

TO R. E. Hanna

DATE August 13, 1974

FROM Dr. H. B. Lovejoy

SUBJECT VCM Guidelines

J. M. Davis asked me to review the VCM Guidelines that Mr. Widing sent out on July 26. I am disturbed by certain differences which would be existant under the Medical Paragraph V. These primarily involve what should take place if positive information is elicited.

- d) - 1) - Physical examination - The finding of enlargement of liver or spleen by abdominal palpation.

Individuals should be excluded from the vinyl (or other chlorinated organics) area. We also exclude people with hypertension, heart or renal disease and those who are obese.

2) Medical History

A. Alcohol

I feel that all we can ask is whether they drink or not. This is already present on their history form and in my experience no person admits to excessive alcoholic intake.

B. Past history of hepatitis

In accordance with our discussion these people should be excluded, but as this is a relatively common ailment, I am going to change my recommendation and say that they should not be excluded permanently but for one year after physical exam and lab have returned to normal. Liver function studies as well as liver and spleen must remain normal on physical examination. During this year, re-examination should be done every three months.

C. Past exposure to potential toxic agents

This data has to be recorded and regular physical and laboratory evaluations made, however, judgement as to further exposure to VCM will have to be made on an individual basis.

- D. I see no reason for excluding blood transfusions from the area. Only exclude those with a history of recent (3 months) blood transfusions because of possible homologous serum jaundice.

- 3) These liver functions studies except for (GGTP) are currently being done. As yet I know of no particular reasons for including the GGTP except that it is included in the Federal Standards. (We are currently trying to get our lab approved. Application for accreditation by the College of American Pathologists can not be accepted until early next year. We have written to Atlanta for information concerning the Clinical Laboratory Improvement Act of 1967 accreditation.)
- 5) - A) If abnormalities are present on retesting, I feel the employee should either undergo a liver scan and be referred to his private physician or visa versa, be referred to his private physician and have a liver scan for definite diagnosis but should also be excluded from the VCM (organic area) and the same applies under "B".
- B) I would oppose allowing an employee with liver disease (recent hepatitis or alcohol intake causing him problems) to return to vinyl chloride related employment.

HBL/bc