

Subject Information:

Company:	Midwest Airline Control	Hire Date:	2/16/1999
SSN:	218-56-6888	Language:	English
Name:	Abner, Frank N.	Location:	Downtown
Birth Date:	12/19/1968		
Sex:	M		
Status:	Active		
In Program:	Yes		

Audiograms:

Date	Time	LB	RB	Left Thresholds								Right Thresholds								ANSI S3.6-1989	
				500	1K	2K	3K	4K	6K	8K	500	1K	2K	3K	4K	6K	8K	Left	Right		
2/16/1999	14:03:03	SR	SR	10	5	5	10	25	40	15	15	10	5	5	20	40	15	First Test	First Test		
2/12/2000	15:08:50	SR		0	-5	0	0	0	25	35	0	-5	0	5	25	35	10	Improvement	No Change		
2/14/2001	14:03:22		SR	5	0	0	0	0	40	15	5	0	5	15	45	50	20	Persistent improvement	STS		
2/26/2002	14:03:22			10	-5	0	0	5	40	35	5	0	5	15	50	45	15	No Change	Persistent STS		

History Information:

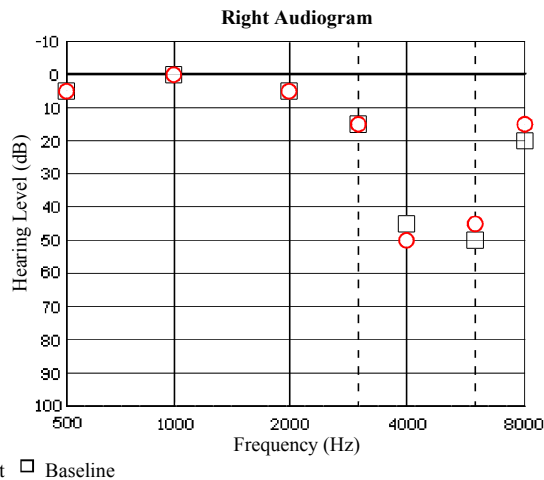
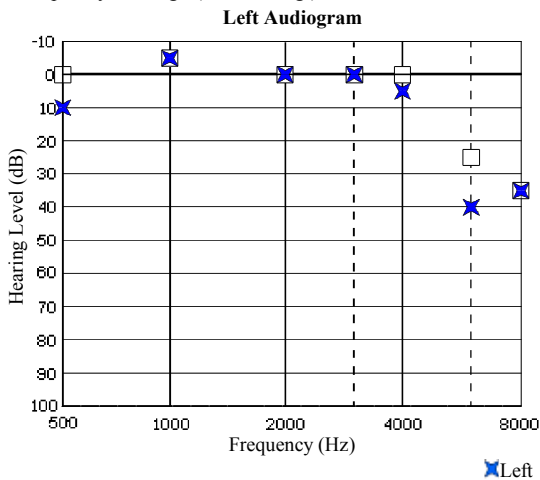
The most recent AAO-HNS medical referral criteria-1996, taken 2/28/2002, shows the following condition(s):
 Have you recently experienced a draining ear? Right

Most Recent Test:

Examiner:	DPM	Serial:	53212
Model:	CCA 220	Cal Date:	10/10/2001
Hours Since Last Exposure:	> 14	Lf Otoscope:	Normal
Exposure:	80 - 85 dB	Rt Otoscope:	Normal
Department:	Flow	Training:	Hearing Conservation Video
Job:	Management	Refer Subject:	
Shift:	1st	Self Eval:	Good
Protector Type:	Muff/Plugs		
Protector Use:	Usually used		

Most Recent Analysis:

Standard Threshold Shift (with Age Correction):	Left	Right
Current OSHA STS Trend (2,3,4K Avg.):	1 No	1 No
Speech Frequency Average (.5,1,2,3K Avg.):	1	23
High Frequency Average (4,6,8K Avg.):	1 Normal	6 Normal
	26 Mild	36 Mild



Examiner _____ Date _____

Subject _____ Date _____

Subject Information:

Company: Midwest Airline Control Hire Date: 2/16/1999
 SSN: 218-56-6888 Language: English
 Name: Abner, Frank N. Location: Downtown
 Birth Date: 12/19/1968
 Sex: M
 Status: Active
 In Program: Yes
 Comment:

Audiograms:

