

Regulation
No. 40-1-1

1 July 1993

Medical Services
MEDICAL HEALTH PROGRAM

1. Purpose. The Army Occupational Health Program (AOHP) is designed to promote health and reduce the risk of illness arising from the individual-job relationship. This encompasses special preventive measures for both military and civilian personnel who are exposed to potentially hazardous influences in the work environment.

2. Elements. As a minimum, the AOHP will include the following elements.

a. Inventory of chemical, biological, radiological, and physical hazards in the work environment.

b. Job-related medical surveillance.

c. Medical examinations.

d. Employee education in job-related health hazards.

e. Treatment of occupational illness and injury.

f. Hearing conservation.

g. Occupational vision.

h. Respiratory protection.

i. Pregnancy surveillance.

j. Job-related immunization.

k. Maintenance of occupational health medical and administrative records.

3. Medical Examinations. Preplacement, preassignment, and periodic job-related medical surveillance will be provided to all military and civilian employees potentially exposed to health hazards in the work environment or who are assigned to positions requiring specific standards of physical fitness. Job-related medical evaluations can be made a condition of employment.

1 Jul 93

4. Occupational Vision. The Occupational Vision Program is outlined in Technical Bulletin MED 506 and CESWL-SO office Memorandum No. 385-1-1. The Occupational Vision Program must include:

a. Posting area to notify employees of eye hazard for each area.

b. Job analysis to determine visual skills required for job performance.

c. Biennial vision screening examination for workers in eye-hazardous job positions.

d. Annotating that this position is an eye-hazardous position on the job description, DA Form 374.

e. Emergency eyewash facilities shall be provided in areas where employees may be exposed to corrosive materials.

f. Annual Hazard Awareness Training.

5. Hearing Conservation. The Hearing Conservation Program is designed to prevent hearing loss from occupational exposure to noise. Procedures in Technical Bulletin MED 501 and CESWL-SO Office Memorandum No. 385-1-1 will be followed in the development and conduct of the hearing conservation program.

a. Noise-hazardous areas and equipment will be posted conspicuously with proper DANGER signs or decals under AR 385-30.

b. Engineering controls will be the primary means to protect personnel from hazardous noise.

c. Annotating that this position is an ear-hazardous position on the job description, DA Form 374.

d. All employees exposed to noise over 85 Db A's will have audiometric testing done as follows: preemployment for a baseline, annually thereafter, and at termination before leaving government employment. The audiometric examiner must be able to test for a threshold shift in the following frequencies: 1000, 2000, 3000, 4000, and 6000 Hz in either ear.

e. Annual hazard awareness training.

6. Respiratory Protection Program. The written standard operating procedures governing the selection and use of respirators are outlined in Technical Bulletin MED 502, EM 385-1-1, and CESWL-SO office Memorandum No. 385-1-1. Minimum acceptable standards are:

- a. Respirators shall be selected on the basis of the hazard.
- b. The user shall be trained in the proper care and use of each specific type respirator they will use. Instruction will be provided by qualified trainers.
- c. Respirator users will be retrained annually to maintain qualification. Users who do not have a current qualification will not use a respirator.
- d. Respirator users will be identified on their job description, DA Form 374. The job position description will state that the wearer will not have facial hair that comes between the sealing surface of the face-piece and the face, facial hair that could interfere with valve function, or wear contact lenses while using a respirator.
- e. A qualified physician shall indicate that the employee is medically qualified to wear a respirator. Medical status will be verified by a physical exam with chest X-ray and spirometer to ensure the employees respiratory system is adequate to handle the extra demand placed on it by a respirator. The employee shall be medically reevaluated annually by a qualified physician.
- f. Breathing air-type compressors shall be designed specifically for the intended use and shall be equipped with an approved regulator and in-line air purifying sorbent beds and filters.
- g. Oil-lubricated compressors shall be equipped with high-temperature, equipment failure, and carbon monoxide continuous monitoring alarm system(s). The alarm system shall be so designed that affected employees will be made aware of hazardous conditions.
- h. Air-line couplings for breathing air shall be incompatible with outlets for other air/gas systems to prevent nonrespirable air, gas, or oxygen from being used.
- i. Respirators shall be stored in a convenient, clean, and sanitary location.

j. Respirators used by more than one employee shall be thoroughly cleaned and disinfected after each use.

7. Diving Medical Requirements. The diver examination must contain an evaluation of muscular development and lean muscle mass in reference to capability to perform the tasks described on the SF-78, including the indicated functional requirements and environmental factors. A negative response to any physical requirements may restrict or limit exposure to hyperbaric conditions depending on severity and the physician's report. Appendix C of ER 385-1-86, dated 1 June 1992, lists the diving medical requirements for government personnel and must accompany the SF-78 for the physician's review before examination.

