U.S. DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION

Aircraft Certification Service

ORDER
IR 3900.75

Effective Date:
05/02/2018

SUBJ: Aircraft Certification Service (AIR) Hearing Conservation Program (HCP)

The Aircraft Certification Service (AIR) Hearing Conservation Program (HCP) is an element of the AIR Occupational Safety and Health (OSH) program and is established to prevent occupational hearing loss in AIR employees. Hearing loss is a pervasive occupational health issue. However, occupational noise-induced hearing loss can be reduced, or often eliminated, through the successful application of an effective HCP.

This Order specifies the actions necessary to protect the health and safety of all AIR employees, and provides the requirements for development, implementation, and maintenance of an effective HCP.

Compliance with this order implements the Occupational Safety and Health Administration's (OSHA) General Industry Standards and applicable Consensus Standards published by consensus organizations related to the AIR HCP.

/original signed by Suzanne R. Chandler/
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Chapter 1. General Information

1. Purpose of This Order. The Aircraft Certification Service (AIR) Hearing Conservation Program (HCP) is established to prevent occupational hearing loss in AIR employees. This program specifies the actions necessary to protect the health and safety of all AIR employees, and provides the requirements for development, implementation, and maintenance of an effective HCP.

2. AIR HCP Requirements. The elements of the AIR HCP are designed to meet or exceed the requirements of Occupational Safety and Health Administration (OSHA) Standards: Title 29 of the Code of Federal Regulations (29 CFR) § 1904.10, 1910.95, 1960.8, and 1960.59; Federal Aviation Administration (FAA) Order 3900.19 series; and other applicable consensus standards to include The National Institute for Occupational Safety and Health (NIOSH) Recommendations 98-126.

a. The Hearing Conservation Program Manager (HC-PM). The AIR HCP is administered by the AIR Designated Hearing Conservation Program Manager (HC-PM), with audiometric medical surveillance, HCP training, and recordkeeping support provided by US Department of Health and Human Services (HHS) Federal Occupational Health (FOH).

b. AIR HCP Local Responsibilities. Local responsibility of the AIR HCP execution is with AIR branch office managers with affected employees. AIR must provide the necessary funding to implement this AIR HCP including hearing protection devices (HPDs) for use by affected employees.

3. Audience. All AIR employees involved with work in an area where the cumulative noise exposure to employees is equal or above 85 dBA Time-Weighted Average (TWA) 8hr, or a 50 percent dose, herein referred to high noise areas.

4. Action Date. AIR has one-year from the date in which this order is signed to come into compliance with the provisions of this order.

5. Where You Can Find This Order. You can find this order on the MyFAA employee Web site at https://employees.faa.gov/tools_resources/orders_notices. This order is available to the public at http://www.faa.gov/regulations_policies/orders_notices.

6. Policy. It is AIR policy that employees comply with the AIR HCP to prevent occupational hearing loss. This guidance represents the minimum requirements for the AIR HCP. Site-specific requirements may be more stringent based upon local risk assessments.

7. Scope and Application. This HCP applies to all FAA AIR personnel especially those performing work in high noise areas.

8. Definitions. Appendix A contains the definitions of various terms used in this order.

9. Directive Feedback Information. Direct questions or comments to AIR-DMO at 9-AWA-AVS-AIR-DMO@faa.gov. For your convenience, FAA Form 1320-19, Directive Feedback Information, is the last page of this order. Note any deficiencies found, clarifications needed, or suggested improvements regarding the contents of this order on FAA Form 1320-19.

Chapter 2. Roles and Responsibilities

1. Executive Director, Aircraft Certification Service (AIR-1). AIR-1 must ensure resources (funding and personnel) are available to effectively implement and maintain this AIR HCP throughout the AIR organization.

2. Director, Enterprise Operations Division (AIR-900) must:

a. Oversee the overall implementation and life cycle management of the AIR HCP.

b. Be informed of potentially hazardous noise work areas, tasks, and equipment.

c. Ensure employee participation in the AIR HCP.

d. Review incidence rates of recordable hearing loss and Standard Threshold Shift (STS) in employees.

e. Evaluate the completeness and quality of the AIR HCP elements.

f. Review reports of AIR HCP effectiveness reviews.

3. AIR Managers must:

a. Manage and implement AIR HCP requirements locally.

b. Identify individuals whose job function exposures equal or exceed 85 A-weighted sound level in decibels (dBA) as determined through review and completion of the AIR Hearing Conservation Program Determination Form (HCPDF) located in appendix B, figure B-1. This value is referred to as the OSHA Action Level (AL).

c. Ensure affected employees receive baseline, annual, and exit audiometric tests.

d. Ensure new employees are evaluated upon reporting into AIR for possible inclusion in the AIR HCP using the HCPDF, appendix B, figure B-1.

e. Initially work with Hearing Conservation Program Manager (HC-PM) who will further coordinate with an AIR Training Manager (ATM). Training events include initial training within 6 months of the employee's enrollment in the AIR HCP, annual HCP training, and post-STS training as required.

f. Furnish and maintain adequate supply of approved HPDs.

g. Review reports of recordable hearing loss and STS with affected employees.

h. Ensure employees identified with an STS receive STS training upon identification of having a STS.

i. Notify employees of potentially hazardous noise associated with work areas, tasks, and equipment through signs, notices, and other written communication, where applicable.

j. Enforce use of HPDs where required and counsel affected employees on the topics noted in chapter 9 of this order.

k. Safeguard employee records with regard to Personally Identifiable Information (PII).

l. Inform AIR's Hearing Conservation Program Manager (HC-PM) of reports of potential hazardous noise work areas.

m. Annually confirm individual noise exposure. Guidance for this requirement is contained in chapter 5, paragraph 12 of this order.

4. AIR Designated Hearing Conservation Program Manager (HC-PM) must:

a. Be suitably trained and certified through Council for Accreditation in Occupational Hearing Conservation (CAOHC) and appointed in writing to administer overall implementation and oversight of the AIR HCP.

b. Serve as the AIR hearing conservation subject matter expert (SME) and perform overall AIR HCP program management.

c. Provide oversight and technical guidance to managers to ensure compliance with the AIR HCP and applicable OSHA standards.

d. Provide appropriate and periodic noise exposure monitoring to identify employees or work activities above the OSHA AL.

e. Create, maintain, and use an AIR noise exposure database for identification of noise exposure by job function, hazardous noise work areas, and tasks.

f. Assist managers with the identification of affected employees through completion of the AIR HCPDF, appendix B, figure B-1; and provide guidance on identifying hazardous noise work areas; tasks; and equipment.

g. Specify and issue a list of the approved HPDs and assist managers with the use of appropriate HPDs to be worn by employees.

h. Coordinate with FAA Occ Med Program, and Federal Occupational Health (FOH) for audiometric testing and evaluation for enrolled HCP AIR employees.

i. Note new operations/activities that may introduce new or additional noise exposures to be further assessed.

j. Provide updated noise exposure reports to managers and FOH, where changes or updates in exposure risk are made.

k. Ensure AIR HCP training related to HCP requirements is provided to managers and impacted employees.

l. Coordinate on a quarterly basis with AIR Human Capital for HCP purposes to identify new and retiring AIR employees.

m. Coordinate with AIR Training Branch point of contacts (POCs) to ensure HCP training requirements are met.

n. Coordinate with AIR Financial Resources Manager to project and plan funding needed to support program evaluations, necessary travel, and purchase of devices.

o. Conduct annual AIR HCP evaluations.

p. Ensure FAA Occ Med Program with NAS Integration Support Contract (NISC) support provides audiogram notification for AIR employees enrolled in the AIR HCP.

5. Federal Occupational Health (FOH) must:

a. Administer the audiometric testing program to include conducting, evaluating and documenting audiometric tests according to the requirements stated in OSHA's Occupational Noise Exposure standard 29 CFR, § 1910.95, OSHA's Occupational Injury and Illness Recording and Reporting Requirements standard 29 CFR, § 1904.10. Maintain all audiometric test results and other required records.

b. Within six months, conduct baseline audiometric tests for all new AIR employees who will be included in the AIR HCP (at or above the 8-hour time-weighted average (TWA) of 85 dBA) as determined by completion of the AIR HCPDF, appendix B, figure B-1. AIR HC-PM will coordinate with FOH and the FAA Occupational Medical Surveillance and Recordkeeping Program (FAA Occ Med Program) POCs to ensure audiometric test requirements are met for new employees who are required to be in the HCP.

c. Conduct annual audiometric tests for all employees included in the AIR HCP as determined by the AIR HCP Determination Form.

d. Evaluate annual audiograms to determine the presence of a recordable hearing loss or STS.

e. Research the work relationship of hearing loss cases. Refer employees for professional consultation to assist in making a work relationship determination, when necessary.

f. Conduct follow-up audiometric examinations within 30-days for tests indicating the presence of STS.

g. Assess and recommend treatment for medical pathology suspected to be caused or aggravated by hearing protectors. Refer employees to a personal physician if medical pathology, unrelated to the use of hearing protectors, is detected. The FAA must pay for clinical audiological evaluation or otological examination required by the FOH PLHCP if additional

reviews are necessary to evaluate the cause of the hearing loss or if there is an indication of a medical condition caused or aggravated by the use of hearing protectors (29 CFR 1910.95(g)(8)(ii)(C)).

h. Notify the employee, the employee's manager and AIR-900 of a recordable hearing loss, STS or any other medical pathology identified during audiometric testing. Written notification is to be made within 21-days of the examination.