														ANSI S3.6-1989							
Date	Time	LB	RB	Left Thresholds								Right Thresholds						Examiner	Model	Serial	Cal Date
				500	1K	2K	3K	4K	6K	8K	500	1K	2K	3K	4K	6K	8K				
2/16/1999	14:03:03	SR	SR	10	5	5	10	25	40	15	15	10	5	5	20	40	15	DPM	CCA 220	53213	10/10/1998
2/12/2000	15:08:50	SR		0	-5	0	0	0	25	35	0	-5	0	5	25	35	10	DPM	CCA 220	53213	10/10/1999
2/14/2001	14:03:22		SR	5	0	0	0	0	40	15	5	0	5	15	45	50	20	DPM	CCA 220	53212	10/10/2000
2/26/2002	14:03:22			10	-5	0	0	5	40	35	5	0	5	15	50	45	15	DPM	CCA 220	53212	10/10/2001

Most Recent Test:

Hours Since Last Exposure: > 14 Lf Otoscope: Normal
 Exposure: 80 - 85 dB Rt Otoscope: Normal
 Department: Flow Training: Hearing Conservation Video
 Job: Management Refer Subject:
 Shift: 1st Self Eval: Good
 Protector Type: Muff/Plugs
 Protector Use: Usually used
 Comment:

Most Recent Analysis:

	<u>Left</u>		<u>Right</u>			<u>Left</u>		<u>Right</u>	
Standard Threshold Shift (Age Correction)	1	No	1	No	.5-1-2K Average:	1	3		
AAO - 1979:	0%				1-2-3K Average:	-1	6		
AAOO - 1971:	0%				2-3-4K Average:	1	23		
Illinois:	0%				3-4-6K Average:	15	36		
New Jersey:	0%				4-6-8K Average:	26	36		
					.5-1-2-3K Average:	1	6		

Examiner

Date

Subject

Date

Subject Averages and Impairments

Subject Information:

Company: Midwest Airline Control
 SSN: 218-56-6888
 Name: Abner, Frank N.
 Birth Date: 12/19/1968
 Sex: M
 Language: English
 In Program: Yes
 Status: Active
 Hire Date: 2/16/1999
 Comment:

Audiogram:

		ANSI S3.6-1989																			
Date	Time	LB	RB	Left Thresholds							Right Thresholds							Examiner	Model	Serial	Cal Date
				500	1K	2K	3K	4K	6K	8K	500	1K	2K	3K	4K	6K	8K				
2/26/2002	14:03:22			10	-5	0	0	5	40	35	5	0	5	15	50	45	15	DPM	CCA 220	53212	10/10/2001

Sound Level Meter:

Date	Time	Ambient noise level							Max permissible ambient noise level (MPANL)							Model	Serial	Cal Date
		125	250	500	1K	2K	4K	8K	125	250	500	1K	2K	4K	8K			
2/26/2002	14:03:22	42.1	39.6	35.8	30.8	26.8	21.0	21.2	Non	Non	40.0	40.0	47.0	57.0	62.0	SLM 200	10532	10/10/2001

Most Recent Test:

Hours Since Last Exposure:	> 14	Lf Otoscope:	Normal
Exposure:	80 - 85 dB	Rt Otoscope:	Normal
Department:	Flow	Training:	Hearing Conservation Video
Job:	Management	Refer Subject:	
Shift:	1st	Self Eval:	Good
Protector Type:	Muff/Plugs		
Protector Use:	Usually used		
Comment:			

Most Recent Analysis:

	Left	Right
Current OSHA STS Trend (2,3,4K Avg.):	1	23
Speech Frequency Average (.5,1,2,3K Avg.):	1 Normal	6 Normal
High Frequency Average (4,6,8K Avg.):	26 Mild	36 Mild

Examiner

Date

Subject

Date

Subject Test

Subject Information:

Company: Midwest Airline Control
 SSN: 218-56-6888
 Name: Abner, Frank N.
 Birth Date: 12/19/1968
 Sex: M
 Status: Active
 In Program: Yes
 Hire Date: 2/16/1999
 Language: English
 Comment:

Audiograms:

