

Medical Surveillance Program

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Medical Surveillance Program

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PURPOSE

Medical surveillance is the systematic collection, analysis, and evaluation of health data in the workplace to identify cases, patterns, or trends suggesting an adverse effect on the health of employees. It includes the routine medical examination of employees over a period of time to evaluate occupational exposure to a potential hazard.

The UIUC Medical Surveillance Program has been implemented to meet regulatory requirements, guidelines or establish standards of practice to help prevent occupational disease and to protect the health and safety of UIUC employees.

POLICY

Employees of UIUC are eligible for inclusion in this program if they perform work-related tasks that might be reasonably anticipated to cause occupational exposure to a potential hazard. These hazards include: animals used in research, their viable tissues, body fluids, wastes or their living quarters; human blood, body fluids and tissues to which universal precautions apply; agents infectious to humans; hazardous chemicals; and certain types of ionizing and non-ionizing radiation. In addition, an employee is eligible for a medical examination when monitoring reveals levels of a particular hazard to be above the limits set forth by applicable regulatory requirements, guidelines or established standards of practice.

This program does not include: students unless they are employed by UIUC; pre-employment medical examinations; certain vaccination schedules; and post-exposure medical examinations included in other UIUC Programs.

RESPONSIBILITIES

Occupational Safety and Health (OSH)

OSH is responsible for the administration of this Program, which involves a healthcare provider, OSH and the eligible employee's campus unit. The coordination of the UIUC Medical Surveillance Program shall be the responsibility of OSH. An OSH program coordinator is designated to provide guidance, regulatory interpretation and oversight for this Program and to review this Program annually.

OSH shall:

- A. Develop and implement the UIUC Medical Surveillance Program.
- B. Be available to answer questions or concerns about the program from Deans, Directors, Heads of Academic and Administrative Units, supervisors, and employees.
- C. Be responsible for the review of this program.
- D. Annually update this program.

Deans, Department Heads, and Directors (Campus Units)

Campus Units shall designate a Responsible Person that will be charged with implementing this Program and Unit-Specific SOPs.

- A. Implement the UIUC Medical Surveillance Program for their unit.
- B. Ensure that supervisors have access to this program.
- C. Ensure that the required funding is available for the implementation of this program.

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D. Manage restrictions imposed on an employee as a result of the medical examination that limit the employee from performing certain functions of a work-related task.

Supervisors

- A. Ensure that the UIUC Medical Surveillance Program is available to eligible employees.
- B. Ensure that eligible employees are enrolled in the UIUC Medical Surveillance Program if mandated by regulations.
- C. Ensure that if the employee chooses not to enroll in the UIUC Medical Surveillance Program, and if not mandated by regulations, then he/she reads and signs the declination statement (example in **APPENDIX A**).
- D. Ensure that a medical examination is available to an employee who initially declined the medical examination, but at a later date decides to enroll in the UIUC Medical Surveillance Program.
- E. Provide a copy of the declination statement to OSH.
- F. Track employee examination dates and ensure that employees obtain routine medical surveillance examinations according to recommendations of the healthcare provider or associated OSHA regulation.
- G. Inform OSH of an employee requiring medical surveillance.
- H. Inform employees of the UIUC Medical Surveillance Program on a continuing basis.
- I. Inform employees that the supervisor shall receive a copy of the physician's written opinion.
- J. Provide Department account information to the employee for billing by the healthcare provider.
- K. Direct the scheduling of employee appointments so that they occur during regular working hours.
- L. File and maintain the employee declination statements and the physician written opinions.
- M. Manage the restrictions imposed on an employee as a result of the medical examination, which limit the employee from performing a specific work-related task.
- N. Facilitate employee access to his/her records.

Employees

- A. Follow the requirements of the UIUC Medical Surveillance Program, if applicable.
- B. Enroll in the UIUC Medical Surveillance Program if mandated by regulations.
- C. Read and sign the declination statement if enrollment in the UIUC Medical Surveillance Program is not mandated by regulations and the employee does not wish to be enrolled in the program.
- D. Keep all appointments with the healthcare provider and complete the required medical examinations and tests.

