

U.S. Department of Labor

**Occupational Safety and Health Administration
WILKES-BARRE AREA OFFICE
7 North Wilkes-Barre Boulevard, Suite 410
Wilkes-Barre, PA 18702-5241**



(570) 826-6538
Fax (570) 821-4170

July 27, 2011

Dear Employer:

Your workplace has been scheduled for a records and workplace inspection as part of OSHA's initiative to assess the quality of injury and illness data recorded by employers, as outlined in the Injury and Illness Recordkeeping National Emphasis Program. This letter explains how your establishment was selected for an inspection under this program and the procedures that will be followed.

Your establishment was selected from a list of establishments in high rate industries based on injury and illness data you supplied to OSHA through our annual injury and illness data collection.

This inspection will consist of three main parts: a records review for CY 2008 and CY 2009, interviews, and a walkaround (safety and health inspection) of the workplace. Each item is discussed below.

Your records from CY 2008 and CY 2009 will be intensively reviewed. As part of the review to inspect the accuracy and completeness of your company's OSHA Form 300, the OSHA compliance officer will ask you to furnish the following information:

1. Your 2008 employee roster(s). (The roster is to include labor, executive, hourly workers, salary workers, part-time workers, seasonal workers, and temporary workers that your firm directly supervised during the referenced year.)
2. Your 2008 and 2009 OSHA Form 300, Form 300A, and corresponding Form 301s. (Please note for data entry purposes the CSHO shall request three calendar years of the Form 300 and current year).
3. Workers' Compensation First Reports of Injury for employees.





4. Medical records for employees (To protect the privacy of medical records, a formal written Medical Access Order is attached. It explains this process more fully.) In addition, the compliance officer will need to see other related records for employees such as, but not limited to, nurse/doctor/clinic logs, company first-aid reports, company accident reports, insurers' accident reports, accident and health benefit insurance records, within-plant employee transfer records, absentee records, and employee/payroll records. Company policies pertaining to injury and illness reporting and recording will also be requested.

As part of the recordkeeping inspection, the compliance officer will conduct interviews with employees, management, the recordkeepers, and medical staff. We will make reasonable efforts to avoid disruption of your workplace activities during the interview process.

Finally, a walkaround (safety and health) inspection of the workplace will take place. This component is necessary to observe the consistency of the recorded injuries and illnesses with the workplace conditions. The compliance officer will address any violations that are observed in plain view during the walkaround. In addition, any other Emphasis Programs that apply to your workplace will be addressed during the inspection.

We appreciate your cooperation in this program. If you have any questions, your compliance officer is available to discuss them with you.

Sincerely,

A yellow sticky note is placed over the signature area. It contains a handwritten signature in blue ink and the typed name "Mark L. Sargent" and "Area Director" in blue ink below it.



JUN 20 2011

MEDICAL ACCESS ORDER

TO: The Principal OSHA Investigator:

Industrial Hygienist
Wilkes-Barre Area Office
Occupational Safety and Health Administration
U.S. Department of Labor
The Stegmaier Building
7 North Wilkes-Barre Boulevard, Suite 410
Wilkes-Barre, Pennsylvania 18702-5241

Telephone: (570) 286-6538

As Principal Investigator, you are hereby authorized to examine and copy any and all medical records from January 1, 2007 to the present date (for audiometric records, the date is to extend from the date of the baseline and/or pre-employment/placement examination), concerning employees' (permanent, temporary and/or contracted) injuries and illnesses, and surveillance data derived from periodic evaluations, in connection with an investigation by the Occupational Safety and Health Administration (OSHA), of working conditions at a place of employment operated by:

whose address is listed as:

Pursuant to the Occupational Safety and Health Act of 1970 as specified in 29 CFR 1910.1020(e)(3), _____ is required to make employee exposure and medical records promptly available for examination and copying by authorized OSHA officials. As the Principal OSHA Investigator, you will examine, copy as necessary and secure at all times, the medical information listed below on all past and current employees of _____, whose address appears above.

The medical information required is anticipated to contain material/data necessary to accomplish the purpose of the investigation, and which shall in each instance, be accompanied by explicit personal identifiers. This Medical Access Order does not limit your access to or use of: aggregate employee medical information or records on individual employees which are not in personally identifiable form; records required to be maintained pursuant to 29 CFR Part 1904; death certificates; or employee exposure records, including biological monitoring records, whether addressed by 29 CFR 1910.1020(c)(5) or by specific occupational safety and health standards. 29 CFR 1913.10(b)(3). Therefore, the medical information required shall include, but is not limited to:

1. The name, social security number and job classification(s) and/or description(s) for each employee.
2. Any and all employee medical histories, including:
 - a. Exposure(s) to hazardous materials, substances, chemicals, gases, vapors, mist, droplets, dust, molds, waste, equipment, machinery, and/or any other worksite condition (i.e. noise and temperatures – heat/cold) that may cause adverse health effects (include any monitoring and/or sampling data).
 - b. Respiratory disorders/diseases (temporary or permanent conditions - including all pulmonary function tests, and qualitative/quantitative fit testing materials).
 - c. Cardiovascular, hematological, gastrointestinal, liver, kidney, reproductive and/or any other internal disorder(s)/disease(s) (temporary or permanent conditions - including diagnosis, prognosis, and the name and results of all tests/examinations performed).
 - d. Neurological and/or musculo-skeletal weaknesses, impairments, disorders and/or diseases (including temporary or permanent conditions as well as conditions that may impact upon the employee's ability to wear a respirator).
 - e. Skin disorders/diseases (including punctures/sticks, chemical burns/irritations/rashes/eruptions/sensitization, and/or any other dermatological related disorder/disease).
 - f. Immunologic and/or allergic reactions/sensitizations (including temporary or permanent conditions).
 - g. Headache(s), ear, eye, nose and/or throat irritations/impairments/disorders and or/diseases (including temporary or permanent conditions).

