2016 American Occupational Health Conference

CHICAGO, ILLINOIS

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American College of Occupational and Environmental Medicine

100 Years
OFFICE OF THE MAYOR
CITY OF CHICAGO

RAHM EMANUEL
MAYOR

April 10, 2016

Dear Friends:

As Mayor and on behalf of the City of Chicago, I am pleased to extend my warmest greetings to all of those gathered for the American College of Occupational and Environmental Medicine’s Annual Health Conference and Centennial Anniversary.

Formally established a century ago, the American College of Occupational and Environmental Medicine (ACOEM) was founded as a society dedicated to promoting the health and safety of work place employees through research, education, clinical care and preventative medicine. As an international society of more than 4,500 occupational physicians, all members are committed to serving within the medical field and being of service to the greater community. ACOEM has provided a comprehensive array of invaluable services to numerous communities while sustaining important partnerships and pursuing advocacy opportunities throughout the world.

This conference marks an extraordinary milestone for the American College of Occupational and Environmental Medicine. More than 100 years of enduring work in the United States and Canada along with a truly distinguished history of leaders and innovators allow the ACOEM to continue making a difference. It remains committed to serving its members, the greater medical community, as well as the general public through educational programs, mentoring, and networking opportunities. I recognize the work of all those involved and commend the American College of Occupational and Environmental Medicine for work that has benefitted Chicago and empowered its residents for generations.

I hope that those visiting our great city take time to experience some of the special places in Chicago. Our historic neighborhoods, iconic skyline, and incredible lakefront invite you to explore all Chicago has to offer. I hope you have a chance to sample our distinguished restaurants, tour our great universities, and visit our world-class museums during your stay.

I offer heartfelt congratulations and hope all have an enjoyable event. Best wishes for much continued success.

Sincerely,

[Signature]
Mayor
ACOEM LEADERSHIP

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Vice President
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Secretary/Treasurer
Jeffrey S. Harris, MD, MPH, MBA, FACOEM
Immediate Past President
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James P. Seward, MD, MPP, MMM, FACOEM

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Tanisha K. Taylor, MD, MPH, FACOEM
Amanda C. Trimpey, MD, MPH, FACOEM

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Paul J. Papanek, MD, MPH, FACOEM
Daniel G. Samo, MD, FACOEM

Speaker
Philip Adamo, MD, MPH, FACOEM
Speaker-Elect
Nelson S. Haas, MD, MPH, MA, FACOEM
Recorder
Douglas W. Martin, MD, FACOEM

2016 AOHC Program Planning Committee
Chair
Natalie Hartenbaum, MD, MPH, FACOEM

Committee Members
Mark J. Boquet, MD, MPH, MS, FACOEM
Robert M. Bourgeois, MD, MPH, FACOEM
Catherine Champi, CRNP, MSN, BC
Marianne Cloeren, MD, MPH, FACOEM, FACP
David L. DeRegis, MD, MPH
Michael L. Fischman, MD, MPH, FACOEM
Tifani Lowe Gleeson, MD, MPH, FACOEM
Pamela A. Hymel, MD, MPH, FACOEM
Ted Niemiec, MD, MRO, CIME
Peter Orris, MD, MPH, FAC, FACOEM
John D. Piacentino, MD, MPH, FACOEM
Daniel G. Samo, MD, FACOEM
Mark C. Taylor, MD, MPH, FACOEM
Craig D. Thorne, MD, MPH, FACOEM

Advisory Panel
Patrick Laraby, MD, MPH, MS, MBA, FACOEM
Mark A. Roberts, MD, PhD, MPH, FACOEM
### CONFERENCE SCHEDULE-AT-A-GLANCE

**SUNDAY, APRIL 10, 2016 ~ CME: 7.5**

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>7:00am-8:00am</td>
<td>New Member Orientation (No CME/MOC)</td>
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<tr>
<td>9:00am-10:00am</td>
<td>Session 101: Introduction to OEM (for newcomers to occupational medicine only) Mayfair</td>
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<tr>
<td>10:00am-11:00am</td>
<td>Session 102: Becoming an ACOEM Fellow Chicago 10</td>
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<tr>
<td>11:00am-12:00pm</td>
<td>Session 103: Business Leadership for Physicians: Necessary Knowledge Not Taught in Medical School Chicago 8-9</td>
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<td>12:00pm-1:30pm</td>
<td>Lunch on Own</td>
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<tr>
<td>1:30pm-2:30pm</td>
<td>Session 104: ACOEM Jeopardy Mayfair</td>
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<tr>
<td>2:30pm-2:45pm</td>
<td>Break</td>
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<tr>
<td>2:45pm-3:45pm</td>
<td>Session 105: Individual Scientific Abstracts Arkansas</td>
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<tr>
<td>3:45pm-4:00pm</td>
<td>Session 106: International Panel Discussion Erie</td>
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<tr>
<td>4:00pm-5:00pm</td>
<td>Session 107: Becoming/Maintaining Board Cert. in OEM Chicago 10</td>
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<tr>
<td>5:00pm-6:45pm</td>
<td>Exhibit Hall Opening Reception and Resident Abstract Poster Presentations</td>
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<tr>
<td>7:00pm-8:30pm</td>
<td>Session 100: AOHC Opening Session: Induction of New Fellows and CO Sappingston Lecture</td>
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*Note: CME credit: 7.5*
# MONDAY, APRIL 11, 2016 ~ CME: 7.0

<table>
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<tr>
<th>Time</th>
<th>Session</th>
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| 7:00am-8:00am      | Session 201 Benchmarking Best Practices Towards a Global Culture of Health Chicago 8-9  
                     Session 202 Health of the Physician Workforce: Unique Needs of an Aging Workforce Chicago 10  
                     Session 203 Case Studies in Environmental Health: ATSDR Experience Michigan B  
                     Session 200 Functional Outcomes: Information Gathering Session Colorado (No CME/MOC)  
                     Session 205 The Determination of Causation in OEM: Where Law and Logic Often Conflict Chicago 6-7  
                     Session 206 Leading Employer Tackles COPD... Evidence Base for Mgmt Mayfair                |
| 8:00am-8:30am      | Breakfast (Exhibit Hall)                                                                                                                        |
| 8:00am-12:30pm     | Worksite Visit 800  
                     Robert J. Quinn Fire Academy (OH Property)                                                                                                    |
| 8:30am-10:00am     | Session 207 The History of OEM: OM Becomes a Specialty - Part I Chicago 10  
                     Session 210 Commercial Driver Medical Examination: What’s New Chicago 6-7  
                     Session 208 Billing Codes for Performance in Workers’ Compensation Michigan B  
                     Session 211 OSHA-NIOSH Workplace Investigations Superior AB  
                     Session 209 The Independent Medical Evaluation Chicago 8-9  
                     Session 212 Resident Research Abstract Presentations Mayfair                                                                                  |
| 10:00am -10:30am   | Break (Exhibit Hall)                                                                                                                             |
| 10:30am-12:00pm    | Session 213 The History of OEM: OM Becomes a Specialty - Part II Chicago 10  
                     Session 210, Continued  
                     Session 214 Low Back Surgery and Workers’ Comp: Role of the OM Provider in Helping Patients Make Better Informed Decisions Chicago 8-9  
                     Session 211, Continued  
                     Session 215 Essentials of OEM Prgrm. Accreditation: Joint Commission and NCQA Accreditation Processes Mayfair  
                     Session 212, Continued                                                                                                                        |
| 12:00pm -1:15pm    | Lunch (Exhibit Hall)                                                                                                                             |
| 1:00pm-4:00pm      | Worksite Visit 801  
                     Goodman Theatre Health Hazards (OH Property)                                                                                                |
| 1:30pm-3:00pm      | Session 216 Knee, Shoulder, Spine: - Part I: The Basics, Exam and Imaging Chicago 6-7  
                     Session 219 MRO Controversies Chicago 8-9  
                     Session 217 Critical Skills: Assessing Your OEM Competencies Superior AB  
                     Session 218 Service Animals in the Workplace: What You Need to Know Mayfair  
                     Session 220 Issues Affecting the Health of Underserved Occ. Populations Michigan A  
                     Session 221 Reproductive Developmental Hazard Management Michigan B  
                     Session 220, Continued                                                                                                                        |
| 3:00pm-3:30pm      | Break (Exhibit Hall)                                                                                                                             |
| 3:30pm-5:00pm      | Session 222 Knee, Shoulder, Spine – Part II: Treatment, Return-to-Work and Permanency Chicago 6-7  
                     Session 219, Continued  
                     Session 223 Respirators: Emerging Issues and Practical Implications Superior AB  
                     Session 224 Facilitating Integrated Health and Safety Management in the Workplace Mayfair  
                     Session 220, Continued  
                     Session 221, Continued                                                                                                                        |
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<tr>
<th>Time</th>
<th>Session 300</th>
<th>Session 301</th>
<th>Session 302</th>
<th>Session 303</th>
<th>Session 304</th>
<th>Session 305</th>
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<tr>
<td>7:00am-8:00am</td>
<td>Preventing Delayed Recovery in Injured Workers Chicago 8-9</td>
<td>So, You Want to be an ACOEM Leader? Michigan A</td>
<td>Advances in Clinical Medicine, Part I Chicago 10</td>
<td>Journal Club for the Practicing OEM Physician Mayfair</td>
<td>Musculoskeletal Ultrasound in Occupational Medicine: Looking Into the Future Superior AB</td>
<td>Record-keeping: OSHA Recordables, Incentives, and Solutions Michigan B</td>
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<td>12:00pm-1:15pm</td>
<td>Lunch on Own</td>
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<td>6:00pm-8:00pm</td>
<td>Special Centennial Event:</td>
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<td>4:30pm-6:00pm: General Session (#330) and Annual Membership Meeting</td>
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<td>6:00pm-8:00pm: Centennial Reception</td>
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<td>Off Property – Navy Pier</td>
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### WEDNESDAY, APRIL 13, 2016 ~ CME: 4.0

<table>
<thead>
<tr>
<th>Time</th>
<th>Session 401</th>
<th>Session 402</th>
<th>Session 403</th>
<th>Session 404</th>
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<tbody>
<tr>
<td>7:00am-8:00am</td>
<td>Advances in Clinical Medicine, Part II Chicago 10</td>
<td>When You Make the Front Page: DoD Response to a Media Blitz Associated with Personnel Exposed to Chemical Warfare Agents Mayfair</td>
<td>Global Health and Productivity Management Michigan A</td>
<td>Evidence-based Diagnosis and Treatment of Back and Neck Complaints: New ACOEM Back and Neck Guidelines Chicago 8-9</td>
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<tr>
<td>8:00am-8:30am</td>
<td>Breakfast</td>
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<tr>
<td>8:30am-9:30am</td>
<td>Session 405 Marijuana: The Science, The Law, and The Experience Chicago 10</td>
<td>Session 406 Current Issues and Updates in Medical Center Occupational Health Michigan B</td>
<td>Session 402, Continued</td>
<td>Session 403, Continued</td>
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<tr>
<td>9:30am-10:45am</td>
<td>Session 405, Continued</td>
<td>Session 406, Continued</td>
<td>Session 407 Past, Present, and Future of Gizmos and Gadget: The History and Advancement of OEM and Industrial Hygiene Technologies Mayfair</td>
<td>Session 408 Communicable Disease Preparedness and Business Response Michigan A</td>
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<tr>
<td>10:45am-11:00am</td>
<td>Session 405, Continued</td>
<td>Session 406, Continued</td>
<td>Session 407, Continued</td>
<td>Session 408, Continued</td>
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<tr>
<td>11:00am-12:00pm</td>
<td>Session 405, Continued</td>
<td>Session 406, Continued</td>
<td>Session 407, Continued</td>
<td>Session 409, Continued</td>
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### PRE-CONFERENCE COURSES:

**FRIDAY-SATURDAY, APRIL 8-9, 2015**

Medical Review Officer Comprehensive  
Foundations of Occupational Medicine — Segment 2  
Occupational Medicine Board Review  
AMA Guides to the Evaluation of Permanent Impairment 6th Edition and Other IME Skills (presented by ABIME)
CONCURRENT CONFERENCE SESSIONS

Speaker Designation
Speakers who are members of ACOEM are indicated with an asterisk (*) throughout this program. The College would like to take this opportunity to recognize their contributions to ACOEM.

Sunday, April 10, 2016
7:00am - 8:00am
Session 099: New Member Orientation .... No CME/MOC Credit Offered
TRACK(S): Other
Are you a potential or new member of ACOEM? Are you a current member who would like to become more involved? Then come to this informal event and network with component, section, and national leaders of the College. Discover ways to get involved and reach the maximum potential of your membership. Continental breakfast will be provided. This session may be of particular interest to residents and recent graduates.

9:00am - 10:00am
Session 102: Becoming an ACOEM Fellow ............... CME/MOC: 1.0
TRACK: Other
Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA
Douglas W. Martin*, MD, FACOEM, FAADEP, FAAFP, Unity Point Clinic - Occupational Medicine, Sioux City, IA
Mark A. Robert*, MD, PhD, FACOEM, Exponent, Inc., Chicago, IL
Daniel G. Samo*, MD, FACOEM, Northwest Medical Group, Chicago, IL
Chris Stewart-Patterson*, MD, CCBOM, FACOEM, Khatsahlano Corporate Medical Services, Vancouver, BC, Canada

Are you aware of family, urgent care, or internal medicine physicians, nurse practitioners, or physician assistants who are not trained in OEM but are interested in adding some OEM competencies to their “tool kits”? If so, let them know about this great opportunity to learn more about OEM! Are you seeing patients with occupational illnesses or injuries such as musculoskeletal injuries with impairment for joints and the spine or opioid-related issues in the workplace? Are you asked to develop return-to-work plans for your patients? This session will provide a brief introduction on the ways that primary care physicians and other practitioners can benefit from the many resources of OEM. This session may be of particular interest to residents and recent graduates.

Room locations for sessions are indicated on the Schedule-at-a-Glance, beginning on page 4.
Session 103: Business Leadership for Physicians: Necessary Knowledge Not Taught in Medical School .......................................... CME/MOC: 3.0

TRACK: Management and Administration in OEM

Catherine M. Baase*, MD, FAAFP, FACOEM, Dow Chemical Company, Midland, MI
Roger L. Chaufournier, MHSA, CSI Solutions, LLC, Bethesda, MD
Pamela A. Hymel*, MD, MPH, FACOEM, Walt Disney Parks and Resorts, Anaheim, CA
Craig D. Thorne*, MD, MPH, MBA, FACOEM, Erickson Living, Baltimore, MD

Health care is complex and fast-moving and occupational health physicians recognize that providing excellent care is not enough. They know that it is critical to develop exceptional leadership skills and business acumen as well. This interactive workshop is designed to include succinct presentations on advanced leadership and management tools and case examples about how they have already positively impacted clinical care and program development within several companies. The lead speaker is a renowned healthcare business professor and other faculty members are innovative occupational health physician leaders, they have mastered leadership and management skills to present business cases for new or improved services with measurable return on investment and process improvement techniques and tools to improve the delivery of occupational health services and demonstrate value. Specific case reports will highlight best practices in demonstrating business case and return-on-investment, collaboration with multiple stakeholders, and measuring and managing work. Attendees will have the opportunity to present their own management challenges they are faced with to the faculty in advance and during the interactive workshop to maximize this learning opportunity. This session may be of particular interest to residents and recent graduates.

Session 104: ACOEM’s Maintenance of Certification Part IV Program ............................................... CME/MOC: 1.0

TRACK: Other

Clare Bonnema, American Board of Preventive Medicine, Chicago, IL
William W. Greaves*, MD, MSPH, FACOEM, American Board of Preventive Medicine, Chicago, IL
Denece O. Kesler*, MD, MPH, FACOEM, University of New Mexico, Albuquerque, NM

As one of the four parts required for recertification under Maintenance of Certification, ABPM diplomates are required to complete a practice performance assessment – also known as Part IV. This component utilizes a quality improvement model with opportunities for assessment of practice performance and improvement activities available in clinical practice, teaching, research, and administration. This session will cover ACOEM’s Part IV program.

Room locations for sessions are indicated on the Schedule-at-a-Glance, beginning on page 3.
CONCURRENT CONFERENCE SESSIONS

Sunday, April 10, 2016
10:00 am – 12:00 pm

Session 105:
Individual Abstract Presentations.......... CME/MOC: 2.0

TRACK: OEM Education and Scientific Research

Deidre M. Defoe*, MD, MPH, Annandale, VA (Moderator)
Ronda Brewer McCarthy*, MD, MPH, FACOEM, City
of Waco Employee Health Services, University of
Pennsylvania, Waco, TX

Abstract 307: Outcomes of a Heat Stress Awareness
Program in Outdoor Municipal Workers
Katelynn E. Dodd, MPH, National Institute for
Occupational Safety and Health (NIOSH), Centers for
Disease Control and Prevention (CDC), Morgantown,
WV

Abstract 302: Factors Associated with Health Insurance
Coverage and Access to Health Care ....... Among Ever-
employed Adults with Work-related Asthma, Asthma
Call-back Survey, 2013
Wigdan Hassan Eltayeb Farah, MBBS, Mayo Clinic,
Rochester, Minnesota

Abstract 303: Skin Testing and Late TB Boosting
Phenomenon Among Health Care Workers in a Low
Prevalence Health Care Setting
Jasminka Goldoni Laestadius*, MD, PHD, The World Bank
Group, Washington, DC

Abstract 304: OEM Without Borders: From Survey to
Action in Five UN Organizations
Rebekah C. Grube, MSEd, ATC/LAT, Cerner Corporation,
Kansas City, MO

Abstract 305: Onsite Motion Health Program Leads
to Reduction in Inappropriate Utilization of Health
Services & Musculoskeletal Spend
Sara E. Luckhaupt*, MD, MPH, NIOSH, Cincinnati, OH

Abstract 306: Industry Variation in the Prevalence of
Low Back Pain among U.S. Workers
Tracy McNew, LPN, MPA, Center for Asbestos Related
Disease, Libby, MT

Abstract 308: Analysis of Radiographic Imaging
Outcomes from Asbestos Health Screening
Nicholas K. Reul*, MD, MPH, Washington State
Department of Labor and Industries, Olympia, WA

Abstract 309: Innovations in Healthcare Quality,
Disability Prevention, and Cost Containment in .......... Washington State Workers’ Compensation
Lee P. Wugofski*, MD, MPH, FACOEM, Federal
Occupational Health - Dept of Health and Human
Services, San Francisco, CA

Abstract 310: Creation of a Customized Relational
Database to Perform Evidence-based Medical
Surveillance
The objective of this session is to present important research
findings on current occupational and environmental medicine topics. All presentations were selected through a peer-
review process of submitted abstracts to ensure the highest
quality of science and relevance. This session may be of par-
ticular interest to residents and recent graduates.

Session 106:
International Panel Discussion .......... CME/MOC: 1.0

TRACK: Other

Paul J. Papanek*, MD, MPH, FACOEM, CAL/OSHA,
Torrance, CA (Moderator)

Representatives of various international occupational
groups will discuss issues of common concerns, challenges,
and opportunities facing occupational medicine across the
world. Audience participation is a key part of the program
and session participants will be encouraged to raise ques-
tions and offer additional insights.
Session 107: Becoming Board Certified and Maintaining Board Certification in Occupational Medicine. CME/MOC: 1.0

TRACK: Other

Clare Bonnema, American Board of Preventive Medicine, Chicago, IL

William W. Greaves*, MD, MSPH, FACOEM, American Board of Preventive Medicine, Chicago, IL

Members of the American Board of Preventive Medicine will be on hand to discuss specifics regarding the rules for acceptance as a candidate to sit for the initial certification examination, as well as for the four parts required for recertification under Maintenance of Certification: professionalism, lifelong learning, cognitive examination, and practice performance. Extensive Q&A with attendees has been a hallmark of this session. Additional information is available on the ABPM website at www.theabpm.org. This session may be of particular interest to residents and recent graduates.

