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PURPOSE

Medical surveillance is the systematic collection, analysis, and evaluation of health data in the workplace to identify cases, patterns, or trends suggesting an adverse effect on the health of employees. It includes the routine medical examination of employees over a period of time to evaluate occupational exposure to a potential hazard.

The University of Illinois Urbana-Champaign (Illinois) Medical Surveillance Program (Program) has been implemented to meet regulatory requirements, guidelines or establish standards of practice to help prevent occupational disease and to protect the health and safety of Illinois employees.

POLICY

Employees are eligible for inclusion in this program if they perform work-related tasks that might be reasonably anticipated to cause occupational exposure to potential hazards including physical, biological, chemical, and radiological hazards. In addition, an employee is eligible for a medical examination when monitoring reveals levels of a particular hazard to be above the limits set forth by applicable regulatory requirements, guidelines, or established standards of practice.

This program does not include students unless they are employed by Illinois; pre-employment medical examinations; certain vaccination schedules; and post-exposure medical examinations.

RESPONSIBILITIES**Occupational Safety and Health (OSH)**

OSH is responsible for the administration of this Program which includes contracting with a qualified healthcare provider in Champaign-Urbana to provide medical surveillance services. An OSH program coordinator is designated to provide guidance and answer questions, conduct regulatory interpretation, provide oversight for this Program, and to review this Program annually.

Deans, Department Heads, and Directors (Campus Units)

Campus Units shall ensure adequate funding is available to implement this Program, and designate a Responsible Person that will be charged with implementing this Program and Unit-Specific standard operating procedures (SOPs) developed for unit-specific processes.

Campus Unit Responsible Person

The Responsible Person shall work with Campus Unit Supervisors to identify personnel that may be required to participate in medical surveillance and properly store medical records containing protected health information (PHI) if received. The Responsible Person shall ensure that Unit-Specific SOPs are reviewed annually. The Responsible Person shall ensure that any healthcare providers contracting directly with their Campus Unit is qualified and adheres to the requirements of this Program.

Supervisors

Supervisors and Principle Investigators (PIs) are responsible for ensuring that eligible employees are enrolled in this Program and complete periodic medical examinations and tests as described in this Program or as directed by the physician or other licensed healthcare professional (PLHCP) unless the employee has completed a declination form (example in **APPENDIX A**). Maintain declination forms and provide copies to OSH. If any medical records are received, ensure they are properly stored in they

contain PHI. Facilitate employee access to their records upon request. When an employee has a restriction imposed on them as a result of the medical examination:

- A. Evaluate if the restriction prevents the employee from performing an essential job function.
- B. If an essential job function is restricted, direct them to the Office of Access and Equity (OAE) [Request a Workplace Accommodation](#) form and engage in the interactive process. Do not retain copies of the medical documentation discussing the restrictions.
- C. If an essential job function is not impacted by a restriction and the restriction can be accommodated without issue, work directly with the employee to comply with the restrictions but still refer the employee to OAE for any additional resources.

Website: <https://oae.illinois.edu/>

Phone: 217-333-0885, option #1

Email: accessibility@illinois.edu

Affected Employees

Eligible affected faculty, staff and students are responsible for following the requirements of the Program, completing a declination form if they choose to forgo enrollment in this Program, attending appointments with the healthcare provider, and completing the required medical examinations and tests.

Healthcare Providers

Attending PLHCPs must determine and perform appropriate medical tests based on regulatory requirements, guidelines, or established standards of practice for occupational exposure to potential hazards. Inform the employee of the results of the examination and, if applicable, the increased associated health risks. Advise the employee of any medical conditions resulting from an occupational exposure that require further evaluation or treatment. Provide to the employee a copy of the physician's written opinion. Maintain all confidential medical records. Oversee the quality control aspects of the medical examinations and tests. The Illinois contracted healthcare provider shall send the employer's copy of the physician's written opinion to OSH.

Quality Control

Quality control aspects of the Program include medical and administrative quality control.

The healthcare provider shall be responsible for quality control of the medical aspects of the Program including: the use of properly calibrated and functional equipment to meet minimum specifications; the use of certified and proficient laboratories for analysis of biological samples, if required; the provision of necessary space and capacity of the healthcare testing facility; and the availability of adequately trained and certified staff to administer the medical examinations and tests to unequivocally provide the best possible healthcare service.