													ANSI S3.6-1989								
Date	Time	Left Thresholds						Right Thresholds						Examiner	Model	Serial	Cal Date				
		500	1K	2K	3K	4K	6K	8K	500	1K	2K	3K	4K					6K	8K		
Current Test:																					
Left:	2/26/2002	14:03:22	10	-5	0	0	5	40	35									CCA 220	53212	10/10/2001	
Right:	2/26/2002	14:03:22								5	0	5	15	50	45	15		CCA 220	53212	10/10/2001	
Baseline:																					
Left:	2/12/2000	15:08:50	0	-5	0	0	0	25	35									DPM	CCA 220	53213	10/10/1999
Right:	2/14/2001	14:03:22								5	0	5	15	45	50	20		CCA 220	53212	10/10/2000	
Standard Threshold Shift (with Age Correction):																					
			10	0	-1	0	4	14	14	0	0	0	0	5	-5	-5					

Sound Level Meter:

Date	Time	Ambient Noise Level							Maximum Permissible Ambient Noise Level							Model	Serial	Cal Date		
		125	250	500	1K	2K	4K	8K	125	250	500	1K	2K	4K	8K					
Current levels:																				
Left:	2/26/2002	14:03:22	42.1	39.6	35.8	30.8	26.8	21.0	21.2	None	None	40.0	40.0	47.0	57.0	62.0	SLM 200	10532	10/10/2001	
Right:	2/26/2002	14:03:22	42.1	39.6	35.8	30.8	26.8	21.0	21.2	None	None	40.0	40.0	47.0	57.0	62.0	SLM 200	10532	10/10/2001	
Baseline levels:																				
Left:	2/12/2000	15:08:50																		
Right:	2/14/2001	14:03:22	42.1	39.6	35.8	30.8	26.8	21.0	21.2	None	None	40.0	40.0	47.0	57.0	62.0	SLM 200	10532	10/10/2000	

For the most recent test, the ambient noise did NOT exceed the maximum permissible ambient noise levels (MPANLs).

Most Recent Test:

Hours Since Last Exposure: > 14
 Exposure: 80 - 85 dB
 Department: Flow
 Job: Management
 Shift: 1st
 Protector Type: Muff/Plugs
 Protector Use: Usually used
 Comment:

Lf Otoscope: Normal
 Rt Otoscope: Normal
 Training: Hearing Conservation Video
 Refer Subject:
 Self Eval: Good

Most Recent Analysis:

	<u>Left</u>		<u>Right</u>	
Standard Threshold Shift (with Age Correction):	1	No	1	No
Current OSHA STS Trend (2,3,4K Avg.):	1		23	
Speech Frequency Average (.5,1,2,3K Avg.):	1	Normal	6	Normal
High Frequency Average (4,6,8K Avg.):	26	Mild	36	Mild

Examiner	Date	Subject	Date
----------	------	---------	------

Subject Test STS

2000 Acme Lane
Watertown MN 55492

Midwest Airline Control

3/28/2003

Abner, Frank N.
218-56-6888
3626 Columbus ave S.
Minneapolis, MN 55402

Sir or Madam:

Recently you had an annual hearing test as part of your company's hearing conservation program, which is administered in compliance with federal regulation and guidelines from the Occupational Safety and Health Administration. This letter informs you of your test results.

Date	Time	Left Thresholds							Right Thresholds							Model	Serial	AudCal
		500	1K	2K	3K	4K	6K	8K	500	1K	2K	3K	4K	6K	8K			
Current Test																		
2/26/2002	14:03:22	10	-5	0	0	5	40	35							CCA 220	53212	10/10/2001	
2/26/2002									5	0	5	15	50	45	15	CCA 220	53212	10/10/2001
Baseline																		
2/12/2000	15:08:50	0	-5	0	0	0	25	35							CCA 220	53213	10/10/1999	
2/14/2001									5	0	5	15	45	50	20	CCA 220	53212	10/10/2000

Your most recent hearing test did not show a standard threshold shift as defined by OSHA.

Your test met one or more referral conditions of the American Academy of Otolaryngology-Head and Neck Surgery Foundation that were approved in 1996. You may want to see your doctor or audiologist about the conditions below if you have not already done so.

Your most recent history, taken 2/28/2002, shows the following condition(s):

Have you recently experienced a draining ear? Right

Your company nurse or Safety Manager will be glad to discuss your test results with you should you have any questions. Continue to use hearing protection when exposed to loud noise, whether on or off the job.