Session 108: ACOEM Jeopardy. CME/MOC: 1.0

TRACK: Other

Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA

Douglas W. Martin*, MD, FACOEM, FAADEP, FAAFP, Unity Point Clinic - Occupational Medicine, Sioux City, IA

Join in a round of ACOEM Jeopardy. Watch surprise contestants compete to see how much they know about the history of ACOEM and Occupational Medicine. Do you know more than the “experts”?

Session 109: Occupational Spirometry Highlights: Pitfalls and Interpretation. CME/MOC: 1.0

TRACK: OEM Clinical Practice

Mary C. Townsend*, DrPh, M. C. Townsend Associates, LLC, Pittsburgh, PA

Occupational spirometry testing is often performed to comply with federal regulations and industry requirements. However, the technical quality of such testing is often mediocre, producing inaccurate results and leading to incorrect inferences about a worker’s health. To increase practitioners’ awareness of the impact of spirometry’s many parts, this one hour session will draw on requirements and best practice guidelines for occupational testing. Recommendations for training, major spirometer issues, and requirements for valid tests will be reviewed. Volume-time and flow-volume curves and their importance to the technician and the practitioner will be reviewed, testing errors will be demonstrated, and interpretation of test results will be reviewed. Prior to the session, participants are encouraged to print out “OSHA 3637-03 2013: Spirometry Testing in Occupational Health Programs: Best Practices for Healthcare Professionals” from https://www.osha.gov/Publications/OSHA3637.pdf so it can be referred to in the class. This session may be of particular interest to residents and recent graduates.

Session 110: Respectful Feedback and Organizational Effectiveness. CME/MOC: 1.0

TRACK: Management and Administration in OEM

David Frances*, PhD, Quadrant Health Strategies, Inc., Beverly, MA

There is a huge educational gap in the management and communication skills of OEM professionals. Graduate education, technical competence and professional licensure often ignore totally the interpersonal skills required of all effective relationships. This session is designed to address difficult conversations in a straightforward manner that has been successfully employed in every type of organizational environment, including OEM.
CONCURRENT CONFERENCE SESSIONS

Sunday, April 10, 2016
1:30pm - 2:30pm

Session 111: Accident Detectives: Medical Issues in Occupational Incident Investigations...... CME/MOC: 1.0
TRACK: Environmental Health and Risk Management

When an incident occurs in the workplace, it is critical to investigate and analyze the possible causes and contributing factors so that appropriate measures can be implemented to prevent similar incidents and improve safety. Investigators must often evaluate factors such as impairment or incapacitation, survivability, injury causation, physical control, sensory ability, and medical certification. Unfortunately, the individuals and organizations conducting the investigation sometimes lack the experience and training required to fully understand all of the relevant medical issues. In addition to other evidence gathered during an investigation, medical personnel should actively advocate for the collection of medical data, both at the time of the incident and from pre-existing records. These data may include photographs, voice or video recordings, toxicology testing, interviews, medical records and/or autopsy reports. Analysis of this information can be critical to fully understanding the role that medical issues may have played in an occupational incident. Using real-world examples, the presenter will outline many of the medical tools, resources, and evaluations that can yield important insights during an investigation.

1:30pm - 3:45pm

Session 112: TED2: OEM’s Top Ten Contributions to the World......................... CME/MOC: 2.0
TRACK: OEM Clinical Practice; Management and Administration in OEM
Daniel J. Conti, PhD, JP Morgan Chase, Chicago, IL
Roger Thomson, PhD, Integrative Health Partners, Chicago, IL

The session focuses on the use of mindfulness for both personal well-being as well as clinical practice opportunities. Dr. Roger Thomson is an expert in treating a wide-range of problems with special interests in helping people with anxiety, chronic pain and other medical problems. Personal and executive coaching is also one of his specialties.

Session 113: Mindfulness for Physicians.......................... CME/MOC: 1.0
TRACK: OEM Clinical Practice; Management and Administration in OEM
Daniel J. Conti, PhD, JP Morgan Chase, Chicago, IL
Roger Thomson, PhD, Integrative Health Partners, Chicago, IL

1:30pm - 3:45pm

Session 114: Electronic Medical Records: Ethical Access and Use in OEM............... CME/MOC: 1.0
TRACK: OEM Clinical Practice; Management and Administration in OEM
William Judge, JD, LLM, Encompass Compliance, Corp., Cornelius, NC
Amir Mohammad*, MD, MPH, Veterans Health Administration/Yale University OEM Program, New Haven, CT
James A. Tacci*, MD, MPH, JD, FACOEM, Rochester Regional Health System, Rochester, NY

With the proliferation of electronic medical records and databases that contain private health information, there are unprecedented opportunities for obtaining useful information that can help OEM clinicians make important decisions, for example, fitness-for-duty, work causation, and legitimacy of controlled drug use. However, ability to access such information does not necessarily mean it is legal, and legality of access does not necessarily mean it is ethical. In this session, panelists will address the legality, ethics, appropriateness and needed disclosures related to accessing electronic medical records and other health databases (e.g. state Prescription Drug Monitoring Programs - PDMPs) for OEM-relevant purposes other than providing direct patient care. Panelists include a workplace drug compliance expert, an occupational medicine physician working on related policies for the VA, and a JD/MD occupational medicine specialist. This session may be of particular interest to residents and recent graduates.
CONCURRENT CONFERENCE SESSIONS

Sunday, April 10, 2016
2:45pm - 3:45pm

Session 115: Standardized Model for Weight Management at Work using the CDC Diabetes Prevention Program .................................. CME/MOC: 1.0

TRACK: OEM Clinical Practice

Lisa R. Connor, RN, BSN, CDE, Vanderbilt Health Plus, Nashville, TN
Lori A. Rolando*, MD, MPH, FACOEM, Vanderbilt University and Medical Center, Nashville, TN
Mary Yarbrough*, MD, MPH, FACOEM, FACPM, Vanderbilt University and Medical Center, Nashville, TN

According to the CDC, diabetes is an epidemic that is significantly affecting the health and future of the U.S. It is estimated that 29.1 million Americans have diabetes, and another 86 million Americans have pre-diabetes. Diabetes is a problem that impacts employers and employees alike. In addition to the obvious direct costs associated with diabetes (i.e. cost of medical care, treatments, etc.) employers should also consider the indirect costs. These range from loss of production in relation to quality of work, absence, sickness, etc. to intangible costs such as pain, anxiety and an elevation in stress. From a financial and productivity perspective, employers should consider implementing effective preventive programs that will not only support their employees in seeking a healthy lifestyle, but will also invest into their long-term health. Vanderbilt Health and Wellness has implemented a workplace, lifestyle change program based on a CDC-led National Diabetes Prevention Program that is proven to prevent or delay type 2 diabetes. Their tailored program has been integrated into an already-existing program, addresses leadership support, and targets employee and provider buy-in.

Session 116: Public Safety: 20/20 Hindsight Makes Great Regulations................................. CME/MOC: 1.0

TRACK: Regulatory, Legal, Military, and Governmental OEM

Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA

Many of the regulations that impact public safety and affect the practice of occupational medicine are the result of significant events. This session will highlight the events that led to regulations in medical fitness, drug testing, hours of duty and others and discuss whether they have made a difference.

4:00pm - 5:00pm

Session 117: Head Trauma: Best Practices for Complex Cases and Fitness-for-Duty in Safety Sensitive Populations............... CME/MOC: 1.0

TRACK: OEM Clinical Practice

Jonathan S. Rutchik*, MD, MPH, FACOEM, University of California, San Francisco, CA

This session will introduce cases of complex head trauma and discuss the best practices. Clinical examination pearls, referral strategies and diagnostic testing will be discussed. Furthermore, issues surrounding fitness for duty for patients with post-concussion headaches, dizziness and vertigo, seizures, cognitive challenges, and post traumatic stroke will be discussed for those in safety sensitive positions such as commercial drivers, firefighters, police and aviation professions.

Session 118: Returning to Work and Staying at Work with Chronic Musculoskeletal Pain .......... CME/MOC: 1.0

TRACK: OEM Clinical Practice

Russell Gelfman*, MD, MS, Mayo Clinic, Rochester, MN

Chronic musculoskeletal pain is prevalent in the population and the costs associated with the resultant absenteeism and losses of productivity are high. While past research has often focused on individuals who are disabled from work, there have been several more recent studies examining the factors associated with staying at work despite the presence of chronic musculoskeletal pain. This session will review the evidence regarding these factors and provide insights for clinicians in occupational medicine and rehabilitation to help support and promote strategies that help workers with chronic musculoskeletal pain not only return to work, but also to stay at work.
Session 119: Merging Clinical Decision Support and Electronic Health Record Systems....... CME/MOC: 1.0

TRACK: OEM Clinical Practice

CAPT Margaret S. Filios, MSc, BSN, USPHS, CDC/NIOSH, Morgantown, WV
Philip Harber*, MD, MPH, FCCP, FACOEM, University of Arizona, Tucson, AZ
Robert K. McLellan*, MD, MPH, FAAFP, FACOEM, Dartmouth Hitchcock Medical Center, Lebanon, NH
Carrie A. Redlich*, MD, MPH, Yale University School of Medicine, New Haven, CT

Empowering electronic health record (EHR) systems by embedding clinical decision support systems (CDS) will automatically provide just-in-time occupational health expertise, monitor clinician and patient use of recommended standards, and facilitate workflow. NIOSH requested input about potential systems for primary care from groups convened by ACOEM, AOEC, and ATS. This session summarizes recommendations for 3 common problems: back pain (unrelated to a work-related injury) return to work, diabetes, and work-related asthma. Presenters will discuss potential obstacles and future innovative approaches such as AI and natural language processing. CDS systems can scan the information in the EHR and automatically generate recommendations, provide necessary knowledge, monitor compliance with recommendations, and encourage occupational medicine specialty referral when appropriate. The session will also illustrate potential benefits of merging CDS and RHT systems in occupational clinics. CDS-EHR approaches will have immediate and long-term implications for both OM clinics and for delivering occupational health services in non-specialty clinics. Attendees will gain both immediately useful and longer-term insights.

Session 120: Why Invest in Community Health: What’s Working and How to Take Action............... CME/MOC: 1.0

TRACK: Management and Administration in OEM

Catherine M. Baase*, MD, FAAFP, FACOEM, Dow Chemical Company, Midland, MI
Nico Pronk, PhD, HealthPartners, Bloomington, MN

Workplace health promotion programs are offered by almost 80% of employers in the U.S., yet the majority of those programs fail to address community-level drivers of workforce health (The Vitality Institute, 2015). American businesses have the unique ability to impact the health of the communities around them, while improving business performance. To advance population health in a community requires not only business engagement but that of multiple stakeholders across various sectors. This session will provide an overview of the Healthy Workplaces, Healthy Communities (HWHC) initiative that aims to build the business case and disseminate tools and resources for employers to engage in the health of the communities around them. Several reasons for business involvement in population health efforts will be presented. Participants will understand the results of an executive convening that begins to reveal the underlying business case for employers to invest intentionally in the health of the community.

Session 121: NIOSH Occupational Research Agenda ...................................... CME/MOC: 1.0

TRACK: OEM Education and Scientific Research

Sarah Felknor, MS, Dr.PH, NIOSH, Atlanta, GA
John D. Piacentino*, MD, MPH, FACOEM, NIOSH, Washington, DC

The National Institute for Occupational Safety and Health (NIOSH) creates new knowledge in the field of occupational safety and health and transfers it into practice globally. NIOSH accomplishes this mission through a variety of scientific activities, such as research, surveillance, field investigations and the development of guidance and recommendations. The purpose of this session is to describe recent advances in occupational safety and health, identify trends affecting the future of occupational safety and health research, and characterize the importance of prioritizing research according to burden, need and impact. Emphasis will be given to the National Occupational Research Agenda. The session will encourage discussion and feedback from participants.
CONCURRENT CONFERENCE SESSIONS

Sunday, April 10, 2016
5:00 pm – 6:45 pm

Exhibit Hall Reception – Welcome to the Neighborhood!
Join the ACOEM Board of Directors and the Program Planning Committee for the Opening Reception in the exhibit hall, located in Riverwalk Hall B on the lower, or river, level of the hotel. Network with friends over food and drink, see what exciting products and services the exhibitors are showing, and view the impressive poster presentations.

Welcome to the Neighborhood! The heart and soul of Chicago lives in its 77 vibrant neighborhoods and within the people who call these neighborhoods home. Each one has its own interesting mix of history and personality, and many are known for their own culinary offerings. The Sheraton Grand Chicago, (the conference hotel), is located in the Streeterville neighborhood.

The AOHC welcome reception will merely scratch the surface of some of the food Chicago is known for, and we encourage you to explore Streeterville and other Chicago neighborhoods during your stay. Rumor has it there may be some fun gifts at the reception to assist you in your local journey.

So, welcome to the neighborhood. Look around and make yourself at home!

Streeterville is considered one of Chicago’s most cosmopolitan neighborhoods, as it is surrounded by some of the city’s most spectacular beaches and is just steps away from trendy shops, four-star restaurants, and the museums and theaters that line the Magnificent Mile. It was named for one of Chicago’s eccentric residents, George Wellington “Cap” Streeter, who ran his schooner aground on a sandbar near Michigan Avenue in 1886. Unable to dislodge the vessel, he remained there and called the vessel home. As landfill turned the lake into land, Streeter (unsuccessfully) laid claim to the land. Streeterville’s prime location is within walking distance to Navy Pier for shopping, recreation, music, or just to watch watercraft go by. The world-famous Oak Street Beach and the John Hancock building are also close by.

7:00 pm – 8:30 pm
Session 100: AOHC Opening Session: Induction of New Fellows
C. O. Sappington Memorial Lecture

CME/MOC: 1.5 | TRACK(S): Other

The opening session of the 101st annual meeting of the American College of Occupational and Environmental Medicine will feature the induction of new Fellows and the C.O. Sappington Memorial Lecture. Named for Clarence Olds Sappington, MD, DrPH (1889-1949), a noted consultant in occupational diseases and industrial hygiene, this lecture is presented annually at AOHC to serves as a forum to address major issues in occupational and environmental medicine. This year’s recipient is Raymond Fabius*, MD, AB3Health, LLC, Newton Square, PA. Dr. Fabius will discuss, “The Next 100 Years: Transitioning from Risk Management and Occupational Health to Cultures of Health and Occupational Wellbeing.”
CONCURRENT CONFERENCE SESSIONS

Monday, April 11, 2016
7:00am - 8:00am

Session 200: Functional Outcomes: Information Gathering Session
(No CME/MOC Credit Offered)

TRACK: Other

To continue to advance the concepts of integrating functional outcomes into overall health care, ACOEM supports the development of functional outcomes measures. ACOEM believes all physicians should focus on returning their patient to a good functional state, not just treating the presenting illness or injury. To bring function to mainstream health care, ACOEM is proposing the development of a white paper on the value of functional outcomes indicating the rationale and necessity for incorporating functional outcomes in all medical/health care. Dr. Kathryn Mueller will be convening this session to discuss the white paper with ACOEM members and obtain your thoughts and ideas on expanding functional outcomes to all health care. Immediately following there will be a continental breakfast in the Exhibit Hall.

Session 201: Benchmarking Best Practices Towards a Global Culture of Health ......................... CME/MOC: 1.0

TRACK: OEM Education and Scientific Research

Myles Druckman*, MD, International SOS, Trevose, PA
Robert L. Quigley, MD, D.Phil, International SOS, Trevose, PA
Charles Yarborough*, MD, MPH, FACOEM, CYHealthAssociates, LLC, Bethesda, MD

The International Corporate Health Leadership Council is a first-of-its-kind, 501(c) non-profit think tank made up of the most senior leadership in corporate health-medical directors, corporate executives, thought leaders and researchers. The members of the Council represent a cross-section of global industries including manufacturing, finance, technology, automotive and energy/mining/infrastructure industries, with representation from both the CDC and WHO, and employing over two million people worldwide. The Council surveyed global organizations, reviewed recent literature, and canvassed leading global health experts. Six corporate health trends were identified and 10 key recommended actions were established to best protect an organization’s global assets (its employees). The actions are based on three pillars: people, place, and purpose. This presentation outlines the Council’s findings and recommended actions.

Session 202: Health of the Physician Workforce: Meeting the Unique Needs of an Aging Workforce and Increased Work Demands .......................... CME/MOC: 1.0

TRACK: Management and Administration in OEM

William George Buchta*, MD, MPH, MS, FACOEM, Mayo Clinic, Rochester, MN
Philip T. Hagen*, MD, Mayo Clinic, Rochester, MN
Robin G. Molella*, MD, MPH, Mayo Clinic, Rochester, MN
Tate D. Shanafelt, MD, Mayo Clinic, Rochester, MN

Approximately 40 percent of practicing physicians are over age 55 and almost 20 percent are over age 65. Yet demands for medical services are increasing faster than the work force is growing. The medical workplace is changing due to technology and the ongoing re-design of health care delivery. This session will profile the physician workforce, describe our research on physician’s perception of their own health needs and those of their colleagues. The session will highlight some of the unique occupational characteristics of the physician’s work force, and physicians as patients. The session will also present a physician care model that can manage preventive needs, acute health needs, and complex illness in the physician, while simultaneously addressing return to work, accommodation, and impairment.

Session 203: Case Studies in Environmental Health: ATSDR Experience ............................... CME/MOC: 1.0

TRACK: Environmental Health and Risk Management

Michelle Watters, MD, PhD, MPH, Agency for Toxic Substances and Disease Registry (ATSDR), Chicago, IL

ATSDR, a federal public health agency, works with communities to address concerns related to environmental contamination. Using case examples from site and emergency response work, this session will cover health concerns, evaluation methods, findings, and recommendations from these examples and discuss the challenges related to addressing these issues.

Room locations for sessions are indicated on the Schedule-at-a-Glance, beginning on page 4.
CONCURRENT CONFERENCE SESSIONS

Monday, April 11, 2016
7:00am - 8:00am

Session 205: The Determination of Causation in Occupational and Environmental Medicine: Where Law and Logic Often Conflict
CME/MOC: 1.0

TRACK: Regulatory, Legal, Military, and Governmental OEM

Jason Mark Carlton, JD, Gitto & Niefer, LLP, Binghamton, NY
Theodore F. Them*, MD, MS, PhD, MPH, FACOEM, Guthrie Medical Group, PC, Sayre, PA

The determination of (occupational) causation is an essential component of routine workers’ compensation management in Independent Medical Examinations (IMEs), and very frequently in civil cases revolving around environmental toxicology/toxic tort. While the legal standard for such a professional, medical opinion is typically to a reasonable degree of medical certainty, that term is both concurrently vague and misguided. This presentation will focus, based on both didactic and exemplary case-history components, on the credible, logical, defensible, and evidence-based approach toward establishing medical causation and toward effectively deconstructing/rebutting faulty, established causation arguments.

