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# Medical Exam Tracking at Ames Research Center

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June 23, 2005

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# Physical Exam Requirement



- 
- **NASA headquarters initiated**
    - Effective Date: October 16, 2002
    - Expiration Date: October 16, 2007
    - Responsible Office: Chief Health & Medical Officer



# What Exams Are Part of the ASAP System?



- **Covers:**
  - Required **Occupational Examinations**
    - NASA Occupational Health Program Procedures NPR 1800.1
    - These exams are required by OSHA, NASA or other regulatory bodies.
- **Not Covered:**
  - **Health Maintenance Exams**
    - Personal decision to receive exam, not regulated



# What Kinds of Exams?



- **31 Occupational exams and 46 Chemical exams = 77 total exams**
  - **Examples:**
    - Hearing (High noise)
    - Heavy Equipment (Cranes, forklifts, etc.)
    - Hazardous Chemicals (ETO, Benzene, Asbestos)
    - Food Handlers
    - Emergency Responders
    - Confined Space Entry Personnel
    - Spray Painters
    - Hazardous Waste Workers
    - FAA
    - Divers



# Ames Safety Accountability Program (ASAP)



- **Executive Safety Committee agreed to move forward with a new ASAP Metric for FY05**
- **THE 5<sup>th</sup> ASAP Metric**
  - 1. Hazard Closure
  - 2. Legally required training
  - 3. Safety Meetings (6/yr.)
  - 4. Inspections (12/yr.)
  - 5. Physical exam tracking



## Physical Exam Summary



**The Physical Exams Information contained herein is presently for Test Purpose only. Please do not alter/change any information.**



### Ames Safety Accountability Program

[List all my codes](#)

Assign physical exam needs to your personnel as a group or by individual.  
 To survey an individual, click the appropriate link on the line with their name.  
 For individuals who have similar tasks, you can do a group survey.  
 Check the boxes for individuals in that group and then click on the Training or Physicals button.

**You are Realm User for Org Code: QH**

Group Survey		Name	Date Last Surveyed	Org When Surveyed	% Current Physicals Versus Required	# Current Physicals Versus Required	Physical History
Check boxes then click: <input type="checkbox"/> Physicals				QH	<div style="width: 100%; height: 10px; background-color: red;"></div>	0/10	
	<input type="checkbox"/>	<a href="#">Physicals</a>	Glazer, Miriam	9/23/2004	QH	<div style="width: 100%; height: 10px; background-color: red;"></div>	0/2 <a href="#">Show</a>
	<input type="checkbox"/>	<a href="#">Physicals</a>	Hulet, Michael	9/23/2004	QH	<div style="width: 100%; height: 10px; background-color: red;"></div>	0/2 <a href="#">Show</a>
	<input type="checkbox"/>	<a href="#">Physicals</a>	King, David	9/24/2004	QH	<div style="width: 100%; height: 10px; background-color: red;"></div>	0/3 <a href="#">Show</a>
	<input type="checkbox"/>	<a href="#">Physicals</a>	Pelligra, Ralph	9/23/2004	QH	<div style="width: 100%; height: 10px; background-color: red;"></div>	0/2 <a href="#">Show</a>
	<input type="checkbox"/>	<a href="#">Physicals</a>	Phillips, Stanleigh	5/28/2004	QH	<div style="width: 100%; height: 10px; background-color: blue;"></div>	0/0 <a href="#">Show</a>
	<input type="checkbox"/>	<a href="#">Physicals</a>	Steen, John	5/28/2004	QH	<div style="width: 100%; height: 10px; background-color: blue;"></div>	0/0 <a href="#">Show</a>

# Physical Exams

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For

King, David

[Return to Org QH List](#)

[NASA Physical Exam Matrix](#)

