

Selected (Potentially) Fixable Problems Identified from Review of Cases November 20-21 Advisory Board Meeting, Paducah, KY

(revised 1-27-2020)

Carrie A. Redlich, MD, MPH

- 1) SEM
- 2) Quality Industrial hygiene reports
- 3) Who gets what information (IH, CMC - eg OHQ, SOAP vs selected medical records)
- 4) Claims examiner's review of medical record can be inaccurate – omit or inaccurately summarize critical medical information
- 5) Questions claims examiner asks IH, CMC
- 6) CMC reports
- 7) Claims examiner's assessment of treating physician / CMC reports

Example of Fixable SEM Problem – Health Effect and Exposure options / links



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Select a health effect potentially-associated with Site: Paducah Gaseous Diffusion Plant

Health effect (from NLM Haz-Map Disease List): *(button must be clicked after changing any selection in order to update results.)*

[Click here](#) to find a listed disease by alias.

SEM – Paducah - Health Effect Choices from Dropdown Menu

Acro-osteolysis	Colorado tick fever	Hypersensitivity pneumonitis	Nasal sinus cancer	Rocky mountain spotted fever
Acute tubular necrosis	Contact dermatitis, allergic	Infertility, female	Nasopharynx cancer	Sequoiosis ←
Angiosarcoma of the liver	Contact dermatitis, phototoxic	Infertility, male	Neuropathy, toxic	Silicosis, acute
Animal handler lung	Contact dermatitis, phytophototoxic	Influenza	Oil acne	Silicosis, complicated
Aplastic anemia	Contact urticaria	Inhalation fever	Omsk hemorrhagic fever	Silicosis, simple
Arsenic, chronic toxicity	Cutaneous larva migrans	Isocyanate HP ←	Orf (Contagious ecthyma)	Skeletal fluorosis
Asbestosis	CWP, complicated	Kidney cancer	Organic dust inhalation	Skin cancer, melanoma
Asbestos-related pleural disease	Cytomegalovirus infection	Laryngeal cancer	Organochlorine insecticides	Skin cancer, non-melanoma
Asphyxiation, chemical	Dermatophytosis	Lead, subacute toxic effect	Organophosphate & carbamate	Solvents, acute toxic effect
Asphyxiation, simple	Ehrlichiosis	Legionellosis	Osteomalacia	Sporotrichosis
Bird breeder lung	Encephalopathy, acute	Leukemia	Osteonecrosis	Stomach cancer
Bladder cancer	Encephalopathy, chronic ←	Liver cancer	Ovarian cancer	Suberosis
Bone cancer	Fumigants, acute toxic	Lung cancer	Paracoccidioidomycosis	Tick paralysis
Bronchiolitis obliterans	Gastroenteritis, viral	Lyme disease	Parkinsonism	TMA HP
Byssinosis	Hantavirus pulmonary syndrome	Lymphocytic choriomeningitis	Parvovirus B19 infection	Tuberculosis
Cadmium, chronic toxicity	Hard metal disease	Lymphoma, Non-Hodgkin's	Pentachlorophenol/Dioxin	Varicella-zoster virus infection
Carbon disulfide, chronic	Hemolytic anemia, acute	Manganese, chronic toxicity	Pneumoconioses, benign	Vesicular stomatitis fever
Cataract, chemical	Hemorrhagic fever with renal syndrome	Measles	Pneumoconioses, other	Viral warts
Chloracne	Hepatitis A	Melioidosis	Pneumonitis, toxic	Vocal cord dysfunction,
Cholangiocarcinoma	Hepatitis B	Mercury, elemental, chronic	Polymer fume fever	Yellow fever
Chromium, chronic toxicity	Hepatitis C	Mesothelioma, peritoneal	Pulmonary disease, chemical	
Chromomycosis	Hepatitis, chemical	Mesothelioma, pleural	Rabies ←	
Chronic beryllium disease ←	Histoplasmosis	Metal fume fever	Radiation sickness, acute	
Chronic renal failure	Humidifier fever	Metalworking fluids HP	Rat-bite fever	
Coal workers' pneumoconiosis	Humidifier HP	Methemoglobinemia, acute	Raynaud's phenomenon	
Colorado tick fever	Hydrofluoric acid, toxic	Mill fever	Relapsing fever	
	Hypersensitivity pneumonitis			
	Hypersensitivity pneumonitis			

SEM is missing commonly used diagnoses:
COPD, emphysema, fibrosis, interstitial lung disease, IPF, pulmonary fibrosis, sarcoid, sarcoidosis

SEM also includes many rare diagnoses.