Sincerely,

Examiner

Date

Subject

Date

2000 Acme Lane
Watertown MN 55492

Midwest Airline Control

3/28/2003

Abner, Frank N.
218-56-6888
3626 Columbus ave S.
Minneapolis, MN 55402

Señor o Señora:

Recientemente usted se sometió a un examen auditivo anual que se lleva a cabo como parte del programa de conservación de la audición, que su compañía administra en cumplimiento con los reglamentos federales y con los lineamientos de la Administración de Salud y Seguridad en el Trabajo (Occupational Safety and Health Administration: OSHA). En esta carta le informamos los resultados de dicho examen.

Fecha	Hora	Umbrales izquierdos						Umbrales derechos						Modelo	Serie	Fecha de
		500	1K	2K	3K	4K	6K	8K	500	1K	2K	3K	4K			
Examen actual:																
2/26/2002	14:03:22	10	-5	0	0	5	40	35						CCA 220	53212	10/10/2001
2/26/2002									5	0	5	15	50	45	15	CCA 220 53212 10/10/2001
Línea de referencia:																
2/12/2000	15:08:50	0	-5	0	0	0	25	35						CCA 220	53213	10/10/1999
2/14/2001									5	0	5	15	45	50	20	CCA 220 53212 10/10/2000

Su examen auditivo más reciente no mostró una desviación del umbral estándar, según lo define la OSHA.

La enfermera o el gerente de seguridad de su compañía se complacerá en discutir con usted los resultados de su examen en caso de que tenga preguntas. Continúe usando dispositivos de protección auditiva cuando esté expuesto a ruidos intensos, dentro o fuera del trabajo.

Atentamente:

Persona que se somete al examen Fecha

Persona que realiza el examen Fecha

Western Hearing Conservation Services

7114 E. 57th Ave
Minneapolis MN, 55406

3/28/2003

Abner, Frank N.
3626 Columbus ave S.
Minneapolis, MN 55402

Midwest Airline Control
2000 Acme Lane
Watertown, MN 55492

Sir or Madam:

Recently you had an annual hearing test as part of your company's hearing conservation program, which is administered in compliance with federal regulation and guidelines from the Occupational Safety and Health Administration. This letter informs you of your test results.

Date	Time	Left Thresholds						Right Thresholds						Model	Serial	AudCal		
		500	1K	2K	3K	4K	6K	8K	500	1K	2K	3K	4K				6K	8K
Current Test																		
2/26/2002	14:03:22	10	-5	0	0	5	40	35							CCA 220	53212	10/10/2001	
2/26/2002									5	0	5	15	50	45	15	CCA 220	53212	10/10/2001
Baseline																		
2/12/2000	15:08:50	0	-5	0	0	0	25	35							CCA 220	53213	10/10/1999	
2/14/2001									5	0	5	15	45	50	20	CCA 220	53212	10/10/2000

Your most recent hearing test did not show a standard threshold shift as defined by OSHA.

Your test met one or more referral conditions of the American Academy of Otolaryngology-Head and Neck Surgery Foundation that were approved in 1996. You may want to see your doctor or audiologist about the conditions below if you have not already done so.

Your most recent history, taken 2/28/2002, shows the following condition(s):

Have you recently experienced a draining ear? Right

Your company nurse or Safety Manager will be glad to discuss your test results with you should you have any questions. Continue to use hearing protection when exposed to loud noise, whether on or off the job.

Sincerely,

Examiner

Date

Subject

Date

Subject Notification Letter

Midwest Airline Control

Name	SSN	Status	Left Test	Left Test	Right Test	Right Test	Age Correction	
			Date	Time	Date	Time	Left	Right
Adlin, Nathan B.	222-22-2222	Active	10/19/2001	15:35:13	10/19/2001	15:35:13	17	1
Nilson, Rosanna	000-00-0343	Active	5/19/2001	14:06:48	5/19/2001	14:06:48	29	12
Parrel, Dan P.	125-55-5748	Active	2/14/2002	14:59:45	2/14/2002	14:59:45	23	23
Schroeder, Ray L.	000-00-0135	Active	2/14/2001	14:07:18	6/2/2002	14:07:29	19	First

Totals

Period: 5/5/1994 to 6/2/2002
Number of subjects: 20
Number with STS (with Age Correction) 4

Midwest Airline Control

Name	SSN	Status	Left Test	Left Test	Right Test	Right Test	Age Correction	
			Date	Time	Date	Time	Left	Right
Adlin, Nathan B.	222-22-2222	Active	10/19/2001	15:35:13	10/19/2001	15:35:13	17	1
Nilson, Rosanna	000-00-0343	Active	5/19/2001	14:06:48	5/19/2001	14:06:48	29	12
Parrel, Dan P.	125-55-5748	Active	2/14/2002	14:59:45	2/14/2002	14:59:45	23	23

