



E. I. DU PONT DE NEMOURS & COMPANY
INCORPORATED
WILMINGTON, DELAWARE

EMPLOYEE RELATIONS DEPARTMENT

CC: D. G. Windsor
H. M. Baker

PLAINTIFF'S
EXHIBIT
DUP-2081

RECEIVED
JUL 6 1979
JOHN C. BONNETT, M.D.

July 6, 1979

J. C. BONNETT, M.D.
MEDICAL DIVISION
N-11400

The following statement is taken from a transparency which was used at the Physicians Annual Meeting on April 25-27, 1979 but was otherwise unidentified.

"Company policy makes submission to periodic (medical) examinations condition of employment where exposure to certain highly acute or chronically toxic substances is possible, e.g., asbestos, TEL"

I would appreciate your verification that this is indeed company policy and an indication of where the policy is documented.

SAFETY & FIRE PROTECTION DIVISION

J. R. Martin
J. R. Martin
Occupational Health Consultant

JRM:sc

7/5/79

T. Hanaran - Answered by phone

DUP 0948395

DU PONT PHYSICIANS ANNUAL MEETING
WILMINGTON, DELAWARE
APRIL 25-27, 1979

PHYSICIANS RESPONSIBILITY UNDER OSHA

MEDICAL SURVEILLANCE UNDER OSHA HEALTH AND SAFETY
STANDARDS

RECORDKEEPING REQUIREMENTS

CONFIDENTIALITY — MEDICAL RECORDS

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DU 039318

MEDICAL SURVEILLANCE
(GENERAL)

- A. PROVIDE OR MAKE AVAILABLE MEDICAL EXAMINATION AT
EMPLOYER'S COST
1. REGULATIONS DO NOT REQUIRE EMPLOYEE TO SUBMIT TO
EXAMINATION
 2. COMPANY POLICY MAKES SUBMISSION TO PERIODIC
EXAMINATIONS CONDITION OF EMPLOYMENT WHERE
EXPOSURE TO CERTAIN HIGHLY ACUTE OR CHRONICALLY
TOXIC SUBSTANCES IS POSSIBLE, E.G., ASBESTOS, TEL
- B. FREQUENCY AND SCOPE
1. PREPLACEMENT, PERIODICALLY THEREAFTER (USUALLY
ANNUALLY, THOUGH CAN BE MORE FREQUENT
DEPENDING ON SPECIAL CIRCUMSTANCES), AND
UPON TERMINATION.
 2. PHYSICAL EXAMINATION COMPARABLE TO BASIC
COMPANY ANNUAL EXAMINATION PROGRAM PLUS
SPECIAL TESTS AND EVALUATIONS AS LISTED
IN SPECIFIC STANDARDS

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MEDICAL SURVEILLANCE
SPECIFIC OSHA STANDARDS

A. ORIGINAL 14 CARCINOGENS, E.G., 4-AMINODIPHENYL,
BETA-NAPHTHYLAMINE

1. PREPLACEMENT AND ANNUAL EXAMINATION FOR EMPLOYEES
TO BE ASSIGNED TO REGULATED AREAS
2. NO TERMINATION PHYSICAL REQUIRED
3. NO SPECIFIC LIST OF TESTS
4. THE PHYSICIAN IS REQUIRED TO "CONSIDER WHETHER
THERE EXIST CONDITIONS OF INCREASED RISK,
INCLUDING REDUCED IMMUNOLOGICAL COMPETENCE,
THOSE UNDERGOING TREATMENT WITH STEROIDS OR
CYTOTOXIC AGENTS, PREGNANCY, AND CIGARETTE
SMOKING"

B. ASBESTOS

1. PREPLACEMENT AND ANNUAL EXAMINATION REQUIRED
FOR ANY EMPLOYEE ENGAGED IN AN OCCUPATION
EXPOSED TO ASBESTOS
2. UPON TERMINATION OF EMPLOYMENT - WITHIN 30 DAYS
BEFORE OR AFTER TERMINATION
3. BASIC MEDICAL EXAMINATION PLUS
 - A. CHEST ROENTGENOGRAM
 - B. HISTORY TO ELICIT SYMPTOMATOLOGY OF
RESPIRATORY DISEASE
 - C. PULMONARY FUNCTION TESTS