Session 206: A Leading Employer Tackles COPD to Refine its Evidence-base for Management
CME/MOC: 1.0

TRACK: OEM Education and Scientific Research

Harris Allen, PhD, Harris Allen Group, LLC, Atlanta, GA
William B. Bunn*, MD, MPH, JD, FACOEM, Medical University of South Carolina, Hilton Head Island, SC

While reporting huge, broad-based reductions in total costs from 2001-2009, Navistar employees also posted an anomaly: its direct costs linked to COPD rose sharply even as associated COPD indirect costs dropped. Prompted by this anomaly, this leading employer undertook a study (Allen et al, JOEM 9/13) for new evidence to strengthen its focus on high-cost, low-prevalent diseases. This study featured novel comparisons tracing the arc of COPD impact over time and found: disconnects between increases vs. decreases in direct costs and their drivers that raised unit price inflation concerns; increases in direct/indirect cost drivers from yet-to-be-diagnosed to diagnosed status that reaffirmed the need for screening; and increases in utilization from newly diagnosed to well-established disease status that underscored the need for continued monitoring. This panel will highlight the substantive concerns raised by these results (e.g., COPD-oriented unit price escalation, prevention, and medical management) concerns, discuss subsequent steps taken by Navistar to address these concerns, and detail methodological breakthroughs that have strengthened an already exemplary approach toward employee health and productivity.

8:00am - 12:30pm

Session 800: Robert J. Quinn Fire Academy (Worksite Visit)
CME/MOC: 3.0

TRACK: Other

Fabrice Czarnecki*, MD, MA, MPH, FACOEM, Transportation Security Administration, Arlington, VA
Daniel G. Samo*, MD, FACOEM, Northwest Medical Group, Chicago, IL

Pre-registration and an additional fee were required to attend this worksite visit. Unfortunately, on-site registrations cannot be accommodated. The buses will begin boarding at 7:30am and will leave promptly at 8:00am. Buses will stage at the convention entrance on the lobby level of the Sheraton. Anyone who misses the bus will not be allowed to participate and refunds will not be given. We anticipate returning to the hotel at 12:30pm. Please note that meals are not included as part of this activity. Attendees should wear long pants, closed-toe shoes, and clothing that be soiled.
CONCURRENT CONFERENCE SESSIONS

Monday, April 11, 2016
8:30am - 10:00am

TRACK: Management and Administration in OEM

Paul D. Blanc*, MD, MSPH, University of California, San Francisco, CA
Tee Guidotti*, MD, MPH, FFOM, FRCPC, FACOEM, Occupational and Environmental Health & Medicine, Washington, MD
Robert K. McLellan*, MD, MPH, FAAFP, FACOEM, Dartmouth Hitchcock Medical Center, Lebanon, NH

The ACOEM Section on History and Archives is pleased to present a series of presentations on the history of occupational and environmental medicine (OEM), from the origins of occupational medicine over 300 years ago to the formation of a national organization of occupational health physicians in the U.S. 100 years ago, to the rapid evolution of the specialty over the past thirty years as modern programs and concepts have arisen in many areas of occupational medical practice, including transportation medicine, substance abuse and screening, and health and productivity management. Speakers include ACOEM leaders with a great deal of personal knowledge and experience, including some who have themselves been instrumental in developing the specialty of OEM in their areas of expertise. The first session, Occupational Medicine Becomes a Specialty, will review our history from the days of Bernardino Ramazzini and before through the industrial revolution to the early 1900s in the U.S., and will include the impact of industrialization and changing technology on occupational illness and injury, the emergence of new biomedical concepts concerning public health and toxicology, and the effects of changing sociopolitical forces on OEM. This session was organized by the History and Archives Special Interest Section. This session may be of particular interest to residents and recent graduates.

Session 208: Billing Codes for Performance in Workers’ Compensation............................................ CME/MOC: 1.5
TRACK: Management and Administration in OEM

Robert C. Blink*, MD, MPH, FACOEM, Worksite Partners Medical Group, Inc., San Francisco, CA
Marianne Cloeren*, MD, MPH, FACOEM, Managed Care Advisors, Inc., Bethesda, MD
Lee S. Glass*, MD, State of Washington, Department of Labor and Industries, Mercer Island, WA
Kathryn L. Mueller*, MD, MPH, FACOEM, University of Colorado Anschutz Medical Campus, Aurora, CO

There is a long-standing disconnect between required documentation in patient encounters in order to be paid, and what needs to done in a clinical workers’ compensation encounter in order to practice evidence-based medicine and have good outcomes. A committee under the ACOEM Council on OEM Practice is developing a model for coding workers’ compensation care, which, if adopted, would incentivize clinicians to provide the kind of care needed to help patients recover more quickly, lose less time, and avoid unnecessary or harmful diagnostic testing and treatment. This panel discussion, featuring system stakeholders including OEM physicians, employers, and payers, will address efforts to change coding and payment arrangements that would reward critical OEM services and bypass irrelevancies of current compensation systems. Topics will include feasibility, precedent (Washington and Colorado examples), potential champions, synergy with other efforts, and potential obstacles. This session was organized by the Private Practice in Occupational Medicine Special Interest Section.
CONCURRENT CONFERENCE SESSIONS

Monday, April 11, 2016
8:30am-10:00am

Session 209: The Independent Medical Evaluation ........................................ CME/MOC: 1.5

TRACK: Regulatory, Legal, Military, and Governmental OEM
Douglas W. Martin*, MD, FACOEM, FAADEP, FAAFP, Unity Point Clinic - Occupational Medicine, Sioux City, IA

The performance of an Independent Medical Evaluation is a skill set that some, but not all, occupational medicine physicians add to their menu of clinical services. IMEs are typically thought of in occupational medicine when there are unresolved issues of impairment, work capacity, treatment recommendations, and causation analysis. However, IMEs also performed in disability systems outside of workers compensation in the areas of personal injury, product liability, and long term disability. This session will instruct the learner on the basic components of the IME, how it differs from a typical doctor-patient encounter, and the critical importance of a well-crafted report. Medico-legal tips will also be covered that will guide the IME physician into areas of confidence as opposed to criticism. The presenter has 22 years of IME experience in many legal arenas and has taught thousands of physicians in the basics of IME provision. This session was organized by the Private Practice in Occupational Medicine Special Interest Section.

8:30am - 12:00pm

Session 210: Commercial Driver Medical Examinations: What's New .................................................. CME/MOC: 3.0

TRACK: OEM Clinical Practice
Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA
Kurt T. Hegmann*, MD, MPH, FACOEM, University of Utah Rocky Mountain Center, Salt Lake City, UT
Charles A. Horan III, FMCSA, Washington, DC
Matthew S. Thiese*, PhD, MSPH, University of Utah Rocky Mountain Center, Salt Lake City, UT
Eric Wood*, MD, MPH, FACOEM, University of Utah, Salt Lake City, UT

This session will provide an update on the National Registry of Certified Medical Examiners and other issues that affect the commercial driver medical examiner. Recent research on medical issues and commercial drivers will be reviewed. A panel will provide an opportunity for attendees to question experienced examiners and a representative from FMCSA on issues important to the commercial driver medical examiner. This session was organized by the Transportation Special Interest Section. This session may be of particular interest to residents and recent graduates.

Session 211: OSHA-NIOSH Workplace Investigations: Red Herrings or Canaries in the Coal Mine ......................................... CME/MOC: 3.0

TRACK: Regulatory, Legal, Military, and Governmental OEM
Jennifer Rebecca Amani*, MD, MPH, University of Texas, Houston, TX
LCDR Judith Eisenberg*, MD, MS, FACEP, NIOSH, Cincinnati, OH
Michael J. Hodgson*, MD, MPH, OSHA, Washington, DC
Loren C. Tapp*, MD, MS, NIOSH, Cincinnati, OH
Kerton Victory, PhD, MSc, CDC/NIOSH, Cincinnati, OH

OSHA and NIOSH medical officers will present findings of recent workplace investigations and health hazard evaluations. The presenters will describe the cases, the approaches to the investigations, the investigation results, and the recommendations to employers. Implications for occupational medicine practice, regulations, research and employer education and public health will be explored, as relevant for each case. Time for questions and discussion will be included. This session may be of particular interest to residents and recent graduates.
CONCURRENT CONFERENCE SESSIONS

Monday, April 11, 2016
8:30am - 12:00pm

Session 212: Resident Research Abstract Presentations............................................. CME/MOC: 3.0

TRACK: OEM Education and Scientific Research

Francesca K. Litow*, MD, MPH, FACOEM, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD (Co-Moderator)
John D. Meyer*, MD, MPH, FACOEM, Mount Sinai School of Medicine, New York, NY (Co-Moderator)
Khaled Abdulrahman Altassan*, MD, MPH(C), Yale Occupational and Environmental Medicine Fellowship, New Haven, CT

Abstract 109: The Effect of Union Status on Injury Risk and Injury Severity in a Manufacturing Cohort
Theodore Aquino*, DO, MBA, University of South Florida, Tampa, FL

Abstract 110: Comparison Of Urinary PAHs Among Firefighters And Asphalt Pavers
Basim Baragaba*, MD, MPH, CIME, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD

Abstract 111: Work-related Injuries and Health-related Quality of Life Among U.S.Workers: a Longitudinal Study of a Population-based Sample
Yvonne Farnacio*, MD, MPH, Rutgers Robert Wood Johnson Medical School, Piscataway, NJ

Mary Gerges*, MD, Meharry Medical College, Nashville, TN

Abstract 135: Health Care Utilization by Migrant Farm Workers: Barriers and Challenges
Medhat Kalliny*, MD, PhD, Meharry Medical College, Nashville, TN

Abstract 141: Obstructive Sleep Apnea-Hypopnea Syndrome Among Professional Drivers
Silpa Dhoma Krefft*, MD, University of Colorado Anschutz Medical Campus / Colorado School of Public Health, Aurora, CO

Abstract 145: Spectrum of Lung Diseases in Deployers Returning from Iraq and Afghanistan
Ann Tu*, MD, MPH, University of Washington, Seattle, WA

Abstract 170: Ecological and Transactional Model of Occupational Stress: Application to 9-1-1 Telecommunicators Coping with Next Generation Technology
This session will provide residents in occupational and environmental medicine with a forum to present current and cutting-edge research in OEM. This session may be of particular interest to residents and recent graduates.

10:30am - 12:00pm

Session 213: The History of Occupational and Environmental Medicine: Occupational Medicine Becomes a Specialty - Part II CME/MOC: 1.5

TRACK: Management and Administration in OEM

Richard JL Heron*, MD, FRCP, FACOEM, BP International, Sudsbury on Thames, England
John D. Meyer*, MD, MPH, FACOEM, Mount Sinai School of Medicine, New York, NY
Mark Russi*, MD, MPH, FACOEM, Yale New Haven Hospital, New Haven, CT

The ACOEM Section on History and Archives is pleased to present a series of presentations on the history of occupational and environmental medicine (OEM), from the origins of occupational medicine over 300 years ago to the formation of a national organization of occupational health physicians in the U.S. 100 years ago, to the rapid evolution of the specialty over the past thirty years as modern programs and concepts have arisen in many areas of occupational medical practice, including transportation medicine, substance abuse and screening, and health and productivity management. Speakers include ACOEM leaders with a great deal of personal knowledge and experience, including some who have themselves been instrumental in developing the specialty of OEM in their areas of expertise. The second session will focus on the history of 3 important OEM hazards/occupations: industrial chemicals such as asbestos related diseases and bladder cancer caused by aniline dyes; medical center occupational health, from the plagues of Europe to SARS and other modern pandemics; and work-related upper extremity disorders from overuse syndromes among office and telecommunications workers in the 19th and 20th centuries to hand-arm vibration syndrome. This session was organized by the History and Archives Special Interest Section. This session may be of particular interest to residents and recent graduates.
Session 214: Low Back Surgery and Workers’ Compensation: The Role of the Occupational Medicine Provider in Helping Patients Make Better Informed Decisions

TRACK: OEM Clinical Practice

Michael Erdil*, MD, FACOEM, OEHN/UCHC, Marlborough, MA

Low back pain is a major cause of lost work days and chronic disability. Approximately 10% of cases of work-related low back pain account for 80 to 90 percent of costs, with high costs attributable in part to poor surgical outcomes. This session will review the medical evidence that informs medical specialty evidence based guidelines on surgery for low back pain (including ACOEM, ODG and North American Spine Society) and then review recent studies that show actual trends in treatment of low back pain and low back surgery, along with information about pain and function outcomes, for conditions that do and don’t meet guideline indications. Typical surgical consent procedures review the risks of anesthesia and the actual procedure. True informed decision making would provide the patient with information - in language or graphical format at the patient’s level - about the probable short and long-term benefit, possible short and long-term risks, the alternatives to the proposed procedures, and the likely long-term outcomes of the alternatives. The informed decision making process then engages the patient in a discussion that addresses the patient’s goals, risk tolerance for surgery vs. benefits, and values. Preliminary research on structured informed decision making indicates that patients often make different decisions than anticipated by providers, and that patients engaging in informed decision making may have better clinical outcomes. Until informed decision making with standardized patient education becomes the clinical norm with widespread availability, OEM providers can play a more prominent role in patient education and shared decision making to assist patients with making informed choices. This session will present the evidence regarding non-surgical vs. surgical treatment of lumbar radiculopathy and chronic low back pain due to degenerative disc disease, results of outcomes studies, and evidence for using shared decision making in addition to presenting recommendations for implementing this in OEM practice.

Session 215: Essentials of OEM Program Accreditation to Standardize Quality: Case Examples from Joint Commission and National Committee for Quality Assurance Accreditation Processes

TRACK: Management and Administration in OEM

Tricia Marine Barrett, MHSA, National Committee for Quality Assurance, Washington, DC
Geralyn Johnson, DDS, MPH, Federal Occupational Health, Bethesda, MD
Michael Kulczycki, MBA, FASAE, The Joint Commission, Oakbrook Terrace, IL
Robert K. McLellan*, MD, MPH, FAAFP, FACOEM, Dartmouth Hitchcock Medical Center, Lebanon, NH
Michelle Smith-Jeffries*, MD, MPH, FACOEM, Federal Occupational Health, Bethesda, MD

Most health care providers are familiar with the hospital accreditation process; however, few ambulatory care providers and even fewer occupational health care providers, consider improving their organization’s quality and safety of care services through a systems accreditation. Federal Occupational Health (FOH), a non-appropriated entity within the U.S. Department of Health and Human Services and provider of health, wellness, and safety services to 1.8 million federal employees, chose to seek a systems accreditation by The Joint Commission (TJC). Accreditation is a process whereby healthcare providers invite an independent, outside evaluation of the organization’s health services and the supporting delivery systems. FOH’s journey, as the first and largest federal occupational health service provider, serves as a model of how a nearly 70 year old, expansive provider used this process to improve patient quality of care and safety. As an organization, Dartmouth-Hitchcock (D-H) is committed to delivering high value health care, excellent health outcomes, and patient safety at low cost with a great patient experience. The patient centered medical home (PCMH) has been recognized as serving these goals. Because the relationship of the specialty “neighborhood” with a PCMH is crucial to achieving high value care, the National Committee for Quality Assurance (NCQA) established a Patient-Centered Specialty Practice recognition program to encourage specialty practices to work closely with primary care. D-H occupational medicine chose to pursue this certification to enhance the visibility and utility of occupational medicine to primary care and at the same time accelerate its path to achieving the healthiest workforce possible.
CONCURRENT CONFERENCE SESSIONS

Monday, April 11, 2016
1:00pm - 4:00pm

Session 801: Goodman Theatre Health Hazards
(Worksite Visit) ........................................... CME/MOC: 3.0

TRACK: Other
David Hinkcamp, MD, University of Illinois, School of
Public Health, Chicago, IL

Pre-registration and an additional fee were required to at-
tend this worksite visit. Unfortunately, on-site registrations
cannot be accommodated. The buses will begin boarding
at 12:30pm and will leave promptly at 1:00pm. Buses will
stage at the convention entrance on the lobby level of the
Sheraton. Anyone who misses the bus will not be allowed
to participate and refunds will not be given. We anticipate
returning to the hotel at 4:00pm. Please note that meals are
not included as part of this activity.

1:30pm - 3:00pm

Session 216: Knee, Shoulder, Spine: - Part I:
The Basics, Exam and Imaging............... CME/MOC: 1.5

TRACK: OEM Clinical Practice
Sam Biafora, MD, Hand to Shoulder Associates, Arlington
Heights, IL
James A. Hill, MD, Northwestern University Feinberg
School of Medicine, Chicago, IL
Daniel G. Samo*, MD, FACOEM, Northwest Medical
Group, Chicago, IL
Kris Siemionow, MD, University of Illinois, Illinois Spine
and Scoliosis Center, Homer Glen, IL

The shoulder, knee and spine are the most commonly in-
jured areas in an occupational medicine practice. Our un-
derstanding of the types of injury, what anatomical struc-
tures are involved, and how to best image these injuries is
constantly changing and improving. This session will cover
the history, physical exam, anatomy, common injuries and
mechanism of injury, and appropriate imaging of these three
commonly injured areas. This session will be a wonderful re-
view and a lead-in for the companion session – Knee, Shoul-
This session may be of particular interest to residents and
recent graduates.

Session 217: Critical Skills: Assessing Your OEM
Competencies............................................. CME/MOC: 1.5

TRACK: OEM Education and Scientific Research
Melissa Bean*, DO, MBA, MPH, FACOEM, Coventry,
Hazelwood, MO
Marianne Cloeren*, MD, MPH, FACOEM, Managed Care
Advisors, Inc., Bethesda, MD
Michael J. Levine*, MD, MPH, FACOEM, Private Practice,
Williamsburg, VA

In 2014, ACOEM released a guidance statement on Occupa-
tional and Environmental Medicine Competencies. This docu-
ment has the potential to guide individual members in self-
assessment of their continuing education needs. It also has
the potential to educate ACOEM about member priorities
and guide it in setting priorities for CME and other educa-
tional activities. During this session the competencies will
be reviewed and audience members will be introduced to
some online prioritization tools to help them in self-assess-
ment. The audience will be polled using smart phones and
other web-enabled devices and results will be discussed in
real-time. Data collected will be shared with ACOEM and
the AOHC 2017 conference planning committee. Attendees
should bring their smart phones or other web-enabled de-
vices with them to the presentation in order to participate
fully. This session was organized by the Council on OEM
Practice. This session may be of particular interest to resi-
dents and recent graduates.
CONCURRENT CONFERENCE SESSIONS

Monday, April 11, 2016
1:30pm - 3:00pm

Session 218: Service Animals in the Workplace: What You Need to Know ......................... CME/MOC: 1.5

TRACK: OEM Clinical Practice

Linda Carter Batiste, JD, Job Accommodations Network, Morgantown, WV
Joyce Edmondson, RN, JD, Veterans Health Administration, Baltimore, MD
Anne M. Foreman, PhD, NIOSH, Morgantown, WV
Margaret K. Glenn, PhD, West Virginia University, Morgantown, WV
Barbara Jean Meade*, MD, DVM, MPH, PhD, West Virginia University, Morgantown, WV

The use of service animals by individuals with disabilities is expanding rapidly requiring that occupational medicine physicians, health and safety personnel and human resource managers become familiar with the laws governing public access for service animals as well as the risks and benefits associated with service animals in the workplace for both employees and employers. Research and regulations have not kept pace with the expanded use of service animals resulting in obstacles for individuals with disabilities and difficulties in maintaining compliance for employers. Topics covered will include laws relating to service animals as reasonable accommodations in the workplace and housing, and public access to transportation. Additionally, guidance will be provided for those counseling individuals contemplating service animals as an accommodation to facilitate return to work. Participants will be made aware of resources available through the Job Accommodation Network (JAN), a program of the U.S. Department of Labor. Considerations of animal-related workplace hazards and controls to mitigate these will be discussed. Case studies will be used as examples to illustrate these points.

