

HUMAN HEALTH CONCEPTUAL SITE MODEL GRAPHIC FORM

Site: _____

Completed By: _____

Date Completed: _____

Instructions: Follow the numbered directions below. Do not consider contaminant concentrations or engineering/land use controls when describing pathways.

(1) Media	(2) Transport Mechanisms
<input type="checkbox"/> Surface Soil (0-2 ft bgs)	<input type="checkbox"/> Direct release to surface soil <i>check soil</i>
	<input type="checkbox"/> Migration to subsurface <i>check soil</i>
	<input type="checkbox"/> Migration to groundwater <i>check groundwater</i>
	<input type="checkbox"/> Volatilization <i>check air</i>
	<input type="checkbox"/> Runoff or erosion <i>check surface water</i>
	<input type="checkbox"/> Uptake by plants or animals <i>check biota</i>
<input type="checkbox"/> Subsurface Soil (2-15 ft bgs)	<input type="checkbox"/> Direct release to subsurface soil <i>check soil</i>
	<input type="checkbox"/> Migration to groundwater <i>check groundwater</i>
	<input type="checkbox"/> Volatilization <i>check air</i>
	<input type="checkbox"/> Uptake by plants or animals <i>check biota</i>
<input type="checkbox"/> Ground-water	<input type="checkbox"/> Direct release to groundwater <i>check groundwater</i>
	<input type="checkbox"/> Volatilization <i>check air</i>
	<input type="checkbox"/> Flow to surface water body <i>check surface water</i>
	<input type="checkbox"/> Flow to sediment <i>check sediment</i>
	<input type="checkbox"/> Uptake by plants or animals <i>check biota</i>
<input type="checkbox"/> Surface Water	<input type="checkbox"/> Direct release to surface water <i>check surface water</i>
	<input type="checkbox"/> Volatilization <i>check air</i>
	<input type="checkbox"/> Sedimentation <i>check sediment</i>
	<input type="checkbox"/> Uptake by plants or animals <i>check biota</i>
	<input type="checkbox"/> Other (list): _____
<input type="checkbox"/> Sediment	<input type="checkbox"/> Direct release to sediment <i>check sediment</i>
	<input type="checkbox"/> Resuspension, runoff, or erosion <i>check surface water</i>
	<input type="checkbox"/> Uptake by plants or animals <i>check biota</i>
	<input type="checkbox"/> Other (list): _____

(3)
 Check all exposure media identified in (2).

soil

groundwater

air

surface water

sediment

biota

(4)
 Check all pathways that could be complete. The pathways identified in this column **must** agree with Sections 2 and 3 of the Human Health CSM Scoping Form.

Incidental Soil Ingestion
 Dermal Absorption of Contaminants from Soil
 Inhalation of Fugitive Dust

Ingestion of Groundwater
 Dermal Absorption of Contaminants in Groundwater
 Inhalation of Volatile Compounds in Tap Water

Inhalation of Outdoor Air
 Inhalation of Indoor Air
 Inhalation of Fugitive Dust

Ingestion of Surface Water
 Dermal Absorption of Contaminants in Surface Water
 Inhalation of Volatile Compounds in Tap Water

Direct Contact with Sediment

Ingestion of Wild or Farmed Foods

(5)
 Identify the receptors potentially affected by each exposure pathway: Enter "C" for current receptors, "F" for future receptors, "C/F" for both current and future receptors, or "I" for insignificant exposure.

Current & Future Receptors

	Residents (adults or children)	Commercial or Industrial workers	Site visitors, trespassers, or recreational users	Construction workers	Farmers or subsistence harvesters	Subsistence consumers	Other
<input type="checkbox"/> Incidental Soil Ingestion							
<input type="checkbox"/> Dermal Absorption of Contaminants from Soil							
<input type="checkbox"/> Inhalation of Fugitive Dust							
<input type="checkbox"/> Ingestion of Groundwater							
<input type="checkbox"/> Dermal Absorption of Contaminants in Groundwater							
<input type="checkbox"/> Inhalation of Volatile Compounds in Tap Water							
<input type="checkbox"/> Inhalation of Outdoor Air							
<input type="checkbox"/> Inhalation of Indoor Air							
<input type="checkbox"/> Inhalation of Fugitive Dust							
<input type="checkbox"/> Ingestion of Surface Water							
<input type="checkbox"/> Dermal Absorption of Contaminants in Surface Water							
<input type="checkbox"/> Inhalation of Volatile Compounds in Tap Water							
<input type="checkbox"/> Direct Contact with Sediment							
<input type="checkbox"/> Ingestion of Wild or Farmed Foods							