

Navy Medical Surveillance Program Process

Process Step	Sub-Step Description	Responsibility
<p>Step 1: Industrial Hygienist (IH) or Industrial Hygiene Officer (IHO) performs workplace assessment to characterize exposure as part of command Industrial Hygiene survey</p> <p><i>As currently written in the DoD, SECNAV, and OPNAV instructions, BUMED Industrial Hygiene (IH) assets perform baseline or periodic worksite assessments and identify operations or environments that may potentially expose DON workers to known hazards.</i></p> <p><i>The IH staff recommend enrollment of assigned workforce in specific medical surveillance programs based on exposure risk to the command leadership.</i></p> <p><i>Supervisors are responsible for identifying applicable workforce personnel, tracking their enrollment in medical surveillance programs, and monitoring accomplishment of appropriate occupational medical surveillance examinations scheduled through the BUMED medical treatment facility supporting the command.</i></p> <p><i>Normally the command Safety Manager/Officer or command Medical Department Representative (MDR) performs overall management of the program for the Commanding Officer, but it can be anyone the CO assigns.</i></p> <p><i>Commands are also responsible to maintain a record of those personnel qualified and/or current with their Specialty/Certification Exam medical surveillance requirements (see NMCPHC-TM OM 6260 Chapter 7).</i></p>	<p>1. <i>Define Similar Exposure Groups (SEG):</i> The IH/IHO will group workers having the same general exposure profile by</p> <ol style="list-style-type: none"> a. Similarity and frequency of the tasks they perform b. The materials and processes with which they work c. The similarity of the way they perform the tasks 	<p><u>BUMED</u></p>
	<p>2. <i>Define Exposure Profiles for each SEG:</i> The IH/IHO will use quantitative and qualitative data, including exposure monitoring, to determine</p> <ol style="list-style-type: none"> a. The degree of personnel exposure b. Estimates of the actual exposure levels for the SEG 	
	<p>3. <i>Make Judgments on Acceptability of the Exposure Profile for each SEG -</i> The IH/IHO shall judge the SEG exposure profile as acceptable, uncertain, or unacceptable. The IH/IHO shall</p> <ol style="list-style-type: none"> a. Determine and document the rationale for each judgment b. Evaluate and determine the adequacy of existing controls 	
	<p>4. <i>Make Control Strategy Recommendations -</i> The IH/IHO makes appropriate recommendations regarding the workplace, workforce and environmental agents based on the results of the exposure assessments by using accepted industrial hygiene practices, which comply with appropriate regulatory requirements.</p> <ol style="list-style-type: none"> a. Include hazard-based medical surveillance recommendations for SEGs determined to have unacceptable exposure profiles 	
	<p>5. <i>Communication -</i> IH/IHO communicates applicable medical surveillance recommendations to the surveyed activity (CO, Safety Officer, and Medical Department Representative (when applicable)) via the Industrial Hygiene survey.</p> <ol style="list-style-type: none"> a. IH/IHO explains how every section of the IH survey helps contribute to the overall Occupational Safety and Health program effectiveness for their command b. IH/IHO explains hazard-based recommendations and also informs commands about the additional requirements for certification exams that may apply to their personnel 	
	<p>6. <i>Record Keeping -</i> IH/IHO documents exposure data in the Defense Occupational and Environmental Health Readiness System (DOEHRS)</p>	
<p>Step 2: Command Safety Officer/Manager or Command Medical Department Rep (MDR) reviews most current Industrial Hygiene Survey with Supervisors</p>	<p>1. Command Safety Officer/Manager or Command MDR work with Supervisors to identify each specific worker (by name) recommended for hazard based surveillance, including new check-ins during check-in process</p>	<p><u>Individual Command (e.g., Supervisor, Safety Manager, or MDR)</u></p>
	<p>2. Command Safety Officer/Manager or Command MDR places each worker into the command's manual or automated (ESAMS, MRRS, SAMS, OSHSYS, etc.) tracker system</p>	
	<p>3. Schedule required medical surveillance examinations for workers with sufficient lead time to complete examinations and maintain qual's based on the command's operational schedule</p>	

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Step 3: Worker or Supervisor contacts supporting Occupational Health Clinic or the Command Medical Department (when applicable) to schedule exam	1. Communicate worker's required exams to Occupational Health staff and verify any paperwork that worker needs to bring to exam	<u>Individual Command (e.g., Supervisor, Safety Manager, or MDR)</u>
	2. The Command Medical Department may perform several Occupational Health Medical Surveillance examinations. If performed by the Command MDR, they should document the exam appropriately.	
	3. Supervisor accommodates exam in worker's schedule	
Step 4: Occupational Health clinic utilizes PC Matrix to consolidate all required exam elements into one (if possible) exam visit	N/A	<u>BUMED</u>
Step 5: Worker reports to Occupational Health or the Command Medical Department (when applicable) at appointed exam date/time	N/A	<u>Individual Command (e.g., Supervisor, Safety Manager, or MDR) and Individual Worker</u>
Step 6: Occupational Health/Command Medical Department (when applicable) performs exam and documents exam completion and disposition	1. Place hardcopy of exam completion in medical record (when applicable)	<u>BUMED or Command Medical Department</u>
	2. Enter exam completion into electronic medical record	
	3. Notify command of exam completion and disposition - Qualified - Not Qualified - Qualified with Restrictions BUMED is developing a Medical Surveillance Exam Completion and Disposition form for inclusion in OPNAV instructions. Results indicating overexposure to a health stressor should be forwarded to the Sailor/worker's Commanding Officer.	
Step 7: Worker returns to work with exam completion documentation	1. Occupational Health or Command MDR provides <u>objective documentation</u> of exam completion and disposition a. Disposition: Qualified, Not Qualified, or Qualified with Restrictions Policy change recommendations to OPNAV 5100.19E and 5100.23G, will require notification in NMCPHC-TM OM 6260, Chapter 1, Medical Screening; and C10.2, Physician's/Provider's Written Opinion Samples, pages 306-317, to indicate sending follow-up "original" to "employee command/supervisor" vice "employer". BUMED is developing a notification form for inclusion in OPNAV instructions.	<u>BUMED or Command Medical Department</u>

