CONOCO

Interoffice Communication

To Houston Medical Clinic

From George Lovett

VIA FAX

Date July 17, 1987

Subject Attached FAX-IOC for Dr. Bender

Please see to it that Dr. Bender receives the attached IOC before 8:00 a.m. today.

Thanx.

George W. Lovett, M.D.
Medical Director - Ponca City Clinic

GL.77.FAS.TXT

JOEL BENDER, Ph.D., M.D.

JUL 17 1987

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(conoco)

Interoffice Communication

To Joel Bender

From George Lovett

Date July 17, 1987

Subject Exams Proposal VIA FAX

I believe the proposal is sensible, proper, and unneeding of further refinement. The cost figures for the periodic exam surely should be persuasive.

My only questions relates to the EKG language on the Periodic Health Screen. I believe this to mean that an EKG is required at preplacement irrespective of age, and that EKGs for subsequent periodic exams are required at each examination beginning at age 40. [SURV.TXT,6]

A trivial point: on the DOT sheet, under "Physical Examination:" the nomative adjective in "insuling dependent diabetes" should be hyphenated, viz. "insulin-dependent diabetes". [SURV.TXT/12, page 1]

George W. Lovett, M.D.
Medical Director - Ponca City Clinic

GL.77.exprop.TXT

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BENZENE SURVEILLANCE EXAMINATION

The Benzene Surveillance Exam may be performed in association with other approved periodic health screening exams, in which case the content and scope may become more extensive. However, before medical approval can be advised for unrestricted activity in job positions with the potential for exposure to benzene, the following guidelines should be achieved.

FREQUENCY

- Consult 29 CFR 1910.1028 regarding specific requirements for medical surveillance of employees assigned to jobs having potential for benzene exposure. Examinations are required prior to assignment and annually during assignments with potential benzene exposure. Employees leaving such assignments will be examined according to Conoco's established periodic health screening procedures unless medical conditions warrant more frequent or more extensive examinations.

MEDICAL HISTORY

- The employee must complete the **Confidential Interval Health History** form. The examining physician should record on the form details of occupational history with special attention to work place exposures. Any past exposure to chemicals known to adversely effect the bone marrow or any past hematologic abnormalities which are potentially work related should be recorded, as well as details of any significant exposure to radiation. Any past illness or abnormality of the hematopoietic system should be carefully evaluated. Any medications used by the worker whose normal or adverse effects impact upon the hematologic or cardiovascular system should be carefully noted. Smoking habits should be recorded.

PHYSICAL

- The examination should be thorough and complete with respect to all organ systems. Record these findings on the Conoco **Physical Examination Record**.

LABORATORY STUDIES

- Complete blood count, including a thrombocyte count, erythrocyte count, leukocyte count with differential, hematocrit, hemoglobin, and erythrocyte indices.
- Dipstick urinalysis with microscopic only if clinically indicated.
- Other clinically appropriate routine laboratory studies as determined by the examining physician.
- Individuals wearing respirators ≥30 days a year must have a pulmonary function test every three years.

APPROVAL AND NOTIFICATION

- Recommendations regarding the need for job-related restrictions should be made on the **Conoco Medical Evaluation** form. Completion of the **Respiratory Certification** section is essential.
- Medical conditions that would place an employee at significant risk from exposure to benzene should be listed in the Comments section of the **Medical Evaluation** Form.
- The examining physician is expected to inform the individual of examination findings, answer immediate questions, and provide any needed recommendations.

Only outpatient exams are approved. The employee is responsible for charges associated with any additional tests, referrals, or diagnostic procedures unless the Medical Division has agreed in advance to accept such charges.

All forms and laboratory reports should be sent marked CONFIDENTIAL to **Conoco Inc., Medical Division, PE-1050, P. O. Box 2197, Houston, TX 77252.**

ASBESTOS SURVEILLANCE EXAMINATION

The Asbestos Surveillance Exam may be performed in association with other approved periodic health screening exams, in which case the content and scope may become more extensive. However, before medical approval can be advised for unrestricted activity in job positions with the potential for exposure to asbestos and related materials the following guidelines should be achieved.

FREQUENCY

- Consult 29 CFR 1910.1001 and 1926.58 regarding specific requirements for medical surveillance of employees assigned to jobs having potential for asbestos exposure. Examinations are required prior to assignment and at least annually during assignments with potential asbestos exposures. Employees leaving such assignments will be examined according to Conoco's established Periodic Health Screening procedures unless medical conditions warrant more frequent or more extensive examinations.