1:30pm - 5:00pm

Session 219: MRO Controversies ................ CME/MOC: 3.0

TRACK: Regulatory, Legal, Military, and Governmental OEM

Karl Auerbach*, MD, MS, MBA, FACOEM, Pulse Occupational Medicine, Greece, NY
Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA
Douglas W. Martin*, MD, FACOEM, FAADEP, FAAFP, Unity Point Clinic - Occupational Medicine, Sioux City, IA
Kent W. Peterson*, MD, FACOEM, Occupational Health Strategies, Charlottesville, VA
R. H. Barry Sample, PhD, Quest Diagnostics, Seneca, SC
Donna Smith, EdD/PhD, EDPM, Inc., St. Petersburg, FL

MRO Controversies is a staple session of AOHC where items of interest to Medical Review Officers are brought forward for insightful discussion that are not taught or addressed in standard MRO training courses. By definition, these issues are intended to raise controversy, as issues such as medical marijuana, alternative testing methodologies, and fitness for duty determinations affect MROs and their practices. In years past we have wrestled with international MRO issues, spousal use concerns and legal parameters. For 2016, given the proposed rule-making regarding the introduction of oral fluid testing as an alternative to urine testing in the federally regulated drug testing programs, there will be much controversy to discuss. Additionally, federal agencies have asked for comments regarding the possibility of considering hair testing. We also will again address the “creep” of incorporating fitness for duty determinations into MRO work. This session was organized by the Medical Review Officers Special Interest Section.
CONCURRENT CONFERENCE SESSIONS

Monday, April 11, 2016
1:30pm - 5:00pm

Session 220: Current Issues Affecting the Health and Safety of Underserved Occupational Populations ................................................CME/MOC: 3.0

TRACK: OEM Clinical Practice

Linda S. Forst*, MD, MPH, MS, University of Illinois School of Public Health, Chicago, IL
Bruce Goldstein, JD, Farmworker Justice, Washington, DC
Gregory D. Kearney*, DrPH, MPH, East Carolina University, Department of Public Health, Brody School of Medicine, Greenville, NC
Scott D. Morris*, MD, MPH, FACOEM, Valley Medical Center, Renton, WA
Poune Saberi*, MD, MPH, FACPOM, Valley Medical Center, Renton, WA
Marc Schenker*, MD, MPH, University of California, Davis, CA
Molly K. Tran*, MD, MPH, MA, State University of New York-Downstate School of Public Health, New York, NY

This Session will explore current issues affecting the health and safety of different underserved occupational populations in the U.S and abroad. It will also review some of the relevant legal and regulatory changes faced by this marginalized group of workers. This session was organized by the Underserved Occupational Populations Special Interest Section.

Session 221: Reproductive and Developmental Hazard Management ..............................................CME/MOC: 3.0

TRACK: Environmental Health and Risk Management

Beth A. Baker*, MD, FACOEM, FACMT, Canadian Pacific Railway, Minneapolis, MN
Susan Buchanan*, MD, MPH, University of Illinois, Chicago, IL
James H. Diaz*, MD, MHA, MPH, DrPH, FACOEM, LSU Health Sciences Center, New Orleans, LA
Melissa A. McDiarmid*, MD, MPH, DABT, FACOEM, University of Maryland School of Medicine, Baltimore, MD
John D. Meyer*, MD, MPH, FACOEM, Mount Sinai School of Medicine, New York, NY

This session will present common reproductive and developmental hazards encountered through workplace and environmental exposure. It will review determinants of children's health such as low versus high level lead exposure. And also discuss risks associated with exposure to other metals, solvents, infectious agents, physical agents and other hazards. Legal considerations such as the Pregnancy Dis-
**CONCURRENT CONFERENCE SESSIONS**

**Monday, April 11, 2016**
3:30pm - 5:00pm

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**Session 223: Respirators: Emerging Issues and Practical Implications**

CME/MOC: 1.5

**TRACK: OEM Clinical Practice**

Barbara I. Braun, PhD, The Joint Commission, Oakbrook Terrace, IL
Lisa M. Brosseau, ScD, CIH, University of Illinois, Chicago, IL
Philip Harber*, MD, MPH, FCCP, FACOEM, University of Arizona, Tucson, AZ
Debra Novak, PhD, RN, NIOSH/National Personal Protective Technology Laboratory, Pittsburgh, PA
Elaine B. Wencil, PhD, Department of Health and Human Services, Washington, DC

This session will educate participants about evolving respirator applications in healthcare and for major epidemics. These situations do not follow the typical OSHA driven protocols. The session includes representatives of The Joint Commission, NIOSH, and the Assistant Secretary of HHS for Preparedness and Readiness. This session was organized by the Medical Center Occupational Health Special Interest Section.

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**Session 224: Facilitating Integrated Health and Safety Management in the Workplace**

CME/MOC: 1.5

**TRACK: Management and Administration in OEM**

Todd Hohn, CSP, UL Institute of Integrated Health and Safety, Northbrook, IL
Edward Andrew Kapp, PhD, CSP, CHMM, Underwriters Laboratories, Inc., Northbrook, IL

While separate programs in employee wellness, health benefits management and injury and illness prevention can improve employee health and build business value, the growing evidence indicates that an integrative approach can yield improved health outcomes for employees and greater financial returns for companies than multiple stand-alone programs. This session examines those organizational factors that have been demonstrated to facilitate or inhibit the integration of health, safety and wellness into singular unified programs. Synthesizing the results of a number of investigations that the UL Institute of Integrated Health and Safety has conducted on organizations at various locations along the continuum of integration, this session will explore the structural and cultural elements of organizations that underlie successful integrated health and safety program implementation, as well as identify the common pitfalls companies that fail to effectively integrate fall prey to.
**Session 300: Preventing Delayed Recovery in Injured Workers**  
**TRACK: OEM Clinical Practice**

Marcos A. Iglesias*, MD, MMM, FAAFP, FACOEM, The Hartford, Hartford, CT

Bob and Joe are the same age, they work together doing the same job and suffered the same injury. Bob returned to work after a short course of treatment. Joe is still off work 2 years later. Many workers have simple musculoskeletal injuries. Some recover quickly without problems, yet others suffer from significant delays in their recovery. Why? What are the factors that predispose an injured worker to go down the path of delayed recovery? How can physicians quickly identify those at highest risk? And, most importantly, what measures can we take to help the injured worker recover their life speedily? This session will focus on practical tools and techniques to help minimize injured worker disability and delayed recovery.

**Session 301: So You Want to Be an ACOEM Leader?**  
**TRACK: Management and Administration in OEM**

Philip Adamo*, MD, MPH, FACOEM, Bayside Health, Pittsfield, MA  
Marianne Cloeren*, MD, MPH, FACOEM, Managed Care Advisors, Inc., Bethesda, MD  
Barry S. Eisenberg*, CAE, American College of Occupational and Environmental Medicine, Elk Grove Village, IL  
Stephen A. Frangos*, MD, MPH, FACOEM, Chevron Services Company, Houston, TX  
Paul J. Papanek*, MD, MPH, FACOEM, CAL/OSHA, Torrance, CA  
Tanisha K. Taylor*, MD, MPH, FACOEM, Barnabas Health Corporate Care, Lakewood, NJ

Have you ever wondered how ACOEM makes decisions? Thought about what you may be able to achieve if you were in a leadership role? Thinking about serving on a committee or running for office, but wondering about the time commitment? This session will explain how ACOEM leaders are developed, nominated, and selected or elected. Topics will include committees and councils, and Board of Directors and House of Delegates leadership roles, and Officers. Following an overview, there will be the opportunity to ask questions of ACOEM leaders. This session may be of particular interest to residents and recent graduates.
CONCURRENT CONFERENCE SESSIONS

Tuesday, April 12, 2016
7:00am - 8:00am

Session 304: Musculoskeletal Ultrasound in Occupational Medicine: Looking Into the Future................................. CME/MOC: 1.0

TRACK: OEM Clinical Practice

Yusef Sayeed*, MD, MPH, COHC, CPH, MEng, West Virginia University, Morgantown, WV
Michael P. Schaefer, MD, Cleveland Clinic, Cleveland, OH
Kate Sully, MD, West Virginia University, Philadelphia, PA

This 1-hour lecture will be an overview/introduction to musculoskeletal ultrasound split between presenters. The lecture will include topics including the physics of ultrasound, knobology, image optimization, technique including patient placement, review of shoulder anatomy/sonoanatomy (with a live demonstration), miscellaneous anatomy/sonoanatomy pertinent to occupational medicine, interventional techniques with a live demonstration (cadaveric vs. gel model), and the future of musculoskeletal ultrasound in workers compensation injury, reimbursement, and finally certification.

Session 305: Record-keeping: OSHA Recordables, Incentives, and Solutions....................... CME/MOC: 1.0

TRACK: Management and Administration in OEM

Robert M. Bourgeois*, MD, MPH, FACOEM, Bourgeois Medical Clinic, Morgan City, LA
Michael J. Hodgson*, MD, MPH, OSHA, Washington, DC

Fatal and non-fatal injury rates appear inversely proportional, in a State by State comparison, raising deeper questions about national under-reporting trends and behaviors by industries. In parallel, advertising nationally appears focused on reducing “OSHA recordables” rather than on reducing causes of injury. OSHA has implemented several changes to record-keeping, including the new Severe Injury Reporting System, new proposed mandates on electronic reporting of 300 logs, and changes and clarifications to recordability. The session will present a structured approach to OSHA recordability, outline evidence for poor professional practices at various levels of independent and dependent licensure, and discuss incentives and disincentives to reporting. It will then present alternative approaches used successfully in industries, from health care through shipbuilding. Finally, the session will document OSHA perspectives on individual practices concerning under-reporting as a whistle-blower (11c) violation.

8:30am - 10:00am


TRACK: OEM Education and Scientific Research

Guillaume Girard, PhD, Eng, Medtronic PLC, Minneapolis, MN
W. Greg Lotz, PhD, Captain, USPHS, CDC/NIOSH, Cincinnati, OH
Timothy L. Newman*, MD, First Energy Corporation, Akron, OH

Electromagnetic interference (EMI) or electromagnetic fields (EMF) in the workplace potentially impact implantable medical devices and pose a risk to individual health and safety. The most common medical devices are cardiac pacemakers and defibrillators, due to the prevalence of cardiovascular diseases. The use of medical devices to manage diabetes and neurologic conditions are increasingly becoming more common in the workplace. NIOSH protocols for the assessment of electromagnetic interference with medical devices have been developed to facilitate a common approach. This discussion will provide a review of medical conditions, implantable devices, and an overview of NIOSH standards to address workplace health and safety risks. A protocol developed for the electric utility industry will be provided for reference.

Room locations for sessions are indicated on the Schedule-at-a-Glance, beginning on page 4.
CONCURRENT CONFERENCE SESSIONS

Tuesday, April 12, 2016
8:30am - 10:00am


TRACK: Management and Administration in OEM

Judith Green McKenzie*, MD, MPH, FACP, FACPM, FACOEM, University of Pennsylvania, Philadelphia, PA
Natalie P. Hartenbaum*, MD, MPH, FACOEM, OccuMedix, Dresher, PA
Kent W. Peterson*, MD, FACOEM, Occupational Health Strategies, Charlottesville, VA

The ACOEM Section on History and Archives is pleased to present a series of presentations on the history of occupational and environmental medicine (OEM), from the origins of occupational medicine over 300 years ago to the formation of a national organization of occupational health physicians in the U.S. 100 years ago, to the rapid evolution of the specialty over the past thirty years as modern programs and concepts have arisen in many areas of occupational medical practice. The third session will present three aspects of OEM that have seen major development during the past forty years, including transportation medicine, substance abuse prevention and screening, and health and productivity management, by three Past-Presidents of ACOEM, all leaders and innovators in their respective presentation topics. Transportation Medicine has seen the birth and implementation of a comprehensive new national program by the FMCSA to certify commercial drivers. Federal legislation and regulations have established rules and requirements for testing alcohol and other substances in the workplace. Health and productivity management has become an important and widely used tool utilized by occupational physicians and managers in many workplaces. This session was organized by the History and Archives Special Interest Section. This session may be of particular interest to residents and recent graduates.

Session 308: New AAOS and ACOEM Clinical Practice Guidelines on Hand, Wrist, and Forearm Disorders ............................. CME/MOC: 1.5

TRACK: OEM Clinical Practice

Kurt T. Hegmann*, MD, MPH, FACOEM, University of Utah Rocky Mountain Center, Salt Lake City, UT
David M. Rempel*, MD, MPH, FACOEM, University of California SF Ergonomics, Richmond, CA

In 2016 AAOS released an updated CPG on carpal tunnel syndrome and ACOEM updated the guidelines for hand, wrist and forearm. This seminar will review recent changes to both Guidelines.

Session 309: Occupational Sleep Medicine .................. CME/MOC: 1.5

TRACK: OEM Clinical Practice

Philip Cheng, PhD, Henry Ford Health System, Detroit, MI
Stefanos N. Kales*, MD, MPH, FACP, FACOEM, Harvard School of Public Health/Cambridge Health Alliance, Boston, MA
Hans P. A. Van Dongen, PhD, Washington State University, Spokane, WA

Sleep disorders and medical conditions may cause sleepiness interfering with job performance. Fatigue also occurs in occupational settings due to extended work hours and/or circadian issues (night/shift work or travel across time zones). Occupational health professionals in diverse settings are confronted with these issues, but no formal educational programs cover this rapidly developing area of occupational sleep medicine. For the last three years, our experienced faculty has put on well-received occupational courses at the international sleep meeting (APSS) providing a comprehensive and practical overview. This session is directed towards the needs of occupational health clinicians: basic review of chronobiology; sleep/wake and alertness regulation and circadian principles; review of shift work disorder, interactions between work schedules, fatigue, sleep, and health; countermeasures; and obstructive sleep apnea in occupational settings (risks, screening, and management) with a focus on transportation. This session may be of particular interest to residents and recent graduates.
Session 310: Public Safety Medicine: The Latest and The Greatest .............................................. CME/MOC: 3.0

TRACK: OEM Clinical Practice

L. Kristin Arnold*, MD, ArLac Health Services, Lexington, MA
James W. Butler*, MD, FACOEM, Orthopedic Associates, Evansville, IN
Fabrice Czarnecki*, MD, MA, MPH, FACOEM, Transportation Security Administration, Arlington, VA
Thomas Hales*, MD, MPH, FACOEM, NIOSH, Cincinnati, OH
Michael J. Levine*, MD, MPH, FACOEM, Private Practice, Williamsburg, VA
Daniel G. Samo*, MD, FACOEM, Northwest Medical Group, Chicago, IL

This session is designed to present the most current changes, controversies and developments in the evaluation and care of public safety workers. There will be an introduction to new guidance for bomb squads and correctional officers. Real life cases of how the guidance has been used for evaluation of LEOs will be presented. There will be a discussion of how to use the ACOEM LEO guidelines and/or NFPA 1582 to evaluate workers in other safety sensitive occupations. Included will be the latest updates on the NFPA standards for firefighters, as well as the chapters under development (psychiatric and respiratory) from ACOEM’s Guidelines to the Medical Evaluation of Law Enforcement Officers. This session was organized by the Public Safety Medicine Special Interest Section.

Session 311: Managing Heartsink Patients with MUPS: Review of Evidence on Approaches that can Minimize or Reverse Impairment and Disability ...... CME/MOC: 3.0

TRACK: OEM Clinical Practice

Garson M. Caruso*, MD, MPH, FAADEP, FACOEM, Garson M. Caruso, MD, MPH, PA, Mechanicsburg, PA

“Heartsink” has been used to describe that feeling we often get when working with patients with chronic pain, disabling symptoms, and protracted work disability whom other physicians have been unable to help or have already harmed. The deficiencies of the biomedical model to explain the suffering of patients with treatment-resistant symptoms and disability is well known. So are the inadequacies of conventional medical care (diagnostic procedures, pills, procedures and surgery) for resolving the patient’s distress and life disruption. These cases are high cost and a major concern for payers. What can we learn from the medical literature that can help us identify the bio-psycho-socio-economic (BPSE) factors that increase the risk for becoming heartsink patients? What does research tell us about clinical interventions that are effective in preventing or reversing work disability related to chronic pain or medically unexplained physical symptoms (MUPS)? This session will review the evidence base and present ideas for putting the research evidence into practice in the OEM setting, with time for audience Q&A.

Session 312: The History of Occupational and Environmental Medicine: Occupational Medicine Becomes a Specialty - Part IV ............... CME/MOC: 1.5

TRACK: Management and Administration in OEM

Jim Morris, Center for Public Integrity, Washington, DC
Robert R. Orford*, MD, MPH, MS, FACOEM, Mayo Clinic, Scottsdale, AZ
Glenn S. Fransky*, MD, MOCCH, FACOEM, Liberty Mutual Research Institute for Safety, Hopkinton, MA

The ACOEM Section on History and Archives is pleased to present a series of presentations on the history of occupational and environmental medicine (OEM), from the origins of occupational medicine over 300 years ago to the formation of a national organization of occupational health physicians in the U.S. 100 years ago, to the rapid evolution of the specialty over the past thirty years as modern programs and concepts have arisen in many areas of occupational medical practice. Speakers include ACOEM leaders with a great deal of personal knowledge and experience, including some who have themselves been instrumental in developing the specialty of OEM in their areas of expertise. The fourth session will review the roles of government, labor, and industry in the U.S. from the perspective of a federal occupational health and safety administrator, consider changes in the practice of OEM, particularly with respect to the occupational health physician’s role in workers’ compensation and disability management, and describe the maturation of occupational medicine as a specialty, with respect to training, certification, ethics and professionalism, and the formation and development of ACOEM and other professional organizations. This session was organized by the History and Archives Special Interest Section. This session may be of particular interest to residents and recent graduates.

**TRACK: OEM Clinical Practice**

Fredric Gerr*, MD, University of Iowa College of Public Health, Iowa City, IA
David M. Rempel*, MD, MPH, FACOEM, University of California SF Ergonomics, Richmond, CA

Interventions that may or may not prevent musculoskeletal disorders (MSDs). This seminar will review conclusions from recent systematic reviews and findings from intervention studies in order to provide guidance for the occupational health provider on what to recommend for both primary and secondary prevention of MSDs. Additionally an overview of the health effects of sit/stand work stations will be reviewed.

Session 314: Occupational Medicine Training Opportunities: Enhancing the Pipeline.... CME/MOC: 1.5

**TRACK: OEM Education and Scientific Research**

Michael Fischman*, MD, MPH, FACOEM, University of California, Walnut Creek, CA
William W. Greaves*, MD, MSPH, FACOEM, American Board of Preventive Medicine, Chicago, IL
Robert Harrison*, MD, MPH, University of California, San Francisco, CA
Michael J. Hodgson*, MD, MPH, OSHA, Washington, DC
Amir Mohammad*, MD, MPH, Veterans Health Administration/Yale University OEM Program, New Haven, CT
John D. Piacentino*, MD, MPH, FACOEM, NIOSH, Washington, DC

The number of trained occupational and environmental medicine (OEM) physicians entering our field every year is less than the number of retirees, yet the need for OEM physicians is not declining. While limitations to and uncertainty regarding funding for training programs is often cited as the main problem contributing to the shortfall, there appear to be other factors involved, including difficulty in attracting qualified candidates, which, in turn, may reflect our inability to convey the breadth of practice and research opportunities ultimately available to graduates. In this session, physicians representing training programs, NIOSH and other funding organizations, and government agencies will attempt to define the current situation and problems and share potential approaches to enhancing the training pipeline through brief individual presentations followed by a panel discussion and an opportunity for audience input.

