§1910.423, decompression procedure assessment evaluations (§1910.423), and records of hospitalizations (§1910.440) shall be provided in the same manner as employee exposure records or analyses using exposure or medical records. Equipment inspections and testing records which pertain to employees (§1910.430) shall also be provided upon request to employees and their designated representatives.

(3) Records and documents required by this standard shall be retained by the employer for the following period:

(i) [Reserved]

(ii) Safe practices manual (§1910.420)—current document only;

(iii) Depth-time profile (§1910.422)—until completion of the recording of dive, or until completion of decompression procedure assessment where there has been an incident of decompression sickness;

(iv) Recording of dive (§1910.423)—1 year, except 5 years where there has been an incident of decompression sickness;

(v) Decompression procedure assessment evaluations (§1910.423)—5 years;

(vi) Equipment inspections and testing records (§1910.430)—current entry or tag, or until equipment is withdrawn from service;

(vii) Records of hospitalizations (§1910.440)—5 years.


(5) [Reserved]


APPENDIX A TO SUBPART T OF PART 1910—EXAMPLES OF CONDITIONS WHICH MAY RESTRICT OR LIMIT EXPOSURE TO HYPERBARIC CONDITIONS

The following disorders may restrict or limit occupational exposure to hyperbaric conditions depending on severity, presence of residual effects, response to therapy, number of occurrences, diving mode, or degree and duration of isolation. History of seizure disorder other than early febrile convulsions.

Malignancies (active) unless treated and without recurrence for 5 yrs.

Chronic inability to equalize sinus and/or middle ear pressure.

Cystic or cavitory disease of the lungs.

Impaired organ function caused by alcohol or drug use.

Conditions requiring continuous medication for control (e.g., antihistamines, steroids, barbiturates, moodaltering drugs, or insulin).

Meniere’s disease.

Hemoglobinopathies.

Obstructive or restrictive lung disease.

Vestibular end organ destruction.

Pneumothorax.

Cardiac abnormalities (e.g., pathological heart block, valvular disease, intraventricular conduction defects other than isolated right bundle branch block, angina pectoris, arrhythmia, coronary artery disease).

Juxta-articular osteonecrosis.

APPENDIX B TO SUBPART T OF PART 1910—GUIDELINES FOR SCIENTIFIC DIVING

This appendix contains guidelines that will be used in conjunction with §1910.401(a)(2)(iv) to determine those scientific diving programs which are exempt from the requirements for commercial diving. The guidelines are as follows:

1. The Diving Control Board consists of a majority of active scientific divers and has autonomous and absolute authority over the scientific diving program’s operations.

2. The purpose of the project using scientific diving is the advancement of science; therefore, information and data resulting from the project are non-proprietary.

3. The tasks of a scientific diver are those of an observer and data gatherer. Construction and trouble-shooting tasks traditionally associated with commercial diving are not included within scientific diving.

4. Scientific divers, based on the nature of their activities, must use scientific expertise in studying the underwater environment and, therefore, are scientists or scientists in training.

[50 FR 1050, Jan. 9, 1985]

APPENDIX C TO SUBPART T OF PART 1910—ALTERNATIVE CONDITIONS UNDER §1910.401(a)(3) FOR RECREATIONAL DIVING INSTRUCTORS AND DIVING GUIDES (MANDATORY)

Paragraph (a)(3) of §1910.401 specifies that an employer of recreational diving instructors and diving guides (hereafter, “divers” or “employees”) who complies with all of the conditions of this appendix need not provide a decompression chamber for these divers as required under §§1910.423(b)(2) or (c)(3) or 1910.426(b)(1).