

Air Traffic Organization (ATO) Hearing Conservation Program (HCP) Determination Form

Instructions for Completing ATO Form 3900-29

Section A. Completion of ATO Form 3900-29 provides the ATO Hearing Conservation Program (HCP) information to identify employee's applicability to be ATO HCP enrolled or disenrolled. If the Frontline Manager/Supervisor (FLM/S) or employee needs additional assistance, please contact their local Safety and Health Specialist (Safety and Environmental Compliance Manager (SECM) or ATO Service Area (SA) or Service Unit (SU) Occupational Medical (Occ Med) point of contact (POC) for assistance. A HCP enrolled employee and their FLM/S must use this form when the employee, due to changes in job functions or position, requires reevaluation. Electronically complete all blank cells.

- **Original or Update:** Choose **original** if this is the employee's first time completing the form or **update** if a previous Determination Form was completed.
- **Routing Code, Office Assignment, Job Classification, Title:** Enter the employee's routing code, primary office location, and job classification information: ex. AXX-33; ESA RO; Atlanta, GA; FV-0801 Engineer.

Section B. Work Tasks: Check the left hand column for the situation best describing the employee's occupational noise exposure. The ATO HCP strives to identify potential hazardous noise areas, activities, and work tasks. Employees working in or adjacent to hazardous noise are considered at-risk and enrollment using a task based assessment even if exposure is random or limited. Enrollment requires training, medical monitoring, and hearing protection devices. Refer to the Common Occupational Noise Sources reference while completing as it provides noise sources and exposure duration to identify potential noise exposure sources. Based upon this determination, those employees in Option 1 will be enrolled in the ATO HCP, Option 3 may be enrolled in the ATO HCP (subject to review by a Safety and Health Specialist), and Options 2 or 4 not included into the ATO HCP.

1. Employees in job classifications 018, 028, 690, 802, 856, 8XX, 2101, 2181, 4749, or XXXX and who perform or experience listed maintenance, or mechanical activities, or equipment, or travel via typical vehicles, or participate in activities in excess of 85 dBA exposure over an 8-hour time weighted average (TWA), or OSHA Action Level.
2. Employees in job classifications whose regular job duties DO NOT include performing any of the activities in Option 1, and do not expose the employee to hazardous occupational noise exceeding the OSHA Action Level. Please indicate the employee's duties in the space provided. The employee will NOT be in the ATO HCP.
3. Employees in any potentially high occupational noise activities not described in Option 1 where the employee and FLM/S believe they are exposed to the OSHA Action Level. This option allows a Safety and Health Specialist to investigate and determine hazardous noise exposure, 3a indicates the employee is enrolled and 3b is not enrolled.
4. Administrative or managerial classifications who do not experience noise hazard and will NOT be in the ATO HCP.

Section C. Employee Declaration and Signature: The employee must type their name, sign, and date. If ATO HCP enrolled the employee must complete HCP training, be provided and use where required hearing protectors, participate in dosimeter exposure monitoring when requested, and attend annual and periodic audiometric evaluations. If not ATO HCP enrolled, the employee must sign and date the form for record keeping.

Section D. FLM/S and ATO SA/SU Occ Med POC Declaration and Signatures: The FLM/S must email the form to a Safety and Health Specialist if Option B.3 is chosen to determine the employee's noise exposure. In all cases, the FLM/S must type their name, sign, date, and email the form to the FAA Occ Med Program Record Clerk (9-FAA-OCCMED-Rec-Submit@faa.gov). The Record Clerk will coordinate the ATO SA/SU Occ Med POC signature and ensure the record is retained and a copy is provided to the employee.

Record keeping Requirements: FAA forms must be completed electronically to comply with Federal mandate. This form is a temporary record and will be included in the Employee Medical Folder (EMF). Record disposition is covered by DAA-GRS-2017-0010-0009 and System of Records OPM/GOV-10 Employee Medical File System (EMFS). EMF are retained for the duration of an employee's employment within the EMFS and after the FAA employee separates from Federal service, the FAA sends the EMF to the National Personnel Records Center, which is operated by the National Archives and Records Administration (NARA). NARA stores the EMF for 30-years per OSHA 29 CFR 1910.1020.