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Step 8: Supervisor concurs or non-concurs with exam completion and updates Command Safety Officer/Manager and/or Command MDR	<ol style="list-style-type: none"> Worker provides copy of objective documentation to Safety Officer/Manager or Command MDR Safety Officer/Manager or Command MDR updates command tracker 	<u>Individual Command (e.g., Supervisor, Safety Manager, or MDR)</u>
Step 9: Command Safety Officer/Manager or Command MDR updates command tracker with exam date and next exam due date	<ol style="list-style-type: none"> Command tracker can take any form <ol style="list-style-type: none"> Automated system (SAMS, MRRS, ESAMS, OSHSYS, etc.) Manual system (Excel, Access, etc.) 	<u>Individual Command (e.g., Supervisor, Safety Manager, or MDR)</u>
Step 10: Command Safety Officer/Manager or Command MDR checks tracker periodically (monthly recommended)	<ol style="list-style-type: none"> Command Safety Officer/Manager or Command MDR notifies Supervisors of personnel coming due for medical surveillance exam within 45 (recommended) days Supervisor alerts worker of exam due Supervisor or worker contact Occupational Health for exam scheduling (Return to Process Step 3). Supervisors should inform Command Safety Officer/Manager or Command MDR if worker changes job duties and may no longer need to be enrolled in program. <i>Safety Manager/Officer or Command MDR should consult with Occupational Health clinic to determine need for a Termination Exam prior to official disenrollment.</i> 	<u>Individual Command (e.g., Supervisor, Safety Manager, or MDR)</u>
Step 11: Command Safety Officer/Manager or Command MDR calculates and reports exam completion rate for each command medical surveillance program <i>A medical surveillance exam completion report spreadsheet is available on the Naval Safety Center Medical Surveillance Toolbox website.</i> <i>This spreadsheet will automatically calculate completion rates for each program and is used for reporting through the annual Safety Self-Assessment process.</i>	<ol style="list-style-type: none"> Calculate the command's overall exam completion rate using the following formula: $\text{Occupational Medical Exam Completion Rate (\%)} = \frac{\text{\# of personnel receiving required medical exams} \times 100}{\text{\# of personnel requiring medical exams for occupational exposures}}$ Calculate the command's overall audiogram completion rate using the following formula: $\text{Occupational Medical Exam Completion Rate (\%)} = \frac{\text{\# of personnel receiving required audiograms} \times 100}{\text{\# of personnel requiring audiograms}}$ Report the overall command Occupational Medical Exam and Audiogram Completion Rates to higher Echelon via the annual safety self-assessment 	<u>Individual Command Safety Manager/Officer or MDR</u>
Step 12 (if applicable): Occupational Health Clinic or Command MDR notifies worker and their command if exam results indicate "Not Qualified" or "Qualified With Restrictions"	<ol style="list-style-type: none"> Notification to command should be addressed to the Supervisor, Command Safety Officer/Manager, or Commanding Officer. 	<u>BUMED or Command MDR</u>

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Step 13 (if applicable): If worker is categorized as medically “Not Qualified”, or “Qualified with Restrictions” Command Safety Manager/Officer or Command MDR consults with Supervisor, Occupational Health, Industrial Hygiene, and Chain-of-Command	1. Quantitatively characterize exposure(s)	<u>Individual Command Safety Manager/Officer or MDR</u>
	2. Consider possible control measures	
	3. Determine follow-up exam recommendations	
Step 14 (if applicable): Command MDR notifies Command Safety Manager/Officer of illnesses and injuries resulting from occupational exposures	1. Utilize command Accident & Injury reports, email, or other notification method to ensure command Safety Officer is aware of all occupational illnesses and injuries as defined in chapter 3 of OPNAVINST 5102.1 series.	<u>Individual Command MDR</u>
Step 15 (if applicable): Safety Officer/Manager reports occupational illnesses and injuries to Naval Safety Center	1. Report occupational illnesses to Naval Safety Center via Web Enabled Safety System (WESS) in accordance with OPNAVINST 5102.1 series http://www.public.navy.mil/navsafecen/Pages/wess/WESS.aspx	<u>Individual Command Safety Officer/Manager</u>
Step 16 (if applicable): Civilian workers with possible occupationally-related health issues contact command Admin/Human Resources	1. If abnormality in lab results is perceived to be work related, the worker should be advised to file a Department of Labor Form CA-2, “Notice of Occupational Disease and Claim for Compensation” through the HR department.	<u>Individual Worker</u>
Step 17: Command Safety Officer/Manager or Command MDR periodically assesses the command tracker to ensure proper updating and compliance status.	1. Safety Officer/Manager or Command MDR must frequently communicate with supervisors in order to maximize likelihood of proper personnel identification, enrollment, tracking, and exam completion. 2. Update tracking system as needed.	<u>Individual Command Safety Officer/Manager or MDR</u>
Step 18: Echelon 2 commands provide oversight of subordinate command program implementation.	1. ISIC periodically assess subordinate command programs during annual safety self-assessment rollup or during required triennial Occupational Safety and Health Management Evaluations (see chapter 0905(a) of OPNAVINST 5100.23G).	<u>Echelon 2 Command</u>