Employee Medical Monitoring Program

California State University,

Long Beach

A Program for monitoring the health of Occupationally Exposed Personnel in accordance with Cal/OSHA Regulations and other applicable standards.

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Safety, Risk Management and Information Security
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Medical Monitoring

Introduction

Medical surveillance in the occupational setting is the systematic collection and analysis of the health information on groups of workers potentially exposed to harmful agents, for the purpose of identifying health effects at an early and hopefully reversible stage. Biological monitoring, or the measurement of tissue levels of contaminants or metabolites, is often included as part of a medical monitoring program, even though these tests do not measure adverse health outcomes.

The primary goal of the occupational health profession is to develop and implement methods and programs that will provide employees with a safe and healthful workplace. Employee health is fostered through keeping employees free of exposure or maintaining employee exposures at “acceptable levels.”

**Engineered equipment or processes and administrative controls are the primary methods for controlling these exposures.** The use of personal protective equipment, such as respirators, is often indicated when engineered controls or administrative procedures are not feasible or reliable. In accordance with a general program of occupational safety and health, medical evaluation is required whenever respiratory protection is used.

The California Code of Regulations provides that employees with potential exposures to certain harmful agents shall receive medical monitoring examinations. These examinations serve the purpose of detecting adverse health effects which could possibly be related to workplace exposures. Early detection of disease will result in earlier treatment and will allow for cessation of additional exposures that could aggravate a potentially serious medical condition. In addition to monitoring of employee health, biological monitoring may also be necessary. Biological monitoring provides a correlation between external exposures and internal exposure. Biological monitoring provides a reliable indication of health risk to an individual worker.

**CSU policy on Mandatory Medical Examinations-Personnel Actions of Failure of Employee to Comply:**

It is the policy of the CSU that medical examinations mandated by federal and state laws and regulations be strictly enforced by each campus. Failure or refusal of an employee to undergo required medical testing as determined by campus management shall constitute a failure or refusal to perform the normal and reasonable duties of the position. In such event, the campus has the authority to commence appropriate disciplinary action up to and including termination of employment.
Overview

Medical surveillance provides a clinical base of information that is used to evaluate an employee’s fitness to work in various hazardous environments, to identify anomalies in a person’s medical history that may be related to potential impaired health, and to evaluate a person’s capability to use respiratory protective equipment. This base of medical information includes personal health history, exposure history, physical examination results, laboratory analyses and the results of screening and special tests.

Examination

- The Initial Baseline Examination:

  The purpose of the baseline examination is pre-placement screening. All effected employees shall be given a baseline examination before being assigned to work with respirators or in occupations with known potentially hazardous exposures or Cal / OSHA regulated substances.

- Periodic / Annual Examination

  All personnel who have taken the initial pre-placement examination and have reviewed clearance by the examining physician shall be re-examined periodically in accordance with hazard-specific regulations. The date of each periodic examination should fall on or as closely as possible to, the anniversary of the previous examination.

  Any employee who has not participated in potentially hazardous work or who is no longer required to use a respirator during the 12 month period following his/her last annual examination, and who is not expected to continue to participate, may discontinue participation in the medical monitoring program as determined by campus Safety, Risk Management and Information Security.

- Exit Examination

  Upon termination of employment, employees who have worked with Cal/OSHA regulated materials and/or carcinogens shall undergo an exit examination consistent with their pre-employment medical evaluation. If the employee has had multiple positions during his/her tenure that have resulted in different medical evaluations, the employee’s exit medical examination will consist of a compilation of all the medical tests received
during the employee’s entire tenure with the University. Additionally, the physician can recommend other tests as applicable.

The process of identifying/notifying employees and scheduling all exit medical examinations shall be coordinated between University Staff Human Resources (SHR) and SRM:

- SHR will notify, in writing, any affected employee informing them of their eligibility to participate in an exit medical examination. This notification will include a declination statement for the employee if he/she does not wish to participate. SRMIS will also be provided a copy of this notification. In order to ensure that the list of active employees participating in the University’s medical monitoring program is accurate, SRM will update the list and provide it to SHR in January of each calendar year.
- SRMIS will review the notification to ensure the employee is indeed eligible for a medical examination. SRM will then contact the employee, schedule the physical and maintain germane records of the examination. A copy of the examination results, including recommendations from the physician, will be provided to the employee and Staff Human Resources upon receipt by SRM.

If a medical exam has been administered to the employee within one year of exit, SRM shall determine if an exit medical examination is warranted. However, this exemption will not be allowed if the employee has been exposed to any Cal/OSHA regulated material and/or carcinogen during this period.

- Special / Emergency Examination (situational medical clearance)

Special testing may be required on certain projects due to the potential for exposure to specific substances. This may be necessary where the potential for heat or cold stress exists, or after an exposure that results in a toxicity reaction. The need for special testing will be assessed on an ongoing basis. Emergency testing may be necessary in the event the of employee exposure.

- Physician’s reports

Examing physicians will use the information provided by the employee in the questionnaire, the examination results, and the results of the laboratory tests to determine if any work restrictions or occupational health problems appear to be present. The physician must send a report of the examination directly to the employee as will the campus medical record custodian who will maintain the employees records. These records are confidential and can only be viewed by the employee, the employee’s
representative, and authorized representatives of the Chief of the Division of Occupational Safety and Health.

Non-work related health issues may arise during the course of the medical evaluation. The examining physician may recommend that employees see their family doctor or a specialist. Any additional tests required to investigate non-work related health issues will be the employee’s responsibility.

Objectives

- The medical monitoring program has several specific objectives. These objectives are to:
  
  Evaluate the health status of potential employees, and determine whether they can perform the job in a safe and effective manner.

  Detect exposure-related adverse health effects at an early and hopefully reversible stage so that occupational diseases can be prevented, and proper medical care can be rendered, if necessary.

  Periodically assess employee suitability for ongoing or new assignments that involve potential contact with hazardous agents.

  Correlate past occupational or environmental exposures with future workplace activities and exposures, to arrive at an opinion on the risk that the job might represent to the health status of the individual.

  Provide a medical monitoring program that complies with all the pertinent Federal, State, and local regulations.

  Identify unrecognized effects of exposure by continually evaluating group employee health data to detect possible adverse health trends.