Session 320: What Constitutes Excellence: The Best Corporate Health and Safety Programs in America .................................................. CME/MOC: 1.5

**TRACK: Other**

Wayne N. Burton*, MD, FACOEM, FACP, American Express, New York, NY
Fikry W. Isaac*, MD, MPH, FACOEM, Johnson & Johnson, New Brunswick, NJ
Elizabeth A. Jennison*, MD, MPH, MBA, FACOEM, Honeywell, Morristown, NJ
Kent W. Peterson*, MD, FACOEM, Occupational Health Strategies, Charlotte, VA
Craig D. Thorne*, MD, MPH, MBA, FACOEM, Erickson Living, Baltimore, MD
Mary Yarbrough*, MD, MPH, FACOEM, FACP, Vanderbilt University and Medical Center, Nashville, TN

The Corporate Health Achievement Award (CHAA) was first presented in 1997 to recognize organizations for their outstanding, comprehensive array of programs dedicated to protecting and improving the safety, health, and productivity of their workforces. During this session, 2016 CHAA recipients will discuss those aspects of their health programs that may serve as model practices for occupational and environmental medicine and highlight qualities of excellence identified by reviewers. These companies continue to demonstrate that building a culture of health and safety by focusing on the well-being and safety aspects of the workplace yields greater value when compared to companies that do not adhere to CHAA standards. The 2016 recipient is Erickson Living.
CONCURRENT CONFERENCE SESSIONS

Tuesday, April 12, 2016
1:30pm - 3:00pm

Session 315: Violence Prevention: Where Are We Now? CME/MOC: 1.5
TRACK: Management and Administration in OEM

Cammie Chaumont Menendez, PhD, MPH, MS, NIOSH/CDC, Morgantown, WV
Michael J. Hodgson*, MD, MPH, OSHA, Washington, DC
Paul M. Sarnese, CHPA, MSE, CPM, Virtua Health, Marlton, NJ

Classifications of occupational violence evolved from simple enumeration before the 2999s to a perpetrator based classification system pioneered by CalOSHA to a now prevention and public health oriented classification system based on considerations of instrumental predatory and reactive or affective violence. Three states have developed structured approaches to violence in the health care workplace, and OSHA has recently reissued guidelines for health care and social services. This presentation will present the issues in the broader context of the workplace and a review of both OSHA’s 5a1 citations and NIOSH’s longer term strategy. A checklist developed from the three State-based regulatory efforts, OSHA’s new guidelines, and nationally recognized programs identified common gaps in programs. It appears useful both for self-assessment and for auditing and enforcement purposes. In addition, such essential elements guide and support the development of intervention tools, applicable for broader use in the workplace, in different industries, from taxicabs through home-based health care. Finally, more structured approaches to threat assessment are meanwhile integrated into programs recognizing the need for the prevention of both initial and recurrent acts of violence.

Session 316: The Occupational Medicine Toolkit for Psychological Fitness-for-Duty Evaluations CME/MOC: 1.5
TRACK: OEM Clinical Practice

Michael Coupland*, Rpsych, CRC, IMCS Group, Inc., West Palm Beach, FL
Michael J. Levine*, MD, MPH, FACOEM, Private Practice, Williamsburg, VA

This session will be taught by a practicing occupational physician and a psychologist who is contracted to provide fitness-for-duty for many employers. The presentation will describe the process of psychological fitness-for-duty evaluation in detail and provide tools for the occupational medicine physician to use to assist in identifying and referring employees with ‘red flags’ and ‘yellow flags.’ Reasons for evaluation, selection of evaluators, and identification and communication with stakeholders in the evaluation will be reviewed. Methods of evaluation are described. Concepts will be illustrated with a selection of case studies. The Toolkit will include the following public domain ‘tools’ for use within an occupational medicine setting: clinical history and interview question templates; mental status questions and test template; neurobehavioral symptom questionnaire; referral letter templates; and release of Information templates.

Session 317: The National Library of Medicine’s Toxicology and Environmental Health Information Program (TEHIP): Open Access References and Resources for the OEM Clinician CME/MOC: 1.5
TRACK: OEM Clinical Practice

John W. Downs*, MD, MPH, FACP, US Army, Fort Campbell, KY

Participants will be introduced to the open access online resources available through the National Library of Medicine’s (NLM) TEHIP program within NLM’s Specialized Information Services (SIS) division. Participants will become familiar with Haz-Map, an occupational health and hazards database, the Hazardous Substance Data Bank (HSDB), an exhaustive searchable database of over 5500 chemical hazards and toxicants, and the Household Products Database (HPD), a reference for the potential toxic effects of over 13,000 household consumer products. Emerging NLM TEHIP databases will also be briefly discussed. An introduction to the capabilities of each resource will be provided, and representative data searches will be conducted during the session to familiarize participants with the strengths of each database, and their potential utility in clinical OEM practice. This session was organized by the Federal and Military Occupational and Environmental Special Interest Section.

Session 318: An Active Shooter in Your Workplace: Tactical and Medical Response Priorities CME/MOC: 1.5
TRACK: OEM Clinical Practice

David K. Tan, MD, EMT-T, FAAEM, St. Charles County (MO) Police Department, St. Louis, MO

This program will help the occupational physician understand the intricacies of dealing with an active shooter in the workplace. It will address the needs for planning, coordination between medical staff, security staff, EMS and police. It will also address the medical care that the occupational physician might be called upon to provide in a situation such as this when outside response may be delayed.
Session 319: Disability Today, Tomorrow, and After That: Evolving OEM Clinician Roles in Three Countries ........................................ CME/MOC: 1.5

TRACK: Regulatory, Legal, Military, and Governmental OEM

Marianne Cloeren*, MD, MPH, FACOEM, Managed Care Advisors, Inc., Bethesda, MD
Richard JL Heron*, MD, FRCP, FACOEM, BP International, Sudsbury on Thames, England
Herman Spanjaard, MD, OHP, Dutch Society of Occupational Medicine, Utrecht, The Netherlands

If you are puzzled or frustrated by disability evaluation, especially SSDI, come to this panel session. It will compare evolving policies, programs and methods used to (a) evaluate and (b) mitigate the impact of newly-acquired disabilities on work and social participation among working age people in three countries and point out ways that physicians can make a positive difference no matter how crazy the system. The U.S. lags behind the UK and the Netherlands in tackling these issues, but may follow a similar evolutionary track. The U.S. Congress seems intent on making to SSDI. The UK launched its new nationwide Fit for Work Service early in 2015. The Netherlands instituted a set of powerful reforms early in the 2000s which have drastically reduced the number of people who are leaving the workforce. The panel will present comparative data on system performance, including early results from the UK. Participants will work in small groups on case studies highlighting the various roles physicians play, the tools and methods used to assess impairment and work capacity in each country, and ways physicians can drive towards the best possible outcome in each system. They will present their findings in a closing plenary. This session was organized by the Work Fitness and Disability Special Interest Section.

Session 321: Late-breaking Topics - What the Occ Doc Needs to Know ........................................ CME/MOC: 1.5

TRACK: Other

Susan Buchanan*, MD, MPH, University of Illinois, Chicago, IL
Myles Druckman*, MD, International SOS, Trevose, PA
John D. Piacentino*, MD, MPH, FACOEM, NIOSH, Washington, DC

This session will review topics with recent media focus where the occupational medicine physician may be responsible for providing advice or responding to questions on issues where information may be incomplete. The session will begin with a brief discussion on communicating risk in areas of uncertainty. Planned topics include the Zika virus and lead exposure in Flint, Michigan. Objectives for the session are: present key issues in communicating risk on current topics with incomplete information; discuss the Zika virus and the risk and concerns of employers and employees; and review the issues of unexpected lead exposure in community water in Flint, Michigan.
Special Centennial Event
Tuesday, April 12, 2016

Session 330: Special Centennial Event –
Session and Reception at Navy Pier
CME/MOC: 1.0

Celebrate ACOEM’s 100th anniversary with your colleagues; this event is not to be missed!
NOTE: Your AOHC name badge is required for bus transportation and for entry at Navy Pier.

Schedule
3:15 pm – 4:15 pm
Buses depart from Sheraton to Navy Pier. Buses will circulate between Navy Pier and the Sheraton Grand Chicago until 8:15 pm. LAST BUS DEPARTS NAVY PIER AT 8:15 PM

4:30 pm – 6:00 pm
Centennial Session – AON Grand Ballroom at Navy Pier
ACOEM Awards Presentation
Special Address: Phil Ponce, award-winning journalist
Membership Meeting to include introduction of new ACOEM officers and directors and remarks from the outgoing and incoming presidents.

6:00 pm – 8:00 pm
Centennial Reception – Lakeview Terrace at Navy Pier
Featuring breathtaking views of both Lake Michigan and the Chicago Skyline, Lakeview Terrace provides a one-of-a-kind indoor setting to celebrate and recognize ACOEM’s centennial year. Food, drink, entertainment and fun are all on tap for you to enjoy, along with a few surprises. Happy birthday, ACOEM – you are 100 years old and looking great!

See page 57 for more details.
CONCURRENT CONFERENCE SESSIONS

Wednesday, April 13, 2016
7:00am - 8:00am

Session 401: Advances in Clinical Medicine, Part II .... CME/MOC: 1.0
TRACK: OEM Clinical Practice

Marie T. Brown, MD, FACP, American College of Physicians, Chicago, IL
Daniel Patrick Dunham, MD, FACP, Rush University Medical Center, Chicago, IL
Robert F. Kushner, MD, FACP, Northwestern University Feinberg School of Medicine, Chicago, IL
Peter Orris*, MD, MPH, FACP, FACOEM, University of Illinois Hospital and Health Sciences System, Chicago, IL

Brief presentations on current developments in clinical care by medical researchers from Chicago Institutions covering:
Cancer Screening: Efficacy and Effects; Medication Adherence; Weight Loss 2016: Surgery/Medicine/Lifestyle?

7:00am - 9:30am

Session 402: When You Make the Front Page: Department of Defense Response to a Media Blitz Associated with Personnel Exposed to Chemical Warfare Agents ..........................................CME/MOC: 2.0
TRACK: Regulatory, Legal, Military, and Governmental OEM

Coleen P. Baird*, MD, MPH, FACOEM, Army Public Health Center, Aberdeen Proving Ground, MD
Bethany Ann Davidson, Army Public Health Center, Aberdeen Proving Ground, MD
Deanna K. Harkins, MD, MPH, Army Public Health Center, Aberdeen Proving Ground, MD
Kevin P. Michaels*, MD, MPH, Walter Reed National Military Medical Center, Madison, AL
Raul Alexander Mirza*, MD, DO, MPH, CPS/A, Army Public Health Center, Aberdeen Proving Ground, MD
Jose M. Ortiz*, MD, MPH, FACOEM, United States Army, Arlington, VA
Ronald F. Teichman*, MD, MPH, FACOEM, Army Public Health Center, Aberdeen Proving Ground, MD

This session shares a response to a series of media articles describing incidents of hazardous exposure to deployed Department of Defense personnel along with allegations of limited care and follow-up. Notably, the session will delve into the Army Public Health Center’s role as the Department of Defense’s investigational medical lead into reports of Service members exposed to chemical warfare agents while serving in support of Operations Iraqi Freedom and New Dawn. This issue was introduced on October 14, 2014, before the national stage in a New York Times expose. The article identified the experiences of seventeen Service members exposed to aging chemical weapons from the Iran-Iraq War era and alleged the Army failed to follow policy related to the medical management and reporting of personnel exposed to nerve and vesicant agents. As a result, the Department of Defense and Department of the Army initiated an in-depth investigation to identify and evaluate Service members which included the development of a screening process and communication and outreach to thousands of potentially exposed personnel. Equally as important as medical screening was to initiate a path toward restoring the faith, trust and confidence in the DoD Services that those involved perceived had failed them. Lessons learned from this large and highly visible project will be shared.

Session 403: Global Health and Productivity Management .............................................. CME/MOC: 2.0
TRACK: Management and Administration in OEM

Murray Coombs, MB, ChB, MEDICHEM, Centurion, South Africa
Jasminka Goldoni Laestadius*, MD, PhD, The World Bank Group, Washington, DC
Richard JL Heron*, MD, FRCP, FACOEM, BP International, Sudsbury on Thames, England
Thirumalai Rajgopal, MD, FFOM (London), FFOM (Ireland), Unilever, Mumbai, India
Leslie M. Yee*, MD, MPH, FACP, FACOEM, Skylark Health Strategies, Ltd., Cincinnati, OH

The need for Health and Productivity Management (HPM) has long been acknowledged with the USA, driven by escalating health care costs as well as by a growing recognition of the indirect costs of health conditions. There is now growing international recognition of the business and economic consequences of poor health by policy-makers and others. OEM specialists serving multinational corporations and other transnational organizations have managed this issue globally for many years, and this session will share current knowledge in this important area. This session was organized by the International Special Interest Section, along with the Health and Productivity Special Interest Section.
CONCURRENT CONFERENCE SESSIONS

Wednesday, April 13, 2016
7:00am - 9:30am

Session 404: Evidence-based Diagnosis and Treatment of Back and Neck Complaints: The New ACOEM Back and Neck Guidelines ...................................... CME/MOC: 2.0

TRACK: OEM Clinical Practice

Jeffrey S. Harris*, MD, MPH, MBA, FACOEM, The Permanente Medical Group, Mill Valley, CA
Kurt T. Hegmann*, MD, MPH, FACOEM, University of Utah Rocky Mountain Center, Salt Lake City, UT
Lucy Shannon, Reed Group, Ltd, Bozeman, MT

Back and neck complaints are among the most common conditions that occupational physicians treat. The new ACOEM neck and chronic low back guidelines provide information on the evidence, or lack thereof, for the benefits and harms of tests, treatments, procedures, and medications used for these complaints. The session will discuss and apply the best evidence on topics such as: the evidence supporting exercise, cognitive behavioral therapy, and other non-pharmacologic treatments; the use of medications in chronic back pain and neck complaints; the benefits, risk, and appropriate use of spinal injections; and the risks and benefits of surgery versus conservative therapy for common spinal conditions. Participants will develop strategies and sequential plans to manage medical care and disability in their practice. Methods of appraising and synthesizing evidence and the process of guideline development to better understand the importance of the guidelines will also be discussed. This session may be of particular interest to residents and recent graduates.

8:30am - 12:00pm

Session 405: Marijuana: The Science, The Law, and The Experience ................................... CME/MOC: 3.0

TRACK: OEM Clinical Practice

Michael J. Kosnett, MD, MPH, Colorado School of Public Health, Denver, CO
Jerrold B. Leikin*, MD, FACOEM, North Shore University Health Systems - OMEGA, Glenview, IL
Douglas W. Martin*, MD, FACOEM, FAADEP, FAAFP, Unity Point Clinic - Occupational Medicine, Sioux City, IA
Robert Morgan, JD, Much Shelist, P.C., Chicago, IL
Ross Morreale, JD, Medical Cannabis Alliance of Illinois, Springfield, IL
Ted Niemiec*, MD, CIME, ArcelorMittal, East Chicago, IN
Marc Sloan, MD, Pain and Rehabilitation Clinic, Chicago, IL

This session will explore the current status of marijuana, focusing on scientific knowledge, dynamic regulatory landscape, and the evolving impact on clinical practice. The first hour will focus on the various claims made. This will include the medical indications, impairment/intoxication and functioning, and habituation and addiction. Both the pro and the con will be addressed, and include what, if any, science is behind the claims. The second hour will deal with the legal aspects, how they affect physicians and how this will affect the MRO. Lastly, the session will present the real life perspectives of physicians who are in states with medical and/or recreational marijuana.

Room locations for sessions are indicated on the Schedule-at-a-Glance, beginning on page 4.
Healthcare workers (HCWs) have high injury rates and face an array of occupational hazards. Occupational medicine physicians caring for this vulnerable population confront specialized clinical challenges in a complex regulatory milieu. Hospitals and healthcare systems may provide these services directly or contract with local OEM practices. In either setting, OEM physicians are needed to provide clinical and administrative leadership. This session will highlight areas of current consensus and controversy in Medical Center Occupational Health and provide a concise user-friendly guide to the field, enabling participants to understand HCWs’ unique medical risks and know how to access the resources they need to manage clinical care and program development. Divided into 3 sections with ample time for audience questions, the session will feature three parts.

**Part I (8:30am-9:30am):** Update on HCW Immunization recommendations and implementation strategies to improve safety and reduce infection risks for healthcare personnel and patients. HCW vaccination programs can illuminate current national issues with vaccine mandates, adult immunization compliance, vaccine efficacy and adult vaccine hesitancy. In addition, HCW immunization presents opportunities to interface with the public health community for outbreak prevention and pandemic preparedness. With its complex epidemiology, variable vaccine efficacy, and need for annual immunization, influenza can provide particular insights into workplace vaccination opportunities and concerns. This session will present recent experiences in transitioning to mandatory influenza vaccination programs at large academic medical centers with a focus on operational, ethical and legal issues.

**Part II (9:45am-10:45am):** Update on tuberculosis (TB) screening and management for HCWs. Faculty will review current TB epidemiology, new diagnostic and treatment options for latent TB infection, focusing on the newer, blood-based IGRAs, and key procedural considerations for screening programs. Current CDC screening recommendations and guidelines will be reviewed. Examples of screening programs in hospital, public health and Veterans Health Administration settings will be discussed, particularly in comparison with the previous standard of TST use. A toolkit with samples of policies and procedures will be shared.

**Part III (11:00am-12:00pm):** MCOH Section faculty will review the newly updated “2015 Guidance for Occupational Health Services in Medical Centers” with an emphasis on new developments and recommendations. Topics will include prevention and exposure management for biologic, chemical and physical hazards in the healthcare workplace; reproductive hazards for healthcare workers; workplace violence; and laboratory animal worker safety. The session will comprise focused presentations and substantial time for questions. This session was organized by the Medical Center Occupational Health Special Interest Section. This session may be of particular interest to residents and recent graduates.
Session 407: Past, Present, and Future of Gizmos and Gadgets: The History and Advancement of OEM and Industrial Hygiene Technologies

**TRACK: OEM Clinical Practice**

Karl Auerbach*, MD, MS, MBA, FACOEM, Pulse Occupational Medicine, Greece, NY
Mark Boquet*, MD, MPH, FACOEM, Dow Chemical Company, Plaquemine, LA
David L. DeRegis*, MD, MPH, Ithaca, NY
Nelson S. Haas*, MD, MPH, MA, FACOEM, Workplace Health, Augusta, ME
Allison L. Jones*, MD, MS, FACOEM, Urbana, IL
Heather O’Hara*, MD, MPH, Meharry Medical School, Nashville, TN
Kenji Saito*, MD, MPH, JD, The Aroostook Medical Center, Presque Isle, ME

This session will look at devices used in occupational medicine; past, present and future. While many such devices have usage in a variety of medical care, OEM has often adopted them as core to OEM practice. The session will look at some historical examples, some present-day examples that are well established and some that are cutting edge, and offer a view of the future of devices that may find value in OEM practice. The historical part of the presentation will be to give context. Current day devices in use will be presented to help understand the evolution of such equipment as well as to set the stage for a prime focus of the presentation; cutting edge tools and feasible future developments for application in the OEM setting. This session was organized by the Residents and Recent Graduates Special Interest Section.