Totals

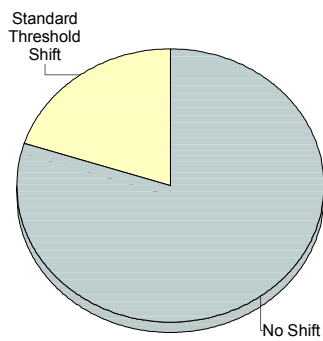
Period: 5/ 5/1994 to 6/ 2/2002
Number of subjects: 20
Number with Recordable Shift: 29 CFR 1904.10 - 2002 (with Age Correction) 3

Midwest Airline Control

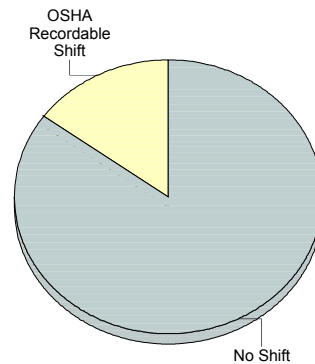
Test Period: 5/5/1994 to 6/2/2002

	Males	Females	Unspecified	Total	Percent
Shift - Referral Criteria					
Standard Threshold Shift (with Age Correction)	3	1	0	4	20.0
OSHA Recordable Shift 29 CFR 1904.10 - 2002 (with Age Correction)	2	1	0	3	15.0
Referral Criteria AAO-HNS - 1996	7	1	0	8	40.00
Categories (.5k, 1k, 2k, 3k Avg.)					
Normal Hearing	11	1	1	13	65.0
Mild Loss	1	1	0	2	10.0
Moderate Loss	2	0	0	2	10.0
Moderately Severe Loss	2	0	0	2	10.0
Severe Loss	0	0	0	0	0.0
Profound Loss	0	0	0	0	0.0
Most Recent Test Invalid or Not Tested	1	0	0	1	5.0
Total	17	2	1	20	

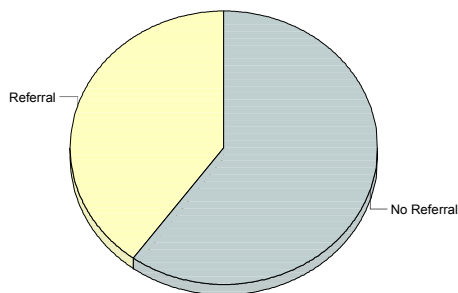
Charts



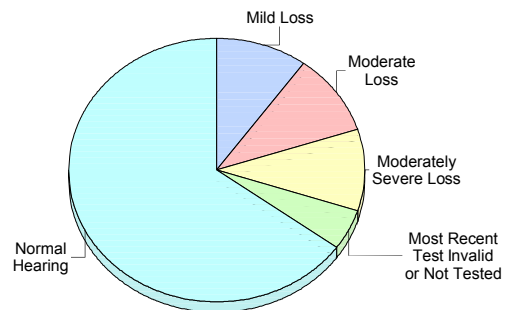
Standard Threshold Shift



OSHA Recordable Shift 29 CFR 1904.10 - 2002



Referral Criteria AAO-HNS -1996



Categories (.5k, 1k, 2k, 3k Avg.)