Exposures linked to Health Effect: Pneumoconioses, other

SCOPE -- Health Effect List: NLM Haz-Map Disease List Site: Paducah Gaseous Diffusion Plant

IDENTIFICATION

Aliases: Carbonundum pneumoconiosis; Kaolinosis; Graphite pneumoconiosis; Flock workers' lung; Dental technicians' pneumoconiosis; Talcosis; Shalosis; Mixed-dust pneumoconiosis; Mica pneumoconiosis; Diatomaceous earth pneumoconiosis; Fuller's earth pneumoconiosis

Antimony hydride CAS: 7801-30-5; Antimonwasserstoffes; Antymor
Antimony trioxide CAS: 1305-76-8; sesquioxide; Antimony white; A
Antimony trisulfide CAS: 1317-39-7; Antimony sesquisulfide; Antimo
III sulfide; Antimony (III) sulfid
Crimson antimony sulphide; Cri
Needle antimony; Antimony nee
Bentonite CAS: 1302-78-9; USP 4444; Altonit SF; Aquagel;
15; Bengel 23; Bengel A; Bengel
Bentonit T; Bentonite 2073; Ber
200; Bulgarben BA; Clarit BW 1
1FC; Detercal G 2FC; Detercol F
(clay); GK 129SA3; GK 129SA5;
creek bentonite; Southern bent
Wilkinite; Wilkonite
Bronze CAS: 7440-50-8; 7440-51-5; 7440-66-6; 7439-92-1 Alias
Carbon (graphite) CAS: 7782-42-5; carbon; Graphite; AerodagG; A
potelot; C; Synthetic carbon gra
Carbon steel CAS: Due to th
CAS numbers are not listed. A
carbon steel; Medium carbon st
steels; Medium-carbon steels; H
Ceric nitrate CAS: 13093-17-1; Cerium nitrate; Cerium nitrate (c
cerium(4+) salt (4:1); Ce(NO3)
Cerium III 2-ethylhexanoat
acid, 2-ethyl-, cerium III salt; H
Ethylhexanoic acid, cerium salt;
Cerium III hydroxide CAS: 13093-17-1; (III) hydroxide; Ce(III) hydroxid
hydroxide (Ce(OH)3); Ce(OH)3
Dysprosium CAS: 7429-91-6; 158; Dy

Europium CAS: 7440-53-1 Aliases
Europium 154; Eu-154; Eu 154; Euro
Gadolinium CAS: 7440-54-2 Alias
150; Gd-150; Gd 150; Gd
Gadolinium III oxide CAS: 12064-10-1; sesquioxide; Digadolinium trioxide; Gc
Lanthanum III nitrate CAS: 1009-10-9; Lanthanum nitrate (La(NO3)3); Lanth.
salt; Nitric acid, lanthanum(3+) salt; L
Lanthanum oxide CAS: 1312-81-8; sesquioxide; Lanthanum trioxide; Dila
Lanthanum (3+) oxide; La2O3
Mica CAS: 12001-26-2 Aliases: Mic
HSDB 2539; HX 610; Mica, fluorian; M
group minerals; Mica, respirable fracti
silica):MICA; Biotite; Lepidolite; Marg
Anchorlube G-771; (Al,V)2(AISi3)(K,Ni
Monel CAS: 7439-89-6; 7440-02-0;
Aliases: none
Naphthenic acid, cerium salt CAS
Naphthenic acid, lanthanum salt
acids, lanthanum salts
Neodecanoic acid, cerium salt C
neodecanoate; Cerium (III) neodecan
Neodecanoic acid, cerium (3+) salt; N
Neodecanoic acid, lanthanum salt
Lanthanum (III) neodecanoate; Lanth
(3+) neodecanoate; Neodecanoic ac
Neodymium chloride CAS: 10024-10-1; Neodymium (III) chloride; NdCl3; Nd
Neodymium III oxide CAS: 1313-10-2; Neodymium sesquioxide; Neodymia; I
Nd2O3
Polyvinyl chloride CAS: 9002-86-2; Expanded polyvinyl chloride; Polyvinyl
Polychloroethylene; Bakelite; Breon; I
Vinyl chloride resin; Polyvinyl chloride
molecular weight: (H2CCHCl)n