8. Any and all records regarding notification(s) to an employee and/or employees concerning:
 - a. Exposure to any hazardous material, substance, chemical, gas, vapor, mist, droplet, dust, mold, waste, equipment, machinery, and/or any other worksite condition (i.e. noise and temperature - heat/cold) that may cause adverse health effects.
 - b. Any exposure monitoring activities.
 - c. The results of their individual tests.
 - d. Precautionary/protective measures available and/or implemented to avoid or reduce the incidence of exposure(s) to occupational hazards.

9. Any and all records concerning the medical removal of an employee from a particular work area (identify work area and type of exposure) including:
 - a. Date of each occasion when the employee was removed from a particular (identify) work area.
 - b. Explanation of why the removal was/is necessary (identify type of exposure/hazard).
 - c. Explanation of how the removal was or is being accomplished.
 - d. Date upon which the employee returned to the former job status.

The Assistant Secretary for OSHA and the Agency's Medical Records Officer have determined that there is a need to gain access to this personally identifiable medical information because it is relevant to OSHA's statutory purpose of investigating:

- A. Whether past or current employees of _____ are suffering or may have suffered, adverse health effects from exposure(s) to occupational hazards; and

- B. Whether _____ has complied with employer's statutory obligation to furnish to each employee, a place of employment which is free from recognized hazards that are causing or likely to cause death or serious physical harm; and with the occupational safety and health standards, including the recordkeeping procedures in 29 CFR 1904. See also 29 U.S.C. 651(b)(1), (3), (5) - (7), (9), (10), (12), (13).

As Principal Investigator, your access to the personally identifiable employee medical information covered by this Medical Access Order shall be provided by (and/or authorized healthcare representative, provider or service), allowing you full and prompt onsite examination. It may be necessary to copy certain records or portions of records. Copying may be provided by (and/or authorized healthcare representative, provider or service), onsite or the records may be taken offsite by you for copying. In the latter case, personal identifiers shall be promptly separated from the medical information, uniquely coded for each employee, and secured separately from the medical information. The medical information with its unique codes shall thereafter be used and kept secured as though they are still in a directly identifiable form. The original records shall be returned to (and/or authorized healthcare representative, provider or service), within a reasonable time.

All copies of the personally identifiable employee medical information will be destroyed at the completion of the investigation or any other enforcement action arising from the investigation. The investigation is scheduled to be completed on or before December 9, 2011. The Medical Access Order will remain in effect throughout the investigative period and during any enforcement proceedings that may result from the investigation.

To assist you (as necessary), in the examination and copying of medical information, Physicians and Health Scientists from the OSHA Office of Occupational Medicine in Washington, D.C., and other persons who may be authorized pursuant to 29 CFR 1913.10(h)(2) and (3), have been authorized by the Assistant Secretary to review and analyze the personally identifiable employee medical information based on their professional qualifications.

Also, as the Principal OSHA Investigator, you must make sure that at least two (2) copies of this Medical Access Order and accompanying Cover Letter be presented to (and when appropriate, authorized healthcare representative, provider or service), prior to examining or obtaining the medical information subject to this Medical Access Order. In addition, you shall inform (and when appropriate, authorized healthcare representative, provider or service), that a copy of this Medical Access Order and accompanying Cover Letter shall be prominently posted for at least fifteen (15) working days. 29 CFR 1913.10(d), (e); 29 CFR 1910.1020 (e)(3). Where it is agreed to by you, and Collective Bargaining Agent, if any, individual notice to employee or the placement of a copy of this Medical Access Order and accompanying Cover Letter in each employee's medical file may also be appropriate. 29 CFR 1913.10(e)(4).

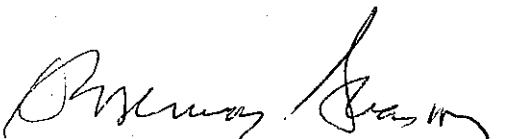
The Agency has promulgated detailed rules of Agency practice and procedure governing OSHA's conduct, which are designed to protect employee privacy interests. A key person in the overall administration of these rules (29 CFR 1913.10) is the OSHA designated Medical Records Officer:

Rosemary Sokas, MD, MOH
Director
Office of Occupational Medicine
Occupational Safety and Health Administration
U.S. Department of Labor
200 Constitution Avenue, N.W., Room N3457
Washington, D.C. 20210

Telephone: (202) 693-2323

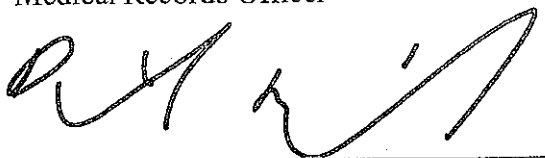
will have the overall Agency responsibility for ensuring that all medical records are protected under the guidelines outlined above as mandated in 29 CFR 1913.10. Written objections, questions or comments on behalf of _____ concerning OSHA's access to employee medical records should be forwarded to this official. However, the filing of written objections does not defer _____ (and/or _____ authorized healthcare representative, provider or service), statutory obligation from providing you with prompt access to the personally identifiable employee medical information. You shall proceed with the investigation unless the Agency decides otherwise. You may contact the Medical Records Officer at any time during the investigation process for direct assistance and/or consultation services.

By:



Rosemary Sokas, MD, MOH
Medical Records Officer

By:



David Michaels, PhD, MPH
Assistant Secretary