Session 408: Communicable Disease Preparedness and Business Response

**TRACK: Management and Administration in OEM**

Stephanie Estala*, DNP, RN, FNP-BC, Chevron Corporation, Houston, TX
Stephen A. Frangos*, MD, MPH, FACOEM, Chevron Services Company, Houston, TX
Scott C. Levy*, MD, MPH, FACOEM, Chevron Corporation, Singapore, Singapore
Femi Pitan, MD, MPH, MBA, FRCPC, FRSPH, Chervron Nigeria Limited, Lagos, Nigeria

The 2014 Ebola outbreak presented significant business continuity risks for a global oil and gas company with operations in Nigeria. The onshore and offshore operations in Nigeria were presented with several challenges. To support operations, there was a need to maintain the mobility of international business travelers in and out of Nigeria. There was also the potential for symptomatic employees to present to a worksite clinic within or outside of the affected countries. The risks were managed through the implementation of a comprehensive response in Nigeria and in the United States. Business interruption was avoided and measures were put in place to protect the workforce.

The presentation will discuss how the response was developed and implemented. The core elements of the response included risk evaluation, scenario planning, screening at onshore and offshore locations, medical evacuation, establishing clinical protocols, and clinical setting processes for pre and post-travel education and screening. This was further supported by travel advisories and restrictions, staff training, and workforce Ebola awareness efforts. Ebola awareness efforts were extended to families, communities and business stakeholders.

Middle East Respiratory Syndrome (MERS) is a viral respiratory disease caused by a coronavirus (MERS-CoV); it was first identified in Saudi Arabia in 2012. MERS is communicable via close contact with infected patients. The first imported case of MERS to South Korea was confirmed in May 2015. Weeks after the MERS outbreak started, the Korean authority began to disclose the relevant information to the public. Although the outbreak was isolated to a defined geographic location, the anxiety experienced by a global workforce was compounded by the incomplete public record, similarity of the MERS virus to Severe Acute Respiratory Syndrome (SARS), the potential to result in the morbidity and mortality of our employees as well as major disruption in the global community and business sectors as a whole.

Our company developed a multipronged approach to protect the workforce and inform the business. Through our efforts we were able to maintain situational awareness of the evolving event and ensured that safe business operations were maintained. This presentation provides relevant industry-specific data that supports the business value of health and medical programs.
Wednesday, April 13, 2016
9:45am - 12:00pm

Session 409: Myofascial Pain Syndromes: Identifying Cases You Can Treat and Avoiding Useless Surgeries........................................ CME/MOC: 2.0

TRACK: OEM Clinical Practice

Constantine Gean*, MD, MS, MBA, FACOEM, Liberty Mutual, Glendale, CA
Stephen Levit*, MD, Liberty Mutual Insurance, Boston, MA
Craig Edwin Morris, DC, DACRB, FAFICC, CSCS, National University of Health Sciences, Torrance, CA
Jules Steimnitz, MD, PM&R, San Francisco, CA

Myofascial pain is a common diagnosis but commonly is both poorly treated and poorly understood. This is particularly important as misdiagnosis of myofascial conditions often results in ineffective procedures or surgeries (e.g., when patients remain symptomatic after carpal tunnel and cubital tunnel releases, extensor tendon releases, shoulder surgery and even neck fusions). There are several common clinical myofascial syndromes that, if properly diagnosed, can be treated non-operatively by the primary care physician. This session will cover the following areas: an overview of current research on myofascial pain syndromes and explanation of the evolution of understanding of this condition over the last 50 yrs; how to recognize myofascial pain syndromes, including a basic diagnostic decision tree for primary care providers; and discussion of 6 non-operative myofascial syndromes mimicking surgical conditions, including diagnostic tests and insights to help distinguish these from operative conditions. Treatments for myofascial pain syndromes including a basic protocol for myofascial patients; discussion of TPI, manual, biofeedback and other techniques; and myofascial pain resource.
INDIVIDUAL SCIENTIFIC EPOSTERS AND RESIDENT POSTER BOARDS

Individual Scientific Abstract ePosters

Mehmet Erdem Alagüney, MD, Hacettepe University, Department of Occ. Medicine, Ankara, Turkey  
ePoster 202: Causes of Undertermination of Occupational Diseases in Turkey - Physician Opinions

Mehmet Erdem Alagüney, MD, Hacettepe University, Department of Occ. Medicine, Ankara, Turkey  
ePoster 203: The Frequency Of Needlestick Injuries Among Nurses In A University Hospital

Brad Black, Center for Asbestos Related Disease, Libby, MT  
ePoster 205: Pulmonary Disease Caused by Zonolite Attic Insulation Contaminated with Libby Amphibole

Teresa Calhoun, Medical Director at Bayer CorpScience, Research Triangle Park, NC  
ePoster 206: Guidance on First Aid and Medical Treatment for Phosgene

Yohama Caraballo-Arias, M.D., Universidad Central de Venezuela, Caracas, Distrito Capital, Venezuela  
ePoster 207: The Impact of the Venezuelan Crisis on its Workers' Lives

Yohama Caraballo-Arias, M.D., Universidad Central de Venezuela, Caracas, Miranda Venezuela  
ePoster 208: Use and Limitations of the Déparis Guide in an Insurance Company’s Call Center in Venezuela

Vanessa Resende Nogueira Cruvinel, University of Brasilia, Faculaty of Ceilândia, Brasilia, DF Brazil  
ePoster 209: Occupational Risks and Accidents in Waste Pickers in a City of Brazil

Cristina Demian, MD, MPH, University of Rochester Medical Center/Finger Lakes Occupational Health Services, Rochester, NY  
ePoster 210: Effects of the New York State Workers Compensation Board Medical Guidelines on Return to Work Outcomes

Brent C. Doney, PhD, MS, MPH, CIH, NIOSH/CDC, Morgantown, WV  
ePoster 211: Chronic Obstructive Plmonary Disease (COPD) Prevalence and Application of a COPD-Specific Job Exposure Matrix among US Working Adults

Mohamed Elhelali Nasreldin Elhelali Ibrahim; PhD, MSc., MD, Environmental health and Occupational Safety section-King Abdulaziz Medical City - SA, Mansoura University, Egypt, Riyadh, Saudi Arabia  
ePoster 212: Occupational Factors Associated with Carpal Tunnel Syndrome among Laboratory Technicians

Steven J. Gaydos, MD MPH, US Army School of Aviation Medicine, Fort Rucker, AL  
ePoster 213: Multidimensional Peer Fatigue Scoring in a Deployed Military Environment

Matthew Groenewold, PhD, MSPH, Centers for Disease Control and Prevention, Cincinnati, OH  
ePoster 214: Prevalence of Upper and Lower Extremity Joint Pain among U.S. Workers by Industry

Gu Ja Kook, CDC/NIOSH, Morgantown, WV  

Tanis Hernandez, MSW, LCSW, Center for Asbestos Related Disease, Libby, MT  
ePoster 216: Lung Cancer Screening for an Asbestos Exposed High Risk Population: Libby, MT

Stella E. Hines, MD, MSPH, University of Maryland-Baltimore School of Medicine, Baltimore, MD  
ePoster 217: Origins and Evolution of a Hospital-based Elastomeric Respirator Program: A Qualitative Assessment

David Hoyle PT, DPT, OCS, BA, MS, CEAS, Select Medical, Storrs, CT  
ePoster 218: Physical Therapy and Occupational Low Back Pain an Evidence Informed Approach

Mariah Kieffer, South Dakota State University, Brookings, SD  
ePoster 220: Ethical Concerns and Well-being for Hospital Teams Preparing for Ebola
INDIVIDUAL SCIENTIFIC EPOSTERS AND RESIDENT POSTER BOARDS

**Allen Kraut, MD, FRCPC,** University of Manitoba, Winnipeg, MB, Central African Republic
ePoster 221: A Comparison of Opioid use Between WCB Recipients and Other Manitobans for Knee, Shoulder, Back and Carpal Tunnel Release Procedures

**Laura Kurth PhD,** NIOSH/CDC, Morgantown, WV
ePoster 222: Comparison of Expert Assigned Occupational Exposure and a Chronic Obstructive Pulmonary Disease (COPD)-Specific Job Exposure Matrix

**Paul O. Kwon DO MPH FAAP,** Walter Reed Army Institute of Research, Silver Spring, MD
ePoster 223: Indirect Household Lead Exposures from Occupational Risks in Field Artillery

**Jerrold B Leikin MD, FACP, FACEP, FACMT, FACOEM,** NorthShore University HealthSystem - OMEGA, Glenview, IL
ePoster 224: Cannabis-Induced Delirium Treated With Dexmedetomidine

**Jacek M. Mazurek, Md, MS, PhD, CDC, NIOSH,** Morgantown, WV

**Katie McBee, DPT, MS, OCS, CEAS,** Select Medical, Louisville, KY
ePoster 226: The Importance of ACOEM MRI Guideline Adherence for Low Back Pain

**Matthew Minson, M.D.,** Critical Management Programs, Spring, TX
ePoster 227: The Economic Case for Screening Physcials Relative to Fitness for Duty Programs and the Reduction of Medical Costs

**Lauren Molella,** Troy University (work done as summer intern Mayo Clinic), Troy, AL
ePoster 228: Monitoring Team Well-being During Ebola Preparation

**Warren Scott Monks, Jr., PA-C, MPAS,** Army Public Health Center, Aberdeen, MD
ePoster 229: Developing Medical Surveillance Exam Guidance for New Materials - The IMX Experience

**Koji Mori,** University of Occupational and Environmental Health, Japan, Kitakyusyu, Fukuoka, Japan
ePoster 230: Developing Standardized Indices for Corporate Health Management to Support a Policy Priority of the Japanese Government

**Tomohisa Nagata,** University of Occupational and Environmental Health, Kitakyushu, Fukuoka, Japan
ePoster 231: Collaboration Health Study with Companies and Health Insurance Societies—Benchmarking and Cost-effectiveness Analysis

**Adebisi Obafemi, MD, MS, FACP,** UT Southwestern medical center, Dallas, TX
ePoster 232: Perioperative Exposure to Coxiella Burnetti Infected Graft

**Lynn C. Onyebeke, MA, SM,** Icahn School of Medicine at Mount Sinai, New York, NY
ePoster 233: Personal Protective Equipment for Female Construction Workers: Does It Fit?

**Demetrios M. Papazaharias, MPH,** Icahn School of Medicine at Mount Sinai, New York, NY
ePoster 234: Using Personal Monitoring to Measure Diesel Exhaust Exposure in New York City Metropolitan Area Bus Drivers

**Nicholas K. Reul, MD, MPH,** Washington State Department of Labor and Industries, Olympia, WA
ePoster 235: Translating Evidence: The Washington State Clinical Guideline for the Diagnosis of Beryllium Sensitization and Chronic Beryllium Disease

**Girija Syamlal, MBBS,MPH,** NIOSH/CDC, Morgantown, WV
ePoster 236: E-Cigarette Use Among U.S. Working Adults - 2014 National Health Interview Survey

**Frank Van Dijk,** Learning and Developing Occupational Health, Amsterdam, North Holland Netherlands
ePoster 238: Occupational Safety and Health Online: How to Find Reliable Information

**John M Violanti, PhD,** SUNY Buffalo, Buffalo, NY
ePoster 239: Longitudinal Association between Depression and Metabolic Syndrome Among Police Officers: The BCOPS Study

**Lee P. Wugofski, MD, MPH, FACOEM,** Federal Occupational Health - Dept of Health and Human Services, San Francisco, CA
ePoster 310: Creation of a Customized Relational Database to Perform Evidence-based Medical Surveillance

**Ali Naci Yıldız, Professor,** Hacettepe University, Faculty of Medicine, Department of Public Health, Ankara, Turkey
ePoster 240: The Opinions Of Physicians About Occupational Health And Safety Services In Community Health Care Centers
INDIVIDUAL SCIENTIFIC EPOSTERS AND RESIDENT POSTER BOARDS

Resident Abstract Posters

Osama Zeinalabidin Abdelgabbar, Qatif College of technology, Qatif, KSA, Sudan
Resident Poster 101: Study of Skin Disorders Among Health Care Workers Using Latex Gloves in Alexandria Main University Hospital

Zakaria Alabdulwahab, MD, University of Arizona, Tucson, AZ
Resident Poster 102: Physical risk factors of CTDS in aluminum works In Saudi Arabia

Kifah Habib Alfulayw, MD, University of Arizona, Tucson, AZ
Resident Poster 103: The Association between Job Categories and Different Risk Factors of Sharp Device Injuries Among Dammam Healthcare Workers

Sukainah Saeed ALHazim MD, University of Arizona, Tucson, AZ
Resident Poster 104: Knowledge, Attitude and Behavior Regarding Ergonomics among Dammam Health Care Workers

Elizabeth Medina Alm, MD, MPH, HealthPartners-University of Minnesota Occupational & Environmental Residency, St. Paul, MN
Resident Poster 105: The Odzi Project: Developing an Employee Health Protocol in a Rural Zimbabwe Hospital

Hanan Alruhiaman, MD, University of Arizona, Tucson, AZ
Resident Poster 106: The Prevalence of LBP in Nurses in a Saudi Arabian Maternity Hospital and its Associated Risk Factors

Abdulrazag Al-Salameen, MD, University of Arizona, Tucson, AZ
Resident Poster 107: Low Back Pain (LBP) Among Workers in a Saudi Paint Factory

Zainab Redha AlShaban, MD, University Of Arizona, Tucson, AZ
Resident Poster 108: Physical and Psychological Workplace Violence among Dammam Healthcare Workers, Saudi Arabia

Deborah N. Barbeau, MD, PhD, MSPH, Harvard T.H. Chan School of Public Health, Boston, MA
Resident Poster 112: Health Effects Associated with Urinary Triclosan Concentration in a Nationally Representative Sample of US Adults

Krishna Baumet, MD, Icahn School of Medicine at Mount Sinai/New York City Department of Health and Mental Hygiene, New York, NY
Resident Poster 113: Injuries Among the “Double Disaster” Cohort of Persons in the WTC Health Registry Exposed to Hurricane Sandy

Raphael Carvalho Biscaro, BS, Faculdade de Medicina de Jundiaí, Jundiaí/ São João da Boa Vista, SP Brazil
Resident Poster 114: Cross-sectional Study of the Profile of Brazilian Employees Presenting Shoulder Lesions with Workers’ Compensation Claims at the Department of Labor

Wesley D. Booze, MD, USUHS, Bethesda, MD
Resident Poster 115: Airway Perturbation Device (APD): Reference Ranges for the Military Population

David M. Boren, MD, University of Utah, Salt Lake City, UT
Resident Poster 116: The Role of Exposure Assessment to Detect the Effects of Alcohol and Occupational Lead Exposure on Biomarkers of Male Infertility

Benjamin Scott Burris, MD, UT Northeast Occupational Medicine Residency, Tyler, TX
Resident Poster 117: Is There a Difference in Well-being Between Healthcare Personnel in Small Psychiatric Wards and Small Medical/Surgical Wards?

William H. Cann, MD MPH, University of Washington, Seattle, WA
Resident Poster 118: Medical Student Awareness of Occupational Medicine

Aisha Sardar, MD, Rutgers University and Environmental & Occupational Health Sciences Institute, Piscataway, NJ
Resident Poster 119: Comparison of Two Methods for Measurement of Acute OXidative Stress/Inflammation During Commuting Exposure to Inhaled Pollutants

Andy Chern, MD, Uniformed Services University, Bethesda, MD
Resident Poster 120: Incidence and Risk Factors for Disease and Non-battle Injury aboard the Hospital Ship USNS COMFORT During a Humanitarian Assistance and Disaster Response Mission, Continuing Promise 2011

Timothy Hyunchan Cho, MD, FS, US Army Aerospace and Occupational Medicine Residency, Fort Rucker, AL
Resident Poster 121: Identification of Military Occupational Specialties Affected by Neurosensory Injuries and Associated Degradation of Critical Job Skills
INDIVIDUAL SCIENTIFIC EPOSTERS AND RESIDENT POSTER BOARDS

Mark Ciagne, MD, HealthPartners, St Paul, MN
Resident Poster 122: Health and Fitness Evaluation of Minnesota Fire Fighters

Corey M. Cronrath DO MPH, US Army, Pensacola, FL
Resident Poster 123: Medical Redeployment in Soldiers With and Without Medical Deployment Waivers

Brandon Dawkins, MD, University of South Florida, Tampa, FL
Resident Poster 124: Risk Factors Associated with Non-compliance with the Respiratory Protection Program Among Firefighters

Juan C. Diaz, MD, US ARMY Uniformed Services University, Bethesda, MD
Resident Poster 125: Health Care Worker Compliance with Follow-up After Occupational Bloodborne Pathogens Exposure at a Tertiary Military Medical Center: August 2011 to November 2014

Aletheia Donahue MD, Mount Sinai Department of Occupational and Environmental Medicine, New York, NY
Resident Poster 126: Communicable Disease Precautions for Food Service Workers in a Health Care Environment: Findings from a Multicenter Survey

Parvaneh Ehsanzadeh, MD, MPH, University of Texas, Houston, TX
Resident Poster 127: Chronic Kidney Disease of Non-traditional Causes in Central America: A Systematic Review

German L. Ellsworth, MD, MPH, University of Utah Rocky Mountain Center for Occupational and Environmental Health, Salt Lake City, UT
Resident Poster 128: Influence of Psychosocial Factors on Low Back Pain Rating and Physical Exam Tenderness Points in an Occupational Cohort

Eric Shuping, MD, MPH, Uniformed Services University of the Health Sciences, Bethesda, MD
Resident Poster 129: Occupational Health and Wellness: A Literature Review of Effectiveness

Omotayo Fawibe, MD, Meharry Medical College, Nashville, TN
Resident Poster 131: The Association of Specific Criteria Pollutants with Hospital Admissions for Respiratory Conditions in Davidson County, Tennessee

Luciano Resende Ferreira, MD, MSc, PhD, UNICASTELO (Universidade Camilo Castelo Branco), UNIFAE (Centro Universitário das Faculdades Associadas de Ensino), São Paulo/São João da Boa Vista, SP Brazil
Resident Poster 132: Cross-sectional Study of the Profile of Brazilian Workers Victims of Work-related Accidents Receiving Disability Pension

Hiroko Furo, MD, PhD, University of Texas at Health Northeast, Tyler, TX
Resident Poster 133: Utilizing Urinary Beta 2 Microglobulin for Biologic Monitoring of Cadmium For Former Workers of a Nuclear Weapons Facility

Shilpa Narasimhan Gowda, MD, University of Washington, Seattle, WA
Resident Poster 136: The Association between Air Pollution Exposure and Lung Cancer Risk in the Women’s Health Initiative Study Cohort

Gretchen C. Guzek, MD, MPH, Yale Occupational and Environmental Medicine Fellowship Program, Yale University, New Haven, CT
Resident Poster 137: Graduate Drama School - Injury Prevalence and Severity

Ryan Harris, MD, UT Health Northeast, Tyler, TX
Resident Poster 138: Case Series: Readily Observable Signs of Impending Heat Stroke

