**(Model SOP)**

**United States Army**

**Name of the Clinic**

**Occupational Health**

**(OFFICE SYMBOL) SOP No.\_\_\_\_\_\_**

**Effective Date\_\_\_\_\_**

**Date Removed from Service\_\_\_\_\_**

**MEDICAL SURVEILLANCE EXAMINATIONS**

**1. PURPOSE**

To provide general guidelines for appropriately assessing personnel with occupational hazard exposure.

**2. AUTHORITY AND REGULATORY COMPLIANCE**

Federal, DoD, and Army regulations governing medical surveillance examinations are included below in the References section of this SOP.

**3. REFERENCES**.

1. OSHA 29 CFR 1910 (General Industry)
2. OSHA 29 CFR 1926 (Construction)
3. DoDI 6055.1, DoD Safety and Occupational Health (SOH) Program, 19 August, 1998.
4. DoDI 6055.05, Occupational and Environmental Health (OEH), 11 November, 2008.
5. DoD 6055.05-M, Occupational Medical Examinations and Surveillance, 02 May, 2007 (Change 1, 16 September 2008).
6. AR 40-5, Preventive Medicine, 25 May 2007.
7. AR 40-66, Medical Record Administration and Healthcare Documentation,

17 June, 2008 (RAR: 04 January 2010).

1. AR 385-10, Army Safety Program, 02 Jul, 2013.
2. DA PAM 40-11, Preventive Medicine, 22 Jul, 2005.

J. DA PAM 385-69, Safety Standards for Microbiological and Biomedical

Laboratories, 6 May 2009

K. NIOSH Publication No. 79-116 (Reference (h)).

L. NMCPHC Technical Manual ™ OM 6260, “Medical Surveillance Procedures

Manual and Medical Matrix,” (Navy Medical Matrix).

**4. ABBREVIATIONS / TERMS**

DA - Department of the Army

DoD - Department of Defense

CEMR - Civilian Employee Medical Records

CPAC - Civilian Personnel Advisory Center

DOEHRS-IH - Defense Occupational and Environmental Health Readiness System – Industrial Health

DOEHRS-HC - Defense Occupational and Environmental Health Readiness System – Hearing Conservation

IAW – In Accordance With

IH- Industrial Hygiene

NMCPHC - Navy and Marine Corps Public Health Center

NIOSH - National Institute for Occupational Safety and Health

OSHA- Occupational Safety and Health Administration

OHC- Occupational Health Clinic

OHP-Occupational Healthcare Provider

PHC - Public Health Command

PPE - Personal Protective Equipment

SOP - Standard Operating Procedure

USAPHC - US Army Public Health Command

**5. PROCEDURES**

1. Determination of Need for Medical Surveillance

1. Occupational Health obtains exposure data and recommendations for enrollment into medical surveillance from Industrial Hygiene. If IH data is not available, OH may use the job title and type of work performed to establish enrollment.
2. Medical Surveillance Guidelines – General
3. Baseline Surveillance (may be part of a preplacement / new hire or new occupational exposure examination must take place within sixty (60) days of the commencement of work (unless more stringent requirements exist), but preferably take place before work begins.
4. Periodic monitoring examination schedules will occur at the intervals recommended by OSHA, DoD and/or DA guidance, whichever is more stringent. See Appendices.
5. Termination (employment and/or exposure) examinations occur when personnel leave employment or are no longer exposed to a hazard. Workers will receive a termination exam within 30 days.
6. Performing the Evaluation
7. Exam elements will consist of those outlined in OSHA, DOD, or DA guidance (See Appendices).
8. In cases where there are no regulatory statutes but there is an occupational health hazard present and surveillance is required, the following are general guidelines to follow regarding important evaluation elements to consider:
9. Specific job tasks and/or requirements.
10. Workplace risk factors including exposure to physical, chemical, biological, radiological, and other agents (e.g., ergonomic stressors).
11. Personal risk factors.
12. Target organ systems.
13. Previous job tasks and/or requirements or work history.
14. Environmental risk factors (e.g., household and hobbies exposures).
15. Use of personal protective equipment (PPE).
16. Allergies.
17. Tobacco, alcohol, and/or illicit drug use.
18. Diet.
19. Use of medications, vitamins, herbals, and supplements.
20. Other factors set forth in National Institute for Occupational Safety and Health (NIOSH) Publication No. 79-116 (Reference (h)).

NOTE: OM Consultants at the Regional Medical Commands or the USAPHC Occupational Medicine Program at Aberdeen Proving Ground, MD are available to assist any OHC personnel in need of help with any questions or guidance related to occupational medical surveillance ([Usarmy.apg.medcom-phc.mbx.oh65@mail.mil](mailto:Usarmy.apg.medcom-phc.mbx.oh65@mail.mil))

1. Occupational Health Hazard Counseling
2. Clinic personnel will educate Army personnel on occupational hazards they encounter in accordance with OSHA or DoD/DA regulations.
3. Informing the Worker of Surveillance Examination Results
4. The OHP shall inform the worker of the results of their surveillance exam as soon as possible and within any OSHA, DoD, and/or DA guidelines. All workers should be provided the following information:
5. If they are qualified.
6. If a medical condition was discovered that would place them at an increased risk of material impairment of their health from continued exposure to work-related chemical or physical agents.
7. Whether limitations are recommended for their exposure(s) or for the use of PPE.
8. What, if any, work restrictions or corrective devices, such as corrective lenses, must be worn to be qualified to perform the job.
9. The OHP shall document the notification of results to the worker in their medical record.
10. All personnel with significant abnormalities must be further evaluated or referred to their private provider for evaluation, as appropriate.
11. In cases where the abnormal lab/exam is likely work-related but not proven, further evaluation by the OH clinic is warranted.
12. Abnormalities that are likely not work-related should be further evaluated by the worker’s private provider.

F. Informing the Supervisor

1. For some DoD/DA positions that require a medical surveillance exam e.g. police and security guards, the supervisor must be informed that the employee is cleared to perform duties, whether any restrictions are warranted, and if there is required PPE.
2. Recordkeeping
3. Occupational medical surveillance examinations for Service members and civilian personnel must recorded and maintained IAW AR 40-66.

**6. FORMS**

1. A general list of forms that are common to all types of medical surveillance exams is located in AR 40-66 and must be included in the CEMR. Examples are the SF 66D - Employee Medical Folder, DD 2807 - Report of Med History, and the DD 2808 - Report of Medical Examination.
2. An electronic copy of the medical record is also acceptable.

**7. APPENDICES**

**Appendix A: Asbestos Medical Surveillance Exams**