Healthcare Providers

- A. Determine appropriate medical tests based on regulatory requirements, guidelines, or established standards of practice for occupational exposure to potential hazards.
- B. Perform the required medical examination and test in full compliance with regulatory requirements, guidelines, or established standards of practice for occupational exposure to potential hazards.
- C. Inform the employee of the results of the examination and, if applicable, the increased associated health risks.
- D. Advise the employee of any medical conditions resulting from an occupational exposure that require further evaluation or treatment.

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- E. Provide to the employee a copy of the physician's written opinion.
- F. Maintain all confidential medical records.
- G. Oversee the quality control aspects of the medical examinations and tests.
- H. The health care provider contracted to provide in-person medical examinations and tests shall send the employer's copy of the physician's written opinion to OSH.

Quality Control

Quality control aspects of the UIUC Medical Surveillance Program include medical and administrative quality control.

The healthcare provider shall be responsible for quality control of the medical aspects of the program. This shall include: the use of properly calibrated and functional equipment to meet minimum specifications; the use of certified and proficient laboratories for analysis of biological samples, if required; the provision of necessary space and capacity of the healthcare testing facility; and the availability of adequately trained and certified staff to administer the medical examinations and tests to unequivocally provide the best possible healthcare service.

OSH shall be responsible for quality control of the administrative aspects of the program. This shall involve accurate record keeping and documentation. OSH may audit UIUC Medical Surveillance Program records at any time to determine compliance.

PROCEDURES

The following steps shall be followed for an *initial* or *exit in-person medical examination with the contracted healthcare provider*:

- A. The employee or supervisor shall inform OSH of an employee requiring medical surveillance.
- B. As needed, OSH shall correspond with the supervisor of the employee needing medical surveillance, detailing the steps required to obtain and complete the medical examination.
- C. The supervisor shall inform the employee of the UIUC Medical Surveillance Program and ensure that all eligible employees are enrolled in the program if mandated by regulations. The supervisor shall also ensure that if the employee chooses not to enroll in the UIUC Medical Surveillance Program and if not mandated by regulations then he/she reads and signs the declination statement (example in APPENDIX A). A copy of the declination statement along with other information about the employee shall be forwarded to OSH by the supervisor. The supervisor shall also ensure that a medical examination is available to the employee that initially declined the medical examination, but at a later date decides to enroll in the program.
- D. The supervisor or the employee shall make an appointment with the healthcare provider for the employee.
- E. The supervisor shall allow the employee to keep the appointment during regular working hours.
- F. The employee shall keep the appointment with the healthcare provider and complete the required medical examinations and tests.
- G. The healthcare provider shall perform the required medical examinations and tests.
- H. The healthcare provider shall inform the employee of the results of the examination and, if applicable, the increased associated health risks.

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- I. The healthcare provider shall provide the employee's copy of the physician's written opinion to the employee.
- J. The healthcare provider shall send the employer's copy of the physician's written opinion to OSH.
- K. The supervisor shall file the declination statement or the physician's written opinion as confidential information in the personnel file of the employee.
- L. The supervisor shall maintain a schedule of current and future appointments for each employee in the medical surveillance program according to the recommendations of the healthcare provider or associated OSHA regulation.

The following steps shall be followed for a *periodic medical examination*:

- A. The supervisor to notify an employee for periodic medical exams when required by the substance specific standard or healthcare provider recommendations.
- B. ...continue with steps G-N listed above.

Campus Units desiring to utilize an online vendor for medical clearance for respirator usage may do so. The Unit will be responsible for all aspects of establishing and maintaining payment, recordkeeping, scheduling, and notification to employees. Proof of medical clearance must be provided to OSH either before or at the time of respirator fit testing.

Medical Testing

The *Initial Medical Examination* shall be administered prior to initiating work that might be reasonably anticipated to cause occupational exposure to a potential hazard. The initial medical examination shall include a medical history and appropriate medical examinations and tests. The examination shall be considered to be the baseline for comparative purposes, should an exposure incident occur. Specific medical tests for the initial medical examination of specific hazards have been included in APPENDIX B.