ATO EOSH Services Toolbox HCP Page: Policy, guidance, and ATO POCs can be found on the Environmental, Occupational Safety, and Health (EOSH) Services Group Toolbox under MyFAAHome / FAA Organizations / Line of Business / Air Traffic Operations / Technical Operations / Facility & Engineering Services.

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Common Occupational Noise Sources

Maximum Duration	Decibels	Noise Example Sources and estimated noise exposures	Base of Comparison
No limit without hearing protection	Less than 85 dBA	Washing machine; enclosed truck cab (75 decibels (dB)).	Some may find upper 70's dB annoyingly loud, yet this falls under OSHA noise exposure levels. <i>Option 4 for only this level of noise.</i>
16 hours @ 85 dB wearing proper hearing protection	OSHA Action Level 85 dBA TWA	Busy city traffic (80 dB); 40 mph diesel truck at 50 ft. (84 dB); flying in a small aircraft ex. Cessna, Metroliner, or Navajo (86 dB); Propeller plane flyover at 1,000 ft. (88 dB).	For every 5-dB increase in noise level, the allowable exposure time is reduced by half. <u>Hearing protector required</u> to avoid potential hearing damage for levels over 85 dBA.
8 hours @ 90 dBA wearing proper hearing protection	OSHA noise Permissible Exposure Limit (PEL) 90 dBA	Jackhammering at 50 ft.; operating a router; operating construction equipment ex. backhoe, tractor, snow plow, ditch witch, or snowmobile (95 dB); operating a power lawn mower, brush cutter, or weed whacker (96 dB); Boeing 737 or DC-9 aircraft overhead at 6,080 ft. before landing (97 dB).	Hearing protector must attenuate to a level of 85 dBA TWA or lower. Oral communication becomes difficult more than four feet away.
Two hours @ 100 dB wearing proper hearing protection	100 dBA	Jet take-off overhead at 1,000 ft.; operating impact wrench or jackhammer (100 dB); testing small aircraft engine run-ups with windows open (101 dB); operating circular saw, table saw, miter saw, or radial arm saw (102 dB); jet flyover overhead at 1,000 feet (103 dB); Boeing 707 or DC-8 aircraft 1,150 ft. overhead before landing (106 dB); monitor, install, maintenance, or test of uninsulated chillers or engine generator (100-106 dB).	Serious hearing damage is possible from an 8-hour TWA exposure without adequate hearing protection. Physical changes include body muscles tend to contract and respiratory rhythm changes. <u>Double hearing protection required above 100 dBA TWA (continuous noise).</u>
30 minutes @ 110 dB wearing proper hearing protection	110 dBA	Operating a snow blower (110 dB); hammer drill (114 dB); chainsaw (115 dB); or attending a rock concert (115 dB).	Average human pain threshold, noise can be felt throughout the body especially a pounding in the chest without hearing protection.
7 ½ minutes @ 120 dB wearing proper hearing protection	120 dBA	Thunderclap; Oxygen torch (121 dB).	Extreme ear pain, excretions of blood from the ears, changes in heartbeat, increased pain in chest, blood vessels constrict especially at skin level without hearing protection.
No exposure any time	140 dBA	Rocket taking off (130+ dBA); Gunfire at shooters ear {pistol .22-.45-9 mm caliber (152-163 dB); rifle .22-.375-7 mm caliber (134-171 dB); shotgun 12-20 gauge (140-173 dB)}.	Long-term deafness, severe heart conditions, respiratory distress, changes in blood chemistry without hearing protection.

