



WORKERS' SPOTLIGHT

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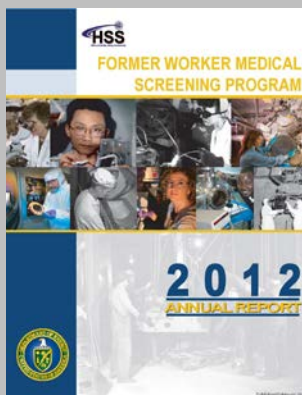
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Former Worker Medical Screening Program 2012 Annual Report

By Mary Fields

The Annual Report of the Department of Energy's (DOE) Former Worker Medical Screening Program (FWP) for 2012 was published in February. Since January 2008, the Office of Health, Safety and Security (HSS) has issued a report to stakeholders on an annual basis, providing the history, goals and accomplishments of the program.

The FWP was mandated by Congress as part of Section 3162 of the National Defense Authorization Act for Fiscal Year (FY) 1993 (Public Law 102-484). Since 1996, the FWP has provided medical screening examinations, at no cost, to all interested and eligible former DOE Federal,



contractor, and subcontractor workers from all DOE sites. The medical screening exams offered by the FWP are designed to detect work-related health effects from a range of potentially hazardous exposures. Individuals who are found to have any abnormal medical findings are referred to their personal physicians or to a specialist for additional testing and diagnoses. Follow-up care is

not covered by the FWP, and the program is not intended to serve as a substitute for routine medical exams by an individual's personal physician.

Exams are offered at clinics in communities near DOE sites, as well as through a large network of health clinics nationwide to allow services to be provided near most workers' residences. In fact, this vast network of clinics has allowed the FWP to provide participant exams in all 50 states, Canada, Puerto Rico, and the Philippines.

During the past year:

- The FWP continued to fulfill its

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A NOTE FROM THE DIRECTOR

By Greg Lewis

Cross Training

This month I would like to focus on a basic but extremely important issue for the EEOICPA Program - cross training staff. Throughout the complex we have a tremendous staff of dedicated employees

working on this program. Because of the wide variety of records collected to respond to requests from the Department of Labor and the National Institute for Occupational Safety and Health, often, many different hands touch a typical records package, including staff from the

medical, dosimetry, industrial hygiene and human resources departments. At many sites, a single staff member might handle the bulk of the records requests in each of the departments, and that staff member may only

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GETTING TO KNOW OUR STAFF

Cecelia Kenney has been a member of the Office of Worker Screening and Compensation Support since July, 2012 but has worked in the Office of Health, Safety and Security (and its predecessor offices) since 2004.

Cecelia jumped into the EEOICPA program feet first and is providing assistance with the budget, conducting site reviews to identify savings to the program and to streamline processes, and is working with the HS-14 staff to publish the *Workers' Spotlight*.



Prior to her employment with DOE, Mrs. Kenney held positions at a national non-profit, two law firms, a local county school district and early in her career, worked for Air Force Systems Command as an Intelligence Assistant in a civilian position.

When not at work, she enjoys traveling with her husband Frank, hand-quilting, chasing after her 2-year old Bassett Hound, Zest, and spoiling her four grandchildren. ■

REPORT *cont.*

critical mandate of providing medical screening services, at no cost, to all interested former DOE workers. To date, 93,684 screenings have been performed. In FY 2012 alone, 4,815 initial medical examinations and 3,578 re-screen exams were conducted.

- The FWP services have resulted in a high level of satisfaction among participating former DOE workers, with an average of 98.1% of the participants indicating satisfaction with the program.
- The FWP has identified conditions at early stages, allowing for successful treatment. For example, former workers have had pre-cancerous conditions and cancers diagnosed at early stages, leading to better success in treatment.
- FWP screening exam results provide useful information to support adjudication of claims for the Energy Employees Occupational Illness Compensation Program Act (EEOICPA). While workers need not participate in the FWP to file an EEOICPA compensation claim, FWP medical results have been useful in supporting workers' claims.

