

Occupational Medical (OM) Services for Biomedical Research

- I. The goal of these services is to promote a safe and healthy workplace, by limiting opportunities for exposure, promptly detecting exposures, and offering prompt and appropriate treatment for exposures.
- II. General considerations
 - A. Medical services must be tailored to meet the organization's needs and based upon a detailed risk assessment.
 - B. The services should be designed by the healthcare provider in consultation with representatives from the Environmental Health and Safety Program, Human Resources, and the facility manager and the principal investigator.
 - C. The services should be provided for all personnel regardless of their employment status. Contracted workers, students, and visitors should be offered equivalent medical care.
 - D. The healthcare provider must be aware of the potential health risks in the work environment, knowledgeable and alert for subtle evidence of infection, and have access to subject matter experts.
 - E. The service must be readily available, so that care evaluation and treatment can be provided in a timely fashion.
 1. The plan must identify and minimize barriers to prompt evaluation and treatment.
 2. Appropriate first aid should be defined in advance, widely promulgated and immediately available.
 3. The treating facility should be prepared to provide definitive medical care.
 4. Emergency medical support training should be provided on a regular basis for both employees and the healthcare providers.
 - F. Medical support services and injury data should be evaluated annually.
- III. Preplacement medical evaluations
 - A. A preplacement medical evaluation is recommended for individuals who may be exposed to potential human pathogens.
 1. The evaluation may include a questionnaire that identifies previous and ongoing medical problems, current medications, allergies to medicines, pets, and other environmental proteins, and prior immunizations.
 2. Physical examinations, if offered, should focus on the minimal mandatory physical and psychological demands of the proposed position.
 - B. Relevant, commercially available immunizations may be indicated, based upon an understanding of the potential workplace health hazards and the individual's history of prior immunizations.
 - C. Individuals who have a substantial risk for exposure to infectious agents at work should be encouraged to donate a blood sample for serum storage, if an infection with the agent can be monitored serologically.

- D. The counseling should be provided during the evaluation should address:
 - 1. the potential health hazards in the work area,
 - 2. steps to take in the event of a recognized exposure, and
 - 3. symptoms suggestive of an occupational infection and steps the worker should take, if they occur.
- IV. Periodic medical evaluations
- A. Routine, periodic medical evaluations generally are not necessary. Workers with substantial risk of exposure to infectious agents may be offered periodic laboratory testing, only if relevant, commercially available tests are available.
 - B. Employers should insist that all occupational injuries be reported to the designated provider of medical support services.
 - C. Information obtained at the report of an occupational injury should include:
 - 1. the identity of the potential infectious agent,
 - 2. the mechanism and route of exposure (percutaneous, mucous membrane, intact skin),
 - 3. personal protective equipment used at the time of the injury,
 - 4. first aid provided at the workplace, and
 - 5. the worker's personal medical history to estimate the susceptibility to infection and potential complications to treatment.
 - D. Estimating risk of exposure may be difficult, if relevant medical literature is limited. In such circumstances, the clinician may need to make a "best-estimate" based upon knowledge of similar agents and exposure circumstances, as well as the advice received from knowledgeable infectious disease specialists.
 - F. Treatment should be provided promptly and there should be an agreed upon plan to follow the individual's clinical course.
 - G. Ongoing clinical assessment may involve additional laboratory testing. In some circumstances it may be appropriate to utilize tests that are not commercially available. If such tests are offered, the healthcare provider should submit the specimens with negative controls in a blinded fashion to the testing facility. The clinician must be circumspect in the interpretation of the laboratory test results.
 - H. The worker should be encouraged to donate a blood sample at the time of the initial report of potential exposures to infectious agents in the workplace and four to six weeks later to be frozen and stored as paired sera.
 - I. Reporting, incident investigation, and reassessment
 - 1. Applicable Workers' Compensation claim forms should be provided.
 - 2. A description of the accident should be reported to the supervisor and the safety specialist.
 - 3. The safety specialist may need to visit the worksite to confirm the circumstances of the injury.

4. A facility's experience with accidents may necessitate a reconsideration of the initial risk assessment and strategies to reduce the possibility of future exposures.