6. Employee Responsibilities: Employees must:

a. Comply with this AIR HCP, applicable OSHA standards, and AIR HCP training.

b. Participate in the audiometric testing program as determined through the completion of the AIR HCPDF located in appendix B, figure B-1.

c. Employees enrolled via the AIR HCPDF, appendix B, figure B-1, acknowledge their AIR HCP enrollment, and must participate in the required program elements including training, audiogram tests, HPD demonstration, and proper use of HPDs.

d. Understand the need to correlate high noise exposure with certain procedures, work areas, tasks, and equipment.

e. Report potential high noise work areas, work tasks, and equipment to his/her manager. Must be aware they are empowered and encouraged to submit Unsatisfactory Condition Report (UCR) (guidance contained in FAA Order 1800.6 series) where situations are observed that may cause or contribute accident, incident, or otherwise present a hazard to personnel and equipment.

f. Wear approved HPDs where elevated noise exists or where hearing protection signage may be present.

g. Properly use and maintain approved HPDs. Request replacement (at no cost to the employee) earplugs or muffs when those issued become lost, broken, unsanitary, or no longer useable for any reason.

h. Inform his/her manager of any personal health problems that could be aggravated by the use of hearing protection devices.

Chapter 3. AIR Hearing Conservation Program (HCP) Requirements

1. Permissible Exposures. Permissible noise exposure levels for AIR employees, with the exception of flight deck crews in operational aircraft (see below note), and their conditions for inclusion in the AIR HCP are defined below. These conditions and levels are referred to as the AIR Noise Exposure Limits.

a. Occupational Exposure Limit. The occupational exposure limit for noise, the criterion sound level, is 85 dBA, expressed as an 8-hour time-weighted average (TWA). This value is the OSHA Action Level (AL), and NIOSH Recommended Exposure Limit (REL). Exposure to this level for any one-day requires inclusion in the AIR HCP.

b. The AIR AL/REL or TWA Exposure. The AL/REL or the TWA exposure which requires program inclusion is ≥ 85 decibels, A-weighted, as an 8-hr time-weighted average (85 dBA as an 8-hr TWA). The action level and TWA exposures for AIR is based on OSHA, NIOSH, and Task Based Exposure Assessment Modeling (T-BEAM).

c. Recordable Hearing Loss or STS. For employees who have experienced a recordable hearing loss or STS, the noise exposure limit is 85 dBA, expressed as an 8-hour TWA exposure for any one-day. As per NIOSH, a significant threshold shift is a hearing loss that is ≥ 15-dB worse than baseline at any test frequency, in either ear, confirmed with follow-up test for same ear or frequency. Additional guidance is contained in appendix C.

d. Table 3-1, Allowable Exposures Times, for noise exposure limits based on noise level and exposure time.

Table 3-1. Allowable Exposures and Times (see note below)

Exposure Level (dBA)	Allowable Exposure Time (hours)	
	Action Level	Permissible Level
82	8	16
85	4	8
88	2	4
91	1	2
94	0.5	1
97	0.25	0.5
100	0.13	0.25

Note: Under the Federal Aviation Administration U.S. Department of Transportation and the Occupational Safety and Health Administration U.S. Department of Labor Memorandum of Understanding (MOU) signed August 22, 2014 and August 26, 2014 respectively, OSHA noise exposure standards do not apply to flight deck crew while onboard operational aircraft.

2. Affected Personnel. Employees whose work specialty or job function meets at least one of the criteria listed below must be included in the AIR HCP. However, employees may request specific job tasks to be evaluated for possible inclusion in the AIR HCP.

a. The employee's assigned job function has an associated 8-hour TWA sound exposure level of 85 decibels (dB) measured on A-weighted scale (dBA) or greater on any one-day.

b. The employee's regular job function has an associated sound exposure level of less than 85 dBA, but works in specific areas, or is engaged in trigger tasks and activities identified as hazardous noise through the AIR HCPDF (appendix B, Sound Exposure Monitoring Procedure and Form).

3. TWA Access to Information. AIR must make available to affected employees or their representatives copies of the OSHA Occupational Noise standard 29 CFR, § 1910.95 and must post a copy in the workplace. A copy of this AIR HCP must be distributed to all AIR offices and must be made available to all affected employees.

4. Program Elements. The AIR HCP consists of the following elements covered in separate chapters in this HCP.

a. Engineering and Administrative Controls. AIR will identify, where feasible and within FAA control, areas requiring engineering controls to reduce excessive noise exposures. Administrative controls (reduced exposure time, changes in work practices, or shifts) may be considered if engineering controls are not feasible.

b. Sound Exposure Monitoring. The sound exposure risk potential of all employees must be properly evaluated and reevaluated where feasible when changes in work practices or conditions occur. Exposure monitoring provides documentation for identifying the hazardous noise job activities, employees for inclusion in the AIR HCP, and for the proper selection of HPDs.

c. Audiometric Evaluation. An audiometric testing program must be established and maintained for all employees in the AIR HCP. Audiometric evaluation is the only way to determine whether occupational hearing loss is being prevented. FOH is responsible for conducting and administering audiometric testing and evaluation. Additional guidance is contained in appendix C.

d. Personal Hearing Protection. Employees are required to wear HPDs in the form of earplugs or earmuffs whenever they are exposed to hazardous noise levels. This includes but not limited to aircraft manufacturing processes, near runways, and around active operational aircraft, engines, or generators. A list of "trigger" tasks or areas is included in appendix B for assistance in identifying potentially hazardous areas.

e. Education and Training. Initial and annual training must be provided to all employees included in the AIR HCP. Those employees who have a confirmed STS, must be provided additional training. Special training administered by managers may supplement annual training. Please see chapter 8 of this order for additional training information.

f. Recordkeeping. AIR must ensure all required records are maintained in a manner consistent with the requirements in chapter 9 of the AIR HCP.

g. Budget. The AIR HC-PM must track and report funds spent in support of the program (e.g., travel, HPD/device purchases, training, etc.) and must use the data to support future requests for program funding.

h. Program Evaluation. The AIR HC-PM must conduct an annual evaluation of the program to assess compliance with federal regulations and to ensure hearing is being conserved. Further guidance is contained in chapter 10 of this order. FOH will conduct an evaluation of audiometric testing procedures, recordable hearing loss, and STS.

Chapter 4. Engineering and Administrative Controls

1. Engineering Controls. The optimal means of reducing or eliminating employee exposure to elevated noise is through the application of engineering controls. Engineering controls are defined as any modification or replacement of equipment, or related physical changes at the noise source or along the transmission path that reduces the noise level to which the employee is exposed. Engineering controls for the AIR workforce is an unlikely resolution since the noise sources are usually owned by the host facility operator.

2. Administrative Controls. If engineering controls fail to reduce sound levels within the requirements specified in this section, administrative controls must be utilized if possible. Administrative controls are defined as changes in the work schedule, procedures, or operations that reduce noise exposure.

a. Examples. Examples of administrative controls include access restrictions and time limitations in the hazardous noise area.

b. Requirements. Requirements for administrative controls include:

(1) Maximizing the distance between the employee and the hazardous noise source to the extent practical; and

(2) Identifying hazardous noise areas.

(a) Since AIR employees work in a variety of host work environments, special attention must be given to identifying areas of potential hazardous noise.

(b) In the United States, host employers with noise issues are required to post signage where hearing protection is required.

(c) Hazardous noise environments overseas have not been evaluated fully, so the employee must use HPDs if they suspect they are in a high noise area.

3. Hearing Protection Devices (HPD). If both engineering and administrative controls fail to reduce sound levels to 85 dBA, 8-hour TWA or below, personal hearing protection must be used to bring exposures to acceptable levels in accordance with the following: Additional guidance is contained in chapter 7 of this order.

a. Employees Exposure to Noise. All employees who enter areas or who perform tasks where exposure to noise is greater than or equal to 85 dBA must be provided with hearing protection. Where exposure to noise is equal to or greater than 85 dBA or 140 dB peak, regardless of duration of exposure, employees must be provided with hearing protection and required to wear it.

b. Using HPDs. All employees must use HPDs in areas required by the facility operator and/or whenever signage requires. There are no exceptions for employees not to use HPDs,

including but not limited to individuals with hearing aids, Cochlear implants, or those who are severely hearing impaired.

c. Earplugs. Earplugs must be for the exclusive use of each employee and not be traded or shared.

d. Earmuffs. Earmuffs must be made available to employees who cannot wear earplugs.

e. Combination or Dual Protection. Earmuffs and earplugs must be made available and utilized together in situations which require additional protection required to lower the noise exposure within the ear, example hazardous noise would include areas over 100 dBA. It is important to note that using such double protection would add only 5 to 10 dB of protection to the higher HPD's noise reduction rating (NRR).

Chapter 5. Sound Exposure Monitoring

1. Background.

a. Sound Exposure Monitoring. Sound exposure monitoring by technically qualified Safety and Health Specialists is an essential component of a Hearing Conservation Program. The sound exposure monitoring procedure provides a uniform and repeatable method to assess the level of hazard from occupational noise.

b. Noise Exposure Sampling Strategy. The noise exposure sampling strategy utilizes representative personal monitoring designed to:

(1) Identify employees for inclusion in the AIR HCP, and

(2) Enable the proper selection of HPDs.

2. Establishment of a Monitoring Program.

a. Development and Implementation. Whenever information indicates any employee's exposure may equal or exceed an 8-hour time-weighted average (TWA) of 85 dB on any one-day, the AIR organization must develop and implement monitoring procedures involving a sampling strategy. Safety and Health Specialists designated to conduct sound exposure monitoring must be qualified in the monitoring methodology as noted below in figure 5-1.

