As a Health Care Provider you have, under the OSHA Lead Standards (29 CFR 1910.025 and 29 CFR 1926.62) primary responsibility for evaluating lead toxicity in the workers who are your patients.

In compliance with state regulations, the New Jersey Department of Health & Senior Services collects and records occupational blood and urine lead reports. The Department also offers assistance to health care providers through consultations, surveillance reports and educational materials.

FOR MORE INFORMATION CONTACT:

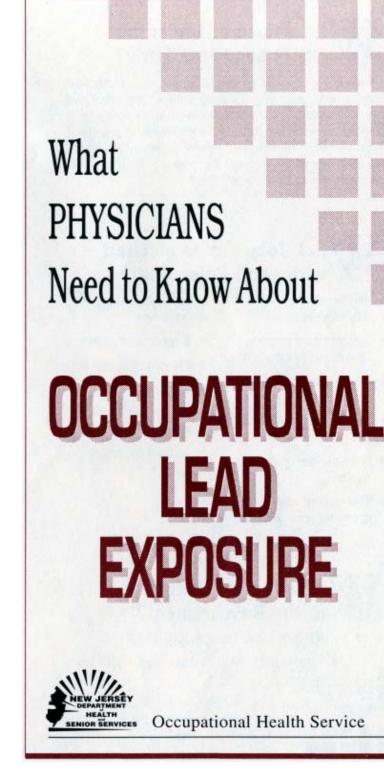
The Lead Project
Occupational Health Service
(609) 984-1863

Administrative Code

(N.J.A.C. 8:57-3.2), physicians
are required to report adult lead
toxicity (blood lead ≥25 ug/dl or
urine lead ≥80 ug/l) to the New
Jersey Department of Health and
Senior Services.

The report must include the following information about the case:

- ★ Name and Address of Employer at Time of Exposure
- \* Name \* Sex
- \* Date of Onset of Illness
- \* Year of Birth
- \* Telephone Number
- \* Home Address



### Who is Covered Under the OSHA Lead Standards?

All workers exposed to metallic lead, inorganic lead compounds, and organic lead soaps. The employer should establish a medical surveillance program for employees who are or may be exposed above the action level of 30 micrograms of airborne lead per cubic meter of air averaged over an 8-hour period for more than 30 days per year.

# hat Jobs are Associated with Lead Poisoning?

- Producing or smelting lead
- Melting and casting brass, copper or lead
- Demolishing old structures
- Stripping or sanding old paint
- Welding old, painted metal
- Machining and grinding lead alloys

- Manufacturing batteries
- \* Repairing radiators
- Handling scrap metal
- Soldering lead
- Using indoor firing ranges
- Mixing ceramic glazes

# Where is Lead Found in the Environment?

- \* PAINT in houses built before 1978
  - DRINKING WATER from pipes with lead solder
    - SOIL and AIR near buildings and factories where people work with lead

#### hat are the Physician's Responsibilities Under The OSHA Lead Standards?

The physician has a primary responsibility for evaluating potential lead toxicity in the employee and providing a written report to the employee detailing the results of this evaluation. The physician also should provide a summary to the employer detailing the fitness for duty and any special equipment required, limitations, or restrictions from performing full job duties.

Employees should be medically removed— (TRANSFERRED TO A NON-LEAD EXPOSED JOB WITHOUT LOSS OF PAY OR BENEFITS)—from the worksite:

- General Industry for blood lead levels greather than or equal to 60 ug/dl or an average of three readings greater than 50 ug/dl;
- Construction for blood lead levels greater than or equal to 50 ug/dl; or for medical conditions that place the employee at increased risk of impairment of health due to lead exposure.

### H ow Often Should Employees Have Medical Evaluations?

Physical examinations and laboratory testing should be conducted with the following frequencies:

- prior to employment or assignment in a leadexposed area;
- at least annually for any employee with a blood lead level in the past 12 months at or above 40 ug/dl;
- as soon as possible for any employee who complains of signs or symptoms consistent with lead exposure;
- as soon as possible for any worker who demonstrates breathing difficulties while wearing a respirator.

## What Constitutes a Medical Evaluation?

- OCCUPATIONAL HISTORY with attention to previous lead exposure;
- MEDICAL HISTORY of past and present medical conditions involving specific organ systems;
- PERSONAL HISTORY of hygiene habits, smoking, alcohol consumption, hobbies;
- \* BLOOD PRESSURE:
- PHYSICAL EXAMINATION with special attention to neurological, gastrointestinal, cardiovascular and renal systems;
- PULMONARY STATUS if respirators are used on the worksite;
- \* LABORATORY TESTING FOR Blood lead level; Hemoglobin, hematocrit, red cell indices and examination of peripheral smear morphology; Zinc protoporphyrin level (ZPP); BUN and serum creatinine; Routine urinalysis.

## H ow Often Should Biological Monitoring be Performed?

#### **BLOOD LEAD LEVELS**

- Less than 40 ug/dl (last result)
- Last result between 40 ug/dl and level requiring medical removal
- Greater than 60 ug/dl or when the average of the last three blood samples taken during the previous 6 month period is 50 ug/dl or greater for general industry; or greater than 50 ug/dl for construction industry.

#### FREQUENCY

Every 6 months

Every 2 months until two consecutive blood samples indicate a blood lead level below 40 ug/dl

At least monthly during the removal period of each employee removed from exposure to lead due to an elevated blood lead level.