AIHA Guideline Foundation
Guideline Value Candidate Agent Nomination Request Form

Requestor Information

Last Name Middle Initial First Name

Nominating on behalf of (list employer or client if applicable)

Phone Email

Country

AIHA Member ☐ Yes ☐ No

Candidate Agent

Name of Candidate Agent:

CAS Number:

Synonyms, trade names:

Is it a high production volume chemical ☐ Yes ☐ No

Amount transported annually in commerce? [ ] LBS [ ] KG [ ] TONS

Is there a potential for agent to be released and generate significant exposures workers, emergency response personnel, the environment or community? If yes, please provide additional information

Is there a potential for significant adverse health effects from inhalation or dermal exposure?
If yes, please provide additional information

Is it a chemical or biological warfare agent or agent of concern based on possible release from terrorism events? If yes, please provide additional information

Is there availability of a regulatory or guide value by other credible organization? ☐ Yes ☐ No
If yes, please list/provide

Comments

Please provide any additional comments (use more pages if necessary):

Please send completed form to Mili Mavely at AIHA via email (mmavely@aiha.org).