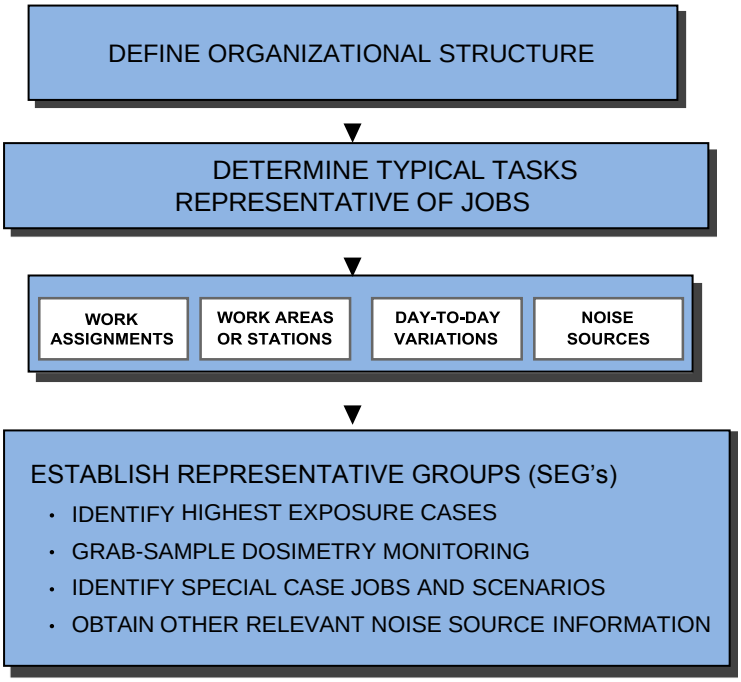

Figure 5-1. Hearing Conservation Monitoring Methodology

b. Factors of Noise Exposures in the Workplace. Factors suggesting noise exposures in the workplace may be at or above this level include: (1) employee complains about the loudness of noise; (2) indications employees are losing their hearing; and/or (3) noisy conditions which make normal conversation difficult. Employees likely to be exposed to noises exceeding 85 dBs over an 8-hour TWA include personnel who visit in the performance of their duties aircraft manufacturing facilities, parts manufacturing, airports, or who are in close proximity of operational aircraft and engine testing for certification purposes.

3. Sound Exposure Monitoring Purpose.

a. Purpose. The purpose of the sound exposure monitoring procedure is to document the long-term, 8-hour TWA sound level relative to Similar Exposure Groups (SEG). An SEG is defined as a group of workers likely to have the same general exposure profile because of the similarity of the method tasks are performed, the similarity of the type of equipment/processes observed in their work, and the similarity of the areas in which they work. Monitoring on one individual within an SEG is considered representative for the exposure expected for any member of the group. For the sampling strategy, employees will be categorized according to the following:

(1) Employees have the potential to rotate or change jobs with no associated change in duty assignment status;

(2) Employees are engaged in a similar kind of work; and

(3) Employees whose sound exposures are expected to be similar.

b. Noise Exposure Assessment for AIR. Based on research and analysis supported by science, data, and evidence most of the SEGs for AIR employees are below the 85 dBA TWA_{8hr} inclusion action level. This means that on a daily basis, the typical noise exposure for AIR employees is expected to be below 85 dBA TWA_{8hr}. However, there are several activities and noise sources that create noise exposures in excess of the 85 dBA TWA_{8hr} HCP inclusion level. The AIR HCPDF in appendix B is used to identify specific individuals that have noise exposures that exceed 85 $TWA_{8hr.}$

4. Methods of Measurement.

a. Sound Exposure Measurements. Sound exposure measurements may be conducted using three methods: dosimetry, area measurement, or hearing zone measurement. All methods may be used as a component for exposure modeling and determination. The sound exposure measurements for area measurement and hearing zone measurement must be conducted by technically qualified Safety and Health Specialists and the measurements/sound level readings are recorded.

b. Instruments. A dosimeter is a body-worn instrument that captures and stores sound level data and integrates these data over time. TWA sound levels over a period such as an 8-hour workday are derived from this measurement. An integrating Sound Level Meter (SLM) is a mobile device used for conducting area and hearing zone measurements.

c. Types of Monitoring. Area monitoring can be used to estimate noise exposure when the noise levels are relatively constant and the employee is not engaged in a mobile task. This measurement may be used to estimate sound exposure in offices. Hearing zone measurements are intended to measure sound level data related to performance of specific tasks. The microphone should be positioned in what is referred to as the hearing zone of the worker (a hemispheric area extending from the workers ear to a distance of 12 inches). Measurements may also be made at alternate positions when the worker's activities may interfere with the measurement. Measurements may also be taken if the worker is not present.

5. Measurement Criteria. AIR assesses employee noise exposure risk under a 3-dB exchange rate and an 85-dBA permissible exposure limit (PEL). Instrument settings for sound exposure monitoring are as follows as noted in Table 5-1:

Table 5-1 Instrument Settings

Frequency Weighting:	A	Peak Weighting:	C
Detector Setting:	Slow	Exchange Rate:	3
Threshold Level:	80 dBA	Criterion Level:	85 dBA

6. Measurement Durations and Positions.

a. Dosimeter Measurements. For dosimeter measurements, the measurement duration (if not full shift) must be representative of the exposure associated with all the tasks performed by the employee. The microphone should be positioned on the mid-top of the wearer’s shoulder with the microphone oriented parallel to the shoulder plane.

b. Task-Based Measurement. For a task-based measurement with an integrating mobile SLM, the measurement duration must be sufficiently long for the resulting noise exposure to be representative of the exposure associated with each of the tasks performed by the employee.

7. Developing Exposure Models.

a. Documentation of Tasks. For each job sampled, exposure models are constructed by developing a list of tasks, related durations, and noise level metrics. Documentation of the tasks comprise the representative work assignment requires the tasks must include all exposure conditions occurring in proportion to the way they occur over the typical work shift. The list of tasks is developed based on an understanding of the job under study through observation and interview time with managers and workers.

b. Interview. The interview must provide information about what the job entails and the activity duration. Additional information to gain from the interview includes time spent at each activity, distance from the activity, and how often/frequency activity is observed. Emphasis is placed on long-term activity, not what occurs on a specific day. Measurements are taken with an integrating SLM for durations ranging from several seconds to a few minutes to meet the requirement that the duration is sufficiently long to be representative of the exposure associated with the task.

c. Fractional Methodology. Eight-hour time-weighted average sound levels (TWA_{8hr}) and related noise doses are computed using the fractional methodology specified in U.S. Department of Health and Human Services (DHHS) (NIOSH) Publication No. 98-126.

8. Exposure Monitoring Practices.

a. Sound Exposure Monitoring. Targeted sound exposure monitoring must be conducted on a continuous basis to expand resolution of job function sound exposures and to reflect changes in job assignments.

b. Re-monitoring of Noise Exposures. Re-monitoring of noise exposures must be performed whenever a change in job tasks, procedures, equipment, or controls indicates noise levels may have increased to result in an exposure of or greater than 85 dBA TWA_{8hr}, additional employees may be exposed at or above the AL or the attenuation provided by hearing protectors may be rendered inadequate to meet the requirements. Re-monitoring of noise exposures for areas which may have decreased must also be monitored as these may allow enrolled AIR HCP employees being allowed to work in the environment without HPDs, or potentially remove AIR HCP employees from the program. Noise reductions can occur especially with equipment modifications and upgrades.

9. Employee Notification. AIR must notify each employee exposed at or above an 8-hour TWA of 85 dBA as noted in the employee completed AIR HCPDF, appendix B, figure B-1. The AIR HC-PM must maintain copies of results for all employees exposed at or above the 85 dBA TWA.

10. Observation of Monitoring. AIR must provide affected employees and their representatives with an opportunity to observe any noise measurements conducted. This should be arranged through branch office managers.

11. Instrument Care and Calibration. The AIR HC-PM must ensure sound level measuring instruments and calibrators are calibrated by SMEs and certified per manufacturer's instructions by a qualified laboratory and maintain calibration certificates on file. In many cases, manufacturers recommend annual calibration of dosimeters, but require annual calibration of the calibrators.

a. Sound Level Meters (SLM). Direct-reading integrating SLMs must be field calibrated before and at the end of each day of monitoring using the technique recommended by the manufacturer.

b. Noise Dosimeters. Noise dosimeters must be field calibrated before and at the end of each sound exposure evaluation. This calibration should also include a visual inspection to identify any damage to the instrument while it was attached to the employee.

c. Instrument Batteries. Check instrument batteries before each field calibration and periodically throughout the sampling period if practical.

Note: If calibration check or battery check indicates unreliable readings, all measurements taken since the last acceptable calibration and/or battery check must be repeated.

12. Sound Exposure Risk Assignments to Individual Employees.

a. Employee Exposures. The noise exposure database maintained by the AIR OSH Office identifies employee job series exposure based on representative exposure groups and exposure profiles.

b. Assignments. The assignments are made to ensure no employee with noise exposure is excluded from the AIR HCP, and potentially includes personnel who may not have significant noise exposure.

c. Responsibilities. It is the responsibility of management at each branch office to annually confirm individual employee noise exposures by:

(1) Reassessing previous year's employee answers on the AIR HCPDF, included in appendix B, figure B, to ensure they are still valid by conferring with the employee.

(2) Reviewing the typical day assignments of the employee and identifying certain tasks and situations that trigger noise exposure risk (included in the AIR HCPDF).

d. Employee Examination Request. If a branch office manager or an individual employee wishes to examine if the employee should be included in the AIR HCP, the HCPDF must be used as the guideline and the documentation for determination.

e. AIR Hearing Conservation Program Determination Form (HCPDF). The AIR HCPDF is designed to be completed by each AIR employee and reviewed by the employee's manager to document potential exposure conditions. This includes identifying noise conditions previously not identified. If the results of the interview process reveal potential exposure to hazardous noise levels, the employee is advised he/she is enrolled in the AIR HCP and agrees to follow procedures to use and maintain HPDs. The AIR HCPDF is contained in appendix B, figure B-1. AIR HCP employees who are determined by a Safety and Health Specialist and/or data that their AIR HCP enrollment should end will complete an updated AIR HCPDF to be removed from the AIR HCP.

f. Completed AIR HCPDF. Completed HCPDF are to be forwarded to the AIR HC-PM, and copies are to be retained in the branch office. The AIR HC-PM will ensure the FAA Occ Med Program receives all AIR HCPDFs electronically (including enrolled, not enrolled, or removed AIR HCP employees). If new noise conditions are identified, notify the AIR HC-PM, and they will be targeted for future monitoring.

