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Standard Threshold Shift (STS) Notification Letter

To be completed and delivered to the employee within 21 days of an STS determination, per 29 CFR 1910.95(g)(8)(i).

Dear _____ (Employee Name),

Your most recent audiometric test, conducted on _____ (Test Date), showed a Standard Threshold Shift (STS) compared to your baseline hearing test. An STS means your hearing test results showed an average change of 10 dB or more at the 2000, 3000, and 4000 Hz test frequencies in one or both ears, compared to your baseline audiogram. This letter is your written notification of that result, provided within 21 days of the determination as required by 29 CFR 1910.95(g)(8)(i).

What this means: an STS is a signal that your hearing may be changing and is worth taking seriously, but it does not necessarily mean permanent hearing loss has already occurred. Left unaddressed, repeated shifts can become permanent, which is why the steps below are being taken now.

Next steps, per 29 CFR 1910.95(g)(8)(ii):

- You will be refitted with your existing hearing protector to confirm proper fit.
- You will be retrained on the selection, fitting, use, and care of hearing protectors.
- If needed, you will be refitted with a hearing protector offering greater attenuation.
- You may be referred for further audiological evaluation if a non-occupational cause cannot be identified.

Notification date: _____

Program Administrator signature: _____

Printed name / title: Dana Whitfield, EHS Manager

Summit Metal Products (SAMPLE) — Summit Metal Products — Springfield Plant

FOSTER SPECIAL INSTRUMENTS

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Hearing Protector Issue Log

Summit Metal Products (SAMPLE) — Summit Metal Products — Springfield Plant: record of hearing protectors issued to employees at no cost, per 29 CFR 1910.95(i). Protector types available at this site: insert earplugs, earmuffs.

[illegible]

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Audiological Referral Form

Summit Metal Products (SAMPLE) — Summit Metal Products — Springfield Plant: used to refer an employee for further audiological or otological evaluation following a confirmed STS, per 29 CFR 1910.95(g)(8)(ii).

Employee name: _____

Employee ID: _____

Date of STS determination: _____

Reason for referral: _____

Referred to (audiologist/physician): _____

Referral date: _____

Program Administrator: Dana Whitfield, EHS Manager

Administrator signature: _____ Date: _____

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Noise Monitoring Results Notice

Summit Metal Products (SAMPLE) — Summit Metal Products — Springfield Plant: for posting or distribution to affected employees, per 29 CFR 1910.95(e) (notification of results) and 1910.95(f) (opportunity to observe monitoring).

Site: Summit Metal Products — Springfield Plant (Springfield, OH)

Monitoring date: _____

Area(s)/job(s) monitored: _____

Measured noise exposure (dBA TWA): _____

Primary noise sources at this site: Stamping presses, pneumatic tools, industrial ventilation fans, and a metal shear line.

Employees exposed at or above the 85 dBA action level are enrolled in this Hearing Conservation Program and notified of these results.

Posted/distributed by: Dana Whitfield, EHS Manager Date: _____

Summit Metal Products (SAMPLE) — Summit Metal Products — Springfield Plant: attendance record for annual hearing conservation training under 29 CFR 1910.95(k). Topics covered: effects of noise on hearing; hearing protector selection, fitting, use, and care; and the purpose of audiometric testing.

Retained by: Dana Whitfield, EHS Manager

[illegible]