

Occupational & Environmental Medicine Newsletter



DECEMBER 2014

Preplacement & DOT Exams

We frequently speak with customers about the similarities/differences between preplacement and DOT exams. A common misunderstanding we encounter is that these exams are essentially the same, when they're not. Here's a summary:

The primary purpose of the DOT exam is to determine if the driver poses a risk for vehicle accidents caused by seizures, strokes, poor vision/hearing or loss of vehicle control due to problems with limbs. The DOT exam isn't focused on the "work" capability of drivers. This is the focus of the preplacement exam.

Preplacement exams are implemented by company policy. The company asks us to review the applicant's health history, perform a thorough musculoskeletal exam (focused on backs, knees, shoulders) and issue an opinion regarding the applicant's ability to perform physically demanding work.

The DOT exam focuses on the driver's ability to safely operate a motor vehicle (often a truck); the preplacement exam focuses on the driver's ability to safely load/unload the truck, bus or other vehicle, moving boxes, baggage, etc.

HealthPartners Work Injury Care Model

Our physicians are proud of the reputations they have for helping employers return their employees to work in a timely, cost-effective way. Communicating with employers, problem-solving and expectation-setting are key components of positive outcomes. Our philosophy is rooted in research and is consistent with the American College of Occupational & Environmental Medicine.

On the Disability Prevention Scale we:

- Provide suggestions on how to overcome activity limitations
- Encourage return to usual activities (including work)
- Explain what to expect regarding condition

On the Patient-Provider Relationship Scale we:

- Listen carefully to our patient
- Show concern regarding patient's condition
- Provide support that the patient needs
- Trust the provider

This practice style was supported in a 2010 study in The Journal of Occupational & Environmental Medicine. Three of our current or former MDs were researchers in the study (McGrail, Gorman, Parker) which demonstrated improved clinical, disability and patient care outcomes while delivering a 20% cost savings.

Our physicians are keenly aware of the pressure our customers are under when it comes to return to work issues, particularly regarding the desire to avoid making an injury OSHA-recordable or lost-time, when possible. Here are some of the techniques they'll employ to this end:

- Use over-the-counter medications when feasible
- Limit use of narcotics unless truly necessary
- Consider non-rigid splints
- Write work restrictions carefully and taking employees off work only in the most serious and medically necessary of circumstances

Our physicians strive to return your phone calls and emails if you have questions or concerns about one of your employees. At the end of the day, their role is to provide the best care possible and help our employer customers solve problems.

Medical Monitoring for Welders

By Dr. Shawn Olson, MD, MPH

Industrial welders work with a wide variety of materials, with potential exposure to a multitude of health hazards, including air contaminants (metal fumes, particulates, gasses), as well as physical agents (ergonomic stress, heat, electricity, noise, infrared and ultraviolet radiation). These hazards may lead to both rapid and insidious health effects, resulting in decreased productivity, increased health care costs and absenteeism.

There are no legal requirements to perform medical surveillance on workers exposed to welding fumes. OSHA (under 1910.134 (e)) does mandate medical evaluation to determine an employee's ability to use a respirator before the individual is fit tested or required to use the respirator. Additionally, depending on the circumstance, medical surveillance for specific hazards (e.g. Chromium) associated with welding may be required or recommended.

Pre-placement and annual medical examinations are important secondary prevention strategies to decrease the risk of lung disease associated with exposure to welding fumes. This is done by identifying symptomatic workers early, removing them from the causative exposure, and providing treatment, thus reducing the likelihood of chronic disability. These examinations consist of employee completion of a focused questionnaire and history, a physical exam and an annual pulmonary function test.

Importantly, medical surveillance must not be considered a substitute for sound occupational safety practices. Suitable fume, dust and chemical controls are the only effective primary prevention strategies.

Holiday Schedule

Christmas

Wednesday, Dec. 24: CLOSED

Thursday, Dec. 25: CLOSED

Friday, Dec. 26: CLOSED

New Year

Wednesday, Dec. 31: Open 8 a.m.-noon

Thursday, Jan. 1: CLOSED

Friday, Jan. 2: Regular hours



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Occupational Medicine & Urgent Care Locations

HealthPartners Clinic – Riverside

2220 Riverside Ave S
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952-883-6999 Opt. 1

HealthPartners Clinic – St. Paul

205 S. Wabasha St
St. Paul, MN 55107
952-883-6999 Opt. 2

HealthPartners Clinic – West

5100 Gamble Dr, Ste 100
St. Louis Park, MN 55416
952-883-6999 Opt. 3

HealthPartners RiverWay Clinic – Anoka

601 Jacob Ln
Anoka, MN 55303
952-883-6999 Opt. 5

Please advise us of any changes in contact information for your organization such as people, phone/fax, etc. This helps us to provide top-level service to you, especially if your account involves drug screening.