Chapter 6. Audiometric Evaluation

1. Requirements of Audiometric Testing and Evaluation Program (ATEP).

a. Audiometric Testing and Evaluation Program (ATEP). FOH, with contract and program oversight by the AIR Enterprise Operations Division (AIR-900) OSH Program Office, will establish and maintain an ATEP for all employees whose assigned job function has an associated sound exposure level equal to an 8-hour time-weighted average (TWA) of 85 dB on any one-day. FAA must provide the ATEP at no cost to employees.

b. Audiometric Testing Requirements. Audiometric testing will be conducted and documented according to the requirements stated in OSHA's Occupational Noise Exposure Standard 29 CFR, § 1910.95, and applicable consensus standards.

c. Audiometric Test Frequencies. Audiometric tests (audiograms) must be pure tone, air conduction, hearing threshold examinations, with test frequencies 500, 1,000, 2,000, 3,000, 4,000, 6,000, and 8,000 Hertz (Hz). The technician must perform tests separately on each ear for each frequency. Technician qualifications are found in 29 CFR, § 1910.95(g)(3).

d. FOH. FOH will ensure FOH staff receive training to perform audiograms and that equipment, test procedures, test interpretation, clinical follow-up, and documentation meet OSHA requirements. FOH staff or contractors conducting audiograms must be certified through the Council for Accreditation in Occupational Hearing Conservation (CAOHC).

e. Phases. Audiometric testing will be offered to employees in two (2) phases as follows:

(1) Phase One - based on initial screening exposure assessments:

(a) Based on exposure risk potential identified by initial monitoring, affected existing employees who have unique noise exposures (exceeding the 85 TWA 8hr action level) due to activities falling outside the noise exposure norm associated with their Job Series' representative SEG, must be included in the AIR HCP. These activities are annotated on the AIR HCPDF located in appendix B, figure B-1.

(b) Baseline, initial, annual, and exit audiograms must be conducted for all employees identified in the AIR HCP under Phase One.

(c) FOH, on behalf of the FAA, must conduct audiograms for identified employees in Phase One.

(d) Retest audiograms must be performed within 30-days when an STS or recordable hearing loss is detected.

(2) Phase Two - based on expanded higher resolution exposure assessments:

(a) FOH, on behalf of the FAA, must conduct a baseline audiogram for all new employees in the AIR HCP within six-months.

(b) FOH, on behalf of the FAA, must conduct annual audiometric testing to all AIR HCP employees whose annual noise exposure assessment equals or exceeds the AIR Noise Exposure Limits.

(c) FOH, on behalf of the FAA, must perform retest audiograms within 30-days when an STS or recordable hearing loss is detected.

(d) All AIR employee enrolled within the AIR HCP must receive an exit audiogram whenever he/she is removed from the AIR HCP or when he/she leaves the agency.

(e) When testing AIR HCP employees, FOH must notify the employee in writing within 21-days when an STS or a recordable hearing loss occurs. The AIR HC-PM, and the FAA Occ Med Program are also notified. Written notification of a decrease in hearing sensitivity is not required. However, employees may request and receive a copy of the hearing examination results.

2. ATEP Responsibilities. The AIR HC-PM must be responsible for oversight of the ATEP, to include:

a. Coordinate with AVS-AQS contract agreements with any medical surveillance provider(s).

b. Ascertain and ensure ATEP procedures for audiometric examinations (testing, review, evaluation, follow-up, and data management) are current and comply with OSHA regulations.

c. Ascertain and ensure required AIR HCP training is complete and compliant.

d. Regularly review reports of STS and recordable hearing loss cases.

e. Regularly review documentation and records of ATEP activity.

Chapter 7. Hearing Protection Devices (HPDs)

1. Requirements.

a. Noise Prevention. Although the most effective method to prevent noise induced hearing loss is through removing the noise from the workplace or removing the worker from the noise, in most jobs within the AIR, HPDs are the only feasible means to protect workers. AIR requires the use of approved HPDs when an employee is working in an area of high noise. These areas which may be demarcated areas with signage indicating hazardous noise levels and HPD use include an airport during airshow with military aircraft, near an active runway, operational aircraft, engine operations, or aircraft manufacturing facilities, generator, etc. Alternatively, is engaged in a task with associated hazardous noise levels, regardless of daily exposure level.

b. HPDs. Employees must wear HPDs described as being ear plugs and/or ear muffs if they are exposed to the levels discussed in this AIR HCP and if they have not yet had a baseline audiogram or they have experienced a STS.

2. Availability of HPDs. AIR managers will make HPDs available to their employees who have the potential to work in high noise areas.

- HPDs must be provided at no cost to employees and must be replaced as necessary. The only exception is active noise reduction earmuffs with additional guidance in appendix D.
- HPDs must be for the exclusive use of each employee and must not be traded or shared.

3. Approved HPDs. The AIR HC-PM will specify and provide a list of the approved HPDs. Several styles and types of earplugs have been selected specifically for AIR employees and the variety of work tasks performed. Approved earmuffs will also be included in the list. Overall, all standard HPDs must have a minimum of 25 dB NRR.

4. Specialized HPDs. For individuals with specific medical needs or physical characteristics requiring specific types of HPD, AIR, upon receipt of request, must provide specialized HPDs. Examples of specific medical needs include hearing aids that cannot be worn in earmuffs or a person with a Cochlear implant. AIR would provide the specialized HPD, not a change in hearing aids.

5. HPD Attenuation. Each type of HPD must provide a level of protection to reduce the employee's 8-hour time-weighted average (TWA) sound level to 85 dBA or less independent of the amount of time exposed to hazardous levels of noise. Until hearing protector performance data are reported using the most up-to-date tests methods specified by the most recent American National Standard Institute (ANSI) S12.6, calculation of the level of protection will be based on de-rating the HPD's NRR by 50 percent.

6. Training on HPDs. AIR HCP training will be provided in accordance with chapter 8 of this order.

7. Management Support. Managers need to monitor and enforce the wearing of hearing protection where required. A critical message for managers to share with employees is someone with a measured hearing loss can save what hearing they have by using HPDs.

Chapter 8. Education and Training

1. Background. The success of the AIR HCP depends largely on effective employee education and training. The specified training requirements and the focus of the training are to educate employees on how to identify high noise areas and jobs, and to properly use HPDs. Initial and Annual training must be provided to all employees who are or may be exposed to the AIR Noise Exposure Limits as determined through review and completion of the AIR HCPDF, appendix B, figure B-1. Supplemental AIR HCP training can be provided annually, covering job-specific topics. Additional training guidance is as follows:

a. Training Occurrences. Upon initial assignment to tasks where occupational exposure may take place in high risk noise environments as identified through the AIR HCPDF, and at least annually thereafter on a fiscal year basis from the date when initial training was received. Training must also be provided when changes such as modification of tasks or procedures, or institution of new tasks or procedures, affect the employee's occupational exposure. The additional training may be limited to addressing the new exposures created. Those employees who have a confirmed STS must be provided additional training.

b. Training Classes. The AIR HC-PM must assist in facilitating classes on the AIR HCP to ensure AIR students are knowledgeable in the subject matter. These classes will be available within 12-months of the date of this order. The AIR HC-PM must also coordinate with managers and ATMs to begin tracking associated AIR HCP training requirements. The branch offices must be notified of the classes via their respective ATM in conjunction with their respective local AIR OSH POC.

c. Refresher Training. Annual refresher training is required on the AIR HCP as noted below in paragraph 2 and is required to be completed within one-year on a fiscal year basis from the date when initial training was received.

d. Proper Recording. All training must be properly documented in the student's learning history in the electronic Learning Management System (eLMS). Documentation of training must also include a sign-in sheet containing the course number, printed name and signature of the employee, the date of training, and the signature of the qualified person who performed the training (when the course is instructor-led). Completed sign-in sheets are to be provided to the local ATM.

2. Annual AIR HCP Training Requirements. All employees included in the AIR HCP must be trained annually and informed of the topics listed below.

a. Effects of Noise on Hearing. Training must cover both how the effects of noise exposure are identified through audiogram testing and the impact of noise-induced hearing loss on everyday life. Emphasis should be placed on protecting hearing in those employees who have already experienced hearing loss.

b. HPDs Training. This training must include:

(1) The purpose of HPDs;

(2) Types of devices, the advantages and disadvantages and attenuation of various types;

(3) Selection, fitting, use, and care of HPDs;

(4) Methods for solving common problems associated with HPDs;

(5) Recordkeeping requirements; and

(6) Supervised hands-on demonstration in the proper fitting, donning, and doffing of HPD.

c. Audiometry. Instruction must include a discussion of the purpose of audiometric testing in preventing hearing loss, a description of the actual evaluation procedures, interpretation, implications of the evaluation results, and recordkeeping. Employees must be made aware that threshold shifts can be traced to inadequate protection from ineffective noise controls and inconsistent use of HPDs.

3. Supplemental AIR HCP Training. The AIR HC-PM must assist in training management responsibilities regarding the AIR HCP. Supplemental training must be sufficient in duration to cover the topics and assess comprehension of attendees. Employees must be provided with a copy of this AIR HCP and the OSHA Occupational Noise Standard. Supplemental training topics may include the following:

- Elevated noise at the workplace.
- Competently performing assigned duties in a hazardous noise environment without sacrificing hearing.
- Off-the-job safety and hearing conservation practices.
- Individual responsibilities for preventing hearing loss.

