Access to Medical & Exposure Records

For

<Insert Organization Name>

Adopted
<Insert date policy is adopted>
I. Purpose
Employees have the right to access to exposure and medical records. This section will outline the procedures to assure compliance with 29 CFR 1910.1020.

II. Scope
This procedure applies to all employee exposure and medical records. The employer will assure that all employee exposure and medical records are preserved.

A. Definitions – The following definitions apply to this policy:

1. Access – The right and opportunity to examine, copy, or use any or all exposure and medical records.
2. Designated Representative – Any individual or organization to whom an employee gives written authorization to exercise a right of access to exposure or medical records.
3. Employee – An individual who is employed by the Organization and who is being assigned or transferred to work where there is or will be exposure to toxic substances or harmful physical agents. In a case where the employee is deceased, the employee's legal representative may directly exercise all of the employee's rights under this policy.
4. Employee Exposure Record – A record containing information on the type of environment or hazards present in the workplace. This can include:
   a. Environmental (workplace) monitoring or measuring of a toxic substance or harmful physical agent, including personal, area, grab, wipe, or other form of sampling, as well as related collection and analytical methodologies, calculations, and other background data relevant to interpretation of the results obtained;
   b. Biological monitoring results which directly assess the absorption of a toxic substance or harmful physical agent by body systems (e.g., the level of a chemical in the blood, urine, breath, hair, fingernails, etc.) but not including results which assess the biological effect of a substance or agent or which assess an employee's use of alcohol or drugs;
   c. Safety data sheets indicating that the material may pose a hazard to human health; or
   d. In the absence of the above, a chemical inventory or any other record which reveals where and when used and the identity (e.g., chemical, common or trade name) of a toxic substance or harmful physical agent.
5. Employee Medical Record – A record concerning the health status of an employee which is made or maintained by a physician, nurse, or other health care personnel. This includes work-related:
   a. Medical and employment questionnaires or histories (including job description and occupational exposures),
   b. The results of medical examinations (pre-employment, pre-assignment, periodic, or episodic) and laboratory tests (including chest and other X-ray examinations taken for the purpose of establishing a base-line or detecting occupational illnesses and all biological monitoring not defined as an "employee exposure record"),
   c. Medical opinions, diagnoses, progress notes, and recommendations,
   d. First aid records,
   e. Descriptions of treatments and prescriptions, and
   f. Employee medical complaints.
6. Exposure – A condition that occurs when an employee is subjected to toxic or hazardous environments as a result of his or her job duties.
7. Health Professional – A physician, occupational health nurse, industrial hygienist, toxicologist or epidemiologist providing medical care or other occupational health services to exposed employees.

8. Record – Any item, collection or grouping of information regardless of the form or process by which it is maintained.

9. Toxic Substance – Any chemical substance, biological agent (bacteria, virus, etc.) or physical stress (noise, heat, cold, radiation, vibration, etc.) to which employees could have been exposed as a result of performing their job function.

B. Preservation of Records:
   1. Work-related Medical records will be maintained for the duration of employment plus thirty (30) years except:
      a. First aid record of one-time treatments
      b. Medical records of employees that have worked less than one (1) year. Those records will be made available to employee at termination.

   2. Employee exposure records will be maintained and preserved for at least thirty (30) years, except:
      a. Background data to environmental monitoring or measuring
      b. Biological monitoring results if required by another OSHA standard will be maintained as required by the specific standard.

C. Access to Records – Employee or designated representative will have access within fifteen (15) working days from the day of request.

D. Employee Notice – When an employee is hired and at least annually thereafter each affected employee will receive the following information:
   1. Existence, location and availability of records covered.
   2. The name of the person responsible for maintaining and providing access to the records covered.
   3. The employee shall be told of his/her right of access to these records.

A memo is located in Appendix A. A copy of the memo addressed to each new hire will be placed in the employee’s personnel file.

All employees will be informed of their rights each January via a memo or by training with documentation (Appendix B).
Appendix A

DATE: January 15, 2008

TO: All Employees

FROM: <Name of Program Administrator>, <Title of Program Administrator>

SUBJECT: Access to Employee Exposure and Medical Records

An Occupational Safety and Health Administration (OSHA) standard “Access to Employee Exposure and Medical Records” (29 CFR 1910.1020), requires that all employers who maintain employee health files permit direct access to employees or their designated representatives to their records. The OSHA standard emphasizes that personal records cannot be released to anyone, except OSHA personnel, without the employee's written permission. A copy of the OSHA standard is available to employees upon request.

Under the rules of the OSHA standard, employees or their designated representative must be provided with the Exposure and Medical records within 15 days of a formal request. A request form is available for employees by contacting the <Title of Program Administrator>.

- Exposure records are associated with health programs such as the chemical exposures and respiratory protection.
- Medical records are the physical examinations associated with the respirator testing and pre-employment screening. Medical records may also include on-the-job injury reports.

Each employee’s Exposure records must be preserved at least 30 years, and each employee’s Medical records must be preserved and maintained for at least the duration of employment plus 30 years.

Upon an employee first entering into employment, and at least annually thereafter, the employer must inform employees exposed to potentially hazardous substances or harmful physical agents of the existence, location, and availability of their medical and exposure records and his or her rights under the access standard.

1. Record Access: Each employee has right of access to records.
2. Record Location: Employee exposure records are kept in the <name the location> office. Medical records are kept in the <name the location>.
3. Record Availability: Any informational materials concerning this standard, which are made available to the Organization from OSHA, will also be available to employees.

The Program Administrator is responsible for maintaining and providing all records.
Appendix B

Access to Medical & Exposure Records

I have trained the employees listed below on their right to access their medical and exposure records, 29 CFR 1910.1020.

I certify that I have been informed of the existence and location of medical records and exposure records regarding potentially harmful chemicals and physical agents to which I may be exposed.

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Our safety evaluations, reports and recommendations are made solely to assist your organization in reducing hazards and the potential of hazards and accidents. These recommendations were developed from conditions observed and information provided at the time of our visit. They do not attempt to identify every possible loss potential, hazard or risk, nor do they guarantee that workplace accidents will be prevented. These safety evaluations, reports and recommendations are not a substitute for ongoing, well-researched internal safety and risk management programs. This report does not warrant that the property inspected and its operations are compliant with any law, rule or regulation.

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