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Section A: Check "Original" if this is an initial form completion or "Update" for changes. Provide your office assignment details. The form must be completed electronically. Please read form instructions and for assistance contact the FAA Occupational Medical (Occ Med) Program's record Clerk (9-FAA-OCCMED-Rec-Submit@faa.gov).	
Original	Update Routing Code, Office Assignment, Job Classification, and Title:
X	Section B: Where applicable check the left hand column for the situation best describing your work tasks and occupational noise exposure. Review the reference Common Occupational Noise Sources.
1. Job classification 018, 028, 690, 802, 856, 8XX, 2101, 2181, 4749 or XXXX whose job duties require performing or experiencing activities in excess of 85 dBA (A-weighted decibels) continuous exposure over an 8-hour time weighted average (TWA) the OSHA Action Level, or when hazardous noise exposure is present or likely to be present.	(1) Operate or perform activities near engine generators, boilers, chillers, or other mechanical room activities while equipment is operating including aircraft related maintenance or flight operations. (2) Operate or perform activities adjacent to ground and lawn maintenance equipment such as chain saws, lawnmowers, tractors, brush cutters, weed whackers, etc. (3) Travel to remote sites in small aircraft such as Cessna, Metroliner, Navajo, or helicopters. (4) Operate or perform activities adjacent to wood and metal working equipment such as grinders, chop saws, circular saws, table saws, radial arm saws, miter saws, etc. (5) Operate or perform activities adjacent to construction equipment such as compressors, pneumatic stapler, jackhammer, ditch witch, compactor, backhoe, tractor, etc. (6) Operate or travel to remote sites via snowcats, snowmobiles, snowplows, snow blowers, all-terrain vehicles, etc. (7) Working on or adjacent to active airport runways or taxiways.
2. Employees whose job duties DO NOT include performing any of the activities in Option 1 and are not exposed to occupational noise exceeding 85 dBA. Describe assigned work area locations and tasks with potential hazardous noise exposure:	
3a. Any high occupational noise work activity not described above exceeding 85 dBA. Describe potential high noise tasks or locations and their duration: (A Safety and Health Specialist will determine if noise exceeds OSHA's Action Level to enroll the employee and completes 3b).	
3b. A Safety and Health Specialist must determine enrollment if Option 3 is chosen and must check one choice. The employee is enrolled: The employee is not enrolled: Please sign as indicated:	
4. Job classifications whose primary job duties are administrative and / or managerial and who do not perform tasks described in Option 1 or 3.	
Section C: I (Employee) understand by selecting either Option 1 or 3 (if confirmed) I am potentially exposed to occupational noise levels at or above OSHA's Action Level and am included into the ATO HCP. I acknowledge it is my responsibility to wear hearing protectors at all times when exposed to noise identified as at or above OSHA's Action Level or in hearing protection required placard locations, present myself for annual training (annual / periodic and perform PPE demonstration to my FLM/S), dosimetry exposure monitoring, and annual / periodic audiometric evaluations. I will request replacement earplugs or muffs when those issued to me become lost, broken, unsanitary, or no longer usable for any reason. HCP participation must continue until the ATO SA/ SU Occ Med POC disenrolls an employee from the program via an updated ATO HCP Determination Form. Note: You must refrain from high noise for 14 hours prior to audiometric test. If Option 2 or 4 is identified, by signing I attest I am not being enrolled within the HCP or I am being reevaluated to be disenrolled from the HCP. Please type below and digitally sign as indicated.	
Employee's full name & FAA email:	Employee signature & date:
Section D: I (FLM/S) understand by signing an employee's enrollment (Option 1 or 3), I will ensure the employee is provided hearing protectors, training, audiometric services, and attend managerial related training. For Option 2 or 4, I attest the employee is not working in high noise areas or if currently HCP enrolled, is being reevaluated to be disenrolled from the ATO HCP. Please type below and digitally sign as indicated.	
FLM/S name & FAA email:	FLM/S signature & date:
ATO SA/SU Occ Med POC:	Receipt / signature & date: