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## §3204. Access to Employee Exposure and Medical Records.

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(a) Purpose. The purpose of this section is to provide employees and their designated representatives and authorized representatives of the Chief of the Division of Occupational Safety and Health (DOSH) a right of access to relevant exposure and medical records. Access by employees, their representatives, and representatives of DOSH is necessary to yield both direct and indirect improvements in the detection, treatment, and prevention of occupational disease. Each employer is responsible for assuring compliance with this section, but the activities involved in complying with the access to medical records provisions can be carried out, on behalf of the employer, by the physician or other health care personnel in charge of employee medical records. Except as expressly provided, nothing in this section is intended to affect existing legal and ethical obligations concerning the maintenance and confidentiality of employee medical information, the duty to disclose information to a patient/employee or any other aspect of the medical-care relationship, or affect existing legal obligations concerning the protection of trade secret information.

(b) Scope and Application.

(1) This section applies to each employer who makes, maintains, contracts for, or has access to employee exposure or medical records, or analyses thereof, pertaining to employees exposed to toxic substances or harmful physical agents.

(2) This section applies to all employee exposure and medical records, and analyses thereof, of employees exposed to toxic substances or harmful physical agents, whether or not the records are related to specific occupational safety and health standards.

(3) This section applies to all employee exposure and medical records, and analyses thereof, made or maintained in any manner by the employer, both on an in-house and on a contractual (e.g., fee-for-service) basis. Each employer shall assure that the preservation and access requirements of this section are complied with regardless of the manner in which records are made or maintained.

(c) Definitions.

(1) Access. The right and opportunity to examine and copy.

(2) Analysis Using Exposure or Medical Records. Any compilation of data, or any research, statistical or other study based at least in part on information collected from individual employee exposure or medical records or information collected from health insurance claims records, provided that either the analysis has been reported to the employer or no further work is currently being done by the person responsible for preparing the analysis.

(3) Designated Representative. Any individual or organization to whom an employee gives written authorization to exercise a right of access. A recognized or certified collective bargaining agent shall be treated automatically as a designated representative for the purpose of access to employee exposure records and analyses using exposure or medical records, but access to an employee's medical records requires the employee's written consent.

(4) Employee. A current employee, a former employee, or an employee being assigned or transferred to work where there will be exposure to toxic substances or harmful physical agents. For the purpose of this section, a deceased or legally incapacitated employee's legal representative may exercise all of the employee's rights under this section.

(5) Employee Exposure Record. A record containing any of the following kinds of information concerning employee exposure to toxic substances or harmful physical agents:

(A) Environmental (workplace) monitoring or measuring, including personal, area, grab, wipe, or other form of sampling, as well as related collection and analytical methodologies, calculations, and other background data relevant to interpretation of the results obtained;

(B) Biological monitoring results which directly assess the absorption of a toxic substance or harmful physical agent by body systems (e.g., the level of chemical in the blood, urine, breath, hair, fingernails, etc.) but not including results which assess the biological effect of a substance or agent or which assess an employee's use of alcohol or drugs;

(C) Safety data sheets indicating that the material may pose a hazard to human health; or

(D) In the absence of (A), (B) or (C) above, a record, such as a chemical inventory or any other record, which reveals the identity (e.g., chemical, common, or trade name) of a toxic substance or harmful physical agent and where and when the toxic substance or harmful physical agent was used.

(6) Employee Medical Record. A record concerning the health status of an employee which is made or maintained by a physician, nurse, or other health care personnel, or technician.

(A) Employee medical record includes the following:

1. Medical and employment questionnaires or histories (including job description and occupational exposures);

2. The results of medical examinations (pre-employment, pre-assignment, periodic, or episodic) and laboratory tests (including chest and other X-ray examinations taken for the purposes of establishing a base-line or detecting occupational illness, and all biological monitoring not defined as an "employee exposure record");

3. Medical opinions, diagnoses, progress notes, and recommendations;

4. First-aid records;

5. Descriptions of treatments and prescriptions; and

6. Employee medical complaints.

(B) Employee medical record does not include medical information in the form of:

1. Physical specimens (e.g. blood or urine samples) which are routinely discarded as a part of normal medical practice; or
2. Records concerning health insurance claims if maintained separately from the employer's medical program and its records, and not accessible to the employer by employee name or other direct personal identifier (e.g., social security number, payroll number, etc.); or
3. Records created solely in preparation for litigation which are protected from discovery under the applicable rules of procedure or evidence; or
4. Records concerning voluntary employee assistance programs (alcohol, drug abuse, or personal counseling programs) if maintained separately from the employer's medical program and its records.

(7) Employer. A current employer, a former employer, or a successor employer.

(8) Exposure or Exposed. Employee subjection to a toxic substance or harmful physical agent in the course of employment through any route of entry (inhalation, ingestion, skin contact or absorption, etc.), and includes past exposure and potential (e.g., accidental or possible) exposure, but does not include situations where the employer can demonstrate that the toxic substance or harmful physical agent is not used, handled, stored, generated, or present in the workplace in any manner different from typical non-occupational situations.

(9) Health Professional. A physician, occupational health nurse, industrial hygienist, toxicologist, or epidemiologist providing medical or other occupational health services to exposed employees.

(10) Record. Any item, collection, or grouping of information regardless of the form or process by which it is maintained (e.g., paper document, microfiche, microfilm, X-ray film, or automated data processing).

(11) Specific Chemical Identity. The chemical name, Chemical Abstracts Service (CAS) Registry Number, or any other information that reveals the precise chemical designation of the substance.

(12) Specific Written Consent.

(A) A written authorization containing the following:

1. The name and signature of the employee authorizing the release of medical information;
2. The date of the written authorization;
3. The name of the individual or organization that is authorized to release the medical information;
4. The name of the designated representative (individual or organization) that is authorized to receive the released information;
5. A general description of the medical information that is authorized to be released;
6. A general description of the purpose for release of the medical information; and

7. A date or condition upon which the written authorization will expire (if less than one year).

(B) A written authorization does not operate to authorize the release of medical information not in existence on the date of written authorization, unless the release of future information is expressly authorized, and does not operate for more than one year from the date of written authorization.

(C) A written authorization may be revoked in writing prospectively at any time.

(13) Toxic Substance or Harmful Physical Agent. Any chemical substance, biological agent (bacteria, virus, fungus, etc.), or physical stress (noise, heat, cold, vibration, repetitive motion, ionizing and non-ionizing radiation, hypo- or hyperbaric pressure, etc.) which:

(A) Is regulated by any California or Federal law or rule due to a hazard to health;

(B) Is listed in the latest printed edition of the National Institute for Occupational Safety and Health (NIOSH) Registry of Toxic Effects of Chemical Substances (RTECS) (See Appendix B);

(C) Has yielded positive evidence of an acute or chronic health hazard in human, animal, or other biological testing conducted by, or known to, the employer; or

(D) Is the subject of a safety data sheet kept by or known to the employer which indicates that the material may pose a hazard to human health.

(14) Trade Secret. Any confidential formula, pattern, process, device, or information or compilation of information that is used in an employer's business and that gives the employer an opportunity to obtain an advantage over competitors who do not know or use it.

(d) Preservation of Records.

(1) Unless a specific occupational safety and health regulation provides a different period of time, each employer shall assure the preservation and retention of records as follows:

(A) Employee Medical Records. The medical record for each employee shall be preserved and maintained for at least the duration of employment plus thirty (30) years, except that the following types of records need not be retained for any specific period:

1. Health insurance claims records maintained separately from the employer's medical program and its records;
2. First aid records (not including medical histories) of one-time treatment and subsequent observation of minor scratches, cuts, burns, splinters, and the like which do not involve medical treatment, loss of consciousness, restriction of work or motion, or transfer to another job, if made on-site by a non-physician and if maintained separately from the employer's medical program and its records; and
3. The medical records of employees who have worked for less than (1) year for the employer need not be retained beyond the term of employment if they are provided to the employee upon the termination of employment.

(B) Employee Exposure Records. Each employee exposure record shall be preserved and maintained for at least thirty (30) years, except that:

1. Background data to environmental (workplace) monitoring or measuring, such as laboratory reports and worksheets, need only be retained for one (1) year so long as the sampling results, the collection methodology (sampling plan), a description of the analytical and mathematical

methods used, and a summary of other background data relevant to interpretation of the results are retained for at least thirty (30) years;

2. Safety data sheets shall be retained as necessary to comply with the provisions of section 5194. Where safety data sheets are destroyed, a record of the identity (chemical name if known) of the substance or agent, where it was used, and when it was used shall be retained for at least thirty years; and

3. Section 3204(c)(5)(D) records concerning the identity of a substance or agent need not be retained for any specified period as long as some record of the identity (chemical name if known) of the substance or agent, where it was used, and when it was used is retained for at least thirty years.

4. Biological monitoring results designated as exposure records by specific occupational safety and health regulations shall be preserved and maintained as required by the specific regulation.

(C) Analyses Using Exposure or Medical Records. Each analysis using exposure or medical records shall be preserved and maintained for at least thirty (30) years.

(2) Nothing in this section is intended to mandate the form, manner, or process by which an employer preserves a record so long as the information contained in the record is preserved and retrievable, except that chest X-ray films shall be preserved in their original state.

(e) Access to Records.

(1) General.

(A) Whenever an employee or designated representative requests access to a record, the employer shall assure that access is provided in a reasonable time, place, and manner, but in no event later than fifteen (15) days after the request for access is made. Before the time for providing access has expired, an employer after notice to the employee or designated representative may, by notification to be followed in writing, request an extension of time from the Chief, Division of Occupational Safety and Health, which shall be granted upon a finding of good cause by the Chief.

(B) The employer may require of the requester only such information as should be readily known to the requester and which may be necessary to locate or identify the records being requested (e.g., dates and locations where the employee worked during the time period in question).

(C) Whenever an employee or designated representative requests a copy of a record, the employer shall assure that either:

1. A copy of the record is provided without cost to the employee or designated representative;
2. The necessary mechanical copying facilities (e.g. photocopying) are made available without cost to the employee or designated representative for copying the record; or
3. The record is loaned to the employee or designated representative for a reasonable time to enable a copy to be made.

(D) In the case of an original X-ray, the employer may restrict access to on-site examination or make other suitable arrangements for the temporary loan of the X-ray.

(E) Whenever a record has been provided previously without cost to an employee or designated representative, the employer may charge reasonable, non-discriminatory administrative costs (i.e., search

and copying expenses but not including overhead expenses) for additional copies of the record.

#### EXCEPTIONS:

1. An employer shall not charge for an initial request for a copy of new information that has been added to a record which was previously provided.
2. An employer shall not charge for an initial request by a recognized or certified collective bargaining agent for a copy of an employee exposure record or an analysis using exposure or medical records.

(F) Nothing in this section is intended to preclude employees and collective bargaining agents from collectively bargaining to obtain access to information in addition to that available under this section.

(G) Whenever an employee requests access to a specific written consent submitted to the employer, the employer shall comply pursuant to the provisions for affording employee access to records stipulated by sections 3204(e)(1)(A)-(C).

#### (2) Employee and Designated Representative Access.

##### (A) Employee Exposure Records.

1. Except as limited by section 3204(f), each employer shall, upon request, assure the access of each employee and designated representative to employee exposure records relevant to the employee. For the purpose of this section, exposure records relevant to the employee consist of:
  - a. A record containing measurements or monitoring results of the amount of a toxic substance or harmful physical agent to which the employee is or has been exposed;
  - b. In the absence of such directly relevant records, such records of other employees with past or present job duties or working conditions related to or similar to those of the employee to the extent necessary to reasonably indicate the amount and nature of the toxic substances or harmful physical agents to which the employee is or has been subjected; and
  - c. Exposure records to the extent necessary to reasonably indicate the amount and nature of the toxic substance or harmful physical agent at workplaces or working conditions to which the employee is being assigned or transferred.
2. Requests by designated representatives for unconsented access to employee exposure records shall be in writing and shall specify with reasonable particularity:
  - a. The records requested to be disclosed; and
  - b. The occupational health need for gaining access to these records.

##### (B) Employee Medical Records.

1. Each employer shall, upon request, assure the access of each employee to employee medical records of which the employee is the subject, except as provided in section 3204(e)(2)(B)4.
2. Each employer shall, upon request, assure the access of each designated representative to the employee medical records of any employee who has given the designated representative specific written consent.

