

**FACTORIES AND INDUSTRIAL UNDERTAKINGS (WORK IN
COMPRESSED AIR) REGULATIONS**

COMPRESSED AIR WORKER'S INDIVIDUAL AIR RECORD

Contract:

Name of worker: Date of birth:

Identification:

Occupation: Shift worker: *Yes/No*

Total days employed in compressed air:

| Date | Length of each shift | Maximum pressure | Decanting time (if applicable) | Shift | | | Bends | | Symp- toms not treated |
|------|-------------------------------|---------------------|--------------------------------------|-------|---|---|--------|--------|------------------------------|
| | | | * WP to WP | †D | B | N | Type 1 | Type 2 | |
| | | | | | | | | | |

* WP = working pressure

† D = Day

B = Back

N = Night

〔第 24 及 27 條〕

壓縮空氣工作人員的個人工作紀錄

受僱於壓縮空氣中工作的總天數：.....

[illegible]