OSH shall be responsible for quality control of the administrative aspects of the Program including accurate record keeping and documentation. OSH may audit Program records at any time to determine compliance.

PROCEDURES

The following steps shall be followed for an *initial or exit in-person medical examination with the contracted healthcare provider*:

- A. The employee or supervisor shall inform OSH of an employee requiring medical surveillance.
- B. If using the Illinois contracted healthcare provider, submit a work order request to the F&S Service Office.
 - a. OSH will provide the current purchase order number (PO).
 - b. The supervisor or employee will contact the contracted healthcare provider to schedule an appointment, provide the PO, and convey the type of medical surveillance exam needed.
- C. If an alternative provider is used, the Campus Unit is responsible for identifying, contracting with, coordinating examinations and tests, and paying invoices with a qualified healthcare provider.
- D. The supervisor shall inform the employee of the Program and ensure that all eligible employees are enrolled in the Program if mandated by OSHA regulations. The supervisor shall also ensure that if the employee chooses not to enroll in the Program and if not mandated by regulations, then he/she reads and signs the declination statement annually (example in APPENDIX A). The supervisor shall also ensure that a medical examination is available to the employee that initially declined the medical examination, but at a later date decides to enroll in the Program.
- E. The supervisor shall allow the employee to keep the appointment during regular working hours.
- F. The employee shall keep the appointment with the healthcare provider and complete the required medical examinations and tests.
- G. The healthcare provider shall perform the required medical examinations and tests.
- H. The healthcare provider shall inform the employee of the results of the examination and, if applicable, the increased associated health risks.
- I. The healthcare provider shall provide the employee's copy of the physician's written opinion to the employee. If the employing department receives and retains a copy, it must adhere to HIPAA requirements if the records contain PHI.
- J. The healthcare provider shall send the employer's copy of the physician's written opinion to OSH.
- K. The supervisor shall file the declination statement or the physician's written opinion as confidential information in the employee's personnel file.
- L. The supervisor shall maintain a schedule of current and future appointments for each employee in the Program according to the recommendations of the healthcare provider or associated OSHA regulation.

The following steps shall be followed for a *periodic medical examination*:

- A. The supervisor to notify an employee for periodic medical exams when required by the substance specific standard or healthcare provider recommendations.
- B. If using the Illinois contracted healthcare provider, submit a work order request to the F&S Service Office.
- C. ...continue with steps E-N listed above.

Campus Units desiring to utilize an online vendor for medical clearance for respirator usage may do so. The Campus Unit will be responsible for all aspects of establishing and maintaining payment,

recordkeeping, scheduling, and notification to employees. Proof of medical clearance must be provided to OSH either before or at the time of respirator fit testing.

Employees may obtain annual audiograms as part of their medical evaluations as required by OSHA regulations, as determined by the PLHCP, or via contractual obligations. Employees only requiring audiograms as part of the Illinois Hearing Conservation Program shall use the Illinois Audiology Clinic in the Department of Speech and Hearing Sciences located at 2001 S. Oak Street, Suite B, Champaign, IL. Refer to the Hearing Conservation Program for additional details. Off-campus employees may use an alternative healthcare provider; however, the Campus Unit is solely responsible for identifying a qualified provider, coordinating, and confirming audiology services, and managing all aspects of purchasing services.

Medical Testing

The *Initial Medical Examination* shall be administered prior to initiating work that might be reasonably anticipated to cause occupational exposure to a potential hazard. The initial medical examination shall include a medical history and appropriate medical examinations and tests. The examination shall be considered to be the baseline for comparative purposes, should an exposure incident occur. Specific medical tests for the initial medical examination of specific hazards have been included in APPENDIX B.

The *Periodic Medical Examination* shall be administered at regular intervals, the frequency of which shall be based on the regulatory dictate or the expected timing of health effects in relation to occupational exposure to a potential hazard as determined by a PLHCP. The medical tests required for the periodic examination may not be as extensive as those required at the initial examination. Specific schedules and medical tests for the periodic medical examination of specific hazards have been included in APPENDIX B. However, frequencies may vary based on recommendations from the PLHCP.

The *Exit Medical Examination* shall be administered, if required, at the time of termination of employment or change in an employee's job status such that he/she is no longer occupationally exposed to the potential hazard that required participation in the Program. Specific medical tests for the exit medical examination of specific hazards have been included in APPENDIX B.