8. Bloodborne Pathogens. The purpose of this standard is to eliminate or minimize occupational exposure to Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV), and other bloodborne pathogens. This standard applies to all employees who have the potential to be exposed. If the employee is only expected to respond to conditions which would cause the exposure (e.g., first aid in the event of an emergency) then that employee is covered by the bloodborne pathogens law.

a. Personal Protective Equipment Requirements.

(1) Two pair of disposable surgical or examination gloves shall be in every first aid kit.

(2) Pocket mouth-to-mouth resuscitation devices designed to isolate emergency response personnel from direct contact shall be provided in each first aid kit.

(3) A puncture-resistant sharps container (plastic bottle) shall be kept in each ranger's vehicle. This container is to be used in the event of finding needles that must be removed to protect the public and our employees.

b. Work Practice Controls.

(1) Disposable gloves shall be a standard component of emergency response equipment and will be donned by all personnel prior to initiating any emergency patient care.

(2) Garments penetrated by blood or other infectious materials shall be removed as soon as feasible and dry cleaned at no expense to the employee.

1 Jul 93

(3) Contaminated laundry and needles shall be bagged and labeled "BIOHAZARD" and shall be disposed of or cleaned in the same method that is used by your local hospital. Do not throw BIOHAZARDS in the regular trash for disposal and do not take contaminated laundry home for cleaning.

c. Exposure.

Employees that are exposed to bloodborne pathogens WILL within 24 hours, report exposure to the Safety Office and report to a Medical Physician for the Hepatitis B Vaccination and/or medical evaluation at no cost to the employee. If the employee will not take the vaccine after exposure, they must sign a Declination Statement at the District Safety Office after counseling. If the employee changes his/her mind, they may start vaccination series at no cost at any time. NOTE: Waiting decreases the effectiveness of the vaccine.

d. Recordkeeping.

(1) Training dates, names and job titles of trainees, summary of training, and name and qualifications of trainer will be kept on file for three years.

(2) Record of exposure will be keep for 30 years.

(3) Employees will be retrained annually.

9. Currently the District employees that are in the following job descriptions must be in the District's Medical Surveillance Program and medically examined as indicated:

<u>EXPOSURE</u>	<u>MEDICAL SURVEILLANCE</u>	<u>FREQUENCY</u>
a. Divers	PHY, EKG, CBC, SMAC21, PFT, CNS, SCT, *MXR, *CXR	Preplacement & Annual
b. Pesticide Workers	PHY, CNS, CBC, GI, LFT, PFT, GGPT, DER,	Preplacement & Annual
c. Hazardous Waste Workers	PHY, CNS, CBC, GI, LFT, PFT, GGPT, DER,	Preplacement & Annual
d. Crane Operators	PHY, EKG,	Preplacement & Annual
e. Commercial Motor Op.	PHY, EKG,	Preplacement & every 2 yrs.

1 Jul 93

f. Vehicle Operator	VIS, AUD,	Preplacement & every 4 yrs.
g. Exposed to Noise	AUD	Preplacement & Annual
h. Welders	HAZARD DETERMINED, SEE SAFETY OFFICE	
i. Rangers	BLOODBORNE PATHOGENS	
j. Boat Op.	PHY, EKG,	Preplacement & Annual

NOTES TO TABLE

PHY= Physical + Audiogram + Vision Screening + CBC + SMAC21 + Urinalysis

CNS= Central Nervous System

CBC= Complete Blood Count

GI= Gastrointestinal

LFT= Liver Function Tests

PFT= Pulmonary Function Tests

GGPT= Gamma Glutamyl Transpeptidase

DER= Skin Emphasis

VIS= Vision Screening

AUD= Audiogram

SMAC21= Blood Count

SCT= Sickle Cell Testing (initial physical only)

*MXR= Musculoskeletal X Rays (initial physical only)

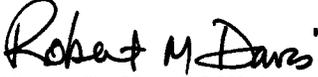
*CXR= Chest X Ray (Tri-annually only)

EKG= Electrocardiogram

SWLR 40-1-1
1 Jul 93

10. All employees that are in the Occupational Health Program (except: Crane, Commercial Motor, Boat, and Vehicle Operators) will have a Termination Medical Surveillance Examination before leaving Civil Service or transferring out of the District.

FOR THE DISTRICT ENGINEER:


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DISTRIBUTION A