			
Date injured returned to work: Follow-up performed by:			_
Signature	Title		

ATTACH ANY ADDITIONAL INFORMATION TO THIS FORM

CONSTRUCTION HEALTH AND SAFETY PLAN APPENDIX C Emergency Hand Signals

EMERGENCY SIGNALS

In most cases, field personnel will carry portable radios for communication. If this is the case, a transmission that indicates an emergency will take priority over all other transmissions. All other site radios will yield the frequency to the emergency transmissions.

Where radio communications is not available, the following air-horn and/or hand signals will be used:

EMERGENCY HAND SIGNALS

OUT OF AIR, CAN'T BREATHE!



Hand gripping throat

LEAVE AREA IMMEDIATELY, NO DEBATE!

(No Picture) Grip partner's wrist or place both hands around waist

NEED ASSISTANCE!



Hands on top of head

OKAY! – I'M ALL RIGHT! - I UNDERSTAND!



Thumbs up

NO! - NEGATIVE!