Midwest Airline Control

Name	SSN	Birth Date	Sex	Language	Job	Department	Most Recent Test Date
Abner, Frank N.	218-56-6888	12/19/1968	M	English	Management	Flow	2/26/2002
Adlin, Nathan B.	222-22-2222	1/ 1/1965	M	English			10/19/2001
Allen, Edmund F.	000-00-0056	6/20/1946	M	English	Assembly		11/18/2000
Auburn, Richard P.	000-00-0159	8/ 2/1946	M	English	Packaging	Final	10/13/2000
Bowins, Matty	355-46-5165	6/ 6/1979	F	English			2/16/2001
Clark, Richard W.	000-00-0233	7/18/1949	M	English	Assembly		10/10/2000
Farmer, Jeff D.	000-00-0104	7/ 9/1955	M	English	Shipping	Final	2/14/2001
James, Radio E.	564-63-6576	5/ 5/1940	M	English			2/19/2001
Lindberg, Fred L.	000-00-0209	11/30/1957	M	English			9/27/2000
Manker, Francis W.	000-00-0141	6/26/1956	M	English			1/24/1999
Marks, Stephen T.	111-11-1111	5/20/1957		English	Engineer	Research	11/18/2000
Nilson, Rosanna	000-00-0343	7/31/1945	F	English	Receiving		5/19/2001
Parrel, Dan P.	125-55-5748	2/ 2/1944	M	English			2/14/2002
Piro, Randy J.	000-00-0164	1/11/1955	M	English			2/14/2001
Priestley, Clarence E.	000-00-0178	8/25/1965	M	English	Office		2/14/2001
Rahim, Jordon W.	123-57-4866	12/12/1970	M	English			2/14/2001
Schroeder, Ray L.	000-00-0135	1/15/1964	M	English			6/ 2/2002
Smith, Barney L.	000-00-0045	10/20/1951	M	English			2/14/2001
Theisman, Charles L.	000-00-0119	11/18/1953	M	English		Press	2/ 5/2000
Wilson, Terry E.	000-00-0203	11/15/1962	M	English	Shipping	Docks	2/14/2001

Total

Number of subjects to test : 20

Midwest Airline Control

Name	SSN	Left Test Date	Right Test Date	Medical Referral Criteria Date	Speech		Asymmetry		Freq. Average		Shift		Medical Referral Criteria		
					Freq. L	Avg. R	Low Freq.	High Freq.	Low L	High R	Low L	High R			
Abner, Frank N.	218-56-6888	2/26/2002	2/26/2002	2/28/2002									X		
Adlin, Nathan B.	222-22-2222	10/19/2001	10/19/2001	2/11/2001			X			X	X				
James, Radio E.	564-63-6576	2/14/2001	2/14/2001	6/ 2/2001	X	X									
Lindberg, Fred L.	000-00-0209	9/27/2000	9/27/2000	4/19/2001	X	X									
Nilson, Rosanna	000-00-0343	5/19/2001	5/19/2001						X	X	X				
Parrel, Dan P.	125-55-5748	2/14/2002	2/14/2002	2/11/2002					X	X	X	X			
Schroeder, Ray L.	000-00-0135	6/ 2/2002	2/14/2001						X						
Theisman, Charles L.	000-00-0119	2/ 5/2000	2/ 5/2000	2/ 5/1999	X	X									
Totals							3	3	1	0	3	3	3	1	1

Audiogram Period: 5/ 5/1994 to 6/ 2/2002
Number of subjects: 20
Number with Medical Referrals: AAO-HNS - 1996 8

Subject Information:

Company:	Midwest Airline Control	Status:	Active
SSN:	218-56-6888	In Program:	Yes
Name:	Abner, Frank N.	Hire Date:	2/16/1999
Birth Date:	12/19/1968	Language:	English
Sex:	M		
Comment:			

AAO-HNS Medical Referral Criteria - 1996:**Please circle your response.**

Have you recently experienced pain in either ear?	Right	Left	Both	No
Have you recently experienced a draining ear?	Right	Left	Both	No
Have you recently experienced dizziness?			Yes	No
Have you recently experienced severe tinnitus (ringing)?	Right	Left	Both	No
Have you recently experienced sudden hearing loss?	Right	Left	Both	No
Have you recently experienced fluctuating hearing loss?	Right	Left	Both	No
Have you recently experienced ear fullness or discomfort?	Right	Left	Both	No
Have you recently had problems wearing hearing protection?			Yes	No

Examiner Only:

(Examiner only) Subject has visible wax or object in ear.	Yes	No
(Examiner only) Subject should be referred.		Yes

Medical History:

Have you ever served in the military?			Yes	No
Have you ever been to a doctor for an ear-related problem?	Right	Left	Both	No
Have you ever had a severe head injury?			Yes	No
Have you ever had ear surgery?	Right	Left	Both	No
Have you ever had an ear injury?	Right	Left	Both	No
Have you ever had measles?			Yes	No
Have you ever had mumps?			Yes	No
Have you ever had kidney disease?			Yes	No
Have you ever had scarlet fever?			Yes	No
Have you ever had meningitis?			Yes	No
Do you have diabetes?			Yes	No
Do you have high blood pressure?			Yes	No
Do you have an existing hearing problem?			Yes	No
Do you have frequent ear infections?	Right	Left	Both	No
Do you shoot guns or hunt?			Yes	No
Do you wear a hearing aid?	Right	Left	Both	No
Do you participate in loud activities (music, motorcycle)?			Yes	No
Do you currently use prescription or over the counter drugs?			Yes	No
Are you currently suffering from allergies?			Yes	No
Does any of your immediate family have hearing problems?			Yes	No

Comment:

Do you have any other comments on the health of your hearing?

