Standardizing Pre-Placement Physical Exams to Reduce OSHA Recordability

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Introduction

With an aging workforce, many with limited retirement options, it is natural to see an increase in chronic, age-related, and non-occupational illnesses and injuries. This is turn has the potential of employers taking responsibility for non-work related issues that could have been detected and avoided if the proper gate checks were in place.

It is therefore important to recognize the available options for pre-placement/post-offer health screenings that include functional capacity testing. Identifying pre-existing disease and injury is key to avoiding potential on-the-job injuries, chronic injuries that present themselves on the job, and undiagnosed chronic medical diseases. How many times have we witnessed an employee routinely walking at work, says he/she has knee pain with no specific injury, but now has a meniscal tear? Or the employee that has a rotator cuff tear but wasn’t doing anything at work that could have caused this?

In essence, a basic drug test and heart/lung may not, and is often not an accurate way to determine an employee’s complete fitness for duty. A thorough examination utilizing the best methods available to reproduce the job demands required is needed to fully determine fitness-for-duty.

In this discussion, we will examine the most recent statistics in occupational fatality, injury and illness. We will also look into the current standards in post-offer examinations and illustrate options that are available to reduce the injury and fatality statistics.

How Are Workers Getting Injured?

Fatality Statistics

The most recent labor statistics give us a clear understanding of the mechanisms, and frequency of work-related injuries and fatalities. Overall, the numbers did not change much from the 2012. The list below shows the individual causes:

- 4405 total work related fatalities
- 1740 of the total fatalities related to transportation mechanisms
- 753 violence related
- 717 blunt force trauma
- 699 falls
- 330 exposure to harmful substances or environment
- 148 fires and explosions
- Demographics show the majority of fatalities are among white, middle to late aged men

**Non-Fatal Statistics**

The most recent complete labor statistics give us a clear understanding of the mechanisms, body part, and frequency of work-related injuries. Overall, the number of recorded injuries declined which begs the question if they are actually decreasing or are fewer being recorded. From the list of topics below one can see that muscular back injuries are the most common.

- Over 1.1 million non-fatal injuries documented
- Average time away from work is 9 days
- Musculoskeletal injuries were the majority at 34%
- Laborers were injured the most frequent
- Government workers were injured more than private sectors
- Overexertion was the most frequent cause of non-fatal injuries (63%), followed by slips and falls (23%)
- The back was the most frequently injured body part (36%) followed by shoulder (13%) and knee (12%)

**Limited Recommendations for Physical Examinations**

There are limited guidelines or mandated requirements in conducting physical exams on workers. Although OSHA mandates certain elements of exams for regulated toxic chemicals, they do not provide a set standard for evaluating fitness-for-duty.

It is therefore up to the performing medical provider and the employer to determine the necessary testing and examination protocols for the employee.

- There are no specific mandated or recommended guidelines for fit-for-duty evaluations
- Example of clean-up workers in the Deep Horizon oil spill, no standard of examinations
- OSHA only mandates parts of a required examination in relation to a potential toxic exposure, i.e. benzene, hexavalent chromium, etc.
- There is limited or no standard to determine if the employee is physical fit to perform his/her job tasks

**Best Practice Recommendations for Physical Examinations**

There are several techniques that an employer can and should utilize to assure their workforce has been successfully examined for that specific occupation. There are many key elements, listed below, that make up a thorough exam process. A strong understanding of the specific job demands are essential in setting up the necessary testing procedures.

- Forming a strong relationship between the provider and employer is key
- A strong focus should be on past medical and surgical history
• Identifying and understanding job demands/requirements
• Hands on physical exam
• Functional capacity testing
• Other testing as needed

**Functional Capacity Testing**
If the occupation in question has any manual component to it, employers should consider incorporating a functional test (FCE) alongside the basic physical exam. However, understanding the methods in which the medical facility is utilizing the function testing is essential.

