



Energy Records Access Management

OHQ Interview Site-Specific Page

For employee: ()
For work at: ()

Information Saved

Section 4(A): DOE FACILITY

DOE or RECA Facility

"Let's now talk about your work at DOE facilities. Did you work at more than one DOE site? If so, let's talk about each one separately. Can you tell me the name of the most recent DOE site where you worked?" [If the claimant worked at a RECA facility, then replace DOE with RECA. If necessary, refer to SEM website for suggestions: <http://www.sem.dol.gov/expanded/index.cfm>]

Unknown, Uncertain or *any* RECA Facility:

"For , help us more confidently identify the site we're talking about by providing additional information on the facility, such as nicknames for the facility, state, county, region, etc.; again, especially if it is uncertain what the name of the facility was." If the Claimant does not know the name of the site, search for it at <http://www.sem.dol.gov/expanded/SiteByAlias2.cfm>

Section 4(B): EMPLOYERS

"Can you recall the name of the company you worked for at ? While there, did you work for more than one company? Can you provide dates (start and end) for the period(s) of employment?"

The applicant stated:

Name of Employer	Start Date	End date	
(A1 25 22)			
(A2 25 22)			

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Section 4(C): UNION AFFILIATION

"Were you a member of a labor union when at ?"

The applicant stated:

Is Union Member?	<input type="checkbox"/>
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Union	Check box if applicable or leave blank if not	
(838 25 22) Carpenters' Union	<input type="checkbox"/>	Del
(839 25 22) IAM (Machinists Union)	<input type="checkbox"/>	Del
(840 25 22) IBEW	<input type="checkbox"/>	Del
(841 25 22) IGAN (Guards' Union)	<input type="checkbox"/>	Del
(842 25 22) Ironworkers' Union	<input type="checkbox"/>	Del
(843 25 22) Laborers' Union	<input type="checkbox"/>	Del
(844 25 22) OCAW	<input type="checkbox"/>	Del
(845 25 22) Operating Engineers' Union International Union of Operating Engineers (IUOOE)	<input type="checkbox"/>	Del
(846 25 22) Painter's Union	<input type="checkbox"/>	Del
(847 25 22) Plumbers' and Pipefitters' Union	<input type="checkbox"/>	Del
(848 25 22) Sheet Metal Workers' Union	<input type="checkbox"/>	Del
(849 25 22) Teamsters' Union	<input type="checkbox"/>	Del
(A3 25 22)	<input type="checkbox"/>	
(A4 25 22)	<input type="checkbox"/>	

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Section 4(D): LABOR CATEGORY (While employed at a DOE Facility)

"So {you | claimant} worked at . Can you tell me {your | claimant's} job title while at the site? We would like to know what labor categories {you | claimant} held there. " *** To help further identification of broad labor categories (e.g., operator, technician, etc.), ask for more information. ***

The applicant stated:

Actual Labor Category	Approximate dates of Employment	
(A5 25 22)		
(A6 25 22)		

[click here to save this form and create space for new entries in the above table](#)

Section 4(E):

"For each of the jobs you mentioned at , can you tell me what you did during a typical day? I need to hear about things like the buildings you worked in, the work you performed in those buildings, and the toxic substances you work with or used to work with."

"How often do you or did you perform that activity or use the toxic substance? (Rarely, Monthly, Weekly, Daily) [consider including formal definitions in script]"

The applicant stated:

Information for each job title from Section 4D	Frequency	
Area, Facility, Building Number/Name or Description; Work Activity; Labor Category / Job Title; Toxins / Agents; Years of Employment	Defined as Rarely: less than once per month Monthly: 1-2 times per month	

	Daily: Daily or almost every day.	
"Example: "I worked as an electrician in Building 320 from 1972-1985. I would change into company clothing each morning and report to the lunch room where we got our job assignments. I would usually be assigned to clean and test electrical motors in the building. That required the use of solvents like trichloroethylene and sometimes benzene to remove dirt and oily grime from the motors. I used rubber gloves when doing that cleaning but did not wear respiratory protection. ..."	Daily	
"...Sometimes I would have to make solder repairs when test leads were damaged. I did that with a soldering torch and silver solder. Most of the work was not contaminated but if uranium or plutonium was present, we wore special Tyvek coveralls over our regular work coveralls plus respirators."	Rarely	
(A7 25 22)	//	//
(A8 25 22)	//	//

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Section 5: EXPOSURE INFORMATION

"For , I am interested in knowing if you worked with certain types of toxic materials. I will ask you and give you an opportunity to name substances in each of the following categories: metals; plastics, adhesives and resins; dusts and fibers; solvents; radiological; and any others. Can you tell me if you used substances in each of the following categories, and if so, what those substances were and how they were used? Some of these may overlap what we just talked about in the prior section of the form but that is OK. "

"For each substance you mentioned, please indicate how you were exposed to the toxic substance, e.g., did you melt, pour, or mix it? What work activities were you performing? How frequently (rarely: ... ; monthly: ...; daily: ...) and over how many months or years?"
 The applicant stated:

Toxic Substance The applicant stated:	Form of toxic substance? (dust, gas, fume, solid, liquid)	How exposed? Inhalation, skin, eye, ...	How did you/the employee use this substance? The applicant stated:	Exposure frequency and duration Frequency, as defined below: Rarely: less than once per month Monthly: 1-2 times per month Daily: Daily or almost every day. The applicant stated:
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METALS