Assign	Job Certification	Required Forms
<p>Does the employee work as an Air Traffic Controller for NASA Ames / Moffett Field? <b>Required Physical:</b></p> <p><input type="checkbox"/> Air Traffic Control</p>	<p><a href="#">More Info</a></p>	<p><a href="#">Civil Servants</a> <a href="#">Contractors</a></p>
<p>Does the employee work in or around food service at the Ames Cafe? <b>Required Physical:</b></p> <p><input checked="" type="checkbox"/> Cafeteria Worker</p>	<p><a href="#">More Info</a></p>	<p><a href="#">All Employees</a></p>
<p>Does the employee work in confined spaces? <b>Required Physical:</b></p> <p><input checked="" type="checkbox"/> Confined Space</p>	<p><a href="#">More Info</a></p>	<p><a href="#">Civil Servants</a> <a href="#">Contractors</a></p>
<p>Does the employee work in the Ames Child Care Center? <b>Required Physical:</b></p> <p><input type="checkbox"/> Childcare Worker</p>	<p><a href="#">More Info</a></p>	<p><a href="#">All Employees</a></p>
<p>Does the employee operate a ground / remotely operated, cab / pulpit or high crane? <b>Required Physical:</b></p> <p><input type="checkbox"/> Crane Operators</p>	<p><a href="#">More Info</a></p>	<p><a href="#">Civil Servants</a> <a href="#">Contractors</a></p>
<p>Does the employee work as a diver for NASA? <b>Required Physical:</b></p> <p><input type="checkbox"/> Diver</p>	<p><a href="#">More Info</a></p>	<p><a href="#">Civil Servants</a> <a href="#">Contractors</a></p>
<p>Does the employee drive vehicles for NASA requiring a Department of Motor Vehicles(DMV) class A, B or commercial C</p>		<p><a href="#">Civil Servants</a></p>



## Examples of Four Questions on the Exam Questionnaire



- Does the employee work as an Air Traffic Controller for NASA Ames / Moffett Field?  
Required Physical: **Air Traffic Control**
- Does the employee work in or around food service at the Ames Cafe?  
Required Physical: **Cafeteria Worker**
- Does the employee require FAA certification to pilot an Aircraft for NASA?  
Required Physical: **FAA**
- Is the employee a member of the DART or HAZMAT Teams?  
Required Physical: **HAZMAT / DART**