Program Cost

Medical examination and associated tests shall be provided without cost to the employee and at a reasonable time and place. It shall be the responsibility of the individual Campus Unit to bear the full cost associated with enrollment of their employees in the Program.

Results of Medical Testing

Notification of Results: It shall be the responsibility of the healthcare provider to inform the employee of the results of the examination and, if applicable, the increased associated health risks. The healthcare provider shall provide the employee's copy of the physician's written opinion to the employee and send the employer's copy to OSH and/or the Campus Unit Responsible Person. The physician's written opinion shall contain, but not be limited to: the healthcare provider's medical opinion related to the occupational exposure to the potential hazard; recommended limitations, if any; and a statement that the employee has been informed of the results of the examination and, if present, the increased associated health risks.

Test Results: Results of the medical examination that limit an employee’s ability to perform a specific work-related task shall be dealt with on an individual basis. Additional information is included in section **Responsibilities, Supervisors**, item M.

Surveillance Recall

Employees enrolled in the Program shall be recalled for medical follow-up according to the frequency specified with each hazard in APPENDIX B or as recommended by the PLHCP.

Record Keeping

Medical Records: The OSH contracted healthcare provider shall maintain medical records for each employee for at least the duration of employment plus 30 years. The records shall include but not be limited to: employee identification; results of the medical examination and tests; the *physician’s written opinion* for each evaluation; and any other pertinent medical information.

Other Records: When OSH receives records from the healthcare provider containing PHI, those records will be maintained in a HIPPA-compliant Box-Health Data Folder. Some records obtained from the healthcare provider may not contain PHI and therefore may be stored or transmitted without following HIPAA protocols.

Record Availability: Employee medical records containing PHI shall be kept confidential and shall not be disclosed or reported without the employee’s express written consent to any person within or outside the workplace. To obtain medical records, the employee shall complete and submit the healthcare provider’s “Authorization to Release Patient Information” form to the healthcare provider.

Confidentiality: All PHI obtained during the medical examination shall remain confidential. Employee medical records shall not be disclosed or reported without the employee’s express written consent to any person within or outside the workplace except the distribution of the employer copy of the physician’s written opinion to OSH and/or the Campus Unit Responsible Person. Campus Units in possession of medical records containing PHI are responsible for complying with HIPAA and associated university policies.

Program Evaluation

This Program will be reviewed annually by OSH. The written Unit-Specific SOPs shall be reviewed and updated by the respective Campus Unit at least annually and more frequently as hazards, tasks, procedures and/or equipment change.

Appendix A – EXAMPLE OF DECLINATION STATEMENT

EXAMPLE OF DECLINATION STATEMENT
(CAMPUS UNIT LETTERHEAD)

MEDICAL SURVEILLANCE DECLINATION FORM

[IF AN EMPLOYEE DECLINES TO BE ENROLLED IN THE ILLINOIS MEDICAL SURVEILLANCE PROGRAM, HE/SHE SHALL SIGN A DECLINATION STATEMENT THAT USES THE FOLLOWING TEXT.]

I _____, I AM ELIGIBLE AND HAVE BEEN GIVEN THE OPPORTUNITY TO ENROLL IN THE ILLINOIS MEDICAL SURVEILLANCE PROGRAM. THIS WILL ENABLE ME TO RECEIVE SPECIFIC INITIAL, PERIODIC AND EXIT MEDICAL EXAMINATIONS FOR THE HAZARD IDENTIFIED ABOVE, AT NO CHARGE TO MYSELF AND AT A REASONABLE TIME AND PLACE.

HOWEVER, I DECLINE TO BE ENROLLED IN THIS PROGRAM AT THIS TIME. I UNDERSTAND THAT BY DECLINING THIS ENROLLMENT, I WILL NOT BE MEDICALLY MONITORED FOR OCCUPATIONAL EXPOSURE TO THIS HAZARD. I ALSO UNDERSTAND THAT IF IN THE FUTURE I CONTINUE TO HAVE OCCUPATIONAL EXPOSURE TO _____ AND I WANT TO BE ENROLLED IN THE ILLINOIS MEDICAL SURVEILLANCE PROGRAM, I CAN DO SO AT ANY TIME AT NO CHARGE TO ME.