Todd G. Hastings DO, Uniformed Services University of the Health Sciences, Bethesda, MD
Resident Poster 139: A Comparative Analysis of Worker’s Compensation Claims for Civilian Department of the Navy Employees Working at Five Geographic Locations from 2000-2013

Crystal M. Jones, MD, MPH, University of Pennsylvania OEM Residency, Philadelphia, PA
Resident Poster 140: Occupational Medical History Taking

Khafagy Abdullah MD, MPH, University of California San Francisco, Division of Occupational and Environmental Medicine, San Francisco, CA
Resident Poster 142: High-altitude Alpine Therapy and Lung Function in Asthma: Systematic Review and Meta-analysis

Ikechi Konkwo, MBBS, MPH, University of Rochester Medical Center, Rochester, NY
Resident Poster 143: ESF-8 Preparedness Planning Form: Accord File as Corporate Compliance Solutions
INDIVIDUAL SCIENTIFIC EPOSTERS AND RESIDENT POSTER BOARDS

Ikechi Konkwo, MBBS, MPH, URMC Preventive medicine, Rochester, NY
Resident Poster 144: STIs and Internet Contacts: Challenges and Opportunities

Zachary Landman, MD, University of California San Francisco, San Francisco, CA
Resident Poster 146: Value-based Case-method Teaching May Improve Resident Competency Across Systems Based Practice and Population Management

Christopher Lee, MD, University of South Florida, Tampa, FL
Resident Poster 147: Critical Heat Stress Evaluation of Two Ebola Ensembles

Christopher T. Littell, DO, MPH, FACPM, Uniformed Services University of the Health Sciences, Bethesda, MD
Resident Poster 148: Prevalence of Partially Hydrogenated Oils in the 2014 Meal, Ready-To-Eat (MRE)

Xianling Liu, MD, PhD, MSPH, University of Pennsylvania, Philadelphia, PA
Resident Poster 149: Utility of 18F-2-fluoro-2-D-deoxyglucose-positron emission tomography/computed tomography (FDG-PET/CT) in Differentially Assessing Metabolic Activity in Organs of Chronic Smokers vs. Non Smokers

Kevin Loh, DO, MPH, Harvard Occupational and Environmental Health Medicine, Boston, MA
Resident Poster 150: Entry Fitness Levels and Subsequent Academy Performance Outcomes in Massachusetts Police Recruits

Thomas D. Louwers, MD, University of Washington School of Public Health/Madigan Army Medical Center, Seattle, WA
Resident Poster 151: Analysis of an Intervention to Reduce Truck Drivers’ Exposure to Vehicle-Induced Whole-Body Vibration

Natasha Narayan, MD, Loma Linda University Medical Center, Department of Occupational and Environmental Medicine, Loma Linda, CA
Resident Poster 152: Treatment Outcomes of Corticosteroid Injection versus Physical Therapy and NSAID use alone for Joint Pain in Work-Related Injuries

Isabella Cotta do Nascimento, UNIFAE, São João da Boa Vista, SP Brazil
Resident Poster 153: Cross-sectional Study of the Profile of Brazilian Professional Drivers Receiving Disability Pension

Gillian Loraine Nelson, MD, Center for Occupational and Environmental Health/ University of California Irvine, Irvine, CA
Resident Poster 154: Is there a Relationship Between Polycyclic Aromatic Hydrocarbon Exposure and Ovarian Reserve Markers in Humans?

Richard D. Newcomb MD, MPH, Mayo Clinic and University of Pennslyvania, Rochester, MN
Resident Poster 155: Accessing Current Practices in Hazardous Drugs Surveillance Programs

Chinyere Omeogu, MD, MPH, University of Pennsylvania, Philadelphia, PA
Resident Poster 156: Efficacy of a Mobile Behavioral Intervention for Workers with Insomnia

Chinyere Omeogu, MD, MPH, University of Pennsylvania, Philadelphia, PA
Resident Poster 157: Barriers to Respiratory Fit Testing and Strategies for Improving Compliance

Ting-Wei Michael Ou, MD, Loma Linda University Health, Occupational Medicine Department, Loma Linda, CA
Resident Poster 158: Effect of Diesel Exhaust Pollution on the Reliability of Exhaled Nitric Oxide Measurement in Asthma

Andrew L. Phillips, MD, MOH, University of Utah, Salt Lake City, UT
Resident Poster 159: Accommodations for Breastfeeding in the Workplace: A Review

Charles Francis Prezza, MD, University of Utah, Rocky Mountain Center for Occupational & Environmental Health, Salt Lake City, UT
Resident Poster 160: Medication Usage among Commercial Motor Vehicle Drivers

Jacob W Robinson, DO, MPH, United States Army School of Aviation Medicine, Ft Rucker, AL

Fabian Rohena, MD, United States Army School of Aviation Medicine, Ft. Rucker, AL
Resident Poster 162: Factors Associated with Accepted Compensation Claims among Federal Civilian Workers in Anniston Army Depot

Warren B. Sayre, MD, MPH, University of Pennsylvania Division Occupational and Environmental Medicine, Knoxville, TN
Resident Poster 163: Development of Chronic Pulmonary Disease After Acute Lithium Hydride Exposure
INDIVIDUAL SCIENTIFIC EPOSTERS AND RESIDENT POSTER BOARDS

Eric Shuping MD, MPH, USUHS, Bethesda, MD
Resident Poster 165: Integration of Occupational and Environmental Medicine (OEM) Exams into an Acute Primary Care Telemedicine Project

Eric Shuping MD, MPH, USUHS, Rockville, MD
Resident Poster 166: The Army’s First Occupational and Environmental Medicine Residency: A Paradigm to Assess Current Residency Training and Prepare for the Future

Stephanie Smith, USUHS, Bethesda, MD
Resident Poster 167: How Reliable is the Database? A Validation Study of ICD-9 coding for Irritable Bowel Syndrome from the Defense Medical Surveillance System

Rassull Suarez, MD, University of Cincinnati, Cincinnati, OH
Resident Poster 168: Risk Perception and Frequency of Exposures for Home Healthcare Workers

Luiz Felipe Tolentino Priester, BS, Unifae, São João da Boa Vista, SP, Brazil
Resident Poster 169: Cross-sectional Study of the Profile of Brazilian Hospital Workers Receiving Disability Pension

Samuel D. Turner, MD, MPH, Harvard T.H. Chan School of Public Health, Boston, MA
Resident Poster 171: Self-reported Stress Related Illnesses Among US Law Enforcement Officers: A National Survey

Aaron W. Tustin, MD, MPH, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD
Resident Poster 172: Associations Between Unconventional Natural Gas Development and Nasal and Sinus, Migraine Headache, and Fatigue Symptoms in Pennsylvania

Rakhee N. Urankar, MD, Meharry Medical College, Nashville, TN
Resident Poster 173: HIV Awareness in Long Distance Truck Drivers: A Cross Sectional Survey

Lacreasia Wheat-Hitchings, MD, MPH, University of Pennsylvania, Occupational and Environmental Medicine Residency, Philadelphia, PA
Resident Poster 175: Educational Model to Increase Resident Scholarly Activity

Clare Wood, BSc., MBChB, Resile Pty, Ltd, Brisbane, QLD, Australia
Resident Poster 176: Health Demographics of Prospective FIFO Mining Workers in Regional Australia

Tungyun David Wu, MD, MS, MOH, University of Utah, Salt Lake City, UT
Resident Poster 177: Carpal Tunnel Syndrome and Physical Activity

Sarang K. Yoon, DO, University of Utah Occupational Medicine Residency, Salt Lake City, UT
Resident Poster 178: The Role of Elbow Tender Point Exam in the Diagnosis of Lateral Epicondylitis in Manufacturing Workers
ACOEM ANNUAL AWARDS

Centennial Lifetime Achievement in Occupational and Environmental Medicine Award

Created in 1938, this award is the highest honor in occupational and environmental medicine. It recognizes an individual who has had a distinguished career in one or more disciplines of occupational medicine, environmental medicine, and/or environmental health.

Kent W. Peterson, MD, FACPM, FACOEM, is the recipient of this award for his leadership and outstanding career in the field of occupational and environmental medicine. Dr. Peterson is honored due to his more than 30 years of contributions to ACOEM, including his term as President from 1996-1997, and for his groundbreaking work in the area of workplace drug testing and as a national MRO expert particularly as Director of Medical Review Officer education for ACOEM, and as co-founder and Board member of the Medical Review Officer Certification Council (MROCC).

Centennial Award for Excellence in Education/Research in Occupational and Environmental Medicine

This lifetime achievement award is presented to an individual for significant contributions to academic excellence or research in the disciplines of occupational medicine, environmental medicine, and/or environmental health.

John D. Meyer, MD, MPH, FACOEM, receives this award for his distinguished and accomplished career as an educator and researcher, most recently as Director of the OM Residency Program at Mount Sinai School of Medicine, and previous positions directing occupational medicine residency programs. It also recognizes his work as director for the past 10 years of ACOEM’s Occupational Medicine Board Review course and his leadership as Director of the Residents Research Session at AOHC. In addition, Dr. Meyer is recognized for his research focused on reproductive hazards and the disparities in minority populations arising from work characteristics.

Centennial Health Achievement in Occupational Medicine Award

Created in 1948, this Award recognizes an ACOEM member for a specific, unique achievement in occupational and environmental medicine.

David M. Rempel, MD, MPH, FACOEM, is being recognized for his many achievements and contributions to the specialty of occupational and environmental medicine – in particular his research in peripheral nerve entrapment, work-related tendon disorders, hand biomechanics, and ergonomics. This award also recognizes his major contributions to the hand, wrist, and forearm chapter of the ACOEM Occupational Medicine Practice Guidelines.

Centennial Meritorious Service Award

This Award was established in 1945 to recognize an ACOEM member who has provided meritorious service to the College.

Michael J. Levine, MD, MPH, FACOEM, receives this award for his dedication and many years of support to ACOEM projects, specifically for his contributions in co-chairing the Private Practice Task Force and services on numerous committees. His contributions include revisions to the on-line Dr. Finder, support for the workers’ compensation coding project, and development of the compensation and benefits survey.
ACOEM ANNUAL AWARDS

Centennial Kammer Merit in Authorship Award

This award recognizes the most outstanding article/contribution published in JOEM during a given year. This year the JOEM Editorial Board and ACOEM Board of Directors have chosen to present the Kammer Award to the authors of an outstanding article.

The 2016 Kammer Merit in Authorship Award honors, Wayne N. Burton, MD, FACP, FACOEM, as lead author, Chin Yu Chen, PhD, Xingquan Li, MS, Alyssa B. Schultz, PhD, and Hannah Abrahamsson, MD, for their paper “The Association of Self-Reported Employee Physical Activity with Metabolic Syndrome, Health Care Costs, Absenteeism, and Presenteeism” which appeared in the September 2014 issue of JOEM. This research provides its focus on an important question, metabolic syndrome, which represents a significant and increasing health burden for society, and because it was rigorously designed and executed, well written, and produced results that have great potential for impact on the field.

ACOEM Outstanding Achievement Award

This award recognizes the work of committees, councils, sections and other groups of volunteers within ACOEM.

ACOEM Task Force on Reproductive Toxicology — Beth Baker; James Diaz; John Meyer; Melissa Hieb; Melissa McDiarmid — for revising the ACOEM guidance statement on Reproductive and Developmental Hazard Management

ACOEM Task Force on OSHA Beryllium Rule — Michael Fischman; Jonathan Borak; Lee Newman; James Seward; David Deubner — providing comments to OSHA

2016 AOHC Resident Scholarship Receipients

The goal of the AOHC Resident Scholarship Program is to assist qualified individuals in receiving a well-rounded residency education in occupational medicine by providing financial support to attend either a designated ACOEM course or AOHC and thereby expanding their educational offerings.

Shuchi Agarwal, MD, MPH; Wesley D. Boose, MD; Aletheia S. Donahue, MD; German L. Ellsworth, MD, MPH; Jeffrey R. Huth, MD, PhD; Amy Kerfoot, MD, MBI; Mellisa Pensa, MD; Andy Phillips, MD, BS; Yusef Sayeed, MD, MPH, COHC, CPH, MEng; Jeffrey Vogel, MD

2016 Resident Research Presentation Awards

Presenting authors listed. The abstracts below will be presented at Session 212 on Monday, April 11, 8:30am-12:00pm This session provides residents with a forum to present current and cutting-edge research.

Abstract 109: The Effect of Union Status on Injury Risk and Injury Severity in a Manufacturing Cohort
Khaled Abdulrahman Altassan, MD, MPH(C), Yale Occupational and Environmental Medicine Fellowship, New Haven, New Haven

Abstract 110: Comparison Of Urinary PAHs Among Firefighters And Asphalt Pavers
Theodore Aquino, DO, MBA, University of South Florida, Tampa, Tampa

Abstract 111: Work-related Injuries and Health-related Quality of Life Among U.S.Workers: a Longitudinal Study of a Population-based Sample
Basim Baragaba, MD, MPH, CIME, Johns Hopkins Bloomberg School of Public Health, Baltimore, Baltimore

Abstract 130: Are Workplace Psychosocial Factors Associated With Work-Related Injury in the U.S. Workforce? - National Health Interview Survey, 2010
Yvonne Farnacio, MD, MPH, Rutgers Robert Wood Johnson Medical School, Piscataway, Piscataway

Abstract 135: Health care utilization by migrant farm workers- Barriers and challenges.
Mary Gerges, MD, Meharry Medical College, Nashville, Nashville

Abstract 141: Obstructive Sleep Apnea-Hypopnea Syndrome Among Professional Drivers
Medhat Kalliny, MD, PhD, Meharry Medical College, NASHVILLE, NASHVILLE

Abstract 145: Spectrum of Lung Diseases in Deployers Returning from Iraq and Afghanistan
Siipa Dhoma Krefft, MD, University of Colorado Anschutz Medical Campus / Colorado School of Public Health, Aurora, Aurora

Abstract 170: Ecological and Transactional Model of Occupational Stress: Application to 9-1-1 Telecommunicators Coping with Next Generation Technology
Ann Tu, MD, MPH, University of Washington, Seattle, Seattle
NEW FELLOWS AND NEW BOARD MEMBERS

NEW FELLOWS – CLASS OF 2016

L. Kristian Arnold, MD, MPH, FACOEM
James D. Ausfahl, MD, MRO, FACOEM
Ebi R. Awosika, MD, MPH, FACOEM
Verne L. Backus, MD, MPH, FACOEM
Anthony C. Biascan, MD, FACOEM
Patricia Blackwell, MD, MPH, FACOEM
Melissa Anne Broadman, DO, MPH, MRO, FACOEM
Belisario R. Cabanilla, MD, MPH, FACOEM
Christine M. Cisneros, MD, MPH, FACOEM
Jeffrey E. Coe, MD, PhD, FACOEM
Craig W. Curtis, MD, FACOEM
David L. DeRegis, MD, FACOEM
Jennifer L. Eaton, MD, MPH, FACOEM
Robert J. Fitzpatrick, DO, MPH, FACOEM
Terence R. Fogwill, MD, MRO, FACOEM
Dale G. Garrett, MD, MPH, MRO, FACOEM
Trevor A. Gillmore, MD, MA, MRO, FACOEM
Jasminka Goldoni Laestadius, MD, PhD, FACOEM
Rebecca Guest, MD, MPH, FACOEM
William H. Heckman, MD, MPH, FACOEM
Ashwin M. Kansagra, MD, MPH, FACOEM
Francine S. Katz, DO, MPH, FACOEM
Ellen R. Kessler, MD, MPH, FACOEM
David P. King, MD, FACOEM
Luke E. Mease, MD, MPH, FACOEM
Donald S. Mehr, MD, FACOEM
Raul A. Mirza, DO, MPH, MS, FACOEM
Amir Mohammad, MD, MPH, FACOEM
Jesse H. Monestersky, DO, MPH, MS, FACOEM
Sudhir K. Nayer, MD, FACOEM
Adebisi I. Obafemi, MD, MS, MRO, FACOEM
Heather M. O'Hara, MD, MSPH, FACOEM
Samuel Peik, MD, MPH, FACOEM
Nancy V. Rodway, MD, MPH, MS, FACOEM
David R. Roomes, MD, FACOEM
William N. Rom, MD, MPH, FACOEM
Kenneth D. Rosenman, MD, FACOEM
Carine J. Sakr, MD, MPH, FACOEM
Warren B. Sayre, MD, MPH, MRO, FACOEM
Akbar Sharip, MD, MPH, FACOEM
Michael P. Shusko, MD, MPH, FACOEM
Dana Sparhawk, MD, MPH, FACOEM
Michael K. Sracic, MD, MS, FACOEM
Kia Lynn Swan-Moore, MD, MPH, FACOEM
Michelle Townsend-Bruce, MD, MSPH, FACOEM
Susan B. Upham, MD, MPH, FACOEM
Norbert L. Wagner, MD, PhD, FACOEM
Amir H. Wolfe, MD, MPH, MBA, FACOEM
Jean Q. Xiao, MD, MS, MSc, FACOEM
Eric M. Wood, MD, MPH, FACOEM
Andrew C. Yorgason, DO, MPH, FACOEM
Edward G. Zurad, MD, MRO, FACOEM

INCOMING BOD AND HOD OFFICERS AND MEMBERS

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President – James A. Tacci, MD, JD, MPH, FACOEM
President-Elect – Charles M. Yarborough, III, MD, MPH, FACOEM
Vice-President – William G. Buchta, MD, MPH, MS, FACOEM
Secretary/Treasurer – Beth A. Baker, MD, MPH, FACOEM
Immediate Past President – Mark A. Roberts, MD, MPH, PhD, FACOEM

Directors – 2014-2017
Karl Auerbach, MD, MS, MBA, FACOEM
Stephen A. Frangos, MD, MPH, FACOEM
Amanda C. Trimpey, MD, MPH, FACOEM

Young Physician Director – 2014-2017
Tanisha K. Taylor, MD, MPH, FACOEM

Directors – 2015-2018
Richard F. Johnson, MD, MPH, FACOEM
Paul J. Papanek, MD, MPH, FACOEM
Daniel G. Samo, MD, FACOEM

Directors – 2016-2019
Melissa A. Bean, DO, MBA, MPH, FACOEM
James W. Butler, MD, MPH, FACOEM
Jill A. Rosenthal, MD, MPH, MA, FACOEM

House of Delegates – 2016-2017
Nelson S. Haas, MD, MPH, MA, FACOEM
Douglas W. Martin, MD, MRO, FACOEM
Darryl F. Lesoski, MD, MPH, FACOEM
# AOHC 2016 ANCILLARY EVENTS (AS OF MARCH 18, 2016)