Samarium CAS: 7440-19-9; Samarium 146; Sm-146; Sm 14
Silica gel CAS: 63231-67-4; 14807-96-6; Silicar; Silicic acid hydrate; Cub
Mikronisil; Neoxyl ET; Polymeric
hydroxide; Silton TF 06; Siperna
Vulcasil S/GR; Zeosil 45; Silicic a
silicakLL Precipitated silica; Silici
gel; Amorphous silica, precipitat
Syloid 244; Syloid 63; Separon S
Sillitin N 85; Sillitin PF 100; Silpe
Desicant
Silicon carbide CAS: 409-21-1; Annanox CK; Betarundum; Beta
Carbolon; Carbon silicide; Carbc
DU-A 1; DU-A 2; DU-A 3; DU-A
101; HSDB 681; KZ 3M; KZ 5M;
8000; Silicon monocarbide; Silu
carbide (SiC); SiC
Silicon dioxide, amorphous
Aliases: Diatomaceous earth, c
amorphous silica; Silicon dioxide
Silica aerogel; Silica xerogel; Ac
st-1; Cab-o-sil; Cabosil; Carplex
silica; Hydrophobic silica 2482kl
calcined; Neosil; Neosyl; Opal; F
fused; Tokusil TPLM; Ultrasil VH
fumed; Silica powder; Silicon di
beads; Glass microballoons; Soc
LLglass manufacturing scrap);
colloidal solution; Hi Sil 233; Aq
1000; Hi Tempco 1000 Couplant
Suspension; SiO2
Synthetic vitreous fibers C
fiber; Manmade mineral fibers; I
fiber; Refractory ceramic fibers;
wool fibers; Special purpose gla
Refractory ceramic fiber: Refrac

Synthetic vitreous fibers C
fiber; Manmade mineral fibers;
fiber; Refractory ceramic fibers
wool fibers; Special purpose gla
Refractory ceramic fiber; Refrac
ODB; Module TrimkLL MT-HP; I
Ball Milled B; HP Ball Milled C/L
70C; K-Chopped; KMTX; MT; M
Durablanket® S; Durablanket®
Tank Car Insulation; TCB; SMB
972-JH; 882-FH; 882-JH; HSA-
(vitreous); Aluminosilicate refr
Talc CAS: 14807-96-6 Alias
(mineral); B 9; Beaver White 2
500; Emtal 549; Emtal 596; Err
Finntalc P40; Finntalc PF; Fren
100; Lo Micron talc USP, bc 27
Micro Ace L1; Micron White 50
139; Mistron 2SC; Mistron frost
MP 25-38; MP 40-27; MP 45-26
400; P 3; P 3 (Mineral); PK-C; I
Steatite talc; Steawhite; Suprer
form; Talcan PK-P; Talcron CP
fibers; Silicates (<1% quartz):t
(containing no asbestos); Talc,
Mg3Si4O10(OH)2
Thulium oxide CAS: 12036-10-0
Titanium dioxide CAS: 1317-09-0; Titanium oxide; Titanic anhydri
Rutile; Rutile (TiO2); BC-620 R
Welding fumes CAS: Due to
individual CAS numbers are not
Yttrium oxide CAS: 1314-36-1; Yttrium sesquioxide; Y2O3