MEDICAL HISTORY

- At the first Asbestos Surveillance Exam the employee must complete both the **Confidential Interval Medical History**, and the **Initial Asbestos Medical Questionnaire**. On subsequent examinations both the **Confidential Interval Medical History** and the **Periodic Asbestos Medical Questionnaire** must be completed.

PHYSICAL

- In addition to an examination of the cardiopulmonary and digestive systems, other systems should be examined as indicated by the past medical history and the physical findings. Record these findings on the Conoco **Physical Examination Record**.

LABORATORY STUDIES

- Pulmonary function testing is required, with measurements of FVC, FEV1, and -- if the machine is so equipped -- the FEF 25-75%.
- A standard PA chest radiograph is to be offered according to the following timetable:

	age <35	age 35-45	age >45
<10 years since first exposure	every 5 years		
10 + years since first exposure	every 5 years	every other year	every year

APPROVAL and NOTIFICATION

- Recommendations regarding the need for job-related restrictions for asbestos exposure should be made on the **Conoco Houston Medical Evaluation** form. Either approval or disapproval for unrestricted activity in jobs with the potential for asbestos exposure must be indicated.
- Completion of the **Respirator Certification** section is also essential.
- Medical conditions that would place the employee at significant risk from exposure to asbestos and related materials should be identified and listed in the Comments section of the **Medical Evaluation** form.
- The examining physician is expected to inform the individual of examination results, answer immediate questions, and provide any needed recommendations.
- All chest X-rays will be submitted to Conoco Houston Medical Division, and will be interpreted by a B-reader radiologist selected by Conoco. The interpretive services of other radiologists are unnecessary.

Only outpatient exams are approved. The employee is responsible for charges associated with any additional tests, referrals, or diagnostic procedures, unless the Medical Division has agreed in advance to accept such charges.

All forms, laboratory reports, and the original chest X-rays should be sent marked CONFIDENTIAL, to **Conoco Inc., Medical Division, PE-1050, P. O. Box 2197, Houston, TX 77252.**

D.O.T. TRANSPORT DRIVER EXAMINATION

POLICY: The examination requirements should be followed to avoid delays in forming medical recommendations and in processing invoices. Conoco medical forms should be used. The original forms, laboratory reports, radiographs, electrocardiographs, and the invoice should be sent marked CONFIDENTIAL to **Conoco, Inc., Medical Division, PE-1050, P. O. Box 2197, Houston, Texas 77252.**

The final recommendation of suitability for unrestricted employment will be made by Conoco Houston Medical. The prospective employee should not begin permanent work with Conoco Inc. or its subsidiaries or affiliates until Conoco Medical's recommendations have been conveyed to the hiring manager or supervisor.

Approval for medical tests beyond the scope of this examination must be obtained from Conoco Houston Medical. D.O.T. recertification may be concluded by the examining physician providing there are no findings that merit consultation by telephone or letter with Conoco Houston Medical, in which case recertification should be withheld. The examining physician is responsible for informing the examinee of the presence of any significant findings.

SCOPE OF EXAMINATION

Applicability: This examination is required by Conoco Inc. for preplacement and periodic medical examinations of permanently employed commercial transportation drivers who are subject to D.O.T. regulations. The examination is also to be used for Conoco employees who are marine transportation workers, and operators of mobile equipment (such as transport vehicles and overhead cranes).

Instructions: The examination requires a complete history, physical evaluation, certain laboratory tests, special studies, and must be conducted by a licensed doctor of medicine or osteopathy. The examiner should be aware of the physical and mental demands required of these jobs, and be ready to detect the presence of any condition likely to interfere with the safe operation of the equipment used in these jobs. Certain findings may be immediately disqualifying, while others may require further investigation before qualification can be offered.

Medical History: The questionnaire is to be completed by the examinee with any pertinently positive response verified, detailed, and documented by the examiner on the form or an attachment. The examinee should signify on the form his consent to be examined and authorize the release of information and material to Conoco Houston Medical.

Physical Examination: The examination should be thorough and complete with respect to all organ systems. Immediately disqualifying are alcoholism, narcotic or other drug abuse, aphakia, and insulin-dependent diabetes. Impairments of the back and extremities should be noted if present. Conoco should be advised if activity restrictions appear to be indicated.

Laboratory Tests: The following are to be obtained:

- Dipstick Urinalysis.
- Hemoglobin or Hematocrit, and White Blood Count.
- Automated fasting blood chemistry panel, including at least:

Glucose	BUN or Creatinine
Triglycerides	High Density Lipoproteins
Cholesterol	Total Bilirubin
GGTP	

Occult Fecal Blood by Guaiac Card: three cards at each examination.