Access to Employee Medical Records

Employees, their designated representatives, and authorized representatives of Cal/OSHA have full right of access to relevant exposure and medical records. Designated representatives must be given the employees written authorization to exercise the right of access. The legal representative of a deceased or legally incapacitated employee may exercise full right of access to all of an employee’s medical record.

All requests for employee medical or exposure records shall be in writing to the University Medical Record Custodian. A copy or the requested records shall be provided to the employee or designated representative at no cost and no later
than fifteen (15) days after the request is made. Copies of x-ray film, if a part of the medical record, will also be provided subject to availability. Whenever a record has previously been provided without cost to the employee or designated representative, the university may charge for the record search and the cost of additional copies.

In the rare case that a request for records is denied, the employee may appeal the denial to the Department of Occupational Safety and Health (DOSH), State of California. The chief of DOSH will make a decision on the appeal and may issue an order to release the information to the employee or their designated representative.

- Designated representatives must be given the employee's written authorization to exercise rights of access. A written authorization shall contain the following:
  1. The name and signature of the employee authorizing the release of the medical information.
  2. The date of the written authorization.
  3. The name of the individual or organization authorized to release the medical information.
  4. The name of the individual or organization authorized to receive the medical information.
  5. A general description of the medical information that is authorized to be released.
  6. A general description of the purpose for release of the medical information, and a date or condition upon which the written authorization will expire. The employee or representative will be provided a copy of the requested medical records at no charge to the employee.

**Retention, Recordkeeping and Confidentiality**

An important part of the Employee Medical Monitoring Program is the confidentiality of the medical and exposure records generated by the program. This program has been carefully designed to ensure that the medical information for individual employees be made available only to medical professionals (including medical records services personnel) and the employee. Specifically, individual medical information is not available to CSULB management personnel, and in the absence of a subpoena, will not be made available to any person other than the employee or their
designated representative of State or Federal regulatory agencies, e.g. Cal / OSHA.

To ensure that the employee has a complete understanding of these confidentiality procedures and the limited uses that will be made of the employee’s medical data, each CSULB employee enrolled in the Medical Monitoring Program is given an Authorization to Release Medical Information form. Employees are asked to sign the form before beginning an exam. The signed authorization form allows the occupational medicine provider to send the records to the campus.

Often, an employee may have undergone a previous medical examination. This information may be of value to the physician performing the exam. If the employee authorizes, copies of these old records may be obtained. The form, Authorization to Release Previous Medical Information, is to be used for this purpose.

Medical and exposure records are maintained for 30 years after the termination of employment at CSU, Long Beach.

**Definition of Medical and Exposure Records**

**Medical records** include the following:

1. Medical and employment questionnaires and histories.
2. The results of medical examinations and laboratory tests.
3. Medical opinions and diagnosis, progress rates and recommendations.
4. First aid records.
5. Description of treatment and prescriptions.
6. Employee medical complaints.

**Medical records** do not include medical information in the form of:

1. Physical specimens (e.g. blood or urine samples) which are routinely discarded as part of normal medical practice.
2. Records created solely in preparation for litigation which are protected from discovery under applicable rules of procedure on evidence.
3. Records concerning voluntary employee assistance programs.
Exposure records

1. A record containing measurements or monitoring results of the amount of a toxic substance or harmful physical agent to which the employee is or has been exposed.

2. In the absence of directly relevant records, records of other employees with past or present job duties or working conditions related to or similar to those of the employee, may be used to indicate the amount and nature of the toxic substances or harmful physical agents to which the employee is or has been subjected.

3. Exposure records to the extent necessary to reasonably indicate the amount and nature of the toxic substance or harmful physical agent at workplaces or working conditions to which the employee is being assigned or transferred.
Medical Monitoring Program Operations

- Routine Examinations

Safety, Risk Management and Information Security identifies employees covered by these regulations and coordinates the completion of baseline, periodic / annual and exit examinations with the employee or his or her supervisor.

Safety, Risk Management and Information Security completes the Employee Medical Monitoring Examination Appointment form, which includes pre-examination instructions. One copy is given to the employee, another is sent to the employee’s appropriate administrator.

Safety, Risk Management and Information Security prepares a package for the employee that includes:

1. Medical Monitoring Program Exam Appointment and Pre-Examination Instructions.
3. Authorization to release Previous Medical Information (if applicable).
4. Physical Examination Form.
5. The Health Status Report Form.
6. The Employee Medical Examination Findings Form.

The employee completes all applicable forms prior to the examination and observes the pre-exam instructions.

The employee attends the appointment.

The examining Physician completes Health Status Report Form and forwards it to Safety, Risk Management and Information Security.

The examining Physician prepares the Employee Medical Findings Form and forwards it directly to the employee.

The examining Physician forwards records to the University Custodian of Medical Records.

Safety, Risk Management and Information Security reviews the Health Status Review Form and initiates appropriate action.
Special Examinations

If situations arise in which an employee may have experienced a hazardous exposure or alleges symptoms, Safety, Risk Management and Information Security will evaluate the potential workplace problems and may arrange for appropriate medical diagnosis and treatment if indicated or required.

Safety, Risk Management and Information Security will contact the examining physician who will coordinate investigations and treatment to determine if overexposure to a hazardous substance has occurred.

An Incident Report detailing the hazardous exposure will be completed by the appropriate administrator and forwarded to Safety, Risk Management and Information Security.
Medical Monitoring

Examination Protocols

- Comprehensive Medical Examination

  **Identifiers:** Name, birth date, gender, job title, department, etc.

  **Personal medical history:**

  - Medications
  - Allergies
  - Illness, injuries, hospitalizations, surgeries
  - Smoking, alcohol, drug histories
  - Medical conditions—specifically lung disease, heart disease, liver disease, skin conditions, neurological condition

  **Family medical history:** specifically cancers and lung, heart, liver, kidneys or neurological diseases

  **General Appearance and Physical Development and Posture:** Height and weight are recorded.

  **Head-Eyes:** Titmus vision testing including near, far, color vision and depth, lateral phoria, esophoric, exphoric and vertical phoria (right and left hemisphere) and peripheral vision. Also noting ptosis, discharge, visual fields, ocular muscle imbalance, presence of corneal scarring, exophthalomos or strabismus uncorrected by corrective lenses. If the applicant wears contact lenses, it will be noted whether they have good tolerance and has adapted to their use. All vision testing is done without corrective lenses and then with the corrective lenses. This is done in order to determine a baseline vision as well as effectiveness of corrective lenses. Note that certain positions do not allow the use of contact lenses.