Examiner _____ Date _____

Subject _____ Date _____

For office use only:

Medical history entered by: _____

Date entered: _____

Subject Information:

Company:	Midwest Airline Control	In Program:	Yes
SSN:	218-56-6888	Status:	Active
Name:	Abner, Frank N.	Language:	English
Birth Date:	12/19/1968		
Sex:	M		
Comment:			

AAO-HNS Medical Referral Criteria - 1996:	Examiner Date	DPM 1/16/1999	DPM 1/12/2000	DPM 1/14/2001	DPM 2/28/2002
Have you recently experienced pain in either ear?		No	No	No	No
Have you recently experienced a draining ear?		No	No	No	Right
Have you recently experienced dizziness?		No	No	No	No
Have you recently experienced severe tinnitus (ringing)?		No	No	No	No
Have you recently experienced sudden hearing loss?		No	No	No	No
Have you recently experienced fluctuating hearing loss?		No	No	No	No
Have you recently experienced ear fullness or discomfort?		No	No	No	No
Have you recently had problems wearing hearing protection?		No	No	No	No

Examiner Only:

(Examiner only) Subject has visible wax or object in ear.	No	No	No	No
(Examiner only) Subject should be referred.				

Medical History:

Have you ever served in the military?	No	No	No	No
Have you ever been to a doctor for an ear-related problem?	No	No	Both	Both
Have you ever had a severe head injury?	No	No	No	No
Have you ever had ear surgery?	No	No	No	No
Have you ever had an ear injury?	No	No	No	No
Have you ever had measles?	No	No	No	No
Have you ever had mumps?	No	No	No	No
Have you ever had kidney disease?	No	No	No	No
Have you ever had scarlet fever?	No	No	No	No
Have you ever had meningitis?	No	No	No	No
Do you have diabetes?	No	No	No	No
Do you have high blood pressure?	No	Yes	Yes	Yes
Do you have an existing hearing problem?	No	No	No	No
Do you have frequent ear infections?	No	No	No	No
Do you shoot guns or hunt?	No	No	No	No
Do you wear a hearing aid?	No	No	No	No
Do you wear a hearing aid?	No	No	No	No
Do you currently use prescription or over the counter drugs?	No	No	No	No
Are you currently suffering from allergies?	No	No	No	No
Does any of your immediate family have hearing problems?	Yes	Yes	Yes	Yes

2/28/2002 Comment:

Examiner	Date	Subject	Date
----------	------	---------	------

Midwest Airline Control

Name	SSN	Missing or Invalid					Test Date Before Birth Date
		Sex	Birth Date	Test	OSHA STS First Baseline	OSHA STS Baseline	
Allen, Edmund F.	000-00-0056			X			
Auburn, Richard P.	000-00-0159			X	X	X	X
Marks, Stephen T.	111-11-1111	X		X			
Schroeder, Ray L.	000-00-0135			X			
Totals		1	0	4	1	1	1

Period:

5/ 5/1994 to 6/ 2/2002

Number of subjects:

20

Number with Exceptions:

4

Midwest Airline Control

Name	SSN	Birth Date	Sex	2,3,4, Ave		Job	Department	Most Recent Test Date
				L	R			
Adlin, Nathan B.	222-22-2222	1/ 1/1965	M	40	6			10/19/2001
Nilson, Rosanna	000-00-0343	7/31/1945	F	40	23	Receiving		5/19/2001

Total

Period: 5/ 5/1994 to 10/22/2002
Number of subjects: 20
Number of subjects to retest : 2

Midwest Airline Control

Abner, Frank N.
3626 Columbus ave S.
Minneapolis, MN 55402

2/16/1999 Yes

218-56-6888
Active

12/19/1968

M

English

Downtown

2/16/1999 14:03:03 SR SR 10 5 5 10 25 40 15 15 10 5 5 20 40 15 DPM CCA 220 53213 10/10/1998
First Invalid 10 21 First Test
First Invalid 6 25 First Test

2/12/2000 15:08:50 SR 0 -5 0 0 0 25 35 0 -5 0 5 25 35 10 DPM CCA 220 53213 10/10/1999
0 10 21 No Change
-13 Improvement -13 6 25 Improvement