PRINT NAME: _____

EMPLOYEE SIGNATURE: _____ DATE: _____

DEPARTMENT: _____

SUPERVISOR SIGNATURE: _____ DATE: _____

Appendix B – MEDICAL EXAMINATION REQUIREMENTS

The individual medical requirements for some common potential hazards are listed in alphabetical order in this appendix. However, the medical examination for an unlisted hazard is similar to a listed hazard in the same category or shall be determined by the healthcare provider.

Descriptions of medical examinations and tests included in this appendix have been generalized for all employees. Requirements of the medical examination and tests for an individual employee may be altered based on the health status of the employee and shall be at the discretion of the healthcare provider.

ASBESTOS

Regulation:	29 CFR 1910.1001 and 1926.58
Eligibility:	All employees who for a combined total of 30 or more days per year are engaged in Class I, II and III work or are exposed at or above a permissible exposure limit. (0.1 fiber/cc of air calculated as an 8 hour time-weighted-average).
Eligible Employees:	<ul style="list-style-type: none"> • F&S and Housing Maintenance Operations employees with current licenses through Illinois Department of Public Health as asbestos workers or supervisors • As identified

Medical Examination Requirements:	
Initial:	<p>Prior to assignment where exposure may occur</p> <ul style="list-style-type: none"> • initial questionnaire including medical and work history • complete physical examination of all systems with special emphasis on respiratory, cardiovascular and digestive system • chest x-ray (PA only), to be read by a B-reader, board certified/eligible radiologist or experienced physician with known expertise in pneumoconiosis • pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second • any other test healthcare provider deems necessary
Periodic:	<p>Annually</p> <ul style="list-style-type: none"> • periodic questionnaire including medical and work history • complete physical examination of all systems with special emphasis on respiratory, cardiovascular and gastrointestinal system • chest x-ray (PA view: see table below for frequency), to be read by a B-reader, or board certified/eligible radiologist or experienced physician with known expertise in pneumoconiosis • pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second • any other test healthcare provider deems necessary
Exit:	<p>Required unless the medical examination was done within the last year</p> <ul style="list-style-type: none"> • initial questionnaire including medical and work history • complete physical examination of all systems with special emphasis on respiratory, cardiovascular and digestive system • chest x-ray (PA view: see table below for frequency), to be read by a B-reader, or board certified/eligible radiologist or experienced physician with known expertise in pneumoconiosis • pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second • any other test healthcare provider deems necessary
Other:	Respirator standards shall be applied if respirator worn.

Frequency of Chest X-Ray – Asbestos Exam

Years Since First Exposure	Age of Employee (years)		
	15 to 35	35+ to 45	45+
0 to 10	Every 5 years	Every 5 years	Every 5 years
10+	Every 5 years	Every 2 years	Every 1 years

CADMIUM

Regulation:	29 CFR 1910.1027
Eligibility:	Any employee who potentially is or may be exposed to airborne cadmium at or above the action level (5µg/m ³ of air calculated as an 8 hour time-weighted average) for 30 or more days per year.
Eligible Employees:	<ul style="list-style-type: none"> As identified

Medical Examination Requirements:	
Initial:	<p>Within 30 days after initial assignment to a job with exposure to cadmium</p> <ul style="list-style-type: none"> initial questionnaire including medical and work history complete physical examination of all systems with special emphasis on blood pressure, respiratory and urinary system chest x-rays (PA view) pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second biological testing including cadmium in blood and urine and beta-2 microglobulin in urine lab tests including CBC profile, renal profile and urinalysis any other test healthcare provider deems necessary
Periodic:	<p>Within one year after the initial examination, at least biennially thereafter. Biological monitoring must be done at least annually</p> <ul style="list-style-type: none"> periodic questionnaire including medical and work history complete physical examination of all systems with emphasis on blood pressure, respiratory and urinary system prostate palpation for males over 40 years old pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second biological testing including cadmium in blood and urine and beta-2 microglobulin in urine lab tests including CBC profile, renal profile and urinalysis any other test healthcare provider deems necessary
Exit:	<p>Required unless medical examination was done within the last six months</p> <ul style="list-style-type: none"> same as periodic medical examination chest x-ray
Other:	<ul style="list-style-type: none"> Respirator standards shall be applied if respirator worn. Follow up procedures for actions triggered by results of biological testing shall be according to the regulations. Biological testing shall be done at “participating laboratories” that conform to the provisions of the non-mandatory protocol specified in the regulations.

