

## OMC Job Risk Assessment

This OHSAS document was printed on 11/29/2006 2:01:00 PM and is no longer an official copy. The revision can be verified on the HR OHSAS Web page: <http://www.bnl.gov/hr/OHSAS.asp>

|   |                                      |   |                   |            |                    |                               |
|---|--------------------------------------|---|-------------------|------------|--------------------|-------------------------------|
| <b>Name(s) of Specific Application Risk Team Members:</b><br>J. Falco, C. Davis<br><br>Reviewers: J. Subramani, E. Erens  | <b>Point Value →<br/>Parameter ↓</b> | 1   | 2                 | 3          | 4                  | 5                             |
| <b>Job Title: Work Site visits</b><br><br><b>Job Number or Job Identifier: JRA-08</b>   | <b>Frequency (B)</b>                 | ≤once/year                                  | ≤once/month       | ≤once/week | ≤once/shift        | >once/shift                   |
| <ul style="list-style-type: none"> <li><b>Job Description: Work site visits</b> are arranged with various departments and divisions to familiarize the OMC physician and nursing staff with Laboratory work areas and make medical input on fitness for duty, protective equipment, medical surveillance, or work hazards more meaningful.</li> </ul> | <b>Severity (C)</b>                  | First Aid Only                              | Medical Treatment | Lost Time  | Partial Disability | Death or Permanent Disability |
| Training Procedures List (Optional):<br>Applicable Standard Operating Procedures:<br><br>Approved by: Dr. J. Falco    Date: 8/25/06    Rev. #: 0  | <b>Likelihood (D)</b>                | Very Unlikely                               | Unlikely          | Possible   | Probable           | Multiple                      |
| <b>Stressors (if applicable, please list all)</b>   |                                      | <b>Reason for Revision (if applicable):</b> |                   |            | <b>Comments:</b>   |                               |

| Activity | Hazard | Control(s) | Before Additional Controls |               |             |            |              | Control(s) Added to Reduce Risk | After Additional Controls |           |               |             |            | % Risk Reduction |
|----------|--------|------------|----------------------------|---------------|-------------|------------|--------------|---------------------------------|---------------------------|-----------|---------------|-------------|------------|------------------|
|          |        |            | Stressor                   | # of People A | Frequency B | Severity C | Likelihood D |                                 | Risk* AxBxCxD             | Stressors | # of People A | Frequency B | Severity C |                  |
|          |        |            |                            |               |             |            |              |                                 |                           |           |               |             |            |                  |

## OMC Job Risk Assessment

This OHSAS document was printed on 11/29/2006 2:01:00 PM and is no longer an official copy. The revision can be verified on the HR OHSAS Web page: <http://www.bnl.gov/hr/OHSAS.asp>

| Activity                      | Hazard  | Control(s)  | Before Additional Controls |               |             |            |              | Control(s) Added to Reduce Risk | After Additional Controls |           |               |             |            | % Risk Reduction |              |
|-------------------------------|---|---|----------------------------|---------------|-------------|------------|--------------|---------------------------------|---------------------------|-----------|---------------|-------------|------------|------------------|--------------|
|                               |   |   | Stressor                   | # of People A | Frequency B | Severity C | Likelihood D |                                 | Risk* AxBxCxD             | Stressors | # of People A | Frequency B | Severity C |                  | Likelihood D |
| Going into various work areas | Falling objects, trip hazards, noise, eye hazards | Hard hats, safety shoes, hearing protection, safety glasses | N                          | 1             | 2           | 2          | 2            | 8                               |                           |           |               |             |            |                  |              |
|                               |   |   |                            |               |             |            |              |                                 |                           |           |               |             |            |                  |              |

|               |                   |                   |                 |                    |                      |
|---------------|-------------------|-------------------|-----------------|--------------------|----------------------|
| <b>*Risk:</b> | <b>0 to 20</b>    | <b>21 to 40</b>   | <b>41-60</b>    | <b>61 to 80</b>    | <b>81 or greater</b> |
|               | <b>Negligible</b> | <b>Acceptable</b> | <b>Moderate</b> | <b>Substantial</b> | <b>Intolerable</b>   |