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LANL Medical Surveillance Enrollment Process

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Occupational Safety and Health
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IH/OS SIG Steering Committee
Why Medical Surveillance?

• The systematic assessment of employees exposed or potentially exposed to occupational hazards.
• Monitors individuals for adverse health effects.
• Determines the effectiveness of exposure prevention strategies.
• Enrollment is based on the potential or actual exposure to work-related hazards.
• Fundamentally designed to optimize employee health by first detecting and then eliminating the underlying cause.
• Goal: reduce and prevent occupational illness and injury in any work environment, but especially those that can be harmful through exposure of chemicals, high radiation levels, or any hazardous component to the body.
Medical Surveillance Programs

<table>
<thead>
<tr>
<th>Medical Surveillance for Chemicals</th>
<th>Medical Surveillance for Hazardous Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>OSHA 13 Carcinogens:</strong></td>
<td>Animal Handler</td>
</tr>
<tr>
<td>2-Acetylaminofluorene</td>
<td>Asbestos</td>
</tr>
<tr>
<td>3,3’-Dichlorobenzidine (and its salts)</td>
<td>Beryllium 1 or 3 Year</td>
</tr>
<tr>
<td>4-Aminodiphenyl</td>
<td>Biohazard Worker 1, 2, 3, 4 and 5</td>
</tr>
<tr>
<td>4-Dimethylaminoazobenzene</td>
<td>Engineered Nanoparticle Worker 1 or</td>
</tr>
<tr>
<td>4-Nitrobiphenyl</td>
<td>Engineered Nanoparticle Worker 2 (Carbon Nanotubes or Carbon Nanofibers)</td>
</tr>
<tr>
<td>Alpha-Naphthylamine</td>
<td>Hazardous Waste Worker</td>
</tr>
<tr>
<td>Benzidine</td>
<td>Hexavalent Chromium (CrVI)</td>
</tr>
<tr>
<td>Beta-Naphthylamine</td>
<td>High Noise Worker (Hearing Conservation)</td>
</tr>
<tr>
<td>Beta-Propiolactone</td>
<td>Human Pathogens</td>
</tr>
<tr>
<td>Bis-Chloromethyl Ether</td>
<td>Lead Worker</td>
</tr>
<tr>
<td>Ethyleneimine</td>
<td>Silica Worker</td>
</tr>
<tr>
<td>Methyl Chloromethyl Ether</td>
<td>Thallium Worker</td>
</tr>
<tr>
<td>N-Nitrosodimethylamine</td>
<td></td>
</tr>
<tr>
<td><strong>Individual OSHA Regulated Carcinogens:</strong></td>
<td></td>
</tr>
<tr>
<td>1,2 Dibromo-3-chloropropane</td>
<td></td>
</tr>
<tr>
<td>1,3 Butadiene</td>
<td></td>
</tr>
<tr>
<td>Acrylonitrile</td>
<td></td>
</tr>
<tr>
<td>Arsenic (Inorganic)</td>
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# Medical Certification Programs

<table>
<thead>
<tr>
<th>LANL Medical Certification Programs</th>
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<tbody>
<tr>
<td>Deployable Team (CONUS/OCONUS)</td>
</tr>
<tr>
<td>Fissile Material Handler</td>
</tr>
<tr>
<td>Hazardous Devices Worker</td>
</tr>
<tr>
<td>Hazmat Team</td>
</tr>
<tr>
<td>High-Altitude Worker (greater than 3,000 meters)</td>
</tr>
<tr>
<td>Class 3B or 4 Laser User</td>
</tr>
<tr>
<td>Incidental Laser User</td>
</tr>
<tr>
<td>Mobile Crane Operator</td>
</tr>
<tr>
<td>Non- Reactor Nuclear Facility Operator (WETF)</td>
</tr>
<tr>
<td>Respiratory Protection Worker</td>
</tr>
<tr>
<td>Technical Surveillance Countermeasures (TSCM)</td>
</tr>
<tr>
<td>Tower Climber</td>
</tr>
<tr>
<td>U.S. Department of Transportation Commercial Driver</td>
</tr>
<tr>
<td>Wildland Firefighter</td>
</tr>
</tbody>
</table>
Historical Enrollment Process: Reactive vs. Proactive

- **Job Demands Evaluation**
  - Filled out by Employee at Phase II Exam
  - Medical provider initiated enrollment
  - Not necessarily evidence based

- **Qualitative and/or Quantitative Exposure Assessments**
  - Evidence based
  - After the fact

- **E-mail requests for IH Input**

- **Phone call to occupational health by the manager**
Identified Enrollment Issues

- Inability to identify new hires, directed transfers and promotions in a formalized way that will allow for timely enrollment
- Lack of input from worker’s management to identify work exposure hazards
- Lack of formalized process to engage Industrial Hygienist in evaluation of job specific hazards before work begins
Improved Enrollment Process

- Focus on manager engagement
  - Program Clean Up
    - Manager sent list of staff and corresponding program enrollment
    - Engage IH review for dis-enrollment

- Automated enrollment management
  - IH Database
  - Management notification of new hires, directed transfers and promotions
    - Digitized medical surveillance/certification enrollment form
    - Manager/Employee notification of enrollment

- Evidence Based Enrollment
  - Documentation of enrollment rationale
New Hire, Directed Transfer, and Promotion Enrollment Process Flow Diagram

HR
Start

Provide list of all new hires, directed transfers, and promotions weekly

Upload HR feed into database

Review questionnaire, enrollment criteria, and sampling data

Concur? No

Resolve differing opinions about enrollment (with Medical Surveillance PL)

Enroll? No

Send notification of decision to RLM and employee

No

Yes

End

Yes

End

Send notification of decision to manager and employee

送 notification to manager with link to enrollment form

Send notification to appropriate IH based on enrollment form

Send link to applicable questionnaires

Complete and submit enrollment form

Occupational Health

Enroll in medical database

Schedule exam

Employee

Completes appropriate questionnaire and submits

RLM

Send notification of decision to manager and employee

Yes

End

Send notification to manager with link to enrollment form

Send notification to appropriate IH based on enrollment form

Send link to applicable questionnaires

Complete and submit enrollment form

Yes

End

Send notification of decision to manager and employee

No

Yes

End
Additional Opportunities for Medical Surveillance Enrollment

- Industrial hygiene exposure assessment based on enrollment criteria and/or sampling which is entered by IH directly
- Medical provider engagement of IH from knowledge obtained from examination
- Union craft workers are enrolled through a separate process based largely on job title
Questions?

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