Chapter 9. Recordkeeping and Employee Notification

1. AIR Required Records. The AIR organization must ensure all required records are maintained in a manner readily accessible to managers in the employee's line of supervision, the AIR HC-PM, employees upon request, employee representatives, and OSHA representatives upon request.

2. Notification. Managers are to notify affected employees with associated noise exposures equal to or greater than the AIR Noise Exposure Limits utilizing the AIR HCPDF, appendix B, figure B-1 of the following: (Additional reminders will also be provided through both annual and refresher training.)

a. Availability. Availability of the OSHA Occupational Noise Standard and where it is posted.

b. Mandatory Requirements. The mandatory requirement to wear HPDs:

(1) While performing inspection activities on an active ramp.

(2) While involved in travel to remote sites in small aircraft and helicopters.

(3) While performing check rides in small aircraft or various helicopter types.

(4) While involved in activities near engine testing operations and in direct proximity of active aircraft auxiliary power units (APU), air cycle machines (ACM), ram air turbine (RAT) etc.).

(5) While involved in activities in direct vicinity of wood and metal working equipment, riveting operations, and assembly/utility equipment present in aircraft manufacturing facilities.

(6) While involved in activities in workplaces where noise levels require a raised voice in order to be heard.

(7) Wear approved HPDs where elevated noise exists or where hearing protection signage may be present.

c. Audiograms.

(1) The employees will be notified to schedule their audiogram with instruction for setting up the FOH clinical examination. The employee will contact the recommended clinic for an agreed upon appointment time.

(2) Employees must be informed of the importance of attending audiogram appointments, since AIR will be charged for the audiogram by FOH, if the appointment is not cancelled at least 48 hours before the scheduled date and time.

(3) Employees must be informed of the need to avoid non-occupational (e.g., riding motorcycles, concerts, shooting, etc.) noise for at least 14 hours prior to a baseline, initial, annual, or a retest audiogram.

(4) Audiometric test records must include the name and job classification of the employee, the date, the examiner's name, the date of the last acoustic or exhaustive calibration, measurements of the background sound pressure levels in the audiometric test room, and the employee's most recent noise exposure measurement.

d. Training Records. The appropriate manager of the employee must ensure training records are maintained in the FAA electronic training records system as noted in chapter 8.

3. Record Retention.

a. Noise Monitoring Results. Records of noise monitoring results must be retained for 30-years. The FAA may retain results longer as they are a historical record of a facilities noise survey.

b. The AIR HCP Determinations Forms (HCPDF). The HCPDF must be maintained within the FAA Occ Med Program. Records are retained following applicable National Archives and Records Administration (NARA) General Records Schedules (GRS) and FAA GRS.

c. Audiometric Test Records. Audiometric test records must be retained as part of the employee's medical record following applicable NARA GRS. FOH will maintain records of all audiograms.

d. Training Records. Training records must be maintained for the duration of employment of the affected employee. These records must include the employee's name and the date of the training.

e. FOH Notification. FOH must send notification to each individual employee when a record is created containing FAA Occ Med Program information. AIR HCP enrolled employees must receive a copy of their results in the form of the Employee Letter, FOH Form 16. FOH must provide the FAA (AIR HC-PM) the Employer Letter FOH Form 33, which must be maintained by the AIR HC-PM and the FAA Occ Med Program. FOH Form 33 provides the FAA the type of audiogram provided (baseline or annual) and if a new STS was noted (right ear or left ear and Recordable or Non-Recordable).

Chapter 10. Program Evaluation

1. Level and Recurrences of Evaluations. The effectiveness of the AIR HCP must be evaluated at the individual level and at the program level.

a. Individual Level. The evaluation at the individual level must take place during the time of audiometric testing. If an employee shows a shift in hearing ability is occupationally related, all possible steps must be taken to ensure no further occupational hearing loss occurs.

b. Program Level. The program level evaluation must occur annually by branch office management with assistance provided by the AIR HC-PM. The audiometric testing and AIR HCP training program elements must be reviewed annually by FOH for quality and effectiveness.

2. Evaluation Tools. Program evaluation must be structured under a questionnaire and evaluation tool (appendix E, Program Evaluation Tools Questionnaire). Additional factors to be considered in the evaluation of program effectiveness include:

- The number and rate of employee standard threshold shifts and hearing loss recordable cases as identified through the audiometric testing program,
- Presence of supplemental training for managers and employees, and
- Branch audits of hearing protection usage.

3. Documentation. The findings of the program evaluation must be documented and must include recommendations for program corrections, modifications and additions. This documentation must be kept for five-years.

4. Occupational Safety, Health, and Environmental Compliance Committee (OSHECCOM). The findings of the program evaluation must be made available to be shared with Establishment Level OSHECCOM members.

Appendix A. Definitions

1. Action Level. The noise level (85 dBA), calculated as an eight-hour time-weighted average (TWA), at which OSHA requires exposed employees be included in the AIR HCP, herein referred to as the OSHA AL.

2. Administrative Controls. When OSHA permissible exposure limit (PEL) exposure levels are exceeded, feasible administrative (i.e., worker-machine rotation or breaks from noise) or engineering controls must be utilized. If administrative or engineering controls fail to reduce sound levels within OSHA PEL exposure levels, personal hearing protective devices must be provided to the employee by the employer, and used to reduce sound levels to within the levels of OSHA PEL exposure levels.

3. AIR Noise Exposure Limits. Permissible noise exposure levels for AIR employees and the conditions under which exposures occur. These limits define inclusion in the AIR HCP and are defined as follows:

- The occupational exposure limit for noise, the criterion sound level, is 85 dBA, expressed as an 8-hour TWA. Exposure to this level for any one-day requires inclusion in the AIR HCP.

- The action level or the TWA exposure which requires program inclusion is 85 dBA.

4. Audiogram (Hearing Test). The chart, graph, or table showing hearing threshold level as a function of frequency; a method of measuring degree of hearing loss.

5. Audiologist. A professional, specializing in the study and rehabilitation of hearing, who is certified by the American Speech-Language-Hearing Association or licensed by a state Board of Examiners.

6. Baseline Hearing Test. An OSHA required audiometric examination which must be administered within six months of an employee entering the AIR HCP. This baseline test is used for comparison with future tests to determine if changes have occurred in hearing.

7. CAOHC. Council for Accreditation in Occupational Hearing Conservation.

8. CAOHC Certification. A certificate issued following successful completion of an accredited course. This certification is renewed every five-years.

9. Criterion Sound Level. The constant sound level in dB, if applied for eight hours, would accumulate a dose of 100 percent.

10. dBA. Unit of measurement of sound level in DB using a weighting network of the A scale on a Sound Level Meter. A weighting is a pitch/frequency response filter adjustment which makes its reading conform, roughly, to the human ear.

11. Decibel (dB). Unit of measurement for sound levels. Based on a logarithmic scale.

12. Dose. A percentage of the maximum allowable noise a worker can be exposed to per day. This is a computation based on the following variables: criterion level, lower threshold, and exchange rate. Dose is expressed as a percentage.

13. Dosimeter. An instrument worn or used by an individual to measure the accumulation of their noise exposure over a work period. Dosimeters record all noise levels but do not record what is being said. Dosimeters generally sample 16 times per second.

14. Exchange Rate. The rate at which a noise hazard (expressed by dose) doubles. Using a decibel scale, every time the sound energy doubles, the measured level increases by 3 dB. This is the 3 dB exchange rate recommended by NIOSH and the American Council of Governmental Hygienists (ACGIH). For every increase of 3 dBA in the TWA, the measured dose (or risk of hearing impairment) would double. OSHA uses an exchange rate of 5 dB. The exchange rate affects the integrated readings L_{avg}, dose and TWA, but does not affect the instantaneous sound level**.**

15. Exhaustive Calibration. A calibration for audiometers. An exhaustive calibration must be performed at least every two-years, or whenever the annual check indicates the audiometer is out of limits. The calibration process checks the audiometers output waveform for linearity, frequency, amplitude, and distortion.

16. Frequency. Pitch or the number of cycles a sound wave completes per second. Measured in Hz or cycles per second (CPS).

17. Hazardous Noise. Noise levels which pose a danger to hearing ability and a potential cause of hearing loss. Hazardous, elevated, or high noise is caused by operating aircraft and machinery, or industrial processes that cause an individual to raise their voice when speaking. Noise levels of 85 dBA and greater constitute hazardous noise.

18. AIR HCP (Hearing Conservation Program) Employee. An employee who is routinely exposed to workplace noise at or above 85 dBA TWA (OSHA Action Level) and an employee whose noise exposure is less than 85 dBA but reports occasional exposures to hazardous noise levels, as documented in the noise exposure assessment (sound survey).

19. Hearing Protection Devices (HPD). Personal protective equipment is designed to be worn in the ear canal or over the ear for the purpose of reducing the sound level reaching the eardrum. Examples include earmuffs or earplugs in which in some cases can be simultaneously worn.

20. Hearing Threshold Level (HTL). The lowest threshold the employee can hear the test tone during an audiometric test. The HTLs are recorded on the employee's audiogram.

21. Hertz. Unit of measurement of frequency, numerically equal to cycles per second.

22. High Noise Area. Any area where the cumulative noise exposure to employees is above 85 dBA TWA, or a 50 percent dose.

23. Initial Hearing Test. An OSHA required audiometric examination which was not administered within six-months of an AIR HCP Employee's initial exposure to potentially elevated noise levels at or above 85 dBA TWA. This will be the common hearing test until this AIR HCP is fully implemented. This initial test is used for comparison with future tests to determine if changes have occurred in hearing.

24. Job Function. A more specific job classification title that relates to a set of job activities (work tasks) routinely performed by an employee with a certain specialty and position. It is used to distinguish between different types of jobs with different sound exposure profiles within the same specialty and position.

