

**California State University,  
Bakersfield**  
Occupational Medical Monitoring  
Program



CALIFORNIA STATE UNIVERSITY  
**BAKERSFIELD**  
Safety and Risk Management

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# California State University, Bakersfield

## Occupational Medical Monitoring Program

### 1.0 PURPOSE

Occupational medical examinations (a.k.a. surveillance exams) are required per Title 8 of the California Code of Regulations when employees wear respirators, have exposure to certain physical stressors, or for employees who perform safety-sensitive duties. The intent of the examinations is to proactively identify adverse health effects so that conditions causing the adverse effects can be reduced or eliminated. Occupational medical monitoring provides a clinical base of information that is used to ensure an employee's fitness to work in various hazardous environments. The examination consists of personal health history, exposure history, physical examination, laboratory analyses, and immunizations when recommended.

### 2.0 SCOPE

This program applies to employees exposed to hazardous materials or recognized hazards (typically for 30 days or more per year) in the workplace that may result in long-term adverse health effects. Employees may continually be added/removed from the Occupational Medical Monitoring Program (OMMP) depending upon identified exposures.

### 3.0 AUTHORITY

California State University, Executive Order 1039, January 1, 2009. (The CSUB program document revises and updates the previous issuance, dated: October 1998.)

Animal Handling/Aerosol Trans Diseases Zoonotic	8 CCR §5199.1 & Nat Inst. Of
Health Asbestos	8 CCR §5208 & §1529
Benzene	8 CCR §5218
Biohazards/Bloodborne Pathogens	8 CCR §5231, §5193, & §5194
Carcinogens	8 CCR §5209 & §5203
Commercial Drivers	49 CFR, Part 391 & 8 CCR §5193
CSU Executive Orders No. 1039	Section III, C (Dated 11/17/2008)
Divers (Hookah)	8 CCR §6056
Fetal Protection	CSU Recommendations
Formaldehyde	8 CCR §5217
Hazardous Waste Operations/Emergency Response	8 CCR §5192
Ionizing Radiation	17 CCR
§30277	
Laboratories	8 CCR §5191
Lead	8 CCR §5216, §5198, & §1532.1
Occupational Noise/Hearing Conservation	8 CCR §5097
Pest Control Operations	3 CCR §6728, & §6760
Respiratory Protection/Aerosol Trans-Diseases	8 CCR §5144, §5147, §5153, & §5199

## 4.0 RESPONSIBILITIES

### 4.1 Office of Safety, Risk, & Sustainability

1. Develop and maintain the OMMP.
2. Determine interval for examination and corresponding content.
3. Maintain and administer OMMP medical contract.
4. Notify departments of changes in the program.
5. Provide support to departments in identifying program participants.
6. Perform exposure monitoring to support the program.
7. Provide exposure information to examining physicians, including stressors and personal protection used.

8. Arrange for special examinations.
9. Verify accommodations, identified by Supervisors and Human Resources permit employee with restricted duty to perform safely.

#### 4.2 Occupational Medical Examination Provider (Physician)

1. Conduct medical examination per agreement. This includes ensuring employee completion of medical release and medical history questionnaires.
2. Communicate with SRS when additional examination components/information is needed.
3. Make recommendations to examination content.
4. Determine when a medical condition is noted or work restrictions are needed (only those conditions that are work-related or which could adversely affect the safety of the employee or the workplace are reported to CSUB).
5. Complete examinations and provide requisite medical clearance summary and documentation to employee and SRS.
6. Inform employee of any work-related conditions noted and of the need to seek personal physician's care when a non-work-related condition is noted.
7. Provide employee, designated representative, or authorized representative access to medical records.

#### 4.3 Supervisors

1. Provide employee exposure, PPE, and related information to physician, SRS, or employee upon request.
2. Process payment for examinations.
3. Notify SRS of required employee's availability for occupational medical monitoring.
4. Notify SRS of employee job/duty change which would affect their status for required occupational medical monitoring program.
5. Ensure employee complies with work restrictions/accommodations based on medical examination findings.
6. Ensure employees are provided training on OMMP and notifying them of changes to the program.

7. Coordinate with Human Resources when an accommodation is needed due to fitness for duty restrictions that result from medical examinations.
8. Ensure employees declining a voluntary examination component sign the declination form.