Not all FCEs are created equal. A study conducted on post offer testing and shoulder injury reduction showed a cost savings in $124,451 which correlated with a substantial and noticeable decrease in shoulder related non-accidental injuries. In addition another study showed that FCE testing on 2,482 new hires showed a relation to physical capacity and work related injuries.

There are many benefits in utilizing a customizable and objective functional test, which are listed below:

• No set standard
• Should be objective
• Should be customizable
• Should have ability to differentiate different body symmetry
• Approved by the ADA and DOL for pre-employment screening
• Attempt to recreate as many job tasks as possible, be specific
• Provides a baseline of physical capacity
• Identifies silent/unrecognizable deficiencies
• Identifies inaccuracies in subjective data

**Reducing Recordable Injuries**
A very important area of concern for private sectors is injuries that are OSHA recordable. The 2013 statistics gives us an understanding about recordable injuries. There were approximately 1.6 million recorded injuries in 2013 that were serious enough to require work restrictions or time away from work. 75% of which were from the private sector. The average number of days missed from work for one injury was 3.

Many injuries are preventable, not only in from a training/safety aspect but also from a risk assessment standpoint. Identifying active disease and pre-existing injuries help reduce the risk of injuries and missed work. Recreating and demonstrating an employee’s functional capacity related to their job tasks helps to identify these deficiencies and potential injuries.

• 3 million recorded injuries in 2013
• 75% from the private sector
• For every 100 employees, the average recordables per year is 1.7
• Identifying a risk before it occurs is key
• Impossible to identify risks without setting measures to test for them
• The physical exam is key
• Functional capacity testing is key
Understanding Key OSHA Rules

It is often easier to understand the exemptions and exemptions to OSHA’s recording regulations. These exemptions can be found in the 1904.5(b)(2) standard. OSHA states you are not required to record injuries and illness if:

- At the time of the injury or illness, the employee was present in the work environment as a member of the general public rather than as an employee.
- The injury or illness involves signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurs outside the work environment.
- The injury or illness results solely from voluntary participation in a wellness program or in a medical, fitness, or recreational activity such as blood donation, physical examination, flu shot, exercise class, racquetball, or baseball.
- The injury or illness is solely the result of an employee eating, drinking, or preparing food or drink for personal consumption (whether bought on the employer's premises or brought in). For example, if the employee is injured by choking on a sandwich while in the employer's establishment, the case would not be considered work-related.
- The injury or illness is solely the result of an employee doing personal tasks (unrelated to their employment) at the establishment outside of the employee's assigned working hours.
- The injury or illness is solely the result of personal grooming, self-medication for a non-work-related condition, or is intentionally self-inflicted.
- The injury or illness is caused by a motor vehicle accident and occurs on a company parking lot or company access road while the employee is commuting to or from work.
- The illness is the common cold or flu (Note: contagious diseases such as tuberculosis, brucellosis, hepatitis A, or plague are considered work-related if the employee is infected at work).
- The illness is a mental illness. Mental illness will not be considered work-related unless the employee voluntarily provides the employer with an opinion from a physician or other licensed health care professional with appropriate training and experience (psychiatrist, psychologist, psychiatric nurse practitioner, etc.) stating that the employee has a mental illness that is work-related.

Note: If the employee is made ill by ingesting food contaminated by workplace contaminants (such as lead), or gets food poisoning from food supplied by the employer, the case would be considered work-related.

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As with many rules, there are special circumstances and caveats to these exemptions with are clarified in OSHA’s letters of interpretation which can be found on their website. In addition the letters detail specific scenarios which have arisen in the workplace and that need clarification on their recordable status. A few examples are listed below:

- Most difficult recordables to overturn examples
- Prescriptions once written are solidified
- Lost time/modified duty can be overruled
- More authoritative opinions must be acted upon expeditiously
- Injuries during lunch or breaks while at work are subject to recording’
- In general, Injuries that occur at work are considered work-related
- Cases where no obvious mechanism are present are still presumed work related
- Injuries while in parking lots during work hours are subject to recording
- Insect stings and animal bites are considered work related

**Bibliography**