  **Ears:** Audiometric tests shall be pure tone, air conduction, hearing threshold examinations with test frequencies including as a minimum, 500, 1000, 2000, 3000, 4000 and 6000 Hz. Tests at each frequency shall be taken separately for each ear. Audiometric screening should meet
specifications of, and be maintained and used in accordance with ANSI, S 3.6-1969. Audiometry testing room should meet the requirements for maximum allowable octave-band sound pressure levels for audiometric test rooms. In addition, audiometric calibration should be checked acoustically on an annual basis according to Title 8 California Code of Regulations, Section 5097 Appendix D. Ear examination also includes noting any evidence of mastoid or middle ear disease, discharge symptoms of aural vertigo or Meniere’s Syndrome.

**Throat:** Examination includes detection of any deformities of the throat, larynx, masses or nodes which may interfere with normal breathing and eating.

**Heart:** Auscultation by stethoscope for heart sounds, presence of murmurs, clicks, rubs, additional heart sounds and dysrhythmias. PMI will be ascertained and full cardiac history is obtained for symptoms such as dyspnea, palpitations, syncope. Blood pressure determinations are also made.

**Pulmonary:** Examination of lungs and thoracic area. Breath sounds are examined specifically noting any signs of chronic obstructive pulmonary disease, congestive heart failure and history of lung disease like asthma or bronchitis.

**Gastrointestinal System:** Complete history, and current signs and symptoms will be noted. Noting will be made specifically for presence of hernia, scars, weakness or injuries, location, size and character of any abdominal masses. Bowl sounds will also be noted. A rectal examination with stool guaiac will be obtained on all male employees over 50 years of age.

**Genitourinary:** Examination for presence of infection or other abnormal findings including urinalysis (noting uncontrolled diabetes, presence of albumin).

**Neurological:** Examination includes pupil reflexes for light and accommodation, sensory, vibratory and positional movements.

**Extremities:** Close examination of all extremities for color, warmth, presence of peripheral pulses and skin tugor. Any deformities, paralysis or varicose veins and leg muscle weakness will be documented.

**Spine:** History of pain, injuries, and physical examination for deformities will be performed.
• Additional Tests as Required

Resting 12-lead Electrocardiogram: Electrocardiograms will be read by a Board Certified Cardiologist.

Treadmill EKG: or MASTER STEP TEST

Pulmonary Function Testing: To include (at the discretion of the examining physician):

- FVC- Forced Vital Capacity
- FEV 1.0-Forced Expired Volume in one second
- FEV 3.0-Forced Expired Volume in three seconds
- FEF 25-75 - Forced Expiratory flow
- RV - Residual Volume

Results of pulmonary function testing are calibrated in prediction-equations. Degree of respiratory impairment is assessed. Some obstructive diseases that may be associated with abnormal findings include: chronic bronchitis, asthma and emphysema. Restrictive diseases like pleural thickening, pulmonary fibrosis and congestive heart failure are associated with other abnormalities found in pulmonary function testing. All pulmonary function testing equipment must be approved by the American Thoracic Society and the operators must be certified by NIOSH (National Institute for Occupational Safety and Health).

Audiometric Testing:

Audiometric tests shall be pure tone, air conduction, hearing threshold examinations with test frequencies including as a minimum, 500,1000, 2000, 3000, 4000 and 6000 Hz. Tests at each frequency shall be taken separately for each ear. Audiometric screening should meet specifications of, and be maintained and used in accordance with ANSI, S 3.6-1969. Audiometry testing room should meet the requirements for maximum allowable octave-band sound pressure levels for audiometric test rooms. In addition, audiometric calibration should be checked acoustically on an annual basis according to Title 8 California Code of Regulations, Section 5097 Appendix D. Ear examination also includes noting any evidence of mastoid or middle ear disease, discharge symptoms of aural vertigo or Meniere’s Syndrome.
Complete Blood Count (RBC, Hgb, HCT, WBC, differential)

Blood Chemistry Panel, Requiring the following tests:
- Glucose
- Sodium
- Potassium
- Chloride
- Creatinine
- BUN
- Phosphate
- Uric acid
- Cholesterol
- Total protein
- Calcium
- Globulin
- Triglycerides
- Albumin
- Total Bilirubin
- Alkaline Phosphatase
- G-Glutamyl Transpep
- Transaminase (AST ALT)
- LDH
- Sickle Cell Index

All laboratory testing is performed by a CLIA approved and licensed clinical laboratory.

Chest X-Rays:  Posterior / anterior view x-rays. Radiologist interpretation should be done by a Board Certified Radiologist. For employees with potential asbestos exposure, Certified “B” readers will interpret x-rays.

Urinalysis (with Microscopy) to test for:
- Specific Gravity
- pH
- Acetone
- Protein
- Albumin
- Glucose

Biological Monitoring for Lead:
- Blood lead level
Hemoglobin and hematocrit, red cell indices and peripheral smear morphology

Zinc protoporphyrin (ZPP)

Blood Urea nitrogen and creatinine

**Red blood cell and Plasma Cholinesterase Tests**

**Stool Specimen**

Submitted for culture and examination for OVA and parasites.
Specific Medical Monitoring Standards and Protocols

This section contains medical monitoring standards and protocols that apply to current or anticipated employee exposures.
This Section Contains Medical Monitoring Standards and Protocols for the following Programs:

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</tr>
<tr>
<td>Respiratory Protection</td>
<td>8CCR5144</td>
</tr>
<tr>
<td>Lead</td>
<td>8CCR5216 &amp; 1532.1</td>
</tr>
<tr>
<td>Diving</td>
<td>8CCR6053</td>
</tr>
<tr>
<td>Bloodbourne Pathogens</td>
<td>8CCR5193</td>
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<tr>
<td>Animal Handling</td>
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<tr>
<td>Asbestos</td>
<td>8CCR5208</td>
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<tr>
<td>Pesticides</td>
<td>3CCR6728</td>
</tr>
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</table>
Occupational Noise:

Authority: Title 8, Section 5097, California Code of Regulations (CCR)

- Covered employees:
  All employees whose workplace noise exposures equal or exceed the action level.

