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April 11, 1995

The Docket Office (Docket H-049)
US Department of Labor
Occupational Safety & Health Administration
Room N 2656
200 Constitution Ave. NW
Washington, DC 20210

OSHA
DOCKET OFFICER
DATE APR 11 1995
TIME _____

Dear Sir/Madam:

RE: Docket No. H-049: Proposed changes to the Respiratory Protection standards; i.e., 29 CFR 1910.146, 29 CFR 1915.152, and 29 CFR 1926.103.

Alabama Power Company is pleased to present these comments on the proposed rule addressing changes to the Respiratory Protection standards; i.e. 29 CFR 1910.146, 29 CFR 1919.152, and 29 CFR 1926.103. This proposed rule was published in the **Federal Register** / Vol. 59, No. 219 on Tuesday, November 15, 1994. Alabama Power Company is an investor owned electric utility which serves over two-thirds of the state.

The Alabama Power Company applauds OSHA's recognition of the need to revise the current Respiratory Protection standards. Alabama Power Company offers the following comments on the various sections of the proposed rule for consideration by OSHA.

(b) Definitions :

The definition of "hazardous exposure level" as defined in the proposed standard is essentially a good idea. However, the fact that the definition indicates that an employer will have to consider chemicals to be at hazardous levels if they exceed such things as the ACGIH TLVs, NIOSH RELs, or other scientific data has in essence incorporated them into the regulation as a regulatory limit that must not be exceeded. Since these limits are being set forth without proper rulemaking they should be removed from the standard.

(c) Respiratory protection program:

In Section P under paragraph (c) of 29 CFR 1926.103 [Fed. Reg. 58931], OSHA requests comments on the need to make monitoring a mandatory part of this standard. We believe there should be two basic methods placed in the standard for determining the need for respiratory protection. These methods are: 1) the use of monitoring data or 2) a determination made from a competent person (industrial hygienist) based upon professional judgment. The use of monitoring data would indicate whether respirators should be worn and the type of respirator to be worn, but in many situations this would be impossible due to the time constraints of many work situations and the lack of adequate sampling and analytical methods for many chemicals being used in the workplace today. The second method could be used to make the same determinations concerning respirator protection but would not be dependent upon time constraints or sampling/analytical methods. These decisions would be based upon the professional judgment of a competent person.

(d) Selection of respirators:

In the preamble where OSHA discussed the recommendations of the Construction Advisory Committee [Id at 58933], OSHA requested comments on whether the respirator program (including monitoring results pertaining to respirator use) should be maintained and made available to employees at the job site. We believe the decision of where records are kept should be left to the company as long as the employee has access to these records within a timely manner.

(e) Medical evaluation:

In the preamble where OSHA discussed medical evaluations [Id at 58907], OSHA requested comments on which of the three alternatives are preferred and why. We believe that OSHA should not deviate from the language in the current standard [29 CFR 1910.134 (b) (10)] regarding medical evaluations. These decision should be made by the local physician who is familiar with the physical stresses of respirators on the body as well as the physical work loads of the employees within the company. This would allow the physician the opportunity to adapt medical evaluations to specific employees depending upon their job tasks and physical condition.

(f) Fit testing:

Paragraph (f)(3) of this proposal requires fit testing of tight fitting atmosphere-supplying and powered air-purifying respirators. We do not believe that it is necessary to fit test tight fitting positive pressure respirators; i.e., PAPRs, constant flow, or pressure demand respirators (SCBAs or air-lines with emergency egress bottles) because the chances of

these respirators becoming negative pressure under normal use conditions are very slim and generally occurs only when there has been a restriction or failure of the air supply system. When this occurs employees should be instructed to immediately stop work and leave the area. Under normal conditions, creating a negative pressure inside tight fitting positive pressure respirator masks should not occur.

(g) Use of respirators:

OSHA requested comments on whether employees should be able to choose PAPRs vs. negative pressure respirators because of their reduced breathing resistance. We believe that this matter should be decided jointly between the local physician and the safety & health professional. Respirators should be selected based upon need and not desire by the employee.

(N) Substance Specific Standards:

OSHA is proposing that disposable respirators not be permitted under the inorganic arsenic standard. In our industry HEPA filtered disposable respirators are routinely used to protect our employees while working in areas in which they may be exposed to inorganic arsenic and these proposed changes would mean a considerable cost increase to our company without an increase in employee protection. In addition, we have found that our employees will accept disposable type respirators better than other types of respiratory protection. Therefore, we do not believe OSHA should prohibit the use of disposable respirators under the inorganic arsenic standard.

Alabama Power Company appreciates the opportunity to submit these comments, and hopes OSHA will give them careful consideration.

Sincerely,

A handwritten signature in black ink that reads "Glenn Nix". The signature is written in a cursive style with a prominent initial "G".

Glenn Nix
Corp. Industrial Hygienist