CRYSTALLINE SILICA

Regulation:	29 CFR 1910.1053 and 1926.1153
Eligibility:	Each employee who will be required under this section to use a respirator for 30 or more days per year.
Eligible Employees:	<ul style="list-style-type: none">As identified

Medical Examination Requirements:	
Initial:	Prior to assignment where exposure may occur that requires respiratory protection <ul style="list-style-type: none">initial questionnaire including medical and work history
Periodic:	Occurs every 3 years or as directed by PLHCP
Initial & Periodic:	<ul style="list-style-type: none">complete physical examination of all systems with special emphasis on respiratory systemchest x-rays (PA view) and B readpulmonary function tests including forced vital capacity and forced expiratory volume at 1 secondtesting for latent tuberculosis infectionany other test healthcare provider deems necessary
Exit:	Required unless medical examination done within the last 18 months <ul style="list-style-type: none">same as initial & periodic
Other:	respirator standards shall be applied

DIVING

Standard:	American Academy of Underwater Sciences Standard for Scientific Diving and Illinois Scientific Diving Manual
Eligibility:	Any employee who participating on the Illinois scientific diving team
Eligible Employees:	<ul style="list-style-type: none">Scientific dive team members

Medical Examination Requirements:	
Initial:	Prior to initial assignment <ul style="list-style-type: none">initial questionnaire including medical and work historycomplete physical examinationpulmonary function tests including forced vital capacity and forced expiratory volume at 1 secondlab tests including CBC profile, hemoglobin, and urine analysisaudiometryvisionchest x-rays (PA and LAT views)any other test healthcare provider deems necessary
Periodic:	Annually and after: <ul style="list-style-type: none">injury or illness requiring hospitalization of more than 24 hoursan episode of unconsciousness related to diving activityany diving accident requiring treatment in a recompression chambersame protocol as periodic
Emergency:	<ul style="list-style-type: none">as soon as possible to all employees who have been exposed to formaldehyde in an emergencyinitial questionnaire including medical and work historycomplete physical examination with emphasis on the upper or lower respiratory problems, allergic conditions, skin reaction or hypersensitivity, and any evidence of eye, nose, or throat irritationany other test healthcare provider deems necessary

HAZARDOUS WASTE OPERATIONS

Regulation:	29 CFR 1910.120
Eligibility:	All employees who are or may be exposed to hazardous substances or health hazards at or above the established permissible exposure limit for 30 days or more a year.
UIUC Eligible Employees:	<ul style="list-style-type: none">• Division of Research Safety, Environmental Chemical Specialists and Hazardous Waste Technicians• Division of Safety and Compliance, Environmental Compliance employees• As identified

Medical Examination Requirements:	
Initial:	Prior to assignment where exposure may occur <ul style="list-style-type: none">• medical history• complete x-ray (PA and lateral view)• EKG• pulmonary function test including forced vital capacity and forced expiratory volume at 1 second• eye exam with depth, vision and color evaluation• treadmill stress exercise test (if required)• lab tests including SMAC-20, CBC profile and urine analysis• any other test healthcare provider deems necessary
Periodic:	Annually; however, complete initial examination should be performed every 5 years for employees under 40 years of age and once every 2 years for employees over 40 years of age. Employees holding administrative jobs which limit exposure to chemicals may only require a complete examination every 3 years. <ul style="list-style-type: none">• medical history• complete physical examination• pulmonary function test including forced vital capacity and forced expiratory volume at 1 second• audiogram• eye exam with depth, vision and color evaluation• treadmill stress exercise test (if required)• lab tests including SMAC-20, CBC profile and urine analysis• any other test healthcare provider deems necessary
Exit:	Required unless a medical examination was done within the last six months <ul style="list-style-type: none">• same as initial medical examination
Other:	Respirator standards shall be applied if respirator worn.