NOTE: Appendix A to this section contains a sample form which may be used to establish specific written consent for access to employee medical records.

3. Whenever access to employee medical records is requested in accordance with section 3204(e)(2)(B)1 or 2, a physician representing the employer may recommend that the employee or designated representative: consult with the physician for the purposes of reviewing and discussing the records requested; accept a summary of material facts and opinions in lieu of the records requested; or accept release of the requested records only to a physician or other designated representative.

4. Whenever an employee requests access to his or her employee medical records and a physician representing the employer believes that direct employee access to information contained in the records regarding a specific diagnosis of a terminal illness or a psychiatric condition could be detrimental to the employee's health, the employer may deny the employee's request for direct access to this information only, and the employer shall inform the employee that access will only be provided to a designated representative of the employee having specific written consent.

5. Where a designated representative with specific written consent requests access to information withheld in accordance with section 3204(e)(2)(B)4, the employer shall assure the access of the designated representative to this information even when it is known that the designated representative will give the information to the employee.

NOTE: Nothing in this section precludes a physician, nurse, or other responsible health care personnel maintaining employee medical records from deleting from requested medical records the identity of a family member, personal friend, or fellow employee who has provided confidential information concerning an employee's health status.

(C) Analyses Using Exposure or Medical Records.

1. Each employer shall, upon request, assure the access of each employee and designated representative to each analysis using exposure or medical records concerning the employee's working conditions or workplace.

2. Whenever access is requested to an analysis which reports the contents of employee medical records by either direct identifier (name, address, social security number, payroll number, etc.) or by information which could reasonably be used under the circumstances indirectly to identify specific employees (exact age, height, weight, race, sex, date of initial employment, job title, etc.), the employer shall assure that personal identifiers are removed before access is provided. If the employer can demonstrate that removal of personal identifiers from an analysis is not feasible, access to the personally identifiable portions of the analysis need not be provided.

(3) Division of Occupational Safety and Health Access.

(A) Each employer shall, upon request, and without derogation of any rights under the Constitution of the United States, the Constitution of the State of California or the California Occupational Safety and Health Act of 1973, Labor Code sections 6300 et seq., that the employer chooses to exercise, assure the prompt access of representatives of the Chief of the Division of Occupational Safety and Health (DOSH) to employee exposure and medical records and to analyses using exposure or medical records.

(B) Whenever DOSH seeks access to personally identifiable employee medical information by presenting to the employer a written access order, the employer shall prominently post a copy of the written access order and its accompanying cover letter for at least fifteen (15) working days.

(f) Trade Secrets.

(1) Except as provided in section 3204(f)(2), nothing in this section precludes an employer from deleting from records requested by a health professional, an employee or designated representative any trade secret data which discloses manufacturing processes, or discloses the percentage of a chemical substance in a mixture, as long as the health professional, employee or designated representative is notified that such information has been deleted. Whenever deletion of trade secret information substantially impairs evaluation of the place where or the time when exposure to a toxic substance or harmful physical agent occurred, the employer shall provide alternative information which is sufficient to permit the requesting party to identify where and when exposure occurred.

(2) The employer may withhold the specific chemical identity, including the chemical name and other specific identification of a toxic substance from a disclosable record provided that:

(A) Evidence is included to support the claim that the information withheld is a trade secret;

(B) All other available information on the properties and effects of the toxic substance is disclosed;

(C) The employer informs the requesting party that the specific chemical identity is being withheld as a trade secret; and

(D) The specific chemical identity is made available to health professionals, employees and designated representatives in accordance with the specific applicable provisions of this subsection, section 3204(f).

(3) Where a treating physician or nurse determines that a medical emergency exists and the specific chemical identity of a toxic substance is necessary for emergency or first-aid treatment, the employer shall immediately disclose the specific chemical identity of a trade secret chemical to the treating physician or nurse, regardless of the existence of a written statement of need or a confidentiality agreement. The employer may require a written statement of need and confidentiality agreement, in accordance with the provisions of section 3204(f)(4) and (f)(5), as soon as circumstances permit.