- Examinations:
  Shall be performed by a licensed 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, obtaining valid audiograms, and properly using maintaining and checking calibration and proper functioning of the audiometers being used. The technician must be responsible to an audiologist, otolaryngologist or physician.

- Frequency:
  Within 6 months of first exposure. At least annually after obtaining the valid baseline audiogram. If using a mobile test van, exams shall be conducted within one year of first exposure.

- Protocol:
  Testing to establish a baseline audiogram shall be preceded by at least 14 hours without exposure to workplace noise. This requirement may be met by wearing hearing protectors of 80 dBA or below. The employer shall inform the employee of the need to avoid high levels of non-occupational noise exposure during the preceding 14 hours.

  The audiogram shall be compared to the baseline to determine if a standard threshold shift (STS) has occurred. A retest may be obtained within 30 days if a STS has occurred and consider the results of the retest an the annual audiogram.
A STS is defined as a change in hearing threshold relative to the baseline audiogram of an average of 10 dB or more at 2000, 3000, 4000 Hz in either ear. Allowance may be made for presbycusis.

- **Physician's Report:**
  If a STS has occurred, the employee shall be notified in writing within 21 days; and shall be referred for a clinical audiological evaluation, an otological examination, as appropriate, if additional testing is necessary.

- **Employers Responsibility:**
  If STS has occurred, the employer shall institute the wearing of hearing protection and / or retraining the employee in the proper use of hearing protection

- **Examination Protocols**

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<th>Pre-Exposure or Pre-Placement</th>
<th>Annual</th>
<th>Periodic</th>
<th>Exit</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Audiometric Examination</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
Respiratory Protection

Authority: Title 8, Section 5144, California Code of Regulations (CCR)

- Covered employees:
  Any employee who has the occasion to use any form of respiratory protective equipment.

- Examinations:
  Persons should not be assigned to tasks requiring the use of respirators unless it has been determined that they are physically able to perform the work while using the required respiratory equipment. A licensed physician shall determine what health and physical conditions are pertinent.

- Frequency:
  The medical status of persons assigned use of respiratory equipment shall be reviewed biannually.

- Protocol:
  Mandatory tests:
  1. Comprehensive medical examination with emphasis on respiratory and cardiovascular condition.
  2. Pulmonary function test.

  Optional tests:
  1. Singleview (PA) Chest X-Ray
  2. Electrocardiogram

- Physicians Report
  Shall indicate if there are any restrictions to the wearing of respiratory protective equipment; shall indicate what levels of respiratory equipment may be worn.
### Examination Protocols

<table>
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<th>Periodic</th>
<th>Exit</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive medical examination</td>
<td>X</td>
<td>Every 2 years</td>
<td>X(1)</td>
<td>(1) if not conducted within previous 12 months</td>
<td></td>
</tr>
<tr>
<td>Pulmonary function test</td>
<td>X</td>
<td>X</td>
<td>X(2)</td>
<td>X(1,2)</td>
<td>(2) for SCBA and airline supplied wearers only.</td>
</tr>
<tr>
<td>Chest X-Ray</td>
<td>X(2)</td>
<td>X(2)</td>
<td>X(2)</td>
<td>X(1,2)</td>
<td>(3) At the examining physicians discretion where there is justifiable concern regarding health risk from use of respirator.</td>
</tr>
<tr>
<td>EKG</td>
<td>X(2)</td>
<td>X(2)</td>
<td>X(2)</td>
<td>X(1,2)</td>
<td></td>
</tr>
<tr>
<td>Stress Test</td>
<td>X(3)</td>
<td>X(3)</td>
<td>X(3)</td>
<td>X(3)</td>
<td></td>
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</table>

**Note:**

Where employees are authorized to use a filtering face piece, single use respirator rated N95,R95, or P95 or below under voluntary use criteria specified in CCR, Title 8, Article 107, section 5144 (c) and mandatory Appendix D, and where that use is not intended to provide respiratory protection to employees for any criteria compound, chemical, particulate or biological material, and where that use will constitute less than 30 days in any one calendar year (Jan. 1 to Dec. 31), those employees may submit a medical evaluation instrument (questionnaire) to be evaluated by a physician or other licensed health care professional. At the discretion of the evaluating physician or other licensed health care professional, a medical clearance to use single use filtering face piece respiratory protection may be issued without a physical examination or pulmonary function test.

The physician or other licensed health care professional shall return a clearance form to Safety, Risk Management, and Information Security that declares the employee cleared to wear a single use, filtering face piece respirator. The completed medical history questionnaire shall be sent under separate cover to the employee.
Lead

Authority: Title 8 California Code of Regulations (CCR), Sections 5208 & 5216

Employees Covered:

University employees engaged in lead-related work tasks that require personal exposure monitoring as defined by Cal-OSHA (8CCR, 1532.1).

All employees occupationally exposed on any day to lead at or above the action level.

All employees who are or may be exposed at or above the action level for more than 30 days in any consecutive 12 months.

Examination Required:

- Comprehensive medical examination
- Biological monitoring (see below for required tests)

Frequency:

Medical examinations shall be performed prior to initial exposure and annually for each employee:

1. Additional Examinations and biological monitoring shall be performed as soon as possible when either the employee has developed signs or symptoms commonly associated with lead intoxication, desires medical advice concerning reproductive hazards, or the employee has demonstrated difficulty in breathing during a respirator fitting or during use and as medically appropriate for each employee removed from exposure to lead.

2. At least every 2 months for each employee whose last blood lead level was at or above 40ug/100 g until two samples in a row are less than 40ug/100g.

3. Monthly during the period an employee is removed from exposure due to an elevated blood lead level.

Biological Monitoring Shall Include:

- blood lead level;
- hemoglobin and hematocrit, red cell indices and peripheral smear morphology;
- zinc protoporphyrin (ZPP);
blood urea nitrogen and creatinine;

Urinalysis with microscopic examination

Any laboratory or other test which the examining physician deems necessary by sound medical practice.

Medical removal protection:

The employer shall remove an employee from work having an exposure to lead at or above the action level on each occasion that a periodic and follow-up blood sampling test conducted indicate that the employee’s blood level is at or above 50 ug/100 g.