1) Aliases do not include pulmonary fibrosis, IPF, fibrosis

2) Linked SEM exposures do NOT INCLUDE ASBESTOS, one of the most common occupational causes of pulmonary fibrosis

More exposures listed for Pneumoconioses, other: most are uncommon and / or rarely cause pulmonary disease

**DOES NOT
INCLUDE
ASBESTOS**

Antimony hydride CAS: 780
Antimonwasserstoffes; Antymor
Antimony trioxide CAS: 130
sesquioxide; Antimony white; A
Antimony trisulfide CAS: 13
Antimony sesquisulfide; Antimo
III sulfide; Antimony (III) sulfid
Crimson antimony sulphide; Cri
Needle antimony; Antimony ne
Bentonite CAS: 1302-78-9
USP 4444; Altonit SF; Aquagel;
15; Bengel 23; Bengel A; Beng
Bentonit T; Bentonite 2073; Ber
200; Bulgarben BA; Clarit BW 1
1FC; Detercal G 2FC; Detercol F
(clay); GK 129SA3; GK 129SA5;
creek bentonite; Southern bent
Wilkinite; Wilkonite
Bronze CAS: 7440-50-8; 7440
5; 7440-66-6; 7439-92-1 **Alias**
Carbon (graphite) CAS: 778;
carbon; Graphite; AerodagG; Ae
potelot; C; Synthetic carbon gra
Carbon steel CAS: Due to th
CAS numbers are not listed. A
carbon steel; Medium carbon st
steels; Medium-carbon steels; F
Ceric nitrate CAS: 13093-17-
Cerium nitrate; Cerium nitrate (c
cerium(4+) salt (4:1); Ce(NO₃)
Cerium III 2-ethylhexanoat
acid, 2-ethyl-, cerium III salt; H
Ethylhexanoic acid, cerium salt;
Cerium III hydroxide CAS:
(III) hydroxide; Ce(III) hydrox
hydroxide (Ce(OH)₃); Ce(OH)₃
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158; Dy

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150; Gd-150; Gd 150; Gd
Gadolinium III oxide CAS: 12064-
sesquioxide; Digadolinium trioxide; Gc
Lanthanum III nitrate CAS: 1009
Lanthanum nitrate (La(NO₃)₃); Lanth
salt; Nitric acid, lanthanum(3+) salt; L
Lanthanum oxide CAS: 1312-81-8
sesquioxide; Lanthanum trioxide; Dila
Lanthanum (3+) oxide; La₂O₃
Mica CAS: 12001-26-2 **Aliases:** Mic
HSDB 2539; HX 610; Mica, fluorian; M
group minerals; Mica, respirable fracti
silica):MICA; Biotite; Lepidolite; Marga
Anchorlube G-771; (Al,V)₂(AlSi₃)(K,N)
Monel CAS: 7439-89-6; 7440-02-0;
Aliases: none
Napthenic acid, cerium salt CAS
Napthenic acid, lanthanum salt
acids, lanthanum salts
Neodecanoic acid, cerium salt C
neodecanoate; Cerium (III) neodecan
Neodecanoic acid, cerium (3+) salt; N
Neodecanoic acid, lanthanum salt
Lanthanum (III) neodecanoate; Lanth
(3+) neodecanoate; Neodecanoic ac
Neodymium chloride CAS: 10024-
Neodymium (III) chloride; NdCl₃; NdC
Neodymium III oxide CAS: 1313-
Neodymium sesquioxide; Neodymia; I
Nd₂O₃
Polyvinyl chloride CAS: 9002-86-2
Expanded polyvinyl chloride; Polyvinyl
Polychloroethylene; Bakelite; Breon; E
Vinyl chloride resin; Polyvinyl chloride
molecular weight: (H₂CCHCl)_n