(4) In non-emergency situations, an employer shall, upon request, disclose a specific chemical identity, otherwise permitted to be withheld under section 3204(f)(2), to a health professional, employee, or designated representative if:

(A) The request is in writing;

(B) The request describes with reasonable detail one or more of the following occupational health needs for the information:

1. To assess the hazards of the chemicals to which employees will be exposed;
2. To conduct or assess sampling of the workplace atmosphere to determine employee exposure levels;
3. To conduct pre-assignment or periodic medical surveillance of exposed employees;
4. To provide medical treatment to exposed employees;
5. To select or assess appropriate personal protective equipment for exposed employees;
6. To design or assess engineering controls or other protective measures for exposed employees; and
7. To conduct studies to determine the health effects of exposure.



(C) The request explains in detail why the disclosure of the specific chemical identity is essential and that in lieu thereof, the disclosure of the following information would not enable the health professional, employee or designated representative to provide the occupational health services described in section 3204(f)(4)(B):

1. The properties and effects of the chemical;
2. Measures for controlling worker's exposure to the chemical;
3. Methods of monitoring and analyzing worker's exposure to the chemical; and
4. Methods of diagnosing and treating harmful exposures to the chemical.

(D) The request includes a description of the procedures to be used to maintain the confidentiality of the disclosed information; and

(E) The health professional, employee or designated representative and the employer or contractor of the services of the health professional or designated representative agree in a written confidentiality agreement that the health professional, employee or designated representative will not use the trade secret information for any purpose other than the health needs(s) asserted and agree not to release the information under any circumstances other than to DOSH, as provided in section 3204(f)(9), except as authorized by the terms of the agreement or by the employer.

(5) The confidentiality agreement authorized by section 3204(f)(4)(D):

(A) May restrict the use of the information to the health purposes indicated in the written statement of need;

(B) May provide for appropriate legal remedies in the event of a breach of the agreement, including stipulation of a reasonable pre-estimate of likely damages; and

(C) May not include requirements for the posting of a penalty bond.

(6) Nothing in this section is meant to preclude the parties from pursuing non-contractual remedies to the extent permitted by law.

(7) If the health professional, employee or designated representative receiving the trade secret information decides that there is a need to disclose it to DOSH, the employer who provided the information shall be informed by the health professional prior to, or at the same time as, such disclosure.

(8) If the employer denies a written request for disclosure of a specific chemical identity, the denial must:

(A) Be provided to the health professional, employee or designated representative within thirty days of the request:

(B) Be in writing;

(C) Include evidence to support the claim that the specific chemical identity is a trade secret;

(D) State the specific reasons why the request is being denied; and

(E) Explain in detail how alternative information may satisfy the specific medical or occupational health need without revealing the specific chemical identity.

(9) The health professional, employee or designated representative whose request for information is denied under section 3204(f)(4) may refer the request and the written denial of the request to DOSH for

consideration.

(10) When a health professional, employee or designated representative refers a denial to DOSH under section 3204(f)(9), DOSH shall consider the evidence to determine if:

(A) The employer has supported the claim that the specific chemical identity is a trade secret;

(B) The health professional, employee or designated representative has supported the claim that there is a medical or occupational health need for the information; and

(C) The health professional, employee or designated representative has demonstrated adequate means to protect the confidentiality.

(11) (A) If DOSH determines that the specific chemical identity requested under section 3204(f)(4) is not a bona fide trade secret, or that it is a trade secret but the requesting health professional, employee or designated representative has a legitimate medical or occupational health need for the information and has executed a written confidentiality agreement with adequate means for complying with the terms of such agreement, the employer will be subject to citation by DOSH.

(B) If an employer demonstrates to DOSH that the execution of a confidentiality agreement would not provide sufficient protection against the potential harm from the unauthorized disclosure of a specific chemical identity trade secret, the Chief of DOSH may issue such orders or impose such additional limitations or conditions upon the disclosure of the requested chemical information as may be appropriate to assure that the occupational health needs are met without an undue risk of harm to the employer.

(12) Notwithstanding the existence of a trade secret claim, and employer shall, upon request, disclose to the Chief of DOSH any information which this section requires the employer to make available. Where there is a trade secret claim, such claim shall be made no later than at the time the information is provided to the Chief of DOSH so that dutiable determinations of trade secret status can be made and the necessary protection can be implemented.

(13) Nothing in this section shall be construed as requiring the disclosure under any circumstances of process or percentage of mixture information which is a trade secret.