25. Job Function Profile. A completely developed job function is a combination of the title and the list of activities and associated sound exposure information necessary to fully describe the sound exposure profile for a typical full shift including non-productive periods. It includes a detailed description of the work performed routinely by an employee. Day–to–day or week–to–week variations that habitually occur would be included in the analysis of the job function.

26. Presbycusis. The term used to refer to hearing loss associated with the aging process. Adjustments for presbycusis are accomplished automatically within audiometric software according to the procedures and tables contained in appendix F of the OSHA Noise Standard. Though age adjustments are allowed by OSHA, this process is not allowed by NIOSH, and Office of Workers' Compensation Programs (OWCP) claim reviews. Additional guidance for age adjustment is contained in FAA Order 3900.19 series.

27. Recordable Hearing Loss. A hearing loss meets both of the following conditions:

a. An 8-hr TWA noise exposure of 85 dBA or greater, per the sound survey.

b. The audiometric test findings are consistent with noise induced hearing loss.

c. Hearing loss is considered work related if the exposure in the work environment either caused or contributed to the hearing loss. It is not necessary for the workplace to be the sole cause, or even the predominant cause for the hearing loss to be work related. Criteria a and b above do not apply to acute occupational acoustic trauma (e.g., head injury, explosion, etc.)

28. Safety Management Information System (SMIS). The database where injuries and illnesses are recorded on the FAA Form 3900-6, Mishap Form. This is the database where the OSHA 300 Logs are generated annually.

29. Sound Survey. A workplace noise exposure assessment is critical in determining which employees are potentially exposed to elevated noise levels and are to be enrolled in the AIR HCP.

30. STS (Standard Threshold Shift). An average change in hearing level of 10 dB or more at 2000, 3000 and 4000 Hz in either ear, as compared to the baseline audiogram. STS calculations are typically adjusted for presbycusis (i.e., age adjusted) according to the procedures and tables provided in appendix F of the OSHA noise standard. Though age adjustments are allowed by OSHA, this process is not allowed by NIOSH, and Office of Workers' Compensation Programs

(OWCP) claim reviews. Additional guidance for age adjustment is contained in FAA Order 3900.19 series.

31. Time-Weighted Average (TWA). The sound level which, if constant over an eight- hour exposure, would result in the same noise dose as is measured.

Appendix B. Sound Exposure Monitoring Procedure and Form

1. Noise Exposure Criteria. Eight-hour time-weighted average (TWA) and related noise doses are computed using the fractional methods detailed in the OSHA Occupational Noise Exposure; Hearing Conservation Amendment, 29 CFR, § 1910.95, appendix A, and NIOSH recommendations for exposure limits (1998). Damage-risk criteria provide the basis for recommending noise exposure limits based on noise level and exposure time. OSHA and NIOSH criteria are shown below.

Table B-1 OSHA and NIOSH Criteria

Exposure Level (dBA)	**85**	**88**	**90**	**92**	**94**	**95**	**100**	**105**	**110**	**115**
Permissible Exposure – OSHA (hours: minutes)	16:00	10.36	8:00	6:00	4:36	4:00	2:00	1:00	0:30	0:15
Recommended Exposure – NIOSH (hours: minutes-seconds)	8:00	4:00	2:00	1:35	1:00	0:47-37	0:15	0:04-43	0:01-29	0:00-28

a. OSHA Permissible Exposure. OSHA permits exposures of 85 dBA for 16 hours per day, and uses a 5 dB time-intensity tradeoff. This means for every 5 dB increase in noise level, the allowable exposure time is reduced by half and for every 5 dB decrease in noise level, the allowable exposure time is doubled. All time/intensity values shown on the OSHA PEL line in the table above are assumed to have equal risk to each other, that is, 16 hours at 85 dBA carries the same auditory risk as 8 hours at 90 dBA, 4 hours at 95 dBA and 2 hours at 100 dBA, etc.

b. NIOSH's Recommended Exposure Limit (REL). NIOSH's Recommended Exposure Limit (REL) is 85 dBA for 8 hours per day, and uses a 3 dB time-intensity tradeoff. This means for every 3 dB increase in noise level, the allowable exposure time is reduced by half and for every 3 dB decrease in noise level, the allowable exposure time is doubled. The time/intensity values shown on the NIOSH REL line in the table are assumed to have equal risk to each other, that is, 8 hours at 85 dBA carries the same auditory risk as 4 hours at 88 dBA, and 2 hours at 90 dBA, etc.

c. NIOSH Criteria. AIR has adopted the NIOSH Criteria for assessing noise exposures in its employees. Further, it has adopted a combination of exposure conditions and levels to determine if an employee must be included in the AIR HCP. The conditions are as follows:

(1) The occupational exposure limit for noise, the criterion sound level, is 85 dBA, expressed as an 8-hour TWA. Exposure to this level for any one-day requires inclusion in the AIR HCP.

(2) The action level or the TWA exposure which requires program inclusion is 85 dBA.

(3) For Standard Threshold Shift (STS) (OSHA) or Significant Threshold Shift (NIOSH), a hearing loss that is ≥ 15-dB worse than baseline at any test frequency, in either ear, confirmed with follow-up test for same ear or frequency.

2. Representative Sampling Strategy. Assignments within AIR may require employees to perform several different activities during the course of a day, week, month, or year. The monitoring strategy involves efficiently conducting personal monitoring and ensuring employees are properly identified for potential inclusion in the AIR HCP. This strategy assigns exposure risk of groups of employees based on a representative job with the highest noise exposure level. Representative groupings are based primarily on four factors:

- Branch Office Structure. A staffing category breakdown organized by specialty and position was utilized to select Similar Exposure Group (SEG);
- Job rotation patterns as identified by management and other responsible personnel. A job may be deemed representative if employees in a defined group rotates or change jobs with no associated change in personnel recordkeeping status;
- Similar jobs or work assignments; and
- Similar exposures - jobs where sound exposures are confirmed to be similar.

3. Personal Monitoring.

a. General. Because assignments can vary greatly on a daily basis personal noise exposure monitoring should be conducted focusing on identifying and characterizing individual tasks. The variability in noise levels and worker mobility makes the exclusive use of area monitoring generally inappropriate for assessing employee exposure potential. Wherever employee mobility or certain tasks make it impossible to measure with a hand held integrating SLM, the employee should wear a dosimeter during performance of those tasks of the job.

(1) In all cases sound level measurements are to be collected in a position representative of the worker's hearing zone, based on the conditions observed and Safety and Health Specialist's judgment.

(2) For employees or jobs where access to the hearing zone is not possible or considered unsafe, controlled dosimetry should be conducted representing the task(s) described. The length of the sample may vary based on the nature of the task.

(3) For task noise monitoring, the sample length may range from several seconds up to a few minutes. If the sound emissions are highly repeatable, the total test duration may encompass only several repetitions of the activity to assure a high degree of measurement accuracy. Other non-repetitive activities could require longer observation periods to maintain reliability.

(4) The sound levels and durations of scheduled breaks and non-assignment times are obtained, and compiled with the job task analysis data to portray typical work days. All information should be recorded on standard data collection forms to facilitate data processing input.

b. Task-Based Exposure Assessment Model (T-BEAM) Methodology. Under T-BEAM Methodology jobs are analyzed based on major task components similar to a classical time-motion study. Operations are to be broken down into major sound level sources/components. Job tasks and durations are based on interviews with personnel and observations made of various jobs during the survey. This is an ideal methodology for the AIR workforce due to the diversity of the job functions and specialties.

4. Background Noise Impact. Aircraft manufacturing activity's influence on the carryover exposure should be considered to identify the potential acoustical impact from the background sound at any location to also include ramp/tarmac and airport operations. The contribution of background noise activity may be a significant factor in some environments.

5. Pre-Survey Noise Exposure Assessment Questionnaires. Prior to onsite data collection, an Employee Noise Exposure Assessment/Sound Survey Questionnaire may be used for completion by AIR employees to describe their daily activities. This assessment questionnaire is designed to gather information such as: 1) types of noise sources; 2) frequency of exposure; 3) duration of exposure; 4) proximity - distance to the source; and 5) new and unique manufacturing processes for new sound level data to be gained.

Figure B-1. AIR Hearing Conservation Program (HCP) Determination Form

Directions: *Mark 'X" next to "Original" if this is your initial application for baseline testing/evaluation. If your job has changed and this is a subsequent application, or an update of an existing form, mark 'X' next to "Update". Fill in your duty assignment location. Provide the completed and signed document to your manager who will forward the original to the AIR OSH Program Manager and retain one copy in the originating office.*

ORIGINAL ☐	UPDATE ☐	DUTY ASSIGNMENT LOCATION:	AIR-800 /MIDO	AIR-700/ACO	Other (list):