The *Periodic Medical Examination* shall be administered at regular intervals, the frequency of which shall be based on the regulatory dictate or the expected timing of health effects in relation to occupational exposure to a potential hazard as determined by a physician or other licensed healthcare professional (PLHCP). The medical tests required for the periodic examination may not be as extensive as those required at the initial examination. Specific schedules and medical tests for the periodic medical examination of specific hazards have been included in APPENDIX B. However, frequencies may vary based on recommendations from the PLHCP.

The *Exit Medical Examination* shall be administered, if required, at the time of termination of employment or change in an employee's job status such that he/she is no longer occupationally exposed to the potential hazard that required participation in the UIUC Medical Surveillance Program. Specific medical tests for the exit medical examination of specific hazards have been included in APPENDIX B.

Program Cost

Medical examination and test shall be provided without cost to the employee and at a reasonable time and place. It shall be the responsibility of the individual campus unit to bear the full cost associated with the medical examination of its employees.

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Results of Medical Testing

Notification of Results: It shall be the responsibility of the healthcare provider to inform the employee of the results of the examination and, if applicable, the increased associated health risks. The healthcare provider shall provide the employee's copy of the physician's written opinion to the employee and send the employer's copy to OSH. The physician's written opinion shall contain, but not be limited to: the healthcare provider's medical opinion related to the occupational exposure to the potential hazard; recommended limitations, if any; and a statement that the employee has been informed of the results of the examination and, if present, the increased associated health risks.

Test Results: Results of the medical examination that limit an employee's ability to perform a specific work-related task shall be dealt with on an individual basis. The employee's supervisor shall try to accommodate, if possible, the restrictions imposed on the employee as a result of the medical examination. However, it shall be the ultimate responsibility of the Deans, Directors, and Heads of Academic and Administrative units to make all possible reasonable changes to accommodate the restrictions imposed on an employee as a result of the medical examination that limit the employee from performing the essential functions of a work-related task. Deans, Directors, and Heads of Academic and Administrative units may wish to consult with the Office of Academic Human Resources or Staff Human Resources in this matter.

Surveillance Recall

Employees enrolled in the UIUC Medical Surveillance Program shall be recalled for medical follow-up according to the frequency specified with each hazard in APPENDIX B.

Record Keeping

Medical Records: the healthcare provider shall maintain medical records for each employee for at least the duration of employment plus 30 years. The records shall include but not be limited to: employee identification; results of the medical examination and tests; the *physician's written opinion* for each evaluation; and any other pertinent medical information.

Other Records: When OSH receives records from the healthcare provider, those records will be maintained in a HIPPA-compliant Box Data Folder.

Record Availability: Employee medical records shall be kept confidential and shall not be disclosed or reported without the employee's express written consent to any person within or outside the work place. To obtain medical records, the employee shall complete and submit an "Authorization to Release Patient Information" form to the healthcare provider. This form is specific to the healthcare provider.

Confidentiality: All medical information obtained during the medical examination shall remain confidential. Employee medical records shall not be disclosed or reported without the employee's express written consent to any person within or outside the work place except as required by the regulating authority specified above.



Program Evaluation

This Program will be reviewed annually by OSH. The written Unit-Specific SOPs shall be reviewed and updated by the respective Campus Unit at least annually and more frequently as hazards, tasks, procedures and/or equipment change.

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Appendix A – eXAMPLE OF DECLINATION STATEMENT

EXAMPLE OF DECLINATION STATEMENT (CAMPUS UNIT LETTERHEAD)

MEDICAL SURVEILLANCE DECLINATION FORM

[IF AN EMPLOYEE DECLINES TO BE ENROLLED IN THE UIUC MEDICAL SURVEILLANCE PROGRAM, HE/SHE SHALL SIGN A DECLINATION STATEMENT THAT USES THE FOLLOWING TEXT.]