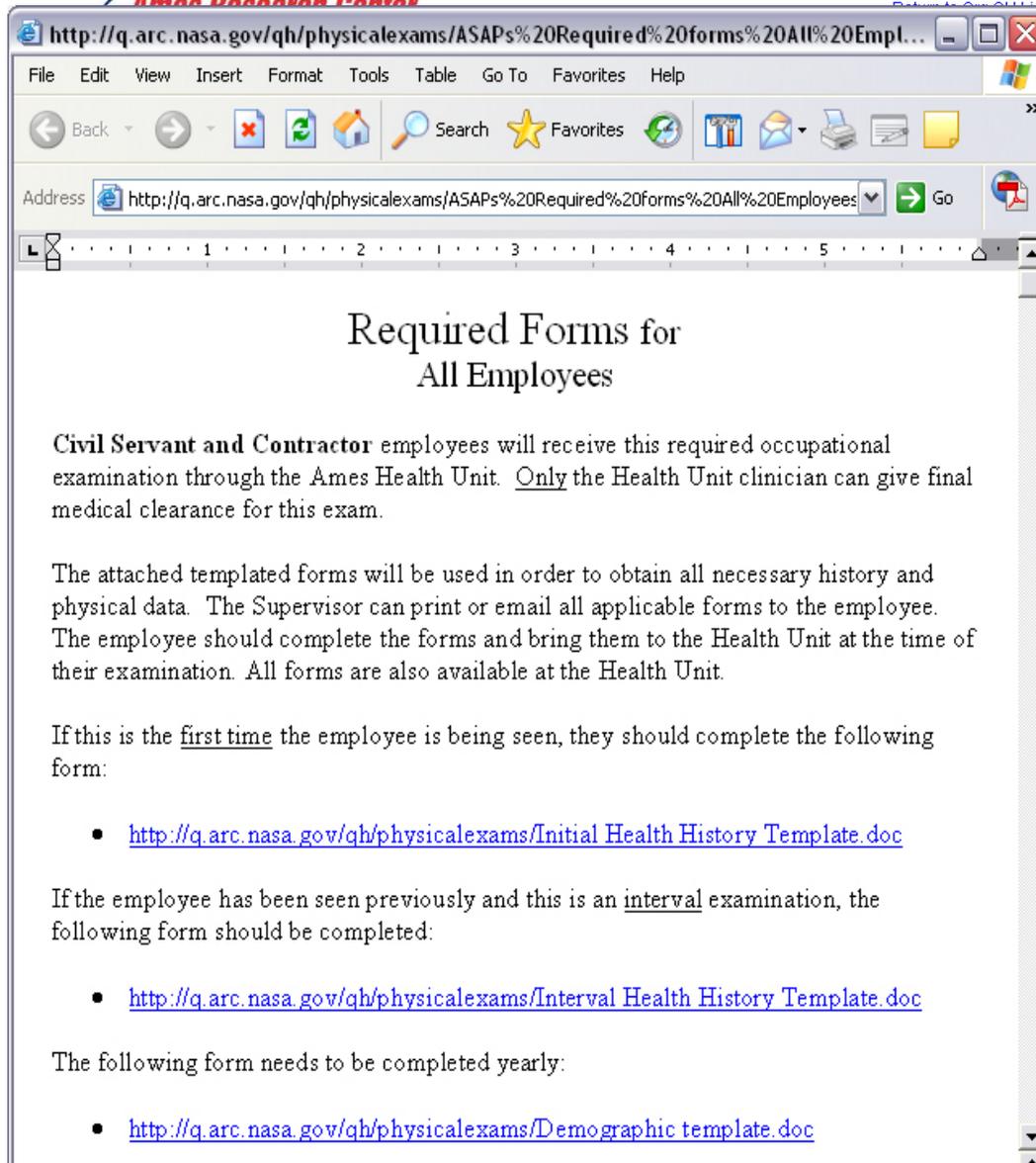
## Physical Exams

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For

King, David

[NASA Physical Exam Matrix](#)



### Required Forms for All Employees

**Civil Servant and Contractor** employees will receive this required occupational examination through the Ames Health Unit. Only the Health Unit clinician can give final medical clearance for this exam.

The attached templated forms will be used in order to obtain all necessary history and physical data. The Supervisor can print or email all applicable forms to the employee. The employee should complete the forms and bring them to the Health Unit at the time of their examination. All forms are also available at the Health Unit.

If this is the first time the employee is being seen, they should complete the following form:

- <http://q.arc.nasa.gov/qh/physicalexams/Initial Health History Template.doc>

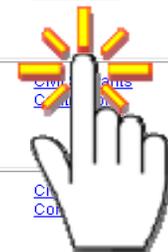
If the employee has been seen previously and this is an interval examination, the following form should be completed:

- <http://q.arc.nasa.gov/qh/physicalexams/Interval Health History Template.doc>

The following form needs to be completed yearly:

- <http://q.arc.nasa.gov/qh/physicalexams/Demographic template.doc>

Job Certification	Required Forms
Controller for NASA Ames / Moffett Field?	<a href="#">Civil Servants</a> <a href="#">Contractors</a>  <a href="#">More Info</a>
service at the Ames Cafe?	<a href="#">All Employees</a>  <a href="#">More Info</a>
aces?	<a href="#">Civil Servants</a> <a href="#">Contractors</a>  <a href="#">More Info</a>
d Care Center?	<a href="#">All Employees</a>  <a href="#">More Info</a>
tely operated, cab / pulpit or high crane?	<a href="#">Civil Servants</a> <a href="#">Contractors</a>  <a href="#">More Info</a>
NASA?	<a href="#">Civil Servants</a> <a href="#">Contractors</a>  <a href="#">More Info</a>
quiring a Department of Motor Vehicles(DMV) class A, B or commercial C	<a href="#">Civil Servants</a> <a href="#">Contractors</a>  <a href="#">More Info</a>
to pilot an Aircraft for NASA?	<a href="#">Civil Servants</a> <a href="#">Contractors</a>  <a href="#">More Info</a>
NASA Ames/ Moffett Field?	<a href="#">Civil Servants</a> <a href="#">Contractors</a>  <a href="#">More Info</a>
ilder?	<a href="#">Civil Servants</a> <a href="#">Contractors</a>  <a href="#">More Info</a>
HAZMAT Teams?	<a href="#">All Employees</a>



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Address http://q.arc.nasa.gov/qh/physicalexams/Initial%20Health%20History%20Template.doc

