

Recognizing occupational disease

What to do if you suspect occupational disease: Guidelines from WorkSafeBC

When a worker develops a disease that may be work related, it is the role of Occupational Disease Services, a centralized claims unit of WorkSafeBC, to determine if the worker is entitled to compensation.

For a worker to be eligible for health care and/or temporary or permanent disability benefits because of an occupational disease, two conditions must apply:

- The worker must be—or have been—employed in BC (or have employment with a sufficient connection to BC).
- The worker's employment must have played a significant role in causing the disease or aggravating/accelerating a pre-existing disease.

Infectious diseases

Generally, WorkSafeBC claims require that a medical diagnosis be submitted by a physician or other qualified practitioner. If, however, your patient contracts a highly contagious disease at work, you may conclude that the condition does not require in-person medical assessment and you may not want this individual to visit your office and risk infecting your staff and patients.

In early 2005, when the Norwalk virus infected large numbers of health care workers, WorkSafeBC implemented adjudication procedures to accommodate these types of situations.

If a worker develops a common, highly contagious disease/condition, a standard physician's report may not be necessary. The following factors are taken into consideration in the adjudication of claims for contagious diseases:

- The nature of the employment and occupational setting, and whether there was likely exposure to the infectious disease at the workplace.
- Whether there is a generalized outbreak of the disease in the worker's community.
- Whether there has been a confirmed diagnosis of the disease at the employer's location and whether the worker's reported symptoms are consistent with that diagnosis.
- The reported length of time between exposure and the onset of symptoms.
- Whether the employer is protesting acceptance of the claim or has reason to believe workplace exposure was not the cause of the worker's reported illness.
- Whether the worker reported symptoms of the contagious disease to the employer, the employer's first aid department, a family physician, or medical clinic.
- Whether the worker was advised not to seek medical treatment due to the risk of infecting others.

Keep a record

If a patient calls your office to say he or she may have contracted a highly contagious disease at work and you advise him or her not to come in for a visit, please document the call with the kinds of information listed above. It may help your patient to successfully claim WorkSafeBC benefits.

Protect your workplace

WorkSafeBC appreciates that you are often the frontline caregivers in the management of these diseases. When patients with infectious diseases visit your offices, we urge you to follow universal precautions, not only in your treatment rooms, but also in other offices and waiting areas, to continue

Call us!

If you suspect that a patient has developed an occupational disease from exposure to allergens, chemicals, heavy metals, infection, or other contamination, and you have questions or concerns about whether you should submit a report to WorkSafeBC—or any other issues regarding the disease—please call one of our occupational disease specialists.

WorkSafeBC's Occupational Disease Services Department in Richmond administers all occupational disease claims from workers throughout BC. To reach us, call 604 276-3007 or toll-free 1 888 967-5377, local 3007.

to manage infection risks in your workplace.

—Don Graham, MD
Chief Medical Officer

Next issue: West Nile virus

Next month, Dr Sami Youakim, one of our occupational disease specialists, will provide information about West Nile virus and the physicians' role in helping patients reduce their risk of being bitten by an infected mosquito.

Physician Education Conference

Our 6th annual Physician Education Conference was held in mid-October 2005 in Kelowna. Historically, we have held conferences in Richmond, but were pleased that more than 75 physicians attended our first regional conference. We will be seriously considering a similar one on Vancouver Island this year.