

FMP Exercise for Chloropicrin

Item No.	Task	Answer or Checkbox
1.	Pick up a copy of a blank FMP template <u>and</u> a product label for a chloropicrin <u>or</u> a metam sodium product. Also pick up a copy of the EPA fact sheet on FMPs & post-application summaries. Check the box to the right.	<input type="checkbox"/>
2.	Fill in as much information as you can in Section I of the template and check the box to the right.	<input type="checkbox"/>
3.	In the left margin of Section II write “GPS not required, general description or map is o.k.” Check the box to the right.	<input type="checkbox"/>
4.	In the left margin of Sections III and IV write “Sections only for contract fumigators.” Check the box to the right.	<input type="checkbox"/>
5.	In Section V, fill in the fumigant product name and the EPA registration number for the product. Check the application method on the template. Find your application method in the Mandatory GAP section of the product label. What is the minimum injection depth from the final soil/air interface?	Minimum injection depth:
6.	Some sections of the FMP emphasize important information for worker safety and emergency response. Much if not all of these standard procedures will be applicable to all your fields. Circle the section numbers for sections VI, VII and XIII on the FMP template. Check the box to the right.	<input type="checkbox"/>
7.	A separate form is available for handler information (Section VIII). Find the “Handler Information” form and complete the following sections for yourself: handler information, employer information, tasks to perform, and PPE. If appropriate, add the respirator information at a later date. Obtain a copy of the “Safety Information for Handlers of Pesticide Soil Fumigants”, read this handout and check the box on the Handler Information form.	What are the 4 things you should do if you have signs or symptoms of exposure (just write key word that is in all caps on the fact sheet)?
8.	If you do not use tarps, check the box in the header for Section IX. Obtain a copy of the EPA fact sheet on worker protection measures. In the table on the last page, how many entry restricted period scenarios are listed for tarped applications?	Number of scenarios for tarped applications:
9.	In Section X, check the box for the USDA Feel and Appearance method. Obtain a copy of the handout on this method. What is the percent moisture availability for a sandy loam soil that is moist, forms a ball with defined finger marks, very light soil/water staining on fingers, darkened color, will not slick.	% moisture range:
10.	In the header for Section XI, write “ http://forecast.weather.gov ” to the right of “Weather Conditions”. Air-Stagnation Advisories are not issued for North Carolina. Write ‘NA’ next to both places where this is mentioned in the template. Obtain a copy of the 5-day weather forecast for Williamston (printed 2-28-2011). What is the high temperature and wind speed forecast for Wednesday?	Wednesday temperature and wind speed forecast:
11.	At the bottom of the page underneath Section XII write “The entry restricted period is at least 5 days and may be extended if tarps are used. The treated area signs must be removed within 3 days after the end of the entry restricted period.” Check the box to the right.	<input type="checkbox"/>

12.	Find your method of application in the Mandatory GAP section of the product label. Draw a box around all the GAPs listed for your method. In Section XIV, check the box right below the header. Underline the following sentence: “If this box is not checked, the checklist below must be completed.” Check the box to the right.	<input type="checkbox"/>
13.	Find the “2010 Soil Fumigant Post Application Summary” form and change ‘2010’ to ‘2011’ in the title. Underline the following phrase on the form: “Only fill-in information if it is different from the FMP”. Place a checkmark next to “Application date and time”, “Weather Conditions” and “Date(s) of Fumigant Treated Area sign removal”. These are the only sections that would need to be completed if the entire fumigation went according to the original plan. However, you would need to check the boxes that indicate where the section is not applicable or to verify that there were no changes from the FMP. Check the box to the right.	<input type="checkbox"/>
14.	Find the form titled “Air Monitoring Results When Sensory Irritation is Experienced”. There is no place for air monitoring data on this form. Change the title to read “Basic Information for Sensory Detection Incidents”. Check the box.	<input type="checkbox"/>
15.	Find the form titled “Breathing Zone Air Monitoring with Direct Read Instruments”. Depending on the template you are using, write the following at the bottom of the page: “Chloropicrin – The use of a full-face air-purifying respirator is required for all handlers working in an area with air concentrations that exceed 0.15 ppm (150 ppb). If the air concentration exceeds 1.5 ppm all handlers must leave the application block.” <u>Or:</u> “Metam Sodium – The use of a full-face air-purifying respirator is required for all handlers working in an area with air concentrations of MITC that exceed 0.6 ppm (600 ppb). If the air concentration exceeds 6 ppm all handlers must leave the application block.” Check the box to the right.	<input type="checkbox"/>