I ______, I AM ELIGIBLE AND HAVE BEEN GIVEN THE OPPORTUNITY TO ENROLL IN THE UIUC MEDICAL SURVEILLANCE PROGRAM. THIS WILL ENABLE ME TO RECEIVE SPECIFIC INITIAL, PERIODIC AND EXIT MEDICAL EXAMINATIONS FOR THE HAZARD IDENTIFIED ABOVE, AT NO CHARGE TO MYSELF AND AT A REASONABLE TIME AND PLACE.

HOWEVER, I DECLINE TO BE ENROLLED IN THIS PROGRAM AT THIS TIME. I UNDERSTAND THAT BY DECLINING THIS ENROLLMENT, I WILL NOT BE MEDICALLY MONITORED FOR OCCUPATIONAL EXPOSURE TO THIS HAZARD. I ALSO UNDERSTAND THAT IF IN THE FUTURE I CONTINUE TO HAVE OCCUPATIONAL EXPOSURE TO ______ AND I WANT TO BE ENROLLED IN THE UIUC MEDICAL SURVEILLANCE PROGRAM, I CAN DO SO AT ANY TIME AT NO CHARGE TO ME.

PRINT NAME:	
EMPLOYEE SIGNATURE:	DATE:
DEPARTMENT:	-
SUPERVISOR SIGNATURE:	DATE:



Appendix B – MEDICAL EXAMINATION REQUIREMENTS

The individual medical requirements for some common potential hazards are listed in alphabetical order in this appendix. However, the medical examination for an unlisted hazard is similar to a listed hazard in the same category or shall be determined by the healthcare provider.

Descriptions of medical examinations and tests included in this appendix have been generalized for all employees. Requirements of the medical examination and tests for an individual employee may be altered based on the health status of the employee and shall be at the discretion of the healthcare provider.

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ANIMAL CONTACT

Regulation:	NIH Publication 85-23	
Eligibility:	lity: Any employee who is involved in the direct care of animals or their living quarters or has direct contact with animals (live or sacrificed), their viable tissues, body fluids or waste.	
UIUC Eligible I	Employees:	
	As identified	

Medical	Examination Requirements:					
Initial:	Prior to assignment where exposure may occur					
	Exposure to all animal contact					
	 initial questionnaire including medical and work history 					
	complete physical examination					
	tetanus prophylaxis					
	tuberculosis screening					
	 any other test healthcare provider feels necessary 					
	Exposure to small and large animals					
	same as above					
	rabies prophylaxis					
	Q fever risk assessment					
	 toxoplasmosis risk assessment 					
	Exposure to non-human primates					
	same as above					
	rubeola prophylaxis					
	hepatitis vaccination					
	herpesvirus risk assessment					
Periodic:	Frequency to be determined on an individual basis					
	 tetanus prophylaxis every 10 years 					
	 serologic testing for rabies annually if rabies immunization has not been initiated 					
	 tuberculin skin test every 6 months if exposed to non-human primates 					
	 any other test healthcare provider deems necessary 					
Other:						
	 All work related injuries resulting from direct animal contact, all gastrointestinal, 					
	respiratory or dermal illnesses or all suspected work related allergies shall be					
	thoroughly investigated.					
	All details in the UIUC Hearing Conservation Program shall be followed if noise exposure					
	is a hazard.					
	 Respirator standards shall be applied if respirator worn. 					



