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Cc: Chen, Jihong (Jane) (CDC/NIOSH/EID) (CTR)
Subject: 223 - Emergency Responder Health Monitoring and Surveillance Comments

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Comments
On behalf of James E. Lockey, MD, MS; Tiina Reponen, PhD, CIAQP; Carol Rice, PhD, CIH:

We congratulate NIOSH for taking the lead in developing the Emergency Responder Health Monitoring and Surveillance guidance, draft 1.2. The involvement of multiple agencies (federal, state and local) and representatives of critical skilled support personnel helps assure that the contents are thorough and can be translated to practice in the event of a response action.

The excellent Figure 1 in the Executive Summary will likely become a guide to many. The text that accompanies the figure may be easier for the reader if each section follows the same order. For example, in the Pre-deployment Phase, the three bullets are Health Screening/Immunizations, Rostering and Credentialing and Training and Preparedness. In the text, the description of this phase begins with Rostering and Credentialing and is followed by Health Screening (omitting immunizations). Consistency in the terminology will strengthen the guidance.

Section 7.3 Acceptability of Exposures may provide undue assurance of safe working conditions. As learned at the World Trade Center, exposures during a response may by one metric be deemed 'acceptable' but later be associated with health effects. This section on Exposures might be enhanced by adding a caution that PPE selection is guided not only by OELs, but also symptoms and lessons learned from other responses. The revision of OELs lags substantially in time behind new information, and may not be sufficient to assure worker protection.

Confirmation of implementation of protocols is essential for future studies and proper interpretation of any data from a registry. If possible, could language be strengthened in the document? As one example, on page 36, it is noted that the '..site safety officer may conduct site health and safety audits...'. Replacing 'may' with 'should' is stronger, without implying a mandatory action.

Monitoring complex exposures is a rapidly developing field; application of continuously evolving sensor technology will improve exposure assessment.
Comment regarding this might be added to the exposure assessment sections.

We hope that these comments are useful, and look forward to using this document in classes with graduate students at the University of Cincinnati, many of whom will have responsibility for planning for an event that hopefully does not occur. It will also be used by the NIEHS-supported Midwest Consortium for Hazardous Waste Worker Training.

The comprehensive nature of the document makes it valuable workers and to the wide range of professionals on the safety and health team, including occupational health nurses, hygienists, ergonomists, physicians, and safety engineers and health physicists.