



## Beryllium CAP Sub-Committee Report (BAG)

1-11-2011

### The HSS CAP Committee input/response on the revision of 10 CFR 850

1. **Question #1:** The committee feels the OSHA PEL's are not protective to prevent people from getting Sensitization and CBD. DOE has put in place protective levels ten times more protective and we still have the numbers increasing of people affected by Beryllium.
2. **Question #2:** The committee feels that the 8 hr time-weighted average is not medically justifiable. DOE should use the most restrictive and proactive levels possible for exposure to Beryllium.
3. **Question #3:** The committee feels using the 2010 ACGIH TLV for airborne exposure is justified when not using the 8 hr time weighted avg. Particle size does matter and what size particle is being inhaled is impossible to measure during work activities.
4. **Question #4:** The committee feels that use of wet wipes are justified when feasible and use of dry wipes should be used when conditions dictate such as a Rad Zone.
5. **Question #5:** The committee feels wipe sampling is a very reliable method of sampling the use of bulk and wipe sampling results will show if any Beryllium is present and the possibility of Beryllium becoming airborne.
6. **Question #6:** The Committee feels a combination of wipe and air sampling should be used to get the best sample results.
7. **Question #7:** The Committee feels they don't understand the question.
8. **Question #8:** The Committee feels that yes if one is lowered then all should be lowered the same amount.
9. **Question #9:** If warning labels should be required for items with surface areas that are free of removable surface levels of Beryllium but which may contain surface or internal contamination of Beryllium that is inaccessible warning labels should be required.
10. **Question #10:** Yes. Both have to be done. Both surface and area air sampling should be done before releasing areas in a facility.
11. **Question #11:** No, the decision should be left up to the worker as they have rights. It should always be left up to the worker as they have the right to make the decision. The worker has the right to consult their own personal Physician on their decision.