Samarium CAS: 7440-19-9
Samarium 146; Sm-146; Sm 146
Silica gel CAS: 63231-67-4; 1
Silicar; Silicic acid hydrate; Cubc
Mikronisil; Neoxyl ET; Polymeric
hydroxide; Silton TF 06; Siperna
Vulcasil S/GR; Zeosil 45; Silicic a
silicakLL Precipitated silica; Silic
gel; Amorphous silica, precipitat
Syloid 244; Syloid 63; Separon S
Sillitin N 85; Sillitin PF 100; Silpe
Desicant
Silicon carbide CAS: 409-21-
Annanox CK; Betarundum; Beta
Carbolon; Carbon silicide; Carbo
DU-A 1; DU-A 2; DU-A 3; DU-A
101; HSDB 681; KZ 3M; KZ 5M;
8000; Silicon monocarbide; Silu
carbide (SiC); SiC
Silicon dioxide, amorphous
Aliases: Diatomaceous earth, c
amorphous silica; Silicon dioxide
Silica aerogel; Silica xerogel; Act
st-1; Cab-o-sil; Cabosil; Carplex;
silica; Hydrophobic silica 2482kL
calcined; Neosil; Neosyl; Opal; F
fused; Tokusil TPLM; Ultrasil VH
fumed; Silica powder; Silicon dic
beads; Glass microballoons; Soc
LLglass manufacturing scrap);
colloidal solution; Hi Sil 233; Aq
1000; Hi Tempco 1000 Couplant
Suspension; SiO₂
Synthetic vitreous fibers C
fiber; Manmade mineral fibers; S
fiber; Refractory ceramic fibers;
wool fibers; Special purpose gla
Refractory ceramic fiber; Refract

Synthetic vitreous fibers C
fiber; Manmade mineral fibers;
fiber; Refractory ceramic fibers
wool fibers; Special purpose gla
Refractory ceramic fiber; Refract
ODB; Module TrimkLL MT-HP; H
Ball Milled B; HP Ball Milled C/L
70C; K-Chopped; KMTX; MT; M
Durablanket® S; Durablanket®
Tank Car Insulation; TCB; SMB
972-JH; 882-FH; 882-JH; HSA-
(vitreous); Aluminosilicate refr
Talc CAS: 14807-96-6 **Alias**
(mineral); B 9; Beaver White 21
500; Emtal 549; Emtal 596; Em
Finntalc P40; Finntalc PF; Fren
100; Lo Micron talc USP, bc 27
Micro Ace L1; Micron White 50
139; Mistron 2SC; Mistron frost
MP 25-38; MP 40-27; MP 45-26
400; P 3; P 3 (Mineral); PK-C; F
Steatite talc; Steawhite; Suprer
form; Talcan PK-P; Talcron CP 4
fibers; Silicates (<1% quartz):t
(containing no asbestos); Talc,
Mg₃Si₄O₁₀(OH)₂
Thulium oxide CAS: 12036-
Titanium dioxide CAS: 1317-
Titanium oxide; Titanic anhydri
Rutile; Rutile (TiO₂); BC-620 R
Welding fumes CAS: Due to
individual CAS numbers are not
Yttrium oxide CAS: 1314-36
trioxide; Y₂O₃

SEM: Fixable Problems

1) Revise choice of diagnoses can enter from dropdown menu

A) Some of THE MOST COMMON clinical diagnoses are missing: pulmonary fibrosis, idiopathic pulmonary fibrosis (IPF), fibrosis, sarcoidosis, sarcoid, COPD

2) Numerous rare diagnoses are included

2) Links between diagnoses and exposures need attention

In part related to above.

ex: asbestos - pulmonary fibrosis; beryllium - sarcoid

3) Other links (eg job title, exposures) need attention – especially office / non-production /lab workers who may have worked in close proximity to production areas.

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Fixable Problem: Questions the Claims Examiner asks CMC

1) Underground uranium miner in UT for over 1 year. Pneumoconiosis documented on chest x-ray, B read.

CE asks CMC: Was employee's exposure to aluminum a significant factor in causing, contributing to employee's pneumoconiosis?