The employer shall remove an employee from work having an exposure to lead at or above the action level on each occasion that at a final medical examination the employee has a detected medical condition which places the employee at increased risk of material impairment to health form exposure.

Return to former job status:

The employee shall be returned to former job status;

- if removed for a blood lead level at or above 80 ug/100 g when the employee’s blood lead level is at or below 60 mg/100 g of whole blood;

- if removed for a level at or above 70 ug/100 g when two consecutive tests indicate the blood lead level is at or below 50 mg/100 g;

- if removed for a level at or above 50 ug/100 g when two consecutive tests indicate the blood lead level is at or below 40 mg/100 g;

- when removed due to a final medical determination when a subsequent final medical determination states that the employee no longer has a detected medical condition which places the employee at increased risk of material impairment to health.
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<tr>
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<th>Exit</th>
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</tr>
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<tbody>
<tr>
<td>Comprehensive Medical Examination</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td>(1) As required by blood level tests.</td>
</tr>
<tr>
<td>Biological Monitoring for Lead</td>
<td>X</td>
<td>X</td>
<td>X(1)</td>
<td></td>
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<tr>
<td>Urinalysis</td>
<td>X</td>
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<td></td>
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</table>
Diver Examinations

Authority: Title 8, Section 6053, California Code of Regulations (CCR)

- Employees Covered:
  Dive team members who are likely to be exposed to hyperbaric conditions, have passed a current physical examination and have been declared legally fit to engage in diving activities.

- Examination:
  Performed by or under the supervision of a licensed physician without cost to the employee.

- Frequency:
  Before an employee may dive, unless an equivalent medical examination has been given within the preceding 12 months and the employer has obtained the results of the examination and an opinion from the examining physician of the employee's medical fitness to dive; at one year intervals from the date of initial examination or last equivalent examination; after an injury or illness requiring hospitalization of more than 24 hours; or after an episode of unconsciousness related to diving activity.

- Information provided to the physician:
  A copy of the medical requirements of this standard; and a summary of the nature and extent of the diving conditions to which the dive team member will be exposed, including diving modes and the level of physical activity which is expected.

- Protocol:
  The Following examinations and tests shall be conducted annually or within 12 months of a dive (except as noted).
  1. Diving-related medical history
  2. Comprehensive physical examination
  3. Tests required in the following table:
<table>
<thead>
<tr>
<th>Test</th>
<th>Initial Exam</th>
<th>Annual Exam</th>
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<tbody>
<tr>
<td>Chest x-ray</td>
<td>X</td>
<td>(b)</td>
</tr>
<tr>
<td>Master’s step test (or equivalent)</td>
<td>X</td>
<td>X (a)</td>
</tr>
<tr>
<td>CBC</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Sickle cell index</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Urinalysis</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

(a) for those age 35 or older
(b) every two years

Any additional tests the physician considers necessary.

Medical examinations conducted after an injury or illness requiring hospitalization of more than 24 hours or after an episode of unconsciousness related to diving activity shall be appropriate to nature and extent of the injury or illness as determined by the examining physician.

- Physician’s written report:
  The examining physician’s opinion of the employee’s fitness to dive, including any recommended restrictions or limitations. The report shall not include diagnosis or details unrelated to diving. The employer shall provide the employee with a copy of the physician’s report.

- The following disorders may restrict or limit occupational exposure to hyperbaric conditions depending on severity, presence of residual effects, response to therapy, number of occurrences, diving mode, or degree and duration of isolation:
  
  History of seizure disorder other than early febrile convulsions.
  
  Malignancies (active) unless treated and without recurrence for 5 years.
  
  Chronic inability to equalize sinus and/or middle ear pressure.
  
  Cystic or cavitary disease of the lungs.
  
  Impaired oxygen function caused by alcohol or drug use.
  
  Conditions requiring continuous medication for control (e.g. antihistamines, steroids, barbiturates, mood altering drugs or insulin).
  
  Meniere’s disease.
  
  Hemoglobinopathies.
Obstructive or restrictive lung disease.

Vestibular end organ destruction.

Pneumothoax.

Cardiac abnormalities (e.g. pathological heart block, valvular disease, intravalvular conduction defects other than isolated right bundle branch block, angina pectoris, arrhythmia, coronary artery disease).

Juxta-articular osteonecrosis.
Bloodborne Pathogens
Authority: Title 8, Section 5193, California Code of Regulations (CCR)

- Employees covered:
  
  All employees who could be “reasonably anticipated” to have occupational exposure to blood or other potentially infectious materials (OPIM)s.

- Examinations:
  
  No specific physical examinations are required. At the employee’s discretion, specific prophylaxis interventions made be given, declined, or deferred. A list of those interventions follows in this document.

  All medical evaluations and procedures are to be conducted under the supervision of a licensed physician or by under the supervision of another licensed healthcare professional. A “licensed healthcare professional” is defined as a person whose legally permitted scope of practice allows them to independently perform the activities required.

- Program:
  
  Voluntary hepatitis vaccinations shall be offered to all employees who have occupational exposure to blood or OPIM’s within 10 working days of appointment or assignments

  An employee declining a Hepatitis B Vaccination must sign a Hepatitis B declination form.

  An employee who initially declines hepatitis B vaccination but at a later date decides to accept the vaccination, shall receive that hepatitis vaccination at that time.

  If a routine booster doses of hepatitis B vaccine is recommended by the U.S. Public Health Service at a future date, such booster dose(s) shall be made available to identified employees.

  Following an exposure incident, a confidential medical evaluation must be performed to include documentation regarding circumstances of exposure, source testing if feasible, testing exposed employees blood(with consent), post-exposure prophylaxis, counseling and evaluation of reported illness.

  The attached form shall be used to document, in part, this required medical evaluation.
California State University, Long Beach

Bloodborne Pathogens- Post Exposure Declination Form

During the course of my employment with California State University, Long Beach (CSULB), I may have been exposed to blood or other potentially infectious materials which may require medical evaluation or treatment. This exposure or potential exposure occurred on _____________________. I acknowledge that an Employee’s Claim for Workers Compensation Benefits has been filed with CSULB’s Worker’s Compensation Coordinator. I further acknowledge that an accident report and a sharps injury report (if required) have been completed and filed with my supervisor and/or Safety and Risk Management.