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C. INORGANIC ARSENIC

1. PREPLACEMENT AND PERIODIC EXAMINATIONS ANNUALLY OR SEMIANNUALLY DEPENDING ON AGE AND LENGTH OF PRIOR EXPOSURE FOR EMPLOYEES WHO WILL BE OR ARE EXPOSED ABOVE ACTION LEVEL ($1/2$ PEL) FOR MORE THAN 30 DAYS PER YEAR (IF EXPOSED MORE THAN 30 DAYS PER YEAR ABOVE ACTION LEVEL FOR TOTAL OF 10 YEARS THEN MEDICAL SURVEILLANCE MUST BE PROVIDED SEMIANNUALLY, IRRESPECTIVE OF CURRENT EXPOSURE)
2. ADDITIONAL EXAMINATIONS AS APPROPRIATE WHENEVER EMPLOYEE DEVELOPS SIGNS OR SYMPTOMS COMMONLY ASSOCIATED WITH INORGANIC ARSENIC EXPOSURE
3. TERMINATION - ONLY IF NO EXAMINATION IN PREVIOUS 6 MONTHS
4. BASIC MEDICAL EXAMINATION PLUS SPECIFIC REQUIRED TESTS INCLUDING SKIN AND NASAL EXAMINATION AND SPUTUM CYTOLOGY

D. INORGANIC LEAD

1. PREPLACEMENT FOR ANY EMPLOYEE FIRST ASSIGNED TO AN AREA WHERE AIRBORNE LEVELS ARE ABOVE 30 mg/m^3
2. ANNUAL EXAMINATIONS FOR ALL EMPLOYEES WHO ARE OR MAY BE EXPOSED ABOVE 30 mg/m^3 FOR MORE THAN 30 DAYS PER YEAR AND WHO HAD ANY MEASURED BLOOD LEAD LEVEL AT OR ABOVE 40 mg/100 g DURING THE PRECEDING 12 MONTHS
3. FURTHER PERIODIC EXAMINATION DETERMINED BY BLOOD LEAD LEVELS
4. ADDITIONAL EXAMINATIONS WHENEVER EMPLOYEE DEVELOPS SIGNS OR SYMPTOMS COMMONLY ASSOCIATED WITH LEAD INTOXICATION, DIFFICULTY IN BREATHING DURING

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RESPIRATOR FIT TESTING OR UPON REQUEST FOR CONSULTATION (MEDICAL DISCRETION AS TO SCOPE OF EXAMINATION PERMITTED WITH REQUEST SITUATION)

5. NO TERMINATION EXAMINATION REQUIRED
6. BASIC MEDICAL EXAMINATION PLUS SPECIFIC LIST OF ADDITIONAL TESTS INCLUDING PREGNANCY TESTING OR MALE FERTILITY EVALUATION IF REQUESTED
7. MULTIPLE PHYSICIAN REVIEW - PROCEDURES ARE INCLUDED FOR PERMITTING AS MANY AS TWO ADDITIONAL MEDICAL OPINIONS IF THE EMPLOYEE IS NOT SATISFIED WITH THE FIRST AND THE FIRST TWO PHYSICIANS CANNOT AGREE ON A DIAGNOSIS (SUBJECT TO COURT STAY)
8. MEDICAL REMOVAL PROTECTION - IF BLOOD LEAD LEVELS EXCEED SPECIFIED LIMITS (1979, 80 $\mu\text{g}/100 \text{ g}$; 1980, 70; 1981, 60; 1982, 50) THEN EMPLOYEE IS TO BE REMOVED FROM EXPOSURE AND GUARANTEED RATE OF PAY AND OTHER BENEFITS FOR 18 MONTHS

E. ACRYLONITRILE

1. APPLIES TO ANY EMPLOYEE EXPOSED ABOVE THE ACTION LEVEL (1 PPM TWA)
2. PREPLACEMENT AND ANNUALLY
3. ADDITIONAL APPROPRIATE EXAMINATIONS - AS IN ARSENIC IF THE EMPLOYEE DEVELOPS SIGNS OR SYMPTOMS
4. TERMINATION EXAMINATION ONLY IF NO EXAMINATION IN PREVIOUS 6 MONTHS
5. BASIC MEDICAL EXAMINATION PLUS SPECIAL LIST OF REQUIRED TESTS

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F. VINYL CHLORIDE

1. PREPLACEMENT AND PERIODIC EXAMINATIONS FOR EMPLOYEES EXPOSED ABOVE THE ACTION LEVEL (1/2 PEL)
2. SEMIANNUAL EXAMINATIONS FOR THOSE EXPOSED TO VINYL CHLORIDE FOR 10 YEARS OR LONGER
3. BASIC PHYSICAL EXAMINATION PLUS SPECIFIC LIST OF ADDITIONAL TESTS
4. ADDITIONAL APPROPRIATE MEDICAL EXAMINATION FOR THOSE EXPOSED TO AN EMERGENCY (MASSIVE RELEASE)