2/14/2001 14:03:22 SR 5 0 0 0 0 40 15 5 0 5 15 45 50 20 DPM CCA 220 53212 10/10/2000
42.1 39.6 35.830.8 26.821.0 21.2 Non Non 40.040.0 47.0 57.062.0 SLM 200 10532 10/10/2000
10 STS 10 10 21 STS
0 Persistent improvement 0 6 25 Persistent improvement

> 14

Flow

1st

Usually used

Normal

80 - 85 dB
Management

Muff/Plugs

Normal

Hearing Conservation Video

Good

2/26/2002 14:03:22 10 -5 0 0 5 40 35 5 0 5 15 50 45 15 DPM CCA 220 53212 10/10/2001
42.1 39.6 35.830.8 26.821.0 21.2 Non Non 40.040.0 47.0 57.062.0 SLM 200 10532 10/10/2001
1 Persistent STS 1 10 21 Persistent STS
1 1 6 25 No Change

> 14

Flow

1st

Usually used

Normal

80 - 85 dB
Management

Muff/Plugs

Normal

Hearing Conservation Video

Good

Adlin, Nathan B.
Yes 222-22-2222 1/1/1965 M English
Active

This guy can't hear

10/18/2000 15:35:13 SR SR 5 5 5 55 5 5 5 55 5 5 5 5 5 5 SB MA-1000
First Invalid 21 5 First Test
First Invalid 5 21 First Test

10/19/2001 15:35:13 10 20 30 40 50 60 70 80 90 0 5 15 25 35 STB MA 1000 1/1/2000
1 1 21 5 No Change
17 STS 17 STS 5 21 STS

Midwest Airline Control

Total:

Number of Subjects : 2

Key:

Name (Last, First, MI.)		SSN	Birth Date	Sex	Language
Address 1	Hire Date	In Program	Status		
Address 2		Email			
Address 3 (City, State, Zip)		Location			

Subject Comment								
Test Date	Test Time	*	**	***	Examiner	Model	Serial	Cal Date
****	*****		*****	SLM Model	Serial	Cal Date		
Test Rejected	Shift STS R	Annual STS Code R		Shift Rec	Annual Rec Code R	Base Ave R	Better Worse R	
	Shift STS L	Annual STS Code L		Shift Rec	Annual Rec Code L	Base Ave L	Better Worse L	
Hours Since Last Exposure:				Exposure:				
Department:				Job:				
Shift:				Protector Type:				
Protector Use:				Lf Otoscope:				
Rt Otoscope:				Training:				
Refer Subject:				Self Eval:				
Test Comment:								

* Test type indicator. 'S' if the test is an OSHA STS baseline test, 'R' if the test is an OSHA Shift Recordable baseline test.

** Left ear thresholds (dBHL) at the following frequencies (Hz): 500, 1000, 2000, 3000, 4000, 6000, 8000.

*** Right ear thresholds (dBHL) at the following frequencies (Hz): 500, 1000, 2000, 3000, 4000, 6000, 8000.

**** SLM Status.

***** SLM Level at the following frequencies (Hz): 125, 250, 500, 1000, 2000, 4000, 8000.

***** SLM MPANL at the following frequencies (Hz): 125, 250, 500, 1000, 2000, 4000, 8000.

Marin Technology Co.Address: 3016 Aldrich Ave
Suite 503
Pole, CA 999840
USAPhone: 111-305-9133
Contact: Jerry RobertsonCalculate STS using Age Correction: No
Calculate STS use Automatic Baseline Revision: Yes
Separate Left/Right Baselines: No
Retest Period: 30 Days

Comment:

Midwest Airline ControlAddress: 2000 Acme Lane

Watertown, MN 55492
USAPhone: 612-442-4444
Contact: Leroy JohnsonCalculate STS using Age Correction: Yes
Calculate STS use Automatic Baseline Revision: Yes
Separate Left/Right Baselines: Yes
Retest Period: 30 Days

Comment:

Neelson Development CenterAddress: 3038 West Lake st

Wabasha, NM 29499
USAPhone: 439-494-3193
Contact: David St.MartinCalculate STS using Age Correction: No
Calculate STS use Automatic Baseline Revision: Yes
Separate Left/Right Baselines: Yes
Retest Period: 30 Days

Comment:

Total

Number of Companies : 3