I further understand that as a result of this incident, I may be at risk of acquiring a bloodborne infection(s), including but not limited to the Hepatitis B virus (HBV). I also acknowledge that I have been given the opportunity to receive, at my employer’s expense, a Hepatitis B vaccination or a Hepatitis Immune Globulin treatment.

However at this time:

<table>
<thead>
<tr>
<th>Option</th>
<th>Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>I decline Hepatitis B vaccine</td>
<td></td>
</tr>
<tr>
<td>I decline Hepatitis Immune Globulin</td>
<td></td>
</tr>
<tr>
<td>I do not consent to baseline blood collection</td>
<td></td>
</tr>
<tr>
<td>I consent to baseline blood collection and HBV serological testing</td>
<td></td>
</tr>
<tr>
<td>I consent to blood collection and HIV serological testing</td>
<td></td>
</tr>
<tr>
<td>I do consent to baseline blood collection but DO NOT consent to any testing at this time. I understand that the blood sample shall be preserved to at least 90 days</td>
<td></td>
</tr>
</tbody>
</table>

_________________________________________  _______________
Employee’ Signature                     Date

_________________________________________  _______________
Physician’s Signature                   Date
Animal Technicians
Program modeled after the National Institute of Health in Bethesda, Maryland.

- Employees Covered:

  Employees who handle or work near animals or their excreta, including but not necessarily limited to animal caretakers, animal technicians, veterinarians, investigators, researchers, laboratory support personnel, cage wash operators and others requiring various types of contact with animals, their tissues, excreta and other biological materials or the contaminated environment, shall be identified and enrolled in the Medical Surveillance Program.

- Examination

  Comprehensive Medical Examinations

- Frequency

  Pre-employment
  Annually
  Upon Termination

- Additional Examination Requirements

  - Blood and other Laboratory Tests (table #1)

    All employees shall undergo a complete blood count with differential, liver function, syphilis serology, hepatitis screen and have two aliquots of baseline sera frozen for possible later use. Serum samples shall be collected yearly for workers handling animals of the genus Macaca (rhesus, cynomolgus and others). A hemagglutination inhibition test for rubella antibody and all ELISA for varicella may be ordered if no proof of vaccination or physician-verified disease is documented. Other blood work may be ordered at the discretion of the examining physician. A standard urinalysis including microscopic examination shall be performed. A fresh stool specimen is submitted for culture and examination for ova and parasites.

  - Tuberculosis Screening (see table #1)

    The employee will be questioned about their PPD status, history of TB or previous BCG vaccination. Those who report a negative PPD in the past shall receive 5 Tuberculin Units (5TU) of intermediate strength PPD. For those who are not sure of their status or have had BCG without follow-up skin testing, a first strength PPD will be given initially,
followed by an intermediate strength if negative. Skin tests are read between 48 to 72 hours. Those who report a previously positive PPD or BCG vaccination with follow up skin testing as well as new converters will need to undergo a PA and lateral Chest x-ray.

- Immunizations (see table #1)

Immunizations shall be given after the determination of the immunological competence of the patient. Live virus vaccines should not be administered during pregnancy and inactivated vaccines should not be administered until the second trimester.

a. **Rabies:**

Immunization is recommended for persons whose work environment makes them susceptible to the bites of carnivores, livestock, nonhuman primates, and wildlife.

A series of three 1-ml rabies immunizations using human diploid cell vaccine (HDCV) is given to all employees covered by this protocol. HDCV rabies boosters are given every other year. Post-immunization titers are not currently recommended but for post exposure prophylaxis, the number of injections is reduced if previous adequate titer is documented.

After receiving the primary series, employees with evidence of exposure are given two additional doses of vaccine, one as close to the time of exposure as possible and the other three days later. Rabies immune globulin (RIG) is not recommended for those who have received pre-exposure immunization.

b. **Tetanus- Diphtheria (Td):**

Immunization with toxoid is given to all covered employees every ten years. An immunization is also given if a tetanus-prone injury occurs in an employee and more than five years has elapsed since the last immunization. If an employee has not received the primary immunization, they shall receive the complete 3 dose series with tetanus-diphtheria toxoid (Td) intramuscularly in the deltoid area with the second dose 1-2 months after the first and the third dose 6-12 months after the second dose.
c. **Hepatitis (Primate Research Only):**

Immunization shall be given to those working with chimpanzees and hepatitis B who lack evidence of previous immunization. Three 1-ml doses of vaccine given at 0,1, and 6 months are currently recommended. These shall be given intramuscularly in the deltoid area. For past exposure to hepatitis B, immunization with a combination of hepatitis immune globulin (HBIG) at a dose of 0.06 ml/kg body weight as soon as possible after exposure, preferably within twenty four hours, plus hepatitis B vaccine is useful if given within 7 days of exposure. These can be administered at the same time in different sites. The hepatitis B series then requires completion, repeated a 1 and 6 months after the initial dose.

Human immune globulin is to be offered to those working with recently imported chimpanzees or if conducting research with hepatitis A or hepatitis non-A, non-B.

- **Annual Examinations**

  Each employee shall undergo an annual examination to include identifying any changes in medical history, audiograms, spirometry, visual acuity testing, laboratory tests, urinalysis and stool specimens and review of immunization status.

  PPD testing will be conducted every 6 months on those with past negative skin tests for physical examination codes 105 and 106 and yearly for codes 104, and 107. Employees in these codes with positive PPD’s and previous BCG vaccination will undergo yearly PA and lateral chest x-rays. Employees in all other codes (i.e. 101,102 and 103) shall be given PPD skin tests on pre-employment and termination.

- **Termination Examination:**

  Upon termination of employment, each employee shall undergo a repeat of the pre-employment examination including medical history, audiogram, spirometry, visual acuity testing, physical examination, tuberculosis screening and repeat of all laboratory test, including a serum sample for frozen storage.
Animal Technicians- Table #1

Laboratory tests, screening and immunizations for animal handlers based on level and type of animal contact.