2) Worker at Paducah GDP for over 30 years. Pulmonary sarcoidosis diagnosed on open lung biopsy.

CE asks CMC: Was employee's exposure to beryllium a significant factor in causing sarcoidosis?

Solution: see Procedure Manual

Sample questions for physician provided in Procedure Manual (V 4.0, Exhibit 16-1 (pg 520))

Sample Questions For Physician

Questions:

CE: Choose from options below or add your own

1. Impairment: Refer to PM Ch. 2-1300, Impairment Ratings for questions and instructions for CMC's conducting impairment evaluations.
2. Impairment: If it is not possible to complete an impairment rating based on the medical evidence we provided, please advise us what medical records and/or testing is required to complete the rating.
3. Diagnosis: In your opinion, do the medical records support a diagnosis of a medical condition? If so, please provide the first date of diagnosis, diagnosis, and the ICD code.
4. Causation: If a medical condition was diagnosed, in your opinion is it at least as likely as not that exposure to toxic substances during the course of employment at covered facility was a significant factor in aggravating, contributing to, or causing the employee's medical condition?

Ask CMC the causation question more broadly.

If exposure to toxic substance(s) during employment at covered facility was a significant ?

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Quality of CMC Reports

- 1) Review of cases reveals concerns regarding the quality of some CMCs reports.
- 2) Quality of the CMC report depends on multiple factors: the CMC, information provided (IH, medical, OHQ etc), questions asked.
- 3) CMC quality can be hard to assess from on-paper credentials, board certifications. Most pulmonary, internal medicine, occupational medicine physicians do not routinely assess disease causality.

More info on CMC process / performance needed.

Important topic for further discussion.

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Example 1:

Oak Ridge laborer at K-25 and Y-12 in the 1950s -1960s with COPD, fibrosis

Letter to treating physician:

Thank you for your letter dated [REDACTED]. Within your letter, you stated that exposures to both ammonia and asbestos contributed to the development of asthma and pulmonary fibrosis.

However, the attached industrial hygienist report does not indicate that ammonia or asbestos are linked to the employee's pulmonary fibrosis.

Letter from treating physician to DOL:

Case ID [REDACTED]

Dear [REDACTED]

This is concerning your letter of August 2, 2018 regarding the above named patient. I find it incredulous that the matrix does not report that asbestos is associated with pulmonary fibrosis. There are multiple articles that confirm same. I would direct your attention to a review article in the New England Journal, February 10, 2000 in which asbestos is listed as the leading occupational cause of fibrotic changes i.e. pulmonary fibrosis. The article references multiple supporting references. I would question the accuracy of the matrix if it does not list asbestos as a known cause of pulmonary fibrosis. The addition of exposure to ammonia intermittently would have compounded the impact on his lungs along with other respiratory irritants.

If you have any questions, please do not hesitate to contact me.

Sincerely,

Example 1 cont: Case then sent to CMC

Now to answer the first three questions posed:

1. In your opinion, is it at least as likely as not that exposure to ammonia asbestos, welding fumes and silicon dioxide, crystalline during the course of employment at the Y- 12 Plant and K-25 Plant was a significant factor in aggravating, contributing to, or causing the employee's COPD?

Answer: No, in my opinion, it is not at least as likely as not that exposure to ammonia asbestos, welding fumes and silicon dioxide, crystalline during the course of employment at the Y- 12 Plant and K-25 Plant was a significant factor in aggravating, contributing to, or causing the employee's COPD.

2. In your opinion, is it at least as likely as not that exposure to Monel and welding fumes during the course of employment at the K-25 Plant was a significant factor in aggravating, contributing to, or causing the employee's Parkinsonism?

Answer: No, in my opinion, it is not at least as likely as not that exposure to Monel and welding fumes during the course of employment at the K-25 Plant was a significant factor in aggravating, contributing to, or causing the employee's Parkinsonism.

3. In your opinion, is it at least as likely as not that exposure to silicon dioxide, amorphous during the course of employment at the Y-12 Plant was a significant factor in aggravating, contributing to, or causing the employee's pulmonary fibrosis?