ASBESTOS

	A50105			
Regulation:	29 CFR 1910.1001 and 1926.58			
Eligibility:	All employees who for a combined total of 30 or more days per year are engaged in			
	Class I, II and III work or are exposed at or above a permissible exposure limit. (0.1			
fiber/cc of air calculated as an 8 hour time-weighted-average).				
UIUC Eligible				
•	• F&S employees with current licenses through Illinois Department of Public Health as			
	asbestos workers or supervisors			
•	As identified			
Modical Exam	nination Requirements:			
	r to assignment where exposure may occur			
	 initial questionnaire including medical and work history 			
•	 complete physical examination of all systems with special emphasis on respiratory, 			
	cardiovascular and digestive system			
•				
	experienced physician with known expertise in pneumococciosis			
•	 pulmonary function tests including forced vital capacity and forced expiratory volume 			
	at 1 second			
•	 any other test healthcare provider deems necessary 			
Periodic: An	nually			
 periodic questionnaire including medical and work history 				
 complete physical examination of all systems with special emphasis on respiratory, 				
cardiovascular and gastrointestinal system				
• chest x-ray (PA view: see table below for frequency), to be read by a B-reader, or board				
certified/eligible radiologist or experienced physician with known expertise in				
	pneumococciosis			
•	 pulmonary function tests including forced vital capacity and forced expiratory volume 			
	at 1 second			
	 any other test healthcare provider deems necessary 			
Exit: Req	uired unless the medical examination was done within the last year			
•	······································			
 complete physical examination of all systems with special emphasis on respiratory, 				
	cardiovascular and digestive system			
• chest x-ray (PA view: see table below for frequency), to be read by a B-reader, or board				
certified/eligible radiologist or experienced physician with known expertise in				
	pneumococciosis			
 pulmonary function tests including forced vital capacity and forced expiratory volume 				
at 1 second				
 any other test healthcare provider deems necessary 				
Other: Respirator standards shall be applied if respirator worn.				
	Frequency of Chest X-Ray – Asbestos Exam			
	Age of Employee (years)			



Medical Surveillance Program

	15 to 35	35+ to 45	45+
Years Since First Exposure			
0 to 10	Every 5 years	Every 5 years	Every 5 years
10+	Every 5 years	Every 2 years	Every 1 years



CADMIUM

Regulation:	29 CFR 1910.1027
Eligibility:	Any employee who potentially is or may be exposed to airborne cadmium at or above the action level (5μg/m³ of air calculated as an 8 hour time-weighted average) for 30 or more days per year.
UIUC Eligible	Employees:
	As identified

Medical Examination Requirements: Within 30 days after initial assignment to a job with exposure to cadmium Initial: initial questionnaire including medical and work history complete physical examination of all systems with special emphasis on blood pressure, respiratory and urinary system chest x-rays (PA view) pulmonary function tests including forced vital capacity and forced expiratory volume • at 1 second biological testing including cadmium in blood and urine and beta-2 microglobulin in urine lab tests including CBC profile, renal profile and urinalysis any other test healthcare provider deems necessary Periodic: Within one year after the initial examination, at least biennially thereafter. Biological monitoring must be done at least annually periodic questionnaire including medical and work history • complete physical examination of all systems with emphasis on blood pressure, respiratory and urinary system • prostate palpation for males over 40 years old pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second biological testing including cadmium in blood and urine and beta-2 microglobulin in urine lab tests including CBC profile, renal profile and urinalysis ٠ any other test healthcare provider deems necessary Exit: Required unless medical examination was done within the last six months • same as periodic medical examination chest x-ray Other: • Respirator standards shall be applied if respirator worn. Follow up procedures for actions triggered by results of biological testing shall be according to the regulations. Biological testing shall be done at "participating laboratories" that conform to the ٠ provisions of the non-mandatory protocol specified in the regulations.

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CRYSTALLINE SILICA

Regulation:	29 CFR 1910.1053 and 1926.1153
Eligibility:	Each employee who will be required under this section to use a respirator for 30 or
	more days per year.
UIUC Eligible	Employees:
•	As identified
Medical Exam	nination Requirements:
Initial: Pric	or to assignment where exposure may occur that requires respiratory protection
•	 initial questionnaire including medical and work history
Periodic: Oc	curs every 3 years or as directed by PLHCP
Initial & Perio	dic:
•	complete physical examination of all systems with special emphasis on respiratory
	system
•	 chest x-rays (PA view) and B read
•	 pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second
•	 testing for latent tuberculosis infection
•	 any other test healthcare provider deems necessary
Exit: Red	quired unless medical examination done within the last 18 months
	same as initial & periodic
•	