- The FWP has advanced the state of medical knowledge by contributing 26 articles to peer-reviewed scientific literature.
- The FWP strengthened its partnership with other Federal agencies on outreach initiatives. The Joint Outreach Task Group (JOTG) includes representatives from HSS, the Department of Labor (DOL), the National Institute for Occupational Safety and Health (NIOSH), the Offices of the Ombudsman for DOL and NIOSH, and HSS-funded FWP projects. The JOTG was established so that agencies/programs with common goals can work together by combining resources and coordinating outreach efforts to better serve the DOE workforce. To date, the JOTG has held 36 "town hall" meetings in and near 22 DOE sites.
- The FWP has enhanced communication with beryllium-affected current and former workers. HSS, in partnership with workers, labor organizations, and the occupational medicine community, developed the Chronic Beryllium Disease (CBD) Awareness Web site as part of

HSS' corporate outreach initiative. The Web site provides information to the worker community, as well as the medical community in order to enhance the likelihood of timely diagnosis and treatment of potential CBD cases. Along with the Web site, HSS created a CBD information card, an easy-to-carry pocket reference for former/current workers to share with their primary physicians, which can be printed from the Web site.

In summary, DOE has made great advances in addressing the occupational health legacy of over 60 years of nuclear weapons design and production. The FWP is a prime example of DOE's commitment to its workforce and demonstrates the feasibility and value of conducting targeted medical screening programs for occupational diseases.

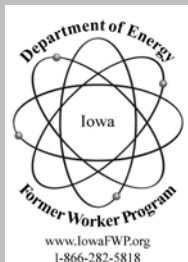
The report is available on the HSS Web site at

http://www.hss.energy.gov/HealthSafety/FWSP/formerworkermed/FWP_Annual_Report.pdf. ■

TRIVIA QUESTION

How many former workers have participated in the medical screening program to date?

UNIVERSITY OF IOWA – FORMER WORKER PROGRAM



Incidental Findings Detected Through Burlington Atomic Energy Commission (AEC) Plant and Ames Laboratory Former Worker Medical Screening Program

The University of Iowa College of Public Health administers medical screenings to former workers from two DOE facilities in Iowa: the Line 1/Division B/Burlington AEC Plant (BAECP) at the Iowa Army Ammunition Plant (IAAP) in West Burlington, Iowa, and the Ames Laboratory on the campus of Iowa State University (ISU) in Ames, Iowa.

From 1949 to mid-1975, approximately 5,000 workers were employed to assemble and disassemble nuclear weapons, specializing in high explosive manufacturing, on the Line 1/Division B at the IAAP. In the early 1940s, scientists at ISU developed the most efficient process for producing high-purity uranium metal in large quantities for nuclear reactor purposes for the Manhattan Project. The Ames Laboratory produced more than 2 million pounds (1,000 tons) of uranium. Since then, over 13,000 employees have worked at the Ames Laboratory, which presently conducts a broad range of applied chemical and physical research.

Since 2001, nearly 3,000 former Department of Energy workers from the IAAP and Ames Laboratory have received a medical screening. In addition to testing for occupational lung diseases and radiation-induced cancers, former workers are also evaluated for non-occupational conditions, such as anemia, diabetes, hypertension, hypercholesterolemia, and thyroid, liver and kidney disease. The medical screenings have identified the following incidental findings:

- **Uncontrolled Hypertension Detected:** 337 (21%) former workers were hypertensive and 10 (0.6%) had urgent/severe hypertension (blood pressure >180/110), n=1,637.
- **Uncontrolled Diabetes Mellitus Detected:** 137 (2%) former workers had hyperglycemia (non-fasting glucose \geq 200mg/dL), n=2,834. 59 (11%) former workers indicated fair control of their diabetes (hemoglobin A1c 7.1-9.0) and 12 (2.2%) had poor control (A1c \geq 9.1), n=542.

- **Cancers:** 50 (1.7%) former workers have been newly diagnosed with a cancer since having their screening, with almost half diagnosed with lung cancer (21 cases), n=2,917.
- **Sarcoid lung disease:** 5 (0.48%) of the BAECP former workers (n=1,170) and 11 (0.71%) of the Ames Laboratory former workers (n=1,556) were found to have a history of pulmonary sarcoidosis.
- **Follow-up recommended:** Of the 3,500 total recommendations given for follow-up medical care from the initial and three year re-screenings, 81% were for non-occupational reasons, such as chronic diseases.