#### 4.4 Employees

1. Comply with the program requirements. It is the policy of the CSU that medical examinations mandated by federal and state laws and regulations be strictly enforced. Failure/refusal of an employee to undergo required occupational medical monitoring, as determined by campus management, shall constitute a refusal to perform the normal and reasonable duties of the position. The campus has authority to commence appropriate disciplinary action up to and including termination of employment. (Note: employees may waive procedures that require injection or ingestion of a medication such as vaccinations.)
2. Disclose to physician any non-work-related health conditions such as diabetes or high blood pressure which may impact the ability to safely perform duties.
3. Adhere to medical restrictions or agreed upon accommodations.
4. Respond to medical questionnaire and physicians' examination questions truthfully and completely.

#### 4.5 Human Resources

1. Ensure position descriptions notify potential employees of mandatory/voluntary participation in the OMMP.
2. Ensure position descriptions are reviewed and updated periodically.
3. Assist supervisors in addressing fitness for duty issues when an employee is found to have restrictions. This includes fitness for duty, restricted duty, or accommodations.
4. Aid Worker's Compensation issues and personnel administration related to significant examination results.
5. Communicate with employee's supervisor regarding work restrictions based on medical examinations.

## 5.0 PARTICIPANT ASSESSMENT

The following chart indicates the job classifications that require employees be offered the opportunity to participate in the OMMP. Individuals who wear respiratory protection of any type are required to have initial and periodic clearances. (See Respiratory Protection Program for additional information.) Asbestos workers and workers whose contact with an OSHA listed chemical agent are required to participate in the OMMP. Employees may be excluded from participation when a supervisor can provide evidence that minimum exposure thresholds apply. An example is that an employee having potential asbestos exposure of less than 30 days per year, for durations of less than 1 hour per day may be excluded from asbestos annual surveillance.

Employees who do not work with a physical or chemical agent listed by regulation may decline (portions of) the examination in writing.

Job Classification	Medical Protocol/Examination Interval	Typical Job Hazards
Admin. Analyst/Specialist (SRS) Administrator I (SRS)	Hazardous Materials Worker, Asbestos Worker, Hazardous Materials Annual	Chemical exposure, materials handling, heat stress, asbestos, contaminant exposure
Metal Worker Building Service Engineer	FM Trades/Asbestos Worker Every two years	Materials handling, noise, respiratory hazards
Facilities Maintenance Mechanic	Maintenance Mechanic/Asbestos Worker Annual	Materials handling, noise, respiratory hazards
Painter	FM Trades/Maintenance Mechanic/Non-Asbestos Worker Annual	Materials handling, noise, respiratory hazards, solvents



Facilities Maintenance Mechanic Lead Carpenter Lead Electrician Lead Plumber	FM Trades / Maintenance Mechanic / Non- Asbestos Worker Every two years*	Materials handling, noise, irritant dust
Auto/Equipment Mechanic	Every three years*	Materials handling, noise, solvents
Air Cond./Refrigeration Mechanic	HVAC/Refrigeration Mechanic Building Services Engineer Every three years*	Materials handling, noise, exhaust, lead
Custodian Lead Custodian	Every three years*	Materials handling, noise, chemicals, irritant dusts, bodily fluids due to waste disposal
Gardening Specialist	Every two years*	Materials handling, noise, irritant dust, allergens, heat stress
Grounds Worker Irrigation Specialist	Every two years*	Materials handling, noise, irritant dust, allergens, heat stress
Light Auto Equipment Operator	Stockroom Worker Annual*	Materials handling, noise, vibration, irritant dust, exhaust, heat stress
Gardening Specialist	Pesticide Applicator Annual	Materials handling, sustained postures, noise, respiratory hazards
Instructional Support Tech. (Sciences, Arts)	Laboratory Technician Every two years*	Materials handling, noise, chemicals, respiratory hazards
Department Chair (Sciences) Instructional Faculty (Sciences) Instructional Support Tech. (Sciences)	Animal Handler Every five years*	Materials handling, noise, respiratory hazards, wood dust
Nurses Clinical Aids Physicians Pharmacists Medical Supports	Respirator Clearance Annual questionnaire*	Aerosol transmissible diseases, Hepatitis B, bodily fluids due to first aid response

Police officers, Chief, Lieutenant	Respirator Clearance Annual questionnaire*	Hepatitis B, bodily fluids due to first aid response, noise, lead, aerosol transmissible disease
Bus Drivers	CDL, Blood & Alcohol Per regulation	Transportation regulations
Reprographic Technicians	Laboratory Technician Every two years*	Noise, dust, chemicals, material handling

\*After a baseline, subsequent examinations may be conducted at the Student Health Clinic provided spirometry or a hearing test is not needed. For employees on the Mandatory Hearing Conservation Program, a hearing test (audiogram) may be declined but the test must be made available to them.