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FORMALDEHYDE

Regulation:	29 CFR 1910.1048
Eligibility:	Any employee who potentially is or may be exposed to airborne hexavalent chromium at or above the action level (0.5ppm of air calculated as an 8 hour time-weighted average) or short term exposure limit (2.0ppm of air calculated as a 15 minute STEL), or employees who develop signs and symptoms of overexposure to formaldehyde, or employees exposed to formaldehyde in emergencies
UIUC Eligible E	Employees:
•	As identified

Medical Examination Requirements:

Initial: Prior to initial assignment

- initial questionnaire including medical and work history
- complete physical examination of all systems with special emphasis on respiratory system, skin, and eyes
- pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second
- lab tests including CBC profile, blood lead level, blood zinc protoporphyrin urinalysis, SMAC-20, and urine analysis
- vision screening
- any other test healthcare provider deems necessary

Periodic: Annually

• same protocol as periodic

Emergency:

- as soon as possible to all employees who have been exposed to formaldehyde in an emergency
- initial questionnaire including medical and work history
- complete physical examination with emphasis on the upper or lower respiratory problems, allergic conditions, skin reaction or hypersensitivity, and any evidence of eye, nose, or throat irritation
- any other test healthcare provider deems necessary
- Exit: Required unless medical examination done within the last 6 months
 - same as periodic

Other: Respirator standards shall be applied



HAZARDOUS WASTE OPERATIONS

Regulation	1: 29 CFR 1910.120
Eligibility:	All employees who are or may be exposed to hazardous substances or health hazards a or above the established permissible exposure limit for 30 days or more a year.
UIUC Eligit	ble Employees:
Ū	 Division of Research Safety, Environmental Chemical Specialists and Hazardous Waste Technicians Division of Safety and Compliance, Environmental Compliance employees As identified
	camination Requirements:
Initial:	Prior to assignment where exposure may occur
	medical history
	 complete x-ray (PA and lateral view)
	• EKG
	 pulmonary function test including forced vital capacity and forced expiratory volume at 1 second
	audiogram
	 eye exam with depth, vision and color evaluation
	 treadmill stress exercise test (if required)
	 lab tests including SMAC-20, CBC profile and urine analysis
	 any other test healthcare provider deems necessary
Periodic:	Annually; however, complete initial examination should be performed every 5 years for employees under 40 years of age and once every 2 years for employees over 40 years of age. Employees holding administrative jobs which limit exposure to chemicals may only require a complete examination every 3 years. • medical history
	complete physical examination
	• pulmonary function test including forced vital capacity and forced expiratory volume at 1 second
	audiogram
	 eye exam with depth, vision and color evaluation
	 treadmill stress exercise test (if required)
	 lab tests including SMAC-20, CBC profile and urine analysis
	 any other test healthcare provider deems necessary
Exit:	Required unless a medical examination was done within the last six monthssame as initial medical examination
Other: Re	spirator standards shall be applied if respirator worn.

Other: Respirator standards shall be applied if respirator worn.