Answer: No, in my opinion, it is not at least as likely as not that exposure to silicon dioxide, amorphous during the course of employment at the Y-12 Plant was a significant factor in aggravating, contributing to, or causing the employee's pulmonary fibrosis.

More detailed and complicated than is needed. Likely asbestos, welding fumes contributed to fibrosis and COPD.

Example 2: SRS employee for > 40 yrs, pulmonary sarcoid dx in 1981

Thank you for referring this case to me for review.

CMC Report:
likely CBD.
CMC provides
rationale.

CE disregards
this report.

This file was reviewed extensively by me, which included a Statement of Accepted Facts (SOAF), employment information, and a report from an industrial hygienist concerning Mr. [REDACTED] occupational toxic exposure to beryllium as well as x-ray reports showing a diagnosis of sarcoidosis in [REDACTED] 1981.

The undersigned was asked to answer the question: Is it "at least as likely as not" that the employee's exposure to beryllium at a DOE facility was a significant factor in aggravating, contributing to, or causing the employee's diagnosis of sarcoidosis based on the guidance provided in the Federal EEOICPA Chapter 18, paragraph 10, Diagnosis of Sarcoidosis?

From the SOAF, we know that Mr. [REDACTED] was a confirmed covered employee at the Savannah River Site (SRS) from [REDACTED] 1970 to the present. The industrial hygienist wrote that, "Throughout the course of its operations, the potential for beryllium exposure existed at the Savannah River Site, due to beryllium use, residual contamination, and decontamination activities. Therefore, the employee was employed during a time period when beryllium dust, particles, or vapor may have been present."

Summary and Conclusions:

Because of the statutory guidance, cited above, it is not at least as likely as not that Mr. [REDACTED] exposure to beryllium at a DOE facility was a significant factor in aggravating, contributing to, or causing the employee's diagnosis of sarcoidosis. He, more likely, has CBD.

Example 2 (cont): CE then gets a 2nd CMC report

I don't think this physician understands sarcoidosis. Sarcoidosis is not a Part B claim. Sarcoidosis is only accepted under Part E. He states he reviewed an Industrial Hygienist (IH) report, there is no IH report required for sarcoidosis under Part E. He needs to state if he meets sarcoidosis criteria under Part E. If he is stating the employee has Pre-1993 CBD, he must clearly clarify in his medical rationale the medical that meets the criteria. Can we get this back by November 01, 2017.

No documentation found that CE communicated above back to CMC #1.

SOAF documents pulmonary sarcoidosis with progression in employee worked > 40 yrs at SRS.

U.S. Department of Labor, Claims Examiner

Thank you for referring the case of [REDACTED] your case number [REDACTED] for review. All records that I have been provided with have been reviewed and considered in developing a medical opinion. No diagnosis, treatment or care has been provided as a result of this chart review.

1. Is it "at least as likely as not" that the employee's exposure to beryllium at a DOE facility was a significant factor in aggravating, contributing to, or causing the employees diagnosis of sarcoidosis based on the guidance provided in Federal EEOICPA Chapter 18, Paragraph 10, diagnosis of Sarcoidosis?

Answer: Yes, in my opinion, it is "at least as likely as not" that the employee's exposure to beryllium at a DOE facility was a significant factor in aggravating, contributing to, or causing the employees diagnosis of sarcoidosis based on the guidance provided in Federal EEOICPA Chapter 18, Paragraph 10, diagnosis of Sarcoidosis.

2nd CMC
concludes
sarcoidosis,
not CBD

Solution: Claims examiner's assessment of treating physician / CMC reports

Extent problem is unclear - may be only a few CEs

Possible solutions:

Additional CE training, oversight

Certain actions automatically prompt review – such as request for CMC if treating physician provides report, need for 2nd CMC.

Conclusions from Review of Cases:

- 1) Many ARE properly adjudicated.
- 2) A number of hopefully /potentially fixable problems have been identified from review of cases