<table>
<thead>
<tr>
<th></th>
<th>101</th>
<th>102</th>
<th>103</th>
<th>104</th>
<th>105</th>
<th>106</th>
<th>107</th>
<th>108</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PPD (TB)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-employment</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td>Yearly</td>
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<td>X</td>
<td>X</td>
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<tr>
<td>Every 6 months</td>
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<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Termination</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td><strong>CXR if Positive on PPD</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Pre-employment</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>Yearly</td>
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<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Termination</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td><strong>Rabies (HDCV)</strong></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Pre-employment</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Booster Every 2 Years</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<tr>
<td><strong>DT-Every 10 Years</strong></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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</tr>
<tr>
<td><strong>Stool for O&amp;P</strong></td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td><strong>Frozen Sera</strong></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-employment</td>
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<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
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<td>Yearly</td>
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<td></td>
<td></td>
<td>X</td>
<td>X</td>
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<tr>
<td>Every 5 years</td>
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<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>HIV-1</strong></td>
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<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-employment</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Every 4 Months</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td><strong>Immune Globulin</strong></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

- Physical examination codes:
  
  101 Employees with minimal animal contact, e.g. personnel in areas through which animals are regularly transported.

  102 Laboratory rodents and rabbits.
103 Carnivores (cats and dogs), livestock, and all other animals except nonhumans, primates.

104 Non-human primates after quarantine.

105 Non-human primates during quarantine without chimpanzees.

106 Chimpanzees during quarantine.

107 Chimpanzees after quarantine used for hepatitis research.

108 Animals used for HIV-1 research utilizing live or attenuated virus.

<table>
<thead>
<tr>
<th>Test</th>
<th>Pre-Exposure or Pre-Placement</th>
<th>Annual</th>
<th>Periodic</th>
<th>Exit</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive medical examination</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>Spirometry</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X(1)</td>
<td>(1) As indicated in the standards and protocols</td>
</tr>
<tr>
<td>Laboratory tests</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X(2)</td>
<td>(2) Every 5 years</td>
</tr>
<tr>
<td>Sera Samples</td>
<td>X</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>
Occupational Questionnaire for
Personnel Assigned to Laboratory Animal Facilities

Name: ____________________________________________

Date of Birth: ______________________

Department: ________________________________ Campus Phone: _______

Species of animals handled: ________________________________

Allergy History:
Have you ever had allergic problems (yes / no)?

<table>
<thead>
<tr>
<th>Nasal</th>
<th>Eye</th>
</tr>
</thead>
</table>

| Bronchial | Other |

Are you now under treatment for allergies? No____ Yes______
If Yes explain: ____________________________________________

Do you have allergy to (yes / no):

Birds (feathers)____ Rats or Mice ______

Rabbits ____ Squirrels ______

Wood shavings____ Other (describe) ______

Signature________________________________ Date ______

36
Asbestos
Authority: Title 8 California Code of Regulations (CCR), Section 5208

Employees Covered:

All employees, who are, or may reasonably be expected to be, exposed to asbestos at or above the action level and/or above the action level and/or excursion limit.

Examinations:

Performed by or under the supervision of a licensed physician.

Frequency:

Before an employee is assigned to work involving exposure or within 30 days of the employee’s initial exposure to asbestos in the event of an emergency and at least annually thereafter. A termination examination shall be given unless the employee has had an exam within the past one year.

Content of Exam:

In addition to evaluating for asbestos-related disease, the physician shall evaluate for fitness to wear personal protective equipment including respirators.

- Comprehensive medical exam plus completion of the required Initial Medical Question for pre-placement or initial examinations or the periodic Medical Questionnaire for subsequent found in 8 CCR, Section 5208 Appendix D (copy attached).

- Chest x-rays shall consist of a 14” X 17” AP and right and left anterior oblique views interpreted by a NIOSH certified B-reader on a ILO rating form. The following frequencies for chest x-rays will be observed.
Years Since First Exposure | Age of Employee
---|---
| Less than 40 | 40 and older
0 to 10 | Every three years | Annually*
10 and above | Annually* | Annually*

* Oblique x-rays need only be performed every three years.

- Spirometry to include forced vital capacity (FVC) and force expiatory volume at 1 second (FEV 1) performed by a technician certified by NIOSH in pulmonary function testing.

- Additional tests deemed appropriate or necessary by the examining physician or LHCP.

Information provided to the Physician:

A copy or title 8 CCR 5208 and Appendices D, E, and I; a description of the employee’s duties; their representative or anticipated exposure levels; description of any personal protective equipment to be used; information from previous medical examinations.

Physician report:

Shall contain the results of the examination without diagnosis disclosure unrelated to occupational exposure to asbestos. It shall also contain any recommended limitations on the employee or upon the use of personal protection equipment; the physician’s opinion as to whether the employee has any detected medical conditions that would place the employee at an increased risk of material impairment from exposure to asbestos; and a statement that the employee has been informed by the physician of the results of the medical examination and of any medical conditions resulting from asbestos exposure that require further explanation or treatment.

<table>
<thead>
<tr>
<th>Test</th>
<th>Pre-Exposure or Pre-Placement</th>
<th>Annual</th>
<th>Periodic</th>
<th>Exit</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive medical examination</td>
<td>X</td>
<td>X</td>
<td></td>
<td>X(1)</td>
<td>(1) is last exam not within past 12 months</td>
</tr>
<tr>
<td>Asbestos medical questionnaire</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chest X-Ray</td>
<td></td>
<td></td>
<td>Every 3 years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spirometry</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Pesticides
Authority: Title 3 California Code of Regulations (CCR), Section 6728

Covered employees:

Employees who mix, load, apply, store, transport or otherwise handle pesticides in toxicity category one or two that contain an organophosphate or carbamate.

Examinations:

- Baseline blood tests (red cell and plasma cholinesterase) shall be performed by a clinical laboratory currently approved by the State Department of Health to perform these tests.

Frequency:

Baseline red cell and plasma cholinesterase tests shall be verified every two years.
Examination & Form Protocols

Medical Examination Appointment Letter (SRMIS 001)  Page 41
Authorization to Release Medical Information (SRMIS 002)  Page 42
Authorization to Release Previous Medical Information (SRMIS 003)  Page 43
Health Status Medical Report  (SRMIS 004)  Page 45
Employee Medical Examination Findings (SRMIS 005)  Page 46
Provider Examination Requests (SRMIS 006)  Page 47
Exit Examination Employee Declination (SRMIS 007)  Page 48
Date: _______________________

To: Employee

From: CSULB Safety, Risk Management and Information Security

Subject: Medical Examination Appointment

This is to remind you that you are scheduled for _______________________

at ________ on________ at _____________________________________________

Please complete the indicated sections of all attached forms and take them with you to the appointment.