## 6.0 EXAMINATIONS

Employee occupational medical examination content is the result of recommendations from the Center for Disease Control and Federal Guidelines for best practices in conducting occupational medical examinations. A board-certified occupational health physician is utilized when possible. Medical examination protocols for various job descriptions are identified in a contract that is administered by SRS. Employees are included in the program based upon job hazards and specific duties entailing exposure to known hazards. Examination components are identified based on the identified exposures and methods available to assess health effects. Examination interval varies depending upon the exposures, employee age, and previous exposure/examination history. Any employee may decline procedures that require injection or ingestion of a medication.

Employees may also decline parts of the examination apart from the components that assess respiratory function for those employees who use chemical or physical agents that have the potential to affect the respiratory system. A waiver/declination form must be signed for refusal of the examination or components. When an examination component is required per regulation, an employee must provide a written explanation as to why the employee will not participate in the test procedure to their Supervisor or Safety, Risk, & Sustainability. SRS will work with the examining physician and Human Resources to determine the appropriate course of action. CSUB will provide the employee and examining physician with copies of the applicable standards when

requested, and as required by the regulations. The Occupational Medical Monitoring Program Confidentiality Statement and Authorization to Release Medical Information Form explains the program and medical data confidentiality practices. This form permits the examining physician to release the following to the CSUB OMMP administrator: the medical qualification determination an occupationally related medical conditions identified during examination, audiogram, threshold shift status, and baseline, respirator medical determination; and work limitations recommended. Human Resources requires a baseline fitness-for-duty for pre-determined positions. These examinations may serve as a baseline audiogram but are not part of the OMMP. Non-work-related health issues may arise during a medical examination. The physician may recommend the employee consult a personal physician or specialist. Tests related to non-work-related health are the employee's responsibility. Medical records are provided to the employee's personal physician upon the employee's written request.

## 6.1 Initial Examination

1. Employees are given an initial examination to verify capability of performing assigned tasks including donning of required respirators.
2. The purpose of the initial examination is to establish a baseline prior to exposure of regulated substances and high noise levels.
3. If the employee has recently undergone an equivalent exam, a determination can be made to substitute the prior exam. The employee is required to complete the medical history questionnaire and provide the results of the equivalent examination to the contracted physician.

## 6.2 Periodic Examination

1. Medical exams are conducted according to the frequency prescribed by the best practices, consulting physician, or regulation.
2. When an employee has been exposed to a regulated substance for 30 days during the year, above the action level for a single day, or per regulation, the employee receives an exam at approximately at 12-month interval.
3. When an employee's exposure is below that listed above for the preceding 12 months, a periodic examination may be waived at the request of the supervisor.

### 6.3 Exit Examination

Upon proposed termination of employment or reduction of duties involving exposures, an employee shall exit the medical monitoring program. A final exit examination is required.

### 6.4 Special/Emergency Examination

An exam is provided to determine the need for preventative medical treatment when an employee or supervisor has reported a potential exposure. Such an example is a sharps penetration or blood borne pathogen following a medical response. Medical exams for administering prophylactic vaccines are provided where required by regulation, or at the discretion of the OMMP Administrator. Designated first aid providers are provided the opportunity to receive the Hepatitis B series annually. Tetanus and Hepatitis A may be administered when warranted but is typically also available through an employee's own health provider. Special examinations will be evaluated as requested, and on an ongoing basis.

### 6.5 ACCESS TO EXPOSURE / MEDICAL RECORDS

Medical records are provided to the employee, their designated representative, and authorized representatives of DOSH-Cal/OSHA. The examining physician provides CSUB with a status report identifying any work restrictions and a clearance for respirator use. In the event an employee is not found to be fit-for-duty due to a medical condition, the contracted physician communicates directly with Human Resources. Human Resources will communicate with the supervisor and the employee to determine the appropriate action. Employee audiograms and an audio summary are provided to CSUB for administration of the Hearing Conservation Program. The examination report is provided by the physician directly to the employee at the time of exam. An employee may request the examination report at any time. Access to medical records will be provided when a signed medical release form is received, and within 15 days of the request.