Electrocardiography: 12-lead study at each examination beginning with the 40th year of age, or when medically indicated.

Chest Radiography: a standard PA film is required at preplacement and during the examination that is closest in proximity to the 40th, 50th, and 60th year of age.

Pulmonary Function Testing: At each examination record FVC, and FEV1, and (if the testing device is so equipped) FEF 25-75%.

Visual Acuity: At each examination verify visual acuity of at least 20/40 (Snellen) in each eye without corrective lenses, or visual acuity separately corrected to at least 20/40 with corrective lenses, and distant binocular acuity of at least 20/40 in both eyes with or without corrective lenses, and a field of vision of at least 70° in the horizontal meridian in each eye.

Color Vision: Required only at preplacement. Verify ability to recognize the colors of traffic devices by any of the standard tests. If impairment is found, ophthalmologic referral is indicated to determine and document adequate color discrimination of the colors of traffic control devices.

Hearing Acuity: At each examination perform audiometric testing that complies with the OSHA Hearing Conservation Amendment, recording thresholds at 500 Hz, 2000 Hz, 3000 Hz, 4000 Hz, 6000 Hz, and 8000 Hz. The results and additionally required documentation (for example; machine serial number, and date of last calibration) should be recorded on the Conoco **Audiometric Results** form. The values of the background noise determination for the testing booth should have been obtained and recorded separately. Hearing loss greater that 40 dB at 500, 1000, and 2000 Hz in the better ear is disqualifying.

Urine Screening for Drugs of Abuse: Required only at preplacement examination. Most conveniently performed following the physical examination, such testing will utilize Conoco procedures, forms, and the laboratories with which Conoco Inc. has a contractual relationship. To obtain the package of necessary materials (instructions, forms, container, evidence tape, and prepaid mailing pouch) call Conoco Houston Medical at (713) 293-1161.

VINYL CHLORIDE MONOMER SURVEILLANCE EXAMINATION

The Vinyl Chloride Monomer Surveillance Exam may be performed in association with other approved periodic health screening, in which case the content may become more extensive. However, before medical approval can be advised for unrestricted activity in job positions with the potential for exposure to vinyl chloride monomer, the following guidelines must be achieved.

FREQUENCY

- Consult 29 CFR 1910.1017 regarding specific requirements for medical surveillance of employees assigned to jobs having potential for vinyl chloride monomer exposure. Examinations are required prior to assignment, every six months for an individual employed in vinyl chloride or polyvinyl chloride manufacturing for 10 years or longer, and annually for all other employees. Employees leaving such assignments will be examined according to Conoco's established periodic health screening procedures unless medical conditions warrant more frequent or more extensive examinations.

MEDICAL HISTORY

- Each employee must complete the **Confidential Interval Health History.** The examining physician should obtain detailed information concerning alcohol intake, exposure to hepatotoxic agents (drugs and chemicals), hospitalizations, blood transfusions, and past history of hepatitis.

PHYSICAL

- A complete physical examination which includes weight, height and blood pressure is required. Findings must be recorded on the **Physical Examination Record.**

LABORATORY STUDIES

- A blood chemistry profile which must include:
  Total bilirubin
  Alkaline Phosphatase
  Serum glutamic oxaloacetic transaminase (SGOT)
  Serum glutamic pyruvic transaminase (SGPT)
  Gamma glutamyl transpeptidase (GGTP)
- Other clinically appropriate routine laboratory studies as determined by the examining physician.

APPROVAL AND NOTIFICATION

- Recommendations regarding the need for job-related restrictions should be made on the Conoco **Medical Evaluation** form. Completion of the **Respiratory Certification** section is essential.
- Medical conditions that would place an employee at significant risk from exposure to vinyl chloride monomer should be listed in the Comments section of the **Medical Evaluation** form.
- The examining physician is expected to inform the individual of examination findings, answer immediate questions, and provide any needed recommendations.

Only outpatient exams are approved. The employee is responsible for charges associated with any additional tests, referrals, or diagnostic procedures, unless the Medical Division has agreed in advance to accept such charges.

