The scope of further testing will normally be determined by the specialist, but should include certain minimum tests. A suggested referral letter indicating these tests is attached.

Where an asbestos-related lung abnormality of Du Pont causality has been established, the follow up should at a minimum include a semi-annual posterior-anterior and lateral chest x-ray, and pulmonary function tests. If the employee refuses, this fact should be documented in the employee's medical record.

Those employees with confirmed asbestosis, exudative pleural thickening, pleural effusion or malignant illnesses should be excluded from tasks with potential for exposure to asbestos. Those with benign asymptomatic abnormalities need not be excluded. Those with presumptive asbestosis should be handled on an individual basis.

REFERENCES

1. Medical Division, Du Pont Employee Relations Department, "Guidelines for Physicians", Section T.

2. Preger, L., et al, "Asbestos-Related Disease", publisher Grune & Stratton, New York, 1978.

3. NIOSH, "A Guide to the Work-Relatedness of Disease", Rev. Edicion, January 1979.

4. National Cancer Institute, "Asbestos: An Information Resource", May 1978.

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