X		Where applicable, mark "X" on the left hand column for all situations/conditions that best describes your current job classification and workplace noise exposure on any given day. If none apply, mark "X" for option E: "None Apply" column.
☐	A.	**Engines/Aircraft/Etc.:** Any specialty whose current job duties include any activity under the following conditions, even if it is a single occurrence on any given day: • In direct proximity (≤ 50 feet) of aircraft or rotorcraft engine testing operations (open air testing). • Near (≤ 200 feet) engine testing operations (other than within a control room with door closed) for ≥ 5 minutes. • On an active ramp, in general proximity (≤ 25 feet) of active aircraft (Auxiliary Power Units (APUs), Air Cycle Machines (ACMs), etc.) ≥ 1 hour per day; OR in direct proximity (≤ 5 feet) for ≥ 5 minutes per day. • Travel to remote sites in small piston aircraft such as Cessna, Metroliner, Navajo and various helicopter types in excess of 4 hours per day. • Perform flight duties in small aircraft or various helicopter types in excess of 1 hour per day. • Activities at public air show that includes military aircraft. • Near an active runway (e.g. accident investigation) ≥ 1.5 hours
☐	B.	**Manufacturing Operations:** Any specialty whose current job duties include any activity under the following conditions, even if it is a single occurrence on any given day: • In direct vicinity (≤ 5 feet) of riveting operations ≥ 1 minute per day (cumulative riveting sound). • In general proximity (5 to 15 feet) of riveting operations ≥ 5 minutes per day (cumulative riveting sound). • In direct proximity (≤ 10 feet) of compressed air blow-off for ≥ 5 minutes per day • In direct proximity (≤ 15 feet) of equipment powered by compressor air ≥ 1 hour per day. • Near (≤ 20 feet) an active Hammer Press for more than 2 minutes on any given day. • In direct proximity (≤ 15 feet) of wood and metal working equipment such as grinders, chop saws, circular saws, table saws, radial arm saws, miter saws, etc. ≥ 30 minutes per day (cumulative sound exposure).
☐	C.	**Function Testing:** Any specialty whose current regular job duties include being in the direct vicinity (≤ 100 feet) of an active ram air turbine (RAT) function testing for any duration on any given day.
☐	D.	With respect to A, B & C above: cannot be certain if exposed to any of these activities; OR, cannot be certain of the distance from source(s) and/or the duration of noise exposure.
☐	E.	Either none of the above conditions in A, B & C apply; or primary job duties are administrative and/or managerial and who do not perform any tasks described in A, B & C above.
☐	F.	A new or previously unidentified noise concern that requires investigation. Describe:

If you have checked the column next to the job classification listed under paragraph A through D, or F this serves as official notification your work environment includes areas of high noise that have been identified as at or above the Action Level of 85 dBA for an 8-hour TWA exposure. This determination mandates you be enrolled in the AIR HCP, which requires you to attend training to include performing a one-time demonstration of your ability to utilize appropriate hearing protection devices; wear hearing protection when exposed to high noise; and you present yourself for initial and annual training, and audiometric testing. Enrollment continues until you are removed from the program annotated by the completion of an updated Hearing Conservation Program (HCP) Determination Form.
Note*: You must also refrain from exposure to high noise levels for 14 hours immediately prior to your audiometric test/evaluation.*

I understand by selecting Paragraphs A, B, C, D or F (enrolled), I am potentially exposed to noise levels at or above the Action Level of 85 dBA for an 8-hour time-weighted average (TWA) and I am enrolled in the FAA AIR HCP. I acknowledge it is my responsibility to use hearing protection when exposed to high noise tasks and situations, and to request replacement devices when they become lost, broken, unsanitary, or no longer useable for any reason.

Print your Name	Signature	Date
Print Manager's Name	Signature	Date
AIR Occupational Safety and Health Program Manager	Signature	Date

Appendix C. Guidelines for Hearing Loss Cases

Determining Work Relationship for AIR HCP Employees.

1. General.

a. For employees who are in the AIR HCP, the physician or other licensed health care professional (PLHCP) will evaluate audiometric examinations and make a work relationship determination when hearing loss (STS and/or Recordable Hearing Loss) is detected according to requirements stated in OSHA's Occupational Noise Standard 29 CFR § 1910.95, OSHA's Occupational Injury and Illness Recording and Reporting Requirements Standard Title 29 § 1904.10 - amended, effective Jan 1, 2003. A case will be considered work related if both of the following conditions are met:

(1) An employee is exposed to workplace noise at 85 dB time-weighted average (TWA) or more, per documented Similar Exposure Group (SEG) exposure assessment.

(2) Findings are consistent with noise induced hearing loss.

Note: Hearing loss is considered work related if the exposure in the work environment either caused or contributed to the hearing loss. It is not necessary for the workplace to be the sole cause, or even the predominant cause, for the hearing loss to be work related. Criteria a) and b) above do not apply to acute occupational acoustic trauma (e.g., head injury, explosion, etc.).

b. Evaluation may include additional Safety and Health Specialist consultation when the PLHCP is unable to make an independent determination. Most cases should not require referral for consultation.

c. The manager must enter hearing loss cases into the Safety Management Information System (SMIS), 3900-6 Mishap Form at the time of the annual audiometric test results are received. If the condition is confirmed on retest and the hearing loss is determined to be work related, the case must be added to the OSHA 300 Log. If the condition is not confirmed on retest or if the condition is confirmed on retest but the hearing loss is determined to be non-work related, then the OSHA Recordable question must be changed from Yes to No. Additionally, if the OSHA 300 log was already updated, the STS entry can be singularly lined-out through and noted the STS was not recordable.

2. Procedure.

a. Medical staff technicians will refer a case to the PLHCP when an annual audiometric test shows an STS, an audiometric retest shows an STS, or an audiometric retest shows a Recordable Hearing Loss.

Note: When a Recordable Hearing Loss is detected on the annual exam, the PLHCP evaluation may be deferred until retest. If a STS or Recordable Hearing Loss is detected on retest, the case must be referred to the PLHCP.

b. When evaluating audiometric cases, the FOH PLHCP will:

(1) Review all available documentation and test results, including actual values as displayed on the audiometer's printout, the employee's Audiometric Test History, and the Surveillance Exam comments.

(2) Consider potential effects of the testing environment by reviewing equipment calibration records, biological testing results and background sound pressure measurements, as necessary.

c. FOH will document the work relationship determinations.

d. Hearing loss cases must remain on the OSHA 300 Log (in SMIS) when a Recordable Hearing Loss is confirmed on retest and when hearing loss is determined by a PLHCP to be work related.

e. The hearing loss case must be updated in the OSHA 300 Log (SMIS) by changing the entry for the OSHA Recordable question to "No," if the Recordable Hearing Loss is not confirmed on retest or when hearing loss is determined by a PLHCP to be non-work related.

f. Unless the Physician determines threshold shift is not occupational, the following actions must be performed:

(1) Employees must be refitted, retrained in use, care, and directed to use them.

(2) Employees may be offered protectors with greater noise attenuation if Safety and Health Specialists determines this is warranted.

(3) Employees must be referred for a clinical audiology or otological evaluation if the PLHCP suspects pathology is related to wearing hearing protectors.

(4) The PLHCP will inform employees of need for otological evaluation if pathology unrelated to use of hearing protectors is suspected.

g. If subsequent audiological evaluation of employee exposed to <8-hr TWA of 90 dB indicates threshold shift is not persistent, AIR must:

(1) Inform employee of new audiometric interpretation, and

(2) No additional training or STS recordkeeping is required.

h. Annual audiogram may be substituted for baseline if the audiologist, otologist, or PLHCP determines the STS is persistent or the threshold indicates significant improvement over the baseline.

Appendix D. Hearing Protection Devices (HPDs)

AIR employees should wear hearing protection devices (HPD) whenever they are in environments where sound level exceeds 85 dBA – even if the employee's anticipated full-day noise exposure is expected to be below 85 TWA. To estimate noise level if you have to raise your voice, from normal conversation level, to maintain a conversation with a person approximately three feet away, the sound level is likely exceeding 85 dBA.

The following is a list of known sources/activities having potential noise exposures in excess of 85 dBA. This is not an all-inclusive list of sources potentially over 85 dBA.

- Air hammers
- Air start cart
- Compressed air blow-off
- Engine testing (with enclosed test cell at idle condition, or any outdoor testing)
- Fastener removal
- Function Tests: flap movement/RAT/wing break
- Military aircraft: takeoff/taxi/flyby
- Near aircraft with active APU, heat exchangers, avionics vent exhaust
- Near rotorcraft
- Plasma spray operations
- Plating tumblers
- Pneumatic grinders: pencil/vertical/pedestal/edge/disc/belt
- Presses/Shears/Drop Forge
- Riveting activity
- Routers
- Screw machines
- Sheet metal trim/cut
- Shot blast operations
- Some flight decks
- Table Saws/Chop Saws
- Water jet cutters

Hearing protectors are very effective at reducing high frequency sound and less effective with low frequency sound. Earplugs are better for high frequency noise and earmuffs are better for low frequency noise. A single number is used to represent the overall effectiveness of HPDs. This number is referred to as the NRR and is required for all HPDs. The NRR value is achieved in a laboratory setting using a noise source with equal amounts of energy across the entire frequency spectrum. The NRR is measured by the HPD manufacture using C- weighting. Consequently, in order to determine HPD sufficiency, the user must first subtract 7 dB from the NRR value if noise is measured on the A weighted decibel scale (dBA). (Skip this step if noise is measured on the C-weighted dB scale.) Divide the result (NRR-7) by 2. This is known as "de-rating." This is required so a comparison can be made between the NRR value and the

A-weighted levels used to document employee noise exposure. (See OSHA 1910.95 appendix B.)

Employees should only use HPD approved by AIR. The “best” HPD is not automatically the one with the highest NRR value. The two most important factors in determining which HPD to wear are (1) the user knows how to wear the HPD well, and (2) the HPD is used in all environments/activities where the sound level exceeds 85 dBA. Comfort, fit and ease of use should always be considered. All HPDs must have a minimum NRR of 25 to 33 decibel attenuation.

AIR will not pay for active noise reduction earmuffs. If such a purchase is pursued, written justification must first be submitted for consideration by management and AIR HC-PM. Justification must include job requirement specifics stating why the active noise reduction earmuffs are required over earplugs and earmuffs.