G. RESPIRATOR PROGRAM

1. WHERE RESPIRATORS ARE NECESSARY TO PROTECT THE HEALTH OF THE EMPLOYEE, A PHYSICIAN MUST DETERMINE THAT THE EMPLOYEE IS "PHYSICALLY CAPABLE OF PERFORMING THE WORK AND USING THE RESPIRATOR"
2. THE HEALTH AND PHYSICAL CONDITIONS PERTINENT TO THIS DETERMINATION ARE LEFT TO THE PHYSICIAN
3. CAPABILITY STATUS MUST BE REVIEWED PERIODICALLY (YEARLY SUGGESTED)

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RECORDKEEPING REQUIREMENTS
PHYSICIAN'S OPINION
RETENTION
ACCESS

DU 039324

DISCUSSION

STANDARD

ASBESTOS

14 CARCINOGENS

INORGANIC ARSENIC

OPINION TO
EMPLOYER

NOT REQUIRED, BUT TEST
RESULTS ARE REQUIRED
TO BE SUBMITTED

EMPLOYEE IS SUITABLE FOR
EMPLOYMENT IN SPECIFIC
EXPOSURE

PHYSICIAN'S
RECORD
RETENTION

20 YEARS

PERIOD OF EMPLOYMENT,
ON TERMINATION TO
NIOSH

RECORD
ACCESS

OSHA, NIOSH, EM-
PLOYEE'S PHYSICIAN
ON REQUEST OF EM-
PLOYEE

SAME AS ABOVE AND
TO NEW EMPLOYER ON
REQUEST OF EMPLOYEE

SAME AS 14 CARCINO-
GENS

1. RESULTS OF EXAM
2. WHETHER DETECTED CON-
DITION WOULD PLACE AT
INCREASED RISK OF MATE-
RIAL IMPAIRMENT FROM
EXPOSURE
3. LIMITATIONS
4. STATEMENT THAT PHYSI-
CIAN HAS INFORMED EM-
PLOYEE OF RESULTS AND
CONDITIONS WHICH MAY
REQUIRE TREATMENT

LONGER OF 40 YEARS OR
EMPLOYMENT PLUS 20
EXCEPT X-RAYS AND CYTO-
LOGIC DATA 5 YEARS

STANDARD	Opinion To Employer	Physician's Record Retention	Record Access DUP 0948403
INORGANIC LEAD	1. WHETHER DETECTED CON- DITION WOULD PLACE EM- PLOYEE AT INCREASED RISK OF MATERIAL IMPAIRMENT FROM LEAD EXPOSURE 2. PROTECTIVE MEASURES 3. LIMITATION ON RESPIRATOR USE 4. BLOOD LEAD DETERMINATION RESULTS	LONGER OF 40 YEARS OR DURATION OF EMPLOYMENT PLUS 20 YEARS MUST NOTIFY NIOSH 3 MONTHS PRIOR TO DISPOSAL; IF GOING OUT OF BUSINESS PASS ON TO SUCCESSOR EMPLOYER OR ELSE SEND TO NIOSH	SAME AS 14 CARCINO- GENES INCLUDING ANY OTHER INDIVIDUAL DESIGNATED BY EMPLOY EE
ACRYLONITRILE	SAME AS INORGANIC ARSENIC	SAME AS INORGANIC LEAD	SAME AS INORGANIC LEAD
VINYL CHLORIDE	SAME AS 14 CARCINOGENS	LONGER OF 30 YEARS OR DURATION OF EMPLOYMENT PLUS 20 YEARS	SAME AS 14 CARCINO- GENS

CONFIDENTIALITY
MEDICAL RECORDS

A. DU PONT POLICY

1. DETAILED MEDICAL RECORD INFORMATION, DIAGNOSES AND OTHER INFORMATION TREATED AS CONFIDENTIAL AND DISCLOSED ONLY TO EMPLOYEES OR UPON EMPLOYEE CONSENT, TO PERSONAL PHYSICIANS (SEE MEDICAL DIVISION POLICY GUIDANCE — N-1)

B. OSHA REQUIREMENTS

1. MEDICAL RECORDS REQUIRED TO BE KEPT UNDER HEALTH AND SAFETY STANDARDS MUST BE SUBMITTED TO OSHA WHETHER OR NOT EMPLOYEE CONSENTS
2. PENDING OSHA PROPOSED RULE RELATING TO PRESERVATION AND ACCESS TO VOLUNTARILY MAINTAINED MEDICAL RECORDS WOULD PERMIT ACCESS BY PRESENT AND FORMER EMPLOYEES OR THEIR DESIGNATED REPRESENTATIVES AND BY OSHA AND NIOSH REGARDLESS OF EMPLOYEE CONSENT

C. NEW JERSEY REQUIREMENT

1. MEDICAL LICENSE CONDITIONED ON DOCTOR AGREEING TO PROVIDE ACCESS TO PATIENT AND PATIENT DESIGNATED SOURCES

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