A number of former workers have expressed gratitude for the FWP medical screenings and finding out about otherwise unknown conditions. For instance, after three medical screenings of normal results over the last nine years, an asymptomatic former worker was found to have low hemoglobin levels, indicating anemia. Following the FWP's recommendation to consult her physician about this

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DIRECTOR'S NOTE *cont.*

spend 25 percent or less of their time on EEOICPA. While it can be a very manageable workload for one staff member, if that staff member leaves the job or is out of work for an extended period of time, it can become difficult for a site to respond to requests in a timely manner.

As a program, we are privileged to have so many staff that take ownership of their process and feel that they have a personal responsibility for the quality and timeliness of the responses. An unintended consequence of that can be that everyone else in the group will defer to that individual as the expert, and in some cases, there is nobody else in the department who really understands the process. Even if there are search procedures and desk instructions prepared, when time is tight and deadlines are looming, it can be difficult for someone new to the process to be able to keep pace with the records requests.

My office will be focusing on this over the remainder of this year, and we encourage you to look at each of the key EEOICPA staff at your site, and determine whether there is someone who is trained to fill in for that person when necessary. If you take the time to cross train staff now, odds are it will pay off sometime in the near future. ■

Calendar of Events



April

- 2 8:00 am FWP Event
Mound Retiree Breakfast
Bob Evans Restaurant, 220 Byers Road, Miamisburg, OH
- 9:00 am Local Event
Y-12 All Retiree Meeting
Shoney's, 204 South Illinois Avenue, Oak Ridge, TN
- 3 7:15 am Local Event
X-10 All Retiree Meeting
Shoney's, 8529 Kingston Pike, Knoxville, TN
- 9:00 am Local Event
Y-12 Inspector Group Meeting
Shoney's, 1100 US 321, Oak Ridge, TN
- 11:00 am Local Event
Y-12 Guards Meeting
Shoney's, 1100 US 321, Oak Ridge, TN
- 4:30 pm FWP Event
X-10/Y-12 ATLC Council Meeting
ATLC Union Hall, 109 Viking Road, Oak Ridge, TN
- 4 9:00 am Local Event
X-10/Y-12 Asbestos Retirees Meeting
Shoney's, 3739 W US Highway 9, Lake City, TN
- 6:00 pm FWP Event
K-25 AGRE Meeting
USW Union Hall, 133 Raleigh Road, Oak Ridge, TN
- 9 9:00 am Local Event
X-10 Plant and Equipment Meeting
Shoney's, 1100 US 321, Lenoir City, TN
- 11:00 am FWP Event
Fernald Retiree Meeting
10995 Hamilton Cleves Highway, Harrison, OH
- 11 11:00 am Local Event
X-10 Guards Meeting
Shoney's, 1100 US 321, Oak Ridge, TN
- 16 12:00 pm Local Event
X-10/Y-12 Machinist Local 480 Meeting
Local 480 Hall, Oak Ridge, TN
- 5:00 pm Local Event
Y-12 Gage Lab
Gondolier, Oak Ridge, TN
- 18 11:30 am FWP Event
Mound Retiree Luncheon
Golden Corral, 8870 Kingsridge Drive, Miamisburg, OH

For a complete list of calendar events, visit:

http://www.hss.doe.gov/healthsafety/FWSP/Formerworkermed/events_calendars.html

UNIVERSITY OF IOWA *cont.*



Screening of former worker

blood test, she found out that she had Stage 2 colon cancer and had surgery to remove the tumor. She claims that the FWP medical screening saved her life by providing the early detection of her cancer.

In another instance, a former worker arrived to his medical screening and had emergent hypertension of 260/140. Since this medical screening was conducted at the hospital, he was immediately taken to the emergency room and stabilized. The former worker was in between retirement and Medicare and had medical insurance with a limited network. After working with him to find an in-network provider, we were able to establish care with a physician to treat his hypertension.

These are just two recent examples of many similar cases of anemia and hypertension identified through the FWP medical screenings, among others. The detection of these non-occupational chronic conditions, many of which can be readily treated, may significantly impact the former workers' longevity and quality of life. For these and other benefits, the former workers are grateful for the attention and services provided through the FWP. ■

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