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	LEAD
Regulatio	n: 29 CFR 1910.1025 and 1926.62
Eligibility	Any employee who is or will be exposed to an airborne exposure of lead at or above the action level $(30\mu g/m^3 of air over an 8 hour time-weighted-average)$ for more than 30 days per year.
UIUC Eligi	ble Employees: As identified
Medical E	xamination Requirements:
Initial:	Prior to assignment where exposure may occur
	 questionnaire including medical and detailed work history with particular attention to next load experience
	past lead exposure
	 complete physical examination of all systems with special emphasis to teeth, gums, hematologic, gastrointestinal, renal, cardiovascular and neurological systems
	blood pressure, pulse, weight
	chest x-ray (PA and lateral view)
	 EKG pulmonary function tests including forced vital capacity and forced expiratory volume
	• pullionary function tests including forced vital capacity and forced expiratory volume at 1 second, if respirator worn
	 lab tests including CBC profile, blood lead level, blood zinc protoporphyrin urinalysis any other test healthcare provider feels necessary
Periodic:	At least annually, if blood sampling test conducted at any time during the preceding 12
r criouic.	months indicated a blood lead level at or above 40 μ g/100g of whole blood; as soon as
	possible upon notification by an employee that he/she has developed signs or symptoms
	commonly associated with lead intoxication, that the employee desires medical advice
	concerning the effects of current or past exposure to procreate a health child, or that the
	employee has demonstrated difficulty in breathing during a respirator fit test or during use;
	and as medically appropriate for each employee either removed from exposure to lead due
	to risk of sustaining material impairment to health
	same as initial medical examination
Exit:	Not required if medical exam done within the last year.
0.1	
Other:	Braha da da anticipativa franchica di sul da sul da successiva da da la sub-la da da successiva
	Biological monitoring for blood lead and zinc protoporphyrin level shall be made
	available: to any employee that is occupationally exposed on any day to lead at or
	above the action level; at least every 2 months and every 6 months thereafter to any
	employee who is exposed to an airborne exposure of lead at or above the action level
	for more than 30 days in any consecutive 12 months; at least every 2 months for each
	employee whose last blood sampling and analysis indicated a blood lead level of
	$40\mu g/100g$ of whole blood (this frequency shall continue until two consecutive blood
	samples and analyses indicate a blood lead level below $40\mu g/100g$ of whole blood) and
	at least monthly during the removal period of each employee removed from exposure
	to lead due to an elevated blood lead level.

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- Conditions of temporary medical removal and return of employee to former job status shall be followed as detailed in the regulations.
- A multiple physician review mechanism shall be available to the employee. ٠
- Employee shall be notified of results within 5 working days after receiving the biological ٠ results.
- Respirator standards shall be applied if respirator worn.

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	NOISE
Regulatio	on: 29 CFR 1910.95 and 1926.52
Eligibility	Any employee who potentially is or may be exposed to noise at or above the action level (80 decibels calculated as an 8 hour time-weighted-average).
UIUC Elig	ible Employees:
	As identified
Medical I	Examination Requirements:
Initial:	Prior to or within 6 months of an employee's first exposure. (Also called baseline audiogram).hearing test
	any other test healthcare provider deems necessary
Periodic:	 Annually. The annual audiogram shall be compared to the baseline audiogram to determine a standard threshold shift (STS). A retest will be given within 30 days with an average STS of 10 db in either ear. The retest exam will be considered as the annual audiogram. An employee must be notified in writing of an STS within 21 days same as initial medical examination
Exit:	Required unless medical exam completed within the last year.
Other:	
	• All procedures detailed in the UIUC Hearing Conservation Program shall be followed.
	 Non-occupational noise exposure shall be avoided during a 14-hour period immediately prior to testing.
	• An annual audiogram may be substituted for a baseline audiogram when the STS shift is
	persistent or a significant improvement over the baseline audiogram.
	 Audiometric tests shall be conducted by a license or certified audiologist,
	otolaryngologist, or other physician, or by a technician who is certified by the Council of
	Accreditation in Occupational Hearing Conservation, or who has satisfactorily
	demonstrated competence in administering audiometric examinations.



	RESPIRATOR
Regulation:	29 CFR 1910.134
Eligibility:	Any employee wearing or who may need to wear a respirator.
UIUC Eligible	Employees:
•	asbestos workers
•	As identified
Medical Exam	nination Requirements:
Initial: Prie	or to wearing respirator
•	 medical evaluation using medical questionnaire, 29 CFR 1910.134, Appendix C or it's equivalent, and/or
•	
•	 pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second
•	blood pressure
•	pulse
•	• other tests the healthcare provider deems necessary to determine fitness
Periodic:	
•	 periodic medical evaluation is not required in 29 CFR 1910.134 for annual fit testing and training.
•	 at the frequency required by OSHA substance specific standards
•	as deemed necessary by the healthcare provider
	same as initial medical examination



Medical Surveillance Program

Document Revisions

Revision Dates

Updated document template, added information for online respirator medical November 30, 2020 clearance, and updated Appendix B with current medical examination requirements.

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