LEAD

Regulation:	29 CFR 1910.1025 and 1926.62
Eligibility:	Any employee who is or will be exposed to an airborne exposure of lead at or above the action level (30µg/m ³ of air over an 8 hour time-weighted-average) for more than 30 days per year.
Eligible Employees:	As identified

Medical Examination Requirements:	
Initial:	<p>Prior to assignment where exposure may occur</p> <ul style="list-style-type: none"> questionnaire including medical and detailed work history with particular attention to past lead exposure complete physical examination of all systems with special emphasis to teeth, gums, hematologic, gastrointestinal, renal, cardiovascular and neurological systems blood pressure, pulse, weight chest x-ray (PA and lateral view) EKG pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second, if respirator worn lab tests including CBC profile, blood lead level, blood zinc protoporphyrin urinalysis any other test healthcare provider feels necessary
Periodic:	<p>At least annually, if blood sampling test conducted at any time during the preceding 12 months indicated a blood lead level at or above 40 µg/100g of whole blood; as soon as possible upon notification by an employee that he/she has developed signs or symptoms commonly associated with lead intoxication, that the employee desires medical advice concerning the effects of current or past exposure to procreate a health child, or that the employee has demonstrated difficulty in breathing during a respirator fit test or during use; and as medically appropriate for each employee either removed from exposure to lead due to risk of sustaining material impairment to health</p> <ul style="list-style-type: none"> same as initial medical examination
Exit:	Not required if medical exam done within the last year.
Other:	<ul style="list-style-type: none"> Biological monitoring for blood lead and zinc protoporphyrin level shall be made available: to any employee that is occupationally exposed on any day to lead at or above the action level; at least every 2 months and every 6 months thereafter to any employee who is exposed to an airborne exposure of lead at or above the action level for more than 30 days in any consecutive 12 months; at least every 2 months for each employee whose last blood sampling and analysis indicated a blood lead level of 40µg/100g of whole blood (this frequency shall continue until two consecutive blood samples and analyses indicate a blood lead level below 40µg/100g of whole blood) and at least monthly during the removal period of each employee removed from exposure to lead due to an elevated blood lead level.

- Conditions of temporary medical removal and return of employee to former job status shall be followed as detailed in the regulations.
- A multiple physician review mechanism shall be available to the employee.
- Employee shall be notified of results within 5 working days after receiving the biological results.
- Respirator standards shall be applied if respirator worn.

PHARMACY

Standard:	United States Pharmacopeia 800 Hazardous Drugs – Handling in Healthcare Settings
Eligibility:	Healthcare workers who handle hazardous drugs.
Eligible Employees:	<ul style="list-style-type: none">• As identified

Medical Examination Requirements:	
Initial:	Prior to wearing respirator <ul style="list-style-type: none">• medical evaluation using medical questionnaire, 29 CFR 1910.134, Appendix C or it's equivalent, and/or• physical examination• pulmonary function tests including forced vital capacity and forced expiratory volume at 1 second• vision screening• lab tests including CBC profile and urine analysis• any other test healthcare provider deems necessary• other tests the healthcare provider deems necessary to determine fitness
Periodic:	At least annually, and following acute exposures. <ul style="list-style-type: none">• same as initial medical examination• post exposure exams to be tailored to exposure route and hazardous drugs exposed to
Exit:	At termination of employment or when job duties such that the employee is no longer exposed to hazardous drugs. Document the information on the employee's medical, reproductive, and exposure histories. Examination and laboratory evaluation should be guided by the individual's history of exposures and follow the outline of the periodic evaluation

RESPIRATOR

Regulation:	29 CFR 1910.134
Eligibility:	Any employee wearing or who may need to wear a respirator.
Eligible Employees:	<ul style="list-style-type: none">As identified

Medical Examination Requirements:	
Initial:	Prior to wearing respirator <ul style="list-style-type: none">medical evaluation using medical questionnaire, 29 CFR 1910.134, Appendix C or it's equivalent, and/orphysical examinationpulmonary function tests including forced vital capacity and forced expiratory volume at 1 secondblood pressurepulseother tests the healthcare provider deems necessary to determine fitness
Periodic:	<ul style="list-style-type: none">periodic medical evaluation is not required in 29 CFR 1910.134 for annual fit testing and training.at the frequency required by OSHA substance specific standardsas deemed necessary by the healthcare providersame as initial medical examination
Other:	All procedures and exemptions detailed in the UIUC Respiratory Protection Program shall be followed.

Document Revisions**Revision Dates**

November 30, 2020 Updated document template, added information for online respirator medical clearance, and updated Appendix B with current medical examination requirements.

May 17, 2024 Updated language for restrictions and online respirator medical clearance, and updated Appendix B with current medical examination requirements.