

## Appendix 2: Stonemason industry silica exposure health assessment: Specialist report template

Provide on practice letterhead and include medical qualifications

### **1. Worker details:**

Name:

Date of birth:

Date and place of examination:

Interpreter provided:

### **2. Work summary**

- a) Year commenced work in stone benchtop industry:
- b) If no longer working in benchtop industry, year finished work:
- c) Total number of employers since starting in work in benchtop industry:
- d) Has work been primarily been involved in onsite installations or factory-based:
- e) On average (during total period of work in industry) estimate the proportion of time spent in an environment where dry processing (e.g. cutting, grinding without water dust suppression) was performed, includes work performed by co-workers in same environment?
  - i. Over 50%
  - ii. 25 – 50%
  - iii. 10 - 25%
  - iv. Less than 10%
  - v. Never

### **3. Exposure history relevant to stone benchtop industry**

Complete for each employer in the stone benchtop industry and address the following items:

Name of employer/business:

Time period of employment:

Estimated number of employees:

Typical work tasks:

Type of stone used, including the proportion of time working with artificial (engineered) stone:

If relevant, estimate percentage of time spent in environment where dry processing (e.g. cutting, grinding without water dust suppression) performed during a typical week?

4. **Other occupational history** (include any other work with crystalline silica exposure and current employment if not in stone benchtop industry)
5. **Background medical history** (include smoking, social and family history)
6. **History of presenting, respiratory and other relevant symptoms** (Including current complaints and symptoms)
7. **Dyspnoea Score** (Modified Medical Research Council – choose one)

0. I only get breathless with strenuous exercise.

1. I get short of breath when hurrying on the level or walking up a slight hill

2. I walk slower than people of the same age on the level because of breathlessness or have to stop for breath when walking at my own pace on the level
3. I stop for breath after walking about 100 yards (90 metres) or after a few minutes on the level
4. I am too breathless to leave the house, or I am breathless when dressing

**8. Investigations results**

**9. Details of physical exam**

**10. Current treatment and medications**

**11. Answer the questions below:**

- a) Has the worker has contracted a disease, injury or illness as a result of work with crystalline silica and if so, what disease?
- b) Are further investigations required to confirm a diagnosis and if so, what investigation are recommended?
- c) Can the worker continue in his/her current work (pre-existing duties)?
- d) If no, is the worker fit for alternative duties and if so, what restrictions are recommended?
- e) What specific treatments or services are recommended?
- f) When should the worker be reviewed and what investigations are required at that time?

**12. Conclusion**