(g) Employee Information.

(1) Upon an employee's first entering into employment, and at least annually thereafter, each employer shall inform current employees covered by this section of the following:

(A) The existence, location, and availability of any records covered by this section;

(B) The person responsible for maintaining and providing access to records; and

(C) Each employee's rights of access to these records.

(2) Each employer shall keep a copy of this section and its appendices and make copies readily available, upon request, to employees. The employer shall also distribute to current employees any informational materials concerning this section which are made available to the employer by the Chief of DOSH.

(h) Transfer of Records.

(1) Whenever an employer is ceasing to do business, the employer shall transfer all records subject to this section to the successor employer. The successor employer shall receive and maintain these records.

(2) Whenever an employer is ceasing to do business and there is no successor employer to receive and maintain the records subject to this standard, the employer shall notify affected employees of their rights of access to records at least three (3) months prior to the cessation of the employer's business.

(3) Whenever an employer either is ceasing to do business and there is no successor employer to receive and maintain the records, or intends to dispose of any records required to be preserved for at least thirty (30) years, the employer shall:

(A) Transfer the records to the Director of the National Institute for Occupational Safety and Health (NIOSH) if so required by a specific occupational safety and health standard; or

(B) Notify the Director of NIOSH in writing of the impending disposal of records at least three (3) months prior to the disposal of the records.

(4) Where an employer regularly disposes of records required to be preserved for at least thirty (30) years, the employer may, with at least three (3) month's notice, notify the Director of NIOSH on an annual basis of the records intended to be disposed of in the coming year.

(i) Appendices. The information contained in the appendices to this section is not intended, by itself, to create any additional obligations not otherwise imposed by this section or to detract from any existing obligation.

### Appendix A

Sample Authorization Letter for the Release of Employee Medical Record Information to a Designated Representative

I, \_\_\_\_\_, (full name of worker/patient) hereby authorize \_\_\_\_\_ (individual or organization holding the medical records) to release to \_\_\_\_\_ (individual or organization authorized to receive the medical information), the following medical information from my personal medical records:

(Describe generally the information desired to be released.)

I give my permission for this medical information to be used for the following purpose: \_\_\_\_\_, but I do not give permission for any other use or re-disclosure of this information.

(NOTE.-You may want to place additional restrictions on this authorization letter. For example, you may want to (1) specify a particular expiration date for this letter (if less than one year); (2) describe medical information to be created in the future that you intend to be covered by this authorization letter; or (3) describe portions of the medical information in your records which you do not intend to be released as a result of this letter.) [Your right of access to a specific written consent form submitted to your employer is provided by section 3204(e)(1)(D).]

Full name of Employee or Legal Representative \_\_\_\_\_

Signature of Employee or Legal Representative \_\_\_\_\_

Date of Signature \_\_\_\_\_

### Appendix B

Availability of NIOSH Registry of Toxic Effects of Chemical Substances (RTECS)

Section 3204 applies to all employee exposure and medical records, and analyses thereof, of employees exposed to toxic substances or harmful physical agents [subsection (b)(2)]. The term "toxic substance or harmful physical agent" is defined by section 3204(c)(13) to encompass chemical substances, biological agents, and

physical stresses for which there is evidence of harmful health effects. The regulation uses the latest printed edition of the National Institute for Occupational Safety and Health (NIOSH) Registry of Toxic Effects of Chemical Substances (RTECS) as one of the chief sources of information as to whether evidence of harmful health effects exists. If a substance is listed in the latest printed RTECS, the regulation applies to exposure and medical records (and analyses of these records) relevant to employees exposed to the substance.

It is appropriate to note that the regulation does not require that employers purchase a copy of RTECS; and many employers need not consult RTECS to ascertain whether their employee exposure or medical records are subject to the regulation. Employers who do not currently have the latest printed edition of the NIOSH RTECS, however, may desire to obtain a copy. The RTECS is issued in an annual printed edition as mandated by section 20(a)(6) of the Occupational Safety and Health Act [29 U.S.C. 669(a)(6)].