In preparation for your physical examination:

   DO NOT smoke, use bronchodilators or asthmatic sprays for at least one hour prior to your examination. If there is a medical reason for using bronchodilators or asthmatic sprays within the hour before the appointment, inform the examining physician.

   If you are exposed to loud sounds in the fourteen hours prior to your appointment, wear hearing protection during that time.

If for any reason you are unable to keep your appointment, please let Safety, Risk Management and Information Security know as soon as possible so that I may reschedule your appointment. If you have any questions, please call me at X-52283.

c: Appropriate Administrator
California State University, Long Beach
Occupational Health Program

Authorization to Release Medical Information

Date: ________________

I, _____________________________, authorize the release of my medical examinations and test results to California State University, Long Beach (CSULB), Safety, Risk Management and Information Security (SRMIS). California State University, Long Beach Office of Safety, Risk Management and Information Security will receive and forward all medical records pertinent to me and my employment at California State University, Long Beach to California State University, Long Beach’s Student Health Services (SHS) for storage. These records will be kept in confidence, and will not be made available to anyone, except the physician, medical records manager and the official State regulatory officials, e.g., Cal/OSHA.

________________________________
Signature of Employee

________________________________
Employee Identification Number
Authorization to Release Previous Medical Information

Date: ________________________________

I, __________________________________________, authorize the release of my medical examinations and test results from my previous places of employment to California State University, Long Beach (CSULB), Safety, Risk Management and Information Security (SRMIS). California State University, Long Beach office of Safety, Risk Management and Information Security will receive and forward all medical records pertinent to me and my employment at California State University, Long Beach to California State University, Long Beach’s Student Health Services (SHS) for storage from my previous places of employment. These records will be kept in confidence, and will not be made available to anyone, except the physician, medical records manager and the official State regulatory officials, e.g., Cal/OSHA.

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Be sure to include address of previous employer. Use a separate sheet of paper, if necessary, to list previous employers if there has been more than one during the past three years, and the employers have medical results on this employee.

________________________________________
Signature of Employee

________________________________________
Employee Identification Number
Note:

The University occupational medical provider will supply all patient and employer notification forms required by this program and regulatory agencies. The following two documents (Health Status Medical Report-SRMIS 004 and Employee Medical Examination Findings – SRMIS 005) should be used only in the event the occupational medical provider cannot supply similar notifications.
The following recommendation is based on a review of base history questionnaire, diagnostic test, physical examination and the specific requirements of the position applied for or occupied by the individual named above. The recommendations comply with government standards.

Has the employee an detected medical conditions that would increase their risk of material health impairment from occupational exposure? □  □  □

Does the employee have any limitations in the use of personal protective equipment (e.g., clothing or respirators)? □  □  □

Status:
□  Qualified The examination indicates no significant medical impairment, can be assigned any work consistent with skills and training.

□  Qualified The examination indicates non-occupational medical impairments, referred to personal physician for follow-up. Can be assigned to any work consistent with skills and training.

□  Qualified -With limitations

□  NOT Qualified

The employee has been informed of the examinations findings.

Physician’s Signature __________________________ Date __________________________
Employee Medical Examination Findings

This form is to be sent or given to the employee.

Employee Name ___________________________ Date of Exam __________

Home Address ______________________________________________________

Recently you had a medical examination in our office. The results of this examination follow:

Medical History: Normal □ Abnormal □ _________________________________

Physical examination: Normal □ Abnormal □ ____________________________

Audiogram: Normal □ Abnormal □ ________________________________

Chest X-Ray: No active disease □ Normal □ Abnormal □ Not indicated □

Breathing tests: Normal □ Abnormal □ _______________________________

Laboratory tests: Normal □ Abnormal □ _______________________________

EKG: Normal □ Abnormal □ ________________________________

Other comments: _____________________________________________________

☐ Your examination was normal.

☐ The abnormalities noted above should be followed up with your personal physician. Copies of your medical record will be furnished upon your signed request.

☐ The abnormalities noted above have resulted in restrictions in your work duties or in your use of personal protective equipment as described in the accompanying Medical Evaluation Form.

If you have any questions, please do not hesitate to call me.

Name of physician ___________________________ Printed name __________ Signature of Physician __________

Address _______________________________________________________ Date __________
**Examination Requests:**

The following medical protocols are to be performed:

<table>
<thead>
<tr>
<th>Protocol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Comprehensive Medical Examination (Baseline), including Memorial Occupational Medical Service health history questionnaire.</td>
</tr>
<tr>
<td>Medical evaluation (employee submitted questionnaire)</td>
</tr>
<tr>
<td>Resting 12-Lead Electrocardiogram</td>
</tr>
<tr>
<td>Treadmill EKG</td>
</tr>
<tr>
<td>Pulmonary Function Test</td>
</tr>
<tr>
<td>Complete Blood Count</td>
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<tr>
<td>Chest X-RAYS</td>
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<td>Urinalysis</td>
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<td>Zinc Protopyphorin</td>
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<td>Blood Chemistry Panel</td>
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<tr>
<td>Red cell and Plasma Cholinesterase tests</td>
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<tr>
<td>Audiometric Examination</td>
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<td>Stool Specimen</td>
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<tr>
<td>Immunizations:</td>
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<tr>
<td>Rabies</td>
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<tr>
<td>Tetanus-Diptheria</td>
</tr>
<tr>
<td>Hepatitis</td>
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<tr>
<td>Sickle Cell indices</td>
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<tr>
<td>Other:</td>
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</tbody>
</table>

__________________________  ________________
CSULB Representative       Date
California State University, Long Beach

Exit Examination – Employee Declination

I, _________________________________, am a current or past participant in the California State University, Long Beach (University) medical monitoring program. I am ending my employment with University and I acknowledge that the University has offered me an exit physical examination. However I am declining this offer.

__________________________________________  ______________________
Employee Signature                        Date

__________________________________________  ______________________
Staff Human Resources Representative     Date