All forms, laboratory reports, and the original chest X-rays should be sent marked CONFIDENTIAL, to **Conoco Inc., Medical Division, PE-1050, P. O. Box 2197, Houston, TX 77252.**

HAZARDOUS WASTE OPERATIONS SURVEILLANCE EXAMINATION

The Hazardous Waste Operations Surveillance Exam may be performed in association with other approved periodic health screening exams, in which case the content and scope may become more extensive. However, before medical approval can be advised for unrestricted activity in job positions with the potential for exposure to hazardous wastes, the following guidelines should be achieved:

FREQUENCY

- Prior to starting hazardous waste operations assignment.
- At least once every 12 months while still in hazardous waste operations assignment.
- At employment termination or on reassignment to a non-hazardous area if the employee has not had an examination within the last 6 months.
- As soon as possible, upon notification by an employee that has developed signs or symptoms indicating possible overexposure to hazardous substances or health hazards.
- At more frequent times, if the examining physician determines that an increased frequency of examination is medically necessary. Employees leaving such assignments will be examined according to Conoco's established periodic health screening procedures unless medical conditions warrant more frequent or more extensive examinations.

MEDICAL HISTORY

- The employee must complete the **Confidential Interval Health History** form. The examining physician should record on the form details of occupational history with special attention to work place exposures and the individual's concerns about occupational health. Special emphasis should be placed on symptoms related to the handling of hazardous substances.

PHYSICAL

- The examination should be thorough and complete with respect to all organ systems. Record these findings on the Conoco **Physical Examination Record.**

LABORATORY STUDIES

- Complete blood count including differential and platelets.
- Dipstick urinalysis with microscopic only if clinically indicated.
- Automated fasting blood chemistry profile which must include at least:

Glucose	BUN or Creatinine	Cholesterol
Total Bilirubin	Triglycerides	High Density Lipoprotein
		GGTP

- Other clinically appropriate routine laboratory studies as determined by the examining physician.

APPROVAL AND NOTIFICATION

- Recommendations regarding the need for job-related restrictions should be made on the Conoco **Medical Evaluation** form. Completion of the **Respiratory Certification** section is essential.
- Medical conditions that would place an employee at significant risk from exposure to hazardous wastes should be listed in the Comments section of the **Medical Evaluation** form.
- The examining physician is expected to inform the individual of examination findings, answer immediate questions, and provide any needed recommendations.

Only outpatient exams are approved. The employee is responsible for charges associated with any additional tests, referrals, or diagnostic procedures unless the Medical Division has agreed in advance to accept such charges.

All forms, laboratory reports, and the original chest X-rays should be sent marked CONFIDENTIAL to **Conoco Inc., Medical Division, PE-1050, P. O. Box 2197, Houston, TX 77252.**

PERIODIC HEALTH SCREEN

FREQUENCY

- Periodic health screening should be conducted at the following intervals: ages 20-40, every five years; ages 41-49, every three years; age ≥50, annually.

HISTORY

- Each employee must complete the **Confidential Interval Health History** and the **Health Risk Survey.**

PHYSICAL

- A complete physical examination which includes weight, height and blood pressure is required. Findings must be recorded on the **Physical Examination Record.**

  The **Occupational Assessment, Respiratory Certification** and examination findings will be recorded on a **Medical Evaluation** form by a Conoco physician or designee and a copy given to the employee.

LABORATORY STUDIES

- Complete blood count with differential, if needed.
- Dipstick urinalysis with microscopic only if clinically indicated.
- Automated fasting blood chemistry profile which must include:

Glucose	BUN or Creatinine	Cholesterol
Total Bilirubin	Triglycerides	High Density Lipoproteins
		GGTP

- Vision Screening: near and distant visual acuity, depth perception and color vision screening, all at preplacement only.
- Tonometry with each examination beginning at age 40.
- Posteroanterior chest film at preplacement and at exams closest in proximity to the 40th, 50th, and 60th year of age.
- Resting EKG at preplacement exam and each exam starting at age 40.
- Pulmonary function testing with FVC, FEV1, and, if the spirometer is so equipped, FEF 25-75%.
- Audiometry: preplacement, ages 35 and 50. Annually, if in the Hearing Conservation Program.
- Stool for occult blood, by guaiac, on three repeat occasions at each exam starting at age 40.
- Flexible sigmoidoscopy: 60 cm screening exam using American Cancer Society Guidelines; at ages 50 and 51, then at 3-5 year intervals depending on risk factors and previous findings.

The examining physician is expected to inform the individual of examination results, answer immediate questions, and provide any indicated recommendations. Each employee is responsible for charges associated with any additional tests, referrals or diagnostic procedures unless the Medical Division has agreed to accept such charges.

The Confidential Interval Health History, Health Risk Survey, Physical Examination Record along with original laboratory reports, EKGs, chest films, and the invoice for services should be sent marked CONFIDENTIAL, to **Conoco Inc., Medical Division, PE-1050, P. O. Box 2197, Houston, Texas 77252.**