The Introduction to the 1980 printed edition describes the RTECS as follows:

“The 1980 edition of the Registry of Toxic Effects of Chemical Substances, formerly known as the Toxic Substances list, is the ninth revision prepared in compliance with the requirements of section 20(a)(6) of the Occupational Safety and Health Act of 1970 (Public Law 91-596). The original list was completed on June 28, 1971, and has been updated annually in book format. Beginning in October 1977, quarterly revisions have been provided in microfiche. This edition of the Registry contains 168,096 listings of chemical substances: 45,156 are names of different chemicals with their associated toxicity data and 122,940 are synonyms. This edition includes approximately 5,900 new chemical compounds that did not appear in the 1979 Registry.” (p. xi)

“The Registry's purposes are many, and it serves a variety of users. It is a single source document for basic toxicity information and for other data, such as chemical identifiers and information necessary for the preparation of safety directives and hazard evaluations for chemical substances. The various types of toxic effects linked to literature citations provide researchers and occupational health scientists with an introduction to the toxicological literature, making their own review of the toxic hazards of a given substance easier. By presenting data on the lowest reported doses that produce effects by several routes of entry in various species, the Registry furnishes valuable information to those responsible for preparing safety data sheets for chemical substances in the workplace. Chemical and production engineers can use the Registry to identify the hazards which may be associated with chemical intermediates in the development of final products, and thus can more readily select substitutes or alternate processes which may be less hazardous. Some organizations, including health agencies and chemical companies, have included the NIOSH Registry accession numbers with the listing of chemicals in their files to reference toxicity information associated with those chemicals. By including foreign language chemical names, a start has been made toward providing rapid identification of substances produced in other countries.” (p. xi)

“In this edition of the Registry, the editors intend to identify ‘all known toxic substances’ which may exist in the environment and to provide pertinent data on the toxic effects from known doses entering an organism by any route described.” (p. xi)

“It must be reemphasized that the entry of a substance in the Registry does not automatically mean that it must be avoided. A listing does mean, however, that the substance has the documented potential of being harmful if misused, and care must be exercised to prevent tragic consequences. Thus, the Registry lists many substances that are common in everyday life and are in nearly every household in the United States. One can name a variety of such dangerous substances: prescription and non-prescription drugs; food additives; pesticide concentrates, sprays, and dusts; fungicides; herbicides; paints; glazes, dyes; bleaches and other household cleaning agents; alkalies; and various solvents and diluents. The list is extensive because chemicals have become an integral part of our existence.” (p. xiv)

The RTECS printed edition may be purchased from the Superintendent of Documents, U.S. Government Printing Office (GPO), Washington, D.C. 20402 (202-783-3238).

Some employers may also desire to subscribe to the quarterly update to the RTECS which is published in a microfiche edition. An annual subscription to the quarterly microfiche may be purchased from the GPO (Order the "Microfiche Edition, Registry of Toxic Effects of Chemical Substances"). Both the printed edition and the microfiche edition of RTECS are available for review at many university and public libraries throughout the country. The latest RTECS editions may also be examined at the OSHA Technical Data Center, Room N2439 - Rear, United States Department of Labor, 200 Constitution Avenue, N.W., Washington, D.C. 20210 (202-523-9700), or at any OSHA Regional or Area Office (See, major city telephone directories under United States Government -Labor Department).

Note: Authority cited: Section 142.3, Labor Code. Reference: Section 142.3, Labor Code.

### **HISTORY**

1. New section (including Appendices A and B) filed 3-20-81; effective thirtieth day thereafter (Register 81, No. 12). For prior history, see Registers 74, No. 43; 72, No. 23; 72, No. 19; and 72, No. 6.
2. Amendment of subsection (d)(1)(B) filed 12-23-81; effective thirtieth day thereafter (Register 81, No. 52).
3. Editorial correction of subsection (e)(3) filed 12-23-81; effective upon filing (Register 81, No. 52).
4. Amendment filed 6-18-90; operative 7-18-90 (Register 90, No. 33).
5. Amendment of subsections (c)(5)(C), (c)(13)(D) and (d)(1)(B)2. filed 5-5-2014; operative 5-6-2014 pursuant to Government Code section 11343.4(b)(3) (Register 2014, No. 19).
6. Change without regulatory effect amending subsection (e)(1)(A) filed 5-2-2019 pursuant to section 100, title 1, California Code of Regulations (Register 2019, No. 18).

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