## NASA AMES HEALTH UNIT

### INITIAL HEALTH HISTORY QUESTIONNAIRE

Name	DOB	Age	Sex
Birthplace	<input type="checkbox"/> Civil Servant <input type="checkbox"/> Contractor <input type="checkbox"/> Student Intern <input type="checkbox"/> Other		
<b>I. ILLNESSES</b> Check if you have now or have ever had any of these conditions, explain details below.			
<input type="checkbox"/> Skin problems (acne, rash)	<input type="checkbox"/> Hemorrhoids	<input type="checkbox"/> Recent weight change	
<input type="checkbox"/> Eye problems	<input type="checkbox"/> Varicose veins	<input type="checkbox"/> Tumors or Cancer	
<input type="checkbox"/> Glasses ( Distance / Reading )	<input type="checkbox"/> Diarrhea <input type="checkbox"/> Constipation	<input type="checkbox"/> Diabetes <input type="checkbox"/> IDDM <input type="checkbox"/> NIDDM	
<input type="checkbox"/> Ear or hearing problems	<input type="checkbox"/> Hiatal Hemia <input type="checkbox"/> Gastric Reflux	<input type="checkbox"/> Thyroid problems	
<input type="checkbox"/> Headaches or Migraines	<input type="checkbox"/> Ulcers	<input type="checkbox"/> Epilepsy or Seizures	
<input type="checkbox"/> Heart murmur	<input type="checkbox"/> Liver/gall bladder	<input type="checkbox"/> Rheumatic fever	
<input type="checkbox"/> Angina / Chest pain	<input type="checkbox"/> Kidney or Bladder disease	<input type="checkbox"/> Measles	
<input type="checkbox"/> Heart attack	Hernia: <input type="checkbox"/> Inguinal <input type="checkbox"/> Abdominal	<input type="checkbox"/> Mumps	
<input type="checkbox"/> High Blood Pressure	Hepatitis: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	<input type="checkbox"/> Chickenpox	
<input type="checkbox"/> Blood clot	<input type="checkbox"/> Kidney stones	<input type="checkbox"/> <b>MALES ONLY:</b> Prostate problems	
<input type="checkbox"/> Asthma	<input type="checkbox"/> Shoulder/ Knee problems	<b>FEMALES ONLY:</b>	
<input type="checkbox"/> Emphysema	<input type="checkbox"/> Back pain	Date of last Period:	
<input type="checkbox"/> Pneumonia <input type="checkbox"/> Bronchitis	<input type="checkbox"/> Arthritis, Gout	<input type="checkbox"/> Painful or Irregular Periods	
<input type="checkbox"/> Tuberculosis	<input type="checkbox"/> Fractures (broken bones)	<input type="checkbox"/> Pregnancy <input type="checkbox"/> Miscarriage	
<input type="checkbox"/> Sinus trouble, allergies	<input type="checkbox"/> Dizziness	<input type="checkbox"/> Breast Lumps or Nodules	
<input type="checkbox"/> Allergies to Animals	<input type="checkbox"/> Depression / Emotional problems	<input type="checkbox"/> <b>NONE OF THE ABOVE</b>	
Explain any YES answers:			
<b>II. MEDICATIONS</b> List all prescribed medications that you are presently taking. Include birth control pills, vitamins, aspirin products and other over-the-counter medications. Give strength and frequency, if known.			
1.		3.	
2.		4.	



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/qh/physicalexams/ASAPs%20Required%20forms%20All%20Employees

## Required Forms for All Employees

Contractor employees will receive this required occupational health history questionnaire from the Ames Health Unit. Only the Health Unit clinician can give final approval for this exam.

These forms will be used in order to obtain all necessary history and information. The supervisor can print or email all applicable forms to the employee. The employee must complete the forms and bring them to the Health Unit at the time of the exam. Additional forms are also available at the Health Unit.

When the employee is being seen, they should complete the following forms:

- [http://q.arc.nasa.gov/qh/physicalexams/Initial Health History Template.doc](http://q.arc.nasa.gov/qh/physicalexams/Initial%20Health%20History%20Template.doc)
- If the employee has not been seen previously and this is an interval examination, the following form must be completed:
  - [http://q.arc.nasa.gov/qh/physicalexams/Interval Health History Template.doc](http://q.arc.nasa.gov/qh/physicalexams/Interval%20Health%20History%20Template.doc)
- Demographic forms must be completed yearly:
  - [http://q.arc.nasa.gov/qh/physicalexams/Demographic template.doc](http://q.arc.nasa.gov/qh/physicalexams/Demographic%20template.doc)

