Occupational Health Department

**SUBMARINE AND DIVE EXAMS**

**Program Elements FY12**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | YES | NO | COMMENTS |
| 1 | Is the physical exam completed at correct periodicity |  |  |  |
| 2 | Occupational history, 5100/15, completed/ current |  |  |  |
| 3 | Are appropriate forms completed: DD2808 & DD2807-1 |  |  |  |
| 4 | Are DD2808 & DD2807-1 signed and reviewed by UMO/Dive Officer |  |  |  |
| 5 | Communication to worker/supervisor/safety whether worker is cleared/not cleared by medical |  |  |  |
| 6 | Correct tests are ordered for examination as required in NAVMED P117 |  |  |  |
| 7 | Abnormal tests are appropriately followed-up, appropriate f/u in most instances is giving a copy of the abnormal test to worker to take to his/her PMD |  |  |  |

Records screened for compliance

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date | Last Name | Last 4SSN | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
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Validated by/Program Manager Signature Date