"For example: Beryllium; Cadmium; Chromium; Lead; Manganese; Mercury; Nickel; Zirconium/Zircalloy"

(A9 25 22)	//	//	//	//
(A10 25 22)	//	//	//	//

Toxic Substance The applicant stated:	Form of toxic substance? (dust, gas, fume,	How exposed? Inhalation, skin, eye, ...	How did you/the employee use this substance? The applicant stated:	Exposure frequency and duration Frequency, as defined below: Rarely: less than once per month Monthly: 1-2 times per month Daily: Daily or almost every
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	solid, liquid)			day. The applicant stated:
RADIOLOGICAL				
"For example: Cesium; Californium; Cobalt machine; Plutonium; Polonium; Tritium; Uranium; Depleted Uranium; X-ray machine"				
(A11 25 22)				
(A12 25 22)				
Toxic Substance The applicant stated:	Form of toxic substance? (dust, gas, fume, solid, liquid)	How exposed? Inhalation, skin, eye, ...	How did you/the employee use this substance? The applicant stated:	Exposure frequency and duration Frequency, as defined below: Rarely: less than once per month Monthly: 1-2 times per month Daily: Daily or almost every day. The applicant stated:
PLASTICS / ADHESIVES/ RESINS				
"For example: Adiprene; MOCA; Isocyanates (TDI); Foams"				
(A13 25 22)				
(A14 25 22)				
Toxic Substance The applicant stated:	Form of toxic substance? (dust, gas, fume, solid, liquid)	How exposed? Inhalation, skin, eye, ...	How did you/the employee use this substance? The applicant stated:	Exposure frequency and duration Frequency, as defined below: Rarely: less than once per month Monthly: 1-2 times per month Daily: Daily or almost every day. The applicant stated:
DUSTS / FIBERS				
"For example: Asbestos (pipe wrap, asbestos board); Silica (sand blasting, masonry, concrete); Coal dust; Fiberglass / glass wool / mineral fibers; Other, metal dusts"				
(A15 25 22)				
(A16 25 22)				

Toxic Substance The applicant stated:	Form of toxic substance? (dust, gas, fume, solid, liquid)	How exposed? Inhalation, skin, eye, ...	How did you/the employee use this substance? The applicant stated:	Exposure frequency and duration Frequency, as defined below: Rarely: less than once per month Monthly: 1-2 times per month Daily: Daily or almost every day. The applicant stated:

FUMES AND VAPORS

"For example: Asphalt fumes, soldering fumes or brazing fumes. Or Coal tar pitch volatiles; Gasoline"

(A17 25 22)				
(A18 25 22)				

Toxic Substance The applicant stated:	Form of toxic substance? (dust, gas, fume, solid, liquid)	How exposed? Inhalation, skin, eye, ...	How did you/the employee use this substance? The applicant stated:	Exposure frequency and duration Frequency, as defined below: Rarely: less than once per month Monthly: 1-2 times per month Daily: Daily or almost every day. The applicant stated:
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SOLVENTS AND LIQUIDS

"For example: Trichloroethylene, Acetone, Methyl ethyl ketone or Stoddard Solvent"

(A19 25 22)				
(A20 25 22)				

Toxic Substance The applicant stated:	Form of toxic substance? (dust, gas, fume, solid, liquid)	How exposed? Inhalation, skin, eye, ...	How did you/the employee use this substance? The applicant stated:	Exposure frequency and duration Frequency, as defined below: Rarely: less than once per month Monthly: 1-2 times per month Daily: Daily or almost every day. The applicant stated:
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OTHER TOXIC SUBSTANCES

"e.g., Explosives"

(A21 25 22)					
(A22 25 22)					

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Section 6: INCIDENTS

"For , please describe any unusual events involving toxic substances that you were involved in. Do you recall where (buildi event happened and what you were doing at the time? What protective equipment were you wearing?"

The applicant stated:

Incident Narratives Site, Location (Area, Facility, Building Number/Name or Description); Work Activity; Labor Category/Job Title; Toxins/Agents; Date(s); Incident/Accident description	
Example: Portsmouth X-705 building. I was a chemical operator hand-cleaning a compressor with trichloroethane when it started smoking. The building was evacuated for about two hours, and I was told that uranium hexafluoride inside the compressor had not been cleaned out and reacted with the building air. I was wearing rubber gloves and a dust mask at the time.	
The applicant stated:	
(A23 25 22)	
(A24 25 22)	

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"For , is there any additional Information you would like to provide about incidents?"

Additional Information	
(A25 25 22)	
(A26 25 22)	

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Section 7: CONCLUSION

"For , do you believe all information relevant to your occupational history was addressed?" (Yes | No) If "no", "Please provide explain:"

The applicant stated:

The claimant was asked whether all relevent occupational history information was addressed, and responded:	
(A27 25 22)	

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Logging

<i>OHQ created (date/time)</i>	2020-03-20 09:57:15.313
<i>OHQ last modified (date/time)</i>	2020-03-20 09:57:15.0
<i>Return location after save</i>	<input type="text"/>
<i>Number of form paramaters:</i>	257

OHQInterview Must be saved before site-specific information can be added.

[Main Page](#)

To Ask Questions about or report problems with the application, send email to: jean.paducah.center@rohio.com.