Appendix E. Program Evaluation Tools and Questionnaire

Table E-1. Program Evaluation Tool

Core Description	Core Requirements Fully Implemented (Acceptable)	Core Requirements Partially Implemented With Sufficiency Plans	Limited or No Implementation Lacks Acceptable Sufficiency Plan	Comments
Sound Exposure Monitoring and Assessment	Employee noise exposure monitoring reports have been reviewed and employees have been selected for inclusion in the AIR HCP.	Employee noise exposure monitoring reports have been partially reviewed and some employees have been selected for inclusion in the AIR HCP.	Employee noise exposure monitoring reports have NOT been reviewed and NO employees have been selected for inclusion in the AIR HCP.	
Sound Exposure Monitoring and Assessment	Individual employees have been interviewed and the AIR HCPDFs have been completed and forwarded to the AIR HC Program Manager.	Some individual employees have been interviewed and some AIR HCP HCPDFs have been completed and forwarded to the AIR HC Program Manager.	Individual employees have NOT been interviewed and the AIR HCPDFs have NOT been completed and forwarded to the AIR HC Program Manager.	
Sound Exposure Monitoring and Assessment	Advisory posting and notices for areas and tasks with high noise concern, where applicable, are complete.	Advisory posting and notices for areas and tasks with high noise concern, where applicable, are incomplete.	Advisory posting and notices for areas and tasks with high noise concern, where applicable, have not been attempted.	
Noise Control Program	Major sources of noise exposure have been identified and where corrective action is feasible, a plan to abate exists.	Major sources of noise exposure have been acknowledged but no plan to abate exists.	Noise exposure sources have NOT been acknowledged and corrective measures have NOT been considered.	
Audiometric Testing	All baseline, annual, and exit audiometric tests have been completed.	Some baseline, annual, and exit audiometric tests have been completed.	NO baseline, annual, and exit audiometric tests have been completed.	
Audiometric Testing	Annual audiometric test results are documented and communicated.	Annual audiometric test results are partially documented and communicated.	Annual audiometric test results are NOT documented and communicated.	
Audiometric Testing	Work relationships for hearing loss cases are determined, documented, and communicated.	Work relationships for hearing loss cases are partially determined, documented, and communicated.	Work relationships for hearing loss cases are NOT determined, documented, and communicated.	
Audiometric Testing	Audiometric testing equipment and testing environments are maintained.	Audiometric testing equipment and testing environments are partially maintained.	Audiometric testing equipment and testing environments are NOT maintained.	

Core Description	Core Requirements Fully Implemented (Acceptable)	Core Requirements Partially Implemented With Sufficiency Plans	Limited or No Implementation Lacks Acceptable Sufficiency Plan	Comments
Hearing Protection	Hearing protectors are readily available (and replaced as necessary) to all employees.	Hearing protectors are readily available (and replaced as necessary) to some employees.	Hearing protectors are NOT readily available (and replaced as necessary) to all employees.	
Hearing Protection	All employees use hearing protection devices in high noise areas.	Some employees use hearing protection devices in high noise areas.	Employees DO NOT use hearing protection devices in high noise areas.	
Employee Training	All AIR HCP employees have received annual AIR HCP training including demonstration HPD training and the training is documented.	Some but not all AIR HCP employees have received annual AIR HCP training including demonstration HPD training and the training is documented.	AIR HCP employees have not received annual AIR HCP training including demonstration HPD training and documentation is pending.	
Employee Training	All AIR HCP employees who have a confirmed STS have had retraining, demonstration HPD training, and the training is documented.	Some but not all AIR HCP employees who have a confirmed STS have had retraining, demonstration HPD training, and the training is documented.	No AIR HCP employees who have a confirmed STS have had retraining, demonstration HPD training, and the training is pending.	
Employee Training	All employees have received supplemental noise awareness training and all the training is documented.	Some but not all employees have received supplemental noise awareness training and all the training is documented.	All employees have NOT received supplemental noise awareness training and documentation is pending.	
Employee Notification and Record Keeping	All employees with sound exposure $\geq$ AIR Exposure Limits have been notified of the following: Availability and posting of applicable regulations; personal noise exposure assessment; hearing protection areas; and the requirements to wear hearing protection is complete.	Some but not all employees with a sound exposure $\geq$ AIR Exposure Limits have been notified of the following: Availability and posting of applicable regulations; personal noise exposure assessment; hearing protection areas; and the requirements to wear hearing protection is partially complete.	Employees with a sound exposure $\geq$ AIR Exposure Limits have NOT been notified of the following: Availability and posting of applicable regulations; personal noise exposure assessment; hearing protection areas; and the requirements to wear hearing protection is incomplete.	

1. Introduction. This annual questionnaire is intended for use by the branch office management, AIR HC-PM, or other qualified person, during the periodic evaluation of program effectiveness. The purpose of the evaluation is to determine the effectiveness of the program in reducing and preventing hearing loss of AIR employees.

2. Program Administration.

a. Are copies of the AIR HCP available in the offices that support the various program elements? Are those who implement the program elements aware of these policies? Do they comply?

b. Are necessary materials and supplies being ordered with a minimum of delay?

c. Safety: Has the failure to hear warning shouts or alarms been tied to any accidents or injuries? If so, have remedial steps been taken?

d. Have managers been provided with the knowledge required to supervise the use and care of hearing protectors by employees?

e. Do managers wear hearing protectors in appropriate areas?

f. Have managers been counseled when employees resist wearing protectors or fail to show up for hearing tests? Are managers and employees aware canceled audiogram tests not made with 48-hour notice results in the FAA receiving a charge of $88.75 (FY18 charge) and may be an OSHA violation if the annual audiogram is not completed within one-year of the previous audiogram?

g. What repercussions/disciplinary actions are enforced when employees repeatedly refuse to wear hearing protectors?

COMMENTS:

3. Sound Exposure Monitoring and Assessment.

a. Have sound exposure reports been reviewed?

b. Have individual employee exposures been assessed using the AIR HCP Determination Form?

c. Have employees been notified of their exposures and apprised of auditory risks?

d. Are the results routinely transmitted to the AIR HC-PM, managers, and employees?

e. Have there been changes in areas, equipment, or processes that have altered noise exposure? Have follow-up noise measurements been conducted?

f. Are appropriate steps taken to include (or exclude) employees in the AIR HCP whose exposures have changed significantly?

COMMENTS:

4. Engineering and Administrative Controls.

a. Have noise control needs been identified and prioritized?

b. Has the cost-effectiveness of various options been addressed?

c. Are employees, managers, AIR HC-PM, apprised of plans for noise control measures? Are they consulted on various approaches?

d. Have employees, and managers been counseled on the operation and maintenance of noise control devices?

e. Has the full potential for administrative controls been evaluated? Are noise exposures minimized as much as practical? Do employees take their lunches and breaks in quiet areas?

COMMENTS:

5. Audiometric Evaluation.

a. Are audiometric trends (deterioration) being identified, both in individuals and in groups of employees? (NIOSH recommends no more than five percent of workers showing 15 dB STS, same ear, same frequency.)

b. Are the results of audiometric tests being communicated to managers as well as to employees?

c. Has corrective action been taken to address no-shows for audiometric test appointments?

d. Are employees who show a potential STS offered a repeat audiogram within 30-days?

e. Are employees with a potential STS obtaining a repeat audiogram within 30-days?

f. Are employees who show STS or have recordable hearing loss notified in writing within at least 21-days?

g. Are STS cases appropriately being captured within SMIS and the OSHA 300 Log?

h. Do employees who incur noise-induced hearing loss receive counseling?

COMMENTS:

6. Personal Hearing Protection Devices (HPD).

a. Have HPDs been made available to all employees who spend any amount time in hazardous noise work areas?

b. Are employees given the opportunity to select from a variety of approved HPDs?

c. Are the HPDs checked regularly for wear or defects, and replaced immediately if necessary?

d. Are replacement HPDs readily available?

e. Do employees understand the appropriate hygiene requirements?

f. Have any employees developed ear infections or irritations associated with the use of HPDs? Are there any employees who are unable to wear these devices because of medical conditions? Have these conditions been treated promptly and successfully?

g. Have alternative types of HPDs been considered when problems with current devices are experienced?

h. Do workers complain HPDs interfere with their ability to do their jobs? Do they interfere with spoken instructions or warning signals? Are these complaints followed promptly with counseling, noise control, or other measures?

i. Are employees able to demonstrate they understand how to use and care for the protector?

COMMENTS:

7. Education and Training.

a. Has it been verified annual AIR HCP training been conducted during audiometric testing?

b. Was supplemental training conducted?

c. Was the supplemental training program documented?

d. Was the supplemental training program evaluated?

e. Are managers directly involved including completing the same training as the enrolled AIR HCP employee?

f. Are posters, regulations, and handouts used as training supplements?

g. For employees having problems with HPDs or showing hearing threshold shifts or hearing loss is time being made available to personally counsel or advise?

COMMENTS:

8. Recordkeeping.

a. Are employee noise exposure records complete?

b. Are records of employees in AIR HCP complete?

c. Are training records complete?

d. Is AIR ensuring all occupational medical records are being sent appropriately to the FAA Occ Med Program for inclusion into the specific employee's medical folder (EMF), which is part of the FAA's Employee Medical File System (EMFS)?

COMMENTS:

Appendix F. FAA Form 1320-19, Directive Feedback Information

FAA Form 1320-19, Directive Feedback Information

Please submit any written comments or recommendations for improving this directive, or suggest new items or subjects to be added to it. Also, if you find an error, please tell us about it.

Subject: Order IR 3900.75

To: Directive Management Officer at 9-AWA-AVS-AIR-DMO@faa.gov or complete the form online at https://ksn2.faa.gov/avs/dfs/Pages/Home.aspx.

(Please check all appropriate line items)

☐ An error (procedural or typographical) has been noted in paragraph _____ on page _____.

☐ Recommend paragraph _____ on page _____ be changed as follows:
(attach separate sheet if necessary)

☐ In a future change to this directive, please include coverage on the following subject *(briefly describe what you want added):*

☐ Other comments:

☐ I would like to discuss the above. Please contact me.

Submitted by: _____ Date: _____

FTS Telephone Number: _____ Routing Symbol: _____

FAA Form 1320-19 (10-98)