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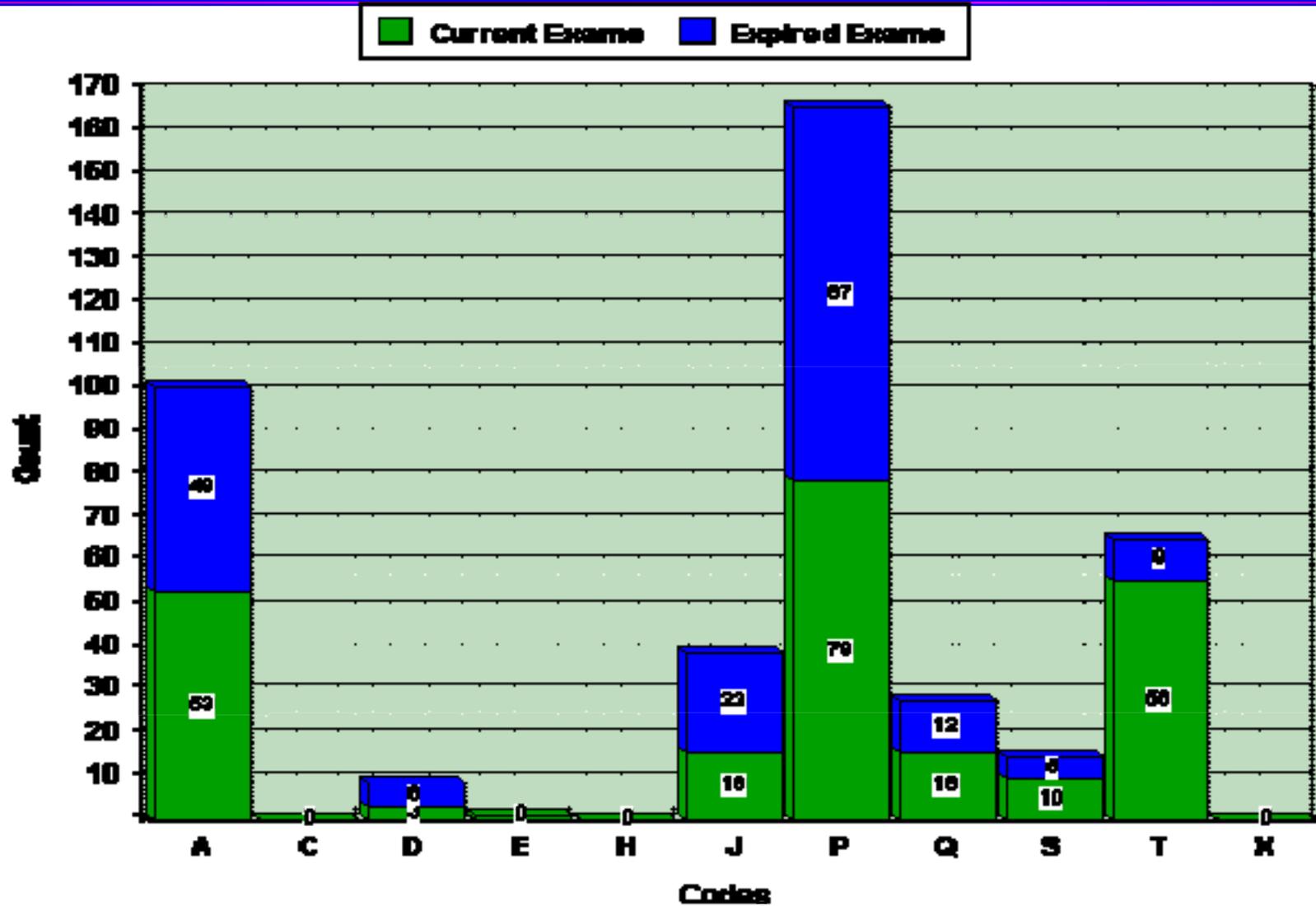


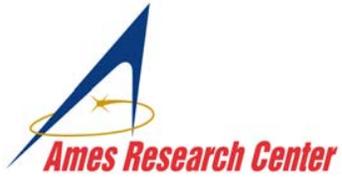
# Start-up Plan



- 
- **System went live during Safety Week, 2004**
  - **Training**
    - **Supervisor Training**
      - One on One (Hands-on)
      - Small groups
  - **Schedule**
    - **Complete training and questionnaire by Dec. 31, 2004**
    - **Complete first cycle of exams by December 31, 2005**

# Metric is On-line





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**The End**