### 7.0 RECORD KEEPING AND CONFIDENTIALITY

Records are confidentially maintained according to Title 8, CCR §3204 Access to Employee Exposure and Medical Records. Medical information is restricted but is permissible by regulatory requirements and through medical release on a need to

know basis. In the absence of a subpoena, medical information will not be made available to any person other than the employee, a designated representative, and authorized representatives of state/federal regulatory agencies.

Health status summary reports are stored in locked file cabinets in Safety, Risk, & Sustainability for the duration of employment plus 30 years.

## 8.0 FORMS AND INSTRUCTIONS

Safety, Risk, & Sustainability initiates the medical examination cycle by notifying supervisors. Examinations are scheduled by SRS or a supervisor. Employees are given time to complete the forms prior to the examination; completed forms are taken to the exam. Protocols have been predetermined by SRS and the medical provider. Following the exam, SRS is provided with a status report reflecting the employee is cleared for duty and to wear a respirator. Forms used in the program are included at the end of this document. Pre-defined job Categories (13) identify the examination content based on the hazards.

## 9.0 Forms used in the Occupational Medical Monitoring Program

### 9.1 Required Employee Occupational Medical Monitoring Memorandum

Supervisors are notified that periodic examinations are pending, are provided with an opportunity to request periods for scheduling of examinations, and options for examination payment.

### 9.2 Required Occupational Medical Monitoring

Employees are notified of the need to participate in medical monitoring by Required Medical Monitoring Memorandum. If the employee does not normally access their e-mail, this notification will be delivered by hardcopy to the supervisor.

### 9.3 Patient Referral

This form is completed by Safety, Risk, & Sustainability or the supervisor when the medical examination is scheduled. The form indicates the date, time, and location of the medical examination.

#### 9.4 Confidentiality Statement and Authorization to Release Medical Information.

This form is prepared and signed by the employee and authorizes release of the patient's health status medical report form to CSUB SRS or Human Resources Department.

#### 9.5 Medical History Questionnaires A.

A. Medical Questionnaire in Accordance with CAL/OSHA Respiratory Protection Standard Title 8, CCR 5208 (Asbestos)

B. Medical Questionnaire in Accordance with CAL/OSHA Respiratory Protection Standard Title 8, CCR 5144 (Non-asbestos)

C. CVO CSUB Occupational Medical Monitoring Program Questionnaire

D. CSUB Exposure Table

E. Hearing Test Questionnaire

Medical Respirator Recommendation: The employee's supervisor should ensure the employee completes the forms prior to the examination. The supervisor reviews the exposure table to ensure it is reflective of the activities performed by the employee. Supervisor does NOT review medical history questionnaires. The employee completes the remainder of the questionnaire and takes it to the clinic. The questions are intended to alert the physician of any exposures that may require additional medical evaluation. The CSU questionnaire is used for initial examinations. The contract physician will provide medical history questionnaire form for use in periodic and final examinations.

Cal/OSHA standard specific mandatory health questionnaires will also be provided by the contract physician.

## **9.6 Hepatitis B Vaccination Authorization and Declination**

This form is used when offering the Hepatitis B vaccine to designated first aid/medical responders. Employees may accept or decline the vaccine using this form.

## **9.7 Voluntary Hepatitis A Vaccination**

This form is used when offering the Hepatitis, A vaccination series to sewage workers.

## **9.8 Occupational Medical Monitoring Declination**

Employees who are not required to participate in the medical monitoring program in its entirety or those whom are offered the examination and wish to decline portions of the examination, such as Hepatitis B or other vaccinations, may decline. The form is completed and placed in the Employee Medical File.

## **9.9 Physicians Status Report**

This report is completed by the physician and sent to CSUB OMMP administrator. The report summarizes the employee medical conditions and includes respirator clearance.

## **9.10 Individual Audiogram Report**

This report contains the baseline audiogram and the most recent audiogram along with threshold shift calculations. The individual audiogram is used by the Hearing Conservation Program to comply with regulations for reporting and prevention.