All events at Sheraton Grand Chicago unless otherwise noted

<table>
<thead>
<tr>
<th>Friday, April 8, 2016</th>
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<tbody>
<tr>
<td>9:00am-5:00pm</td>
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<tr>
<td>LEO Task Group</td>
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<tr>
<td>Illinois Board Room</td>
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<tr>
<th>Saturday, April 9, 2016</th>
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<tbody>
<tr>
<td>7:00am-9:00am</td>
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<tr>
<td>AOEC Breakfast</td>
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<td>Arkansas</td>
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<td>8:00am-12:00pm</td>
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<tr>
<td>House of Delegates</td>
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<tr>
<td>Chicago Ballroom 6</td>
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<td>8:00am-5:30pm</td>
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<tr>
<td>Residency Directors</td>
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<tr>
<td>Ohio</td>
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<td>9:00am-5:00pm</td>
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<tr>
<td>LEO Task Group</td>
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<tr>
<td>Illinois Board Room</td>
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<tr>
<td>9:30am-4:00pm</td>
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<tr>
<td>ACOEM Board of Directors</td>
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<tr>
<td>Lincoln Board Room</td>
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<tr>
<td>12:00pm-1:15pm</td>
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<tr>
<td>Academic Occupational Medicine Section</td>
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<tr>
<td>2:00pm -6:00pm</td>
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<tr>
<td>ABIME Physician Exam 2pm-6pm Non-physician 2:30pm-4pm</td>
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<tr>
<td>3:00pm-5:00pm</td>
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<tr>
<td>Practice Guidelines Meeting</td>
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<td>7:00pm</td>
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<tr>
<td>Corporate Medicine Section</td>
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<tr>
<td>7:30pm</td>
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<tr>
<td>HOD Ragtag Dinner</td>
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<tr>
<td>Offsite - Volare Restaurant</td>
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<tr>
<th>Sunday, April 10, 2016</th>
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<tbody>
<tr>
<td>7:00am-8:00am</td>
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<tr>
<td>New Member Orientation</td>
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<tr>
<td>Mayfair</td>
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<tr>
<td>7:00am-8:15pm</td>
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<tr>
<td>Health and Productivity Section</td>
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<tr>
<td>7:00am-11:00am</td>
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<tr>
<td>MROCC Exam (check-in begins at 7:00am)</td>
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<td>8:00am-4:00pm</td>
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<tr>
<td>Obesity Panel Meeting</td>
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<tr>
<td>Bridgeport</td>
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<tr>
<td>9:00am</td>
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<tr>
<td>ABPM Certification Exam registration begins at 9:00am)</td>
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<tr>
<td>12:00pm-1:15pm</td>
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<tr>
<td>Council of Scientific Advisors</td>
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<td>12:00pm-1:15pm</td>
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<tr>
<td>Transportation Section</td>
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<tr>
<td>Colorado</td>
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<tr>
<td>12:00pm-1:15pm</td>
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<tr>
<td>History and Archives Section</td>
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<td>12:00pm-1:30pm</td>
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<tr>
<td>Public Safety Medicine Section</td>
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<tr>
<td>8:30pm-10:00pm</td>
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<tr>
<td>Residents and Recent Graduates Section Meeting</td>
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# AOHC 2016 ANCILLARY EVENTS

(AS OF MARCH 18, 2016)

All events at Sheraton Grand Chicago unless otherwise noted

<table>
<thead>
<tr>
<th><strong>Monday, April 11, 2016</strong></th>
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<tbody>
<tr>
<td>7:00am-8:15am</td>
<td>Patient Satisfaction Workgroup</td>
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<td>12:00pm-1:15pm</td>
<td>New Fellows Luncheon</td>
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<td>12:00pm-1:15pm</td>
<td>TBI Panel</td>
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<td>12:00pm-1:15pm</td>
<td>International Section</td>
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<tr>
<td>12:00pm-1:15pm</td>
<td>Physicians/Pharmaceutical Industry Section</td>
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<tr>
<td>5:00pm-7:00pm</td>
<td>Work Fitness and Disability Section</td>
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<tr>
<td>5:00pm-7:00pm</td>
<td>Federal and Military Section</td>
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<tr>
<td>5:00pm</td>
<td>Residents and Recent Graduates Social Section</td>
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<tr>
<td>5:15pm-6:15pm</td>
<td>MOC Part IV Committee</td>
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<tr>
<td>6:00pm-8:30pm</td>
<td>Environmental Health Section</td>
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<tr>
<td>6:00pm</td>
<td>Past Presidents Dinner</td>
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<tr>
<td>7:00pm</td>
<td>Private Practice Section</td>
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<tr>
<td>7:00pm-9:00pm</td>
<td>Medical Center Occupational Health Section</td>
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<th><strong>Tuesday, April 12, 2016</strong></th>
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<tbody>
<tr>
<td>7:00am-8:15am</td>
<td>Physician Assistants &amp; Nurse Practitioners Section</td>
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<tr>
<td>12:00pm-1:15pm</td>
<td>Council on Education &amp; Academic Affairs</td>
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<tr>
<td>12:00pm-1:15pm</td>
<td>MRO Section</td>
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<tr>
<td>12:00pm-1:15pm</td>
<td>Underserved Occupational Populations Section</td>
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<tr>
<td>4:30pm – 6:00pm</td>
<td>Centennial Session: Awards Presentation, Special Speaker Phil Ponce Membership Meeting</td>
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<tr>
<td>6:00pm – 8:00pm</td>
<td>Centennial Reception</td>
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<tr>
<th><strong>Wednesday, April 13, 2016</strong></th>
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<tbody>
<tr>
<td>7:00am-8:00am</td>
<td>Council on Public Affairs</td>
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<tr>
<td>7:00am-8:00am</td>
<td>Council on OEM Practice</td>
</tr>
<tr>
<td>12:30pm-3:00pm</td>
<td>ACOEM Incoming Board of Directors</td>
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GENERAL CONFERENCE INFORMATION

ACOEM
Established in 1916, the American College of Occupational and Environmental Medicine (ACOEM) is the pre-eminent organization of occupational health professionals who champion the health and safety of workers, workplaces, and environments. Its mission is to provide leadership by educating health professionals and the public; stimulating research; enhancing the quality of practice; guiding public policy; and advancing the field of occupational and environmental medicine (OEM). In its leadership role, ACOEM sponsors educational activities for physicians and other health professionals, including courses and the annual spring AOHC.

AOHC 2016
The 2016 American Occupational Health Conference (AOHC) is ACOEM’s 101st Annual Meeting.

AOHC serves two fundamental purposes: it is the premier professional meeting for physicians and other health professionals who have an interest in the fields of occupational and environmental medicine (OEM); and it is the annual membership meeting for ACOEM’s members.

Educational Needs and Objectives
OEM is the medical specialty devoted to the prevention and management of occupational and environmental injury, illness, and disability, and the promotion of health and productivity of workers, their families, and communities.

ACOEM has identified core competencies in areas where the OEM-trained physician should strive to remain current and serve as a knowledgeable representative of the specialty. The ten core competencies are available at www.acoem.org

The ACOEM CME mission is to provide educational activities that enhance the professional capabilities related directly to the professional work of physicians practicing occupational and environmental medicine and (1) to promote physician lifelong and self-directed learning, (2) to improve worker/patient clinical outcomes, (3) to facilitate physician effectiveness and efficiency in carrying out professional responsibilities, and (4) to communicate the value of occupational and environmental medicine.

To address the educational needs of OEM physicians, AOHC is planned within the context of desirable physician attributes and aligned with the OEM core competencies.

AOHC content is designed to enhance physician competence and performance and to improve patient outcomes by providing learner-centered education in the most current issues relevant to the practice of OEM.

Upon completion of AOHC 2016, the learner should be able to:
• evaluate current research;
• analyze emerging issues in OEM; and
• exemplify effectiveness and efficiency in carrying out professional responsibilities.

Target Audience
AOHC is designed for physicians who specialize in or have an interest in OEM as well as for non-physicians, such as industrial hygienists, nurses, safety professionals, and environmental health specialists who are involved in the field. AOHC offers a variety of educational activities for participants new to OEM as well as for the experienced professional.

ACCM Accreditation Statement
“The American College of Occupational and Environmental Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.”

AMA Credit Designation Statement
“The American College of Occupational and Environmental Medicine designates this live activity for a maximum of 25.0 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.”

AAFP
This live activity, American Occupational Health Conference (AOHC), with a beginning date of April 10, 2016, has been reviewed and is accepted for up to 25.00 Prescribed credit(s) by the American Academy of Family Physicians. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

ABOHN
The American Board of Occupational Health Nurses may recognize AMA PRA Category 1 Credit(s)™ as applicable for the education requirements for certification by the ABOHN.
GENERAL CONFERENCE INFORMATION

ABPM
The majority AOHC sessions are eligible for ABPM MOC credits toward recertification with the American Board of Preventive Medicine. Those sessions are identified by “MOC.” The maximum number of ABPM MOC credits available for this educational activity is 25.0 and the course code is 1257.

Doctors of Osteopathy
This conference may be eligible for Category 2-A credit from the American Osteopathic Association.

Physician Assistants
AAPA accepts certificates of participation for educational activities certified for AMA PRA Category 1 Credit™ from organizations accredited by ACCME or a recognized state medical society. Physician assistants may receive a maximum of 25.0 hours of Category I credit for completing this program.

Attendees, particularly RNs, are encouraged to consult their respective certifying associations/agencies for the conversion of AMA PRA approved credit to other educational credit.

HOW TO OBTAIN PROOF OF YOUR EDUCATIONAL CREDITS

AMA PRA Category 1 Credit(s)™
In order to be awarded AMA PRA Category 1 Credit™, attendees should:
1. Complete the CME/MOC attendance verification form, checking the box for CME credit.
2. Return the form to the AOHC registration desk or to any ACOEM staff member. You may also fax or mail it to the ACOEM office.
3. Approximately 60 days after the conference, your credits will post to your ACOEM CME record.

To access a copy of your ACOEM CME transcript, please follow the instructions below:
1. Begin at our website: www.acoem.org
2. Select “MyACOEM LOG-IN” and log in using your e-mail address and password (please contact our Membership Department at 847-818-1800 if you are not aware of your log-in information. A default password was established for first time attendees).
3. Your MyACOEM page will be displayed
4. Select “myProfile” and you will see a link on the left-hand side to View My CME Transcript
5. Enter the date range that you would like your CME transcript to cover
6. Select “View Transcript”
7. Your transcript will be displayed and is ready to be printed

This service is available to both ACOEM members and non-members, physicians and non-physicians. Please note, ACOEM does not produce or mail CME certificates. Proof of CME credit should be obtained via the online transcript system. The transcript contains the same wording as a certificate would have - it is simply in a different format.

ABPM MOC Credit
In order to be awarded ABPM MOC credit, attendees should:
1. Complete the ABPM MOC self-assessment for the conference. The self-assessment is located near the AOHC registration area in the kiosks.
2. Complete the CME/MOC attendance verification form, checking the box for MOC credit. Be sure to list your answers on the back of the form, otherwise credit cannot be awarded!
3. Return the CME/MOC credit verification form to the AOHC registration desk or to any ACOEM staff member.
4. Credit will post to your ABPM MOC profile approximately 60 days after the conference.

Please note, ABPM MOC credits are not posted to your ACOEM CME transcript. Remember, we will be unable to process your MOC credits if you do not list the answers for the self-assessment on the back of the CME/MOC attendance verification form.

In order to avoid missing important information regarding their board certification requirements, diplomates are reminded to keep their contact information up-to-date with ABPM. To update your information, please call ABPM at 312-939-2276 or log on to theabpm.org.
GENERAL CONFERENCE INFORMATION

Evaluations – A Streamlined Evaluation Process
To help ACOEM continue to offer the most up-to-date educational experiences possible and to provide the conference planning committee with faster and more robust information for developing future content, AOHC evaluations can once again be completed quickly and easily on your desktop, laptop, or PDA through a service called Meeting Metrics.

At the end of each day during the conference, watch your e-mail for a link to evaluate that day’s sessions. Each one you complete automatically enters you for a chance to win a prize! Complete the session evaluations onsite using your device or one of the AOHC internet stations. Soon after the conference, the overall evaluation will arrive. Please complete the evaluation – your opinions are vital and will make next year’s conference even better. The committee awaits your input!

Disclaimer
The ideas represented in presentations at AOHC 2016 do not necessarily reflect ACOEM positions. ACOEM disclaims responsibility or liability for all products, services, or information presented at AOHC 2016. ACOEM does not endorse any product or service exhibited, nor necessarily support the content contained in the educational offerings.

Insurance/Liability
ACOEM cannot be held responsible for personal injury, loss, damage, accident to private property or additional expenses incurred as a result of delays or changes in air, rail, sea, road, or other services, strikes, sickness, weather, acts of terrorism, or any other cause. All participants are encouraged to make their own arrangements for health and travel insurance.

Disclosure Policy
As a provider accredited by the ACCME, ACOEM must ensure balance, independence, objectivity, and scientific rigor in all of its educational activities. In accordance with the Accreditation Council for Continuing Medical Education’s Standards for Commercial Support, all CME providers are required to disclose to the activity audience the relevant financial relationships of the planners, teachers, and authors involved in the development of CME content. An individual has a relevant financial relationship if he or she has a financial relationship in any amount occurring in the last 12 months with a commercial interest whose products or services are discussed in the CME activity content over which the individual has control. In the case of an individual for whom a conflict cannot be resolved, that individual shall not participate in the development or presentation of the CME activity.

Handouts
All handouts submitted by speakers as of February 26, 2016, were available to conference attendees via a secured area of ACOEM’s web site two weeks before the meeting and will continue to be available for at least two weeks post. Registrants will be able to access the site, allowing them to view and print all or any of the submitted handouts.

Flash Drive
Your conference registration materials include a flash drive that contains handouts received by February 26, 2016. We also included important information that you may wish to reference after AOHC (i.e. CME and MOC details).

SESSION INFORMATION

Program Changes
ACOEM cannot assume liability for any changes in the program due to external or unforeseen circumstances.

AOHC Resident Poster Presentations and Display
Resident posters will be on display for viewing beginning Sunday, April 10, located in the AOHC Exhibit Hall (Riverwalk Hall B). Poster authors will be available to discuss their research with attendees on Sunday, April 10 from 5:00pm-6:45pm.

Sessions
AOHC sessions offer focused presentations that cover critically chosen, cutting-edge subjects related to OEM competencies. These sessions typically include single or multiple presenters and can be one hour, 90 minutes, or 3 hours in length. Sessions are designed for OEM physicians and related professionals who practice in a variety of work settings.
Sessions are identified by tracks. The tracks are:

- OEM Clinical Practice
- Management and Administration in OEM
- OEM Education and Scientific Research
- Environmental Health and Risk Management
- Regulatory, Legal, Military, and Governmental OEM Practice

Late Comers – Quiet Please!
If you arrive at a session late, please be courteous to your fellow attendees and enter the room quietly, making sure that they door closes quietly behind you.

And a friendly reminder to all too please silence cell phones while sessions are being conducted.

C. O. Sappington Memorial Lecture
The Sappington Lecture serves as a forum from which to address major issues in the field of OEM. Raymond Fabius, MD with ABCHealth, LLC, Newton Square, PA will present this year’s lecture. Dr. Fabius will discuss, “The Next 100 Years: Transitioning from Risk Management and Occupational Health to Cultures of Health and Occupational Well-being.” It will be held during the AOHC Opening Session on Sunday, April 10 from 7:00pm-8:00pm.

Resident and Recent Graduate Friendly Sessions
Some sessions have been highlighted as “Resident and Recent Graduate Friendly.” These sessions, identified within the session description and in the listing below, will contain the highlights of fundamental principles and increased depth of OEM.

Sunday, April 10
Sessions: 099, 101, 103, 105, 107, 109, 114

Monday, April 11
Sessions: 207, 210, 211, 212, 216, 217, 222

Tuesday, April 12
Sessions: 301, 303, 307, 309, 312

Wednesday, April 13
Sessions: 404, 406

Worksite Visits
The following worksite visits are at capacity and we are unable to accept on-site registrations. Please note that pre-registration and an additional fee were required to attend. For those registered, please review the session description for departure information and attendance requirements:

Monday
800: Robert J. Quinn Fire Academy
801: Goodman Theatre

Buses will stage on convention entrance on the lobby level of the Sheraton. Please note, those who miss the bus will not be allowed to participate and no refunds will be given. Please see session descriptions for boarding times.

AOHC and Twitter
ACOEM uses Twitter to announce late-breaking news during AOHC. Follow AOHC on Twitter: https://twitter.com/aohc

Receive conference updates via RSS feeds and SMS text messages using your computer or mobile device. Connect with ACOEM! Post comments and pictures using #AOHC.

Learning Resources
We know you can’t be in two places at once, but that doesn’t mean you have to miss out on content. Most sessions will be recorded for sale and orders can be placed on-site and after AOHC. Stop by the Mobiltape desk in the ballroom foyer for details.

2016 AOHC Distance Learning Activity – More CME!
Earn credit for sessions that you were unable to attend in person at this year’s conference by completing the 2016 AOHC Distance Learning Activity. This activity will be available in summer 2016 and will require purchase and use of the AOHC 2016 conference recordings. Additional fees may apply for credit requested.

Speaker Designation
Speakers who are members of ACOEM are indicated with an asterisk (*) throughout this program. The College would like to take this opportunity to recognize their contributions to ACOEM.
Pre-Conference Courses
Pre-conference courses are designed to enrich participants’ understanding of concepts and issues related to OEM, giving physicians the knowledge necessary to sustain a competitive edge. Content is driven by research, the latest in regulatory issues, and the expertise of the faculty. Pre-registration is strongly encouraged and a separate registration fee is required.

ACOEM MEMBERSHIP INFORMATION/ SERVICE BOOTH
Located next to Registration, the Membership Booth is your one-stop shop for all things ACOEM! Visit the Membership Booth, where you can:
• Browse the ACOEM Bookstore for the latest books on OEM topics that are specifically tied to the Conference Sessions – everyone receives member pricing on books and merchandise!
• Learn how to connect with MyACOEM to maximize the benefits and resources available to you as an ACOEM member, including the Idea Marketplace™ and Knowledge Center.
• Make a contribution to the Occupational & Environmental Health Foundation (OEHF), enter to win a prize and don’t forget to wear your blinkie light during the conference to acknowledge your generous donation!
• Get social with ACOEM – learn how to connect with us via our social media outlets.
• View the Centennial website and share your story of how you became involved in OEM. Sign the statue and become a permanent part of the Centennial!
• Learn how to apply for Fellow status within ACOEM.
• Become educated on where to post an open position and/or your resume on ACOEM’s Career Center.
• Join as a new member*, renew your current membership and get your membership questions answered.

*Become a NEW MEMBER of ACOEM while at AOHC and receive $100 off of your member dues plus one free Section membership. Visit the Membership Booth to learn more!

ACOEM Message Center
Employers who have positions in OEM may post job descriptions on the bulletin board located near the AOHC Registration Desk. Messages may also be posted for conference attendees.

Internet Stations
Internet stations are available in the AOHC registration area for conference attendees.

ACOEM Annual Membership Meeting
ACOEM’s Annual Membership Meeting and Breakfast will take place on Tuesday, April 12 from 4:30pm-7:30pm during the special Centennial Celebration at Navy Pier. Highlights of the membership meeting will include introduction of new ACOEM officers and directors and installation of ACOEM’s new president.

This meeting and reception is open to any attendee who is registered for the full conference or who has a one-day conference registration for Tuesday. All ACOEM members may attend the membership meeting regardless of their AOHC registration status (meal ticket available for purchase for those members not registered for the conference).

As a meal function, pre-registration is required so that we may order the appropriate food quantities without waste. Guest tickets to the breakfast are available for $100 each. On-site registration deadline is Monday, April 11 at 10:00am.

Are you involved and/or interested in OEM in any capacity? Then ACOEM membership is right for you. Whether you are a physician, non-physician, certified physician assistant, licensed nurse practitioner, nurse, medical student, intern, resident or OEM administrator, ACOEM has the tools and resources to enhance your career and expand your professional network. Visit the Membership Booth to learn about your membership options.
ACOEM wishes to thank the AOHC 2016 exhibitors and acknowledge their part in contributing to the success of the conference. Attendees are invited to visit the exhibit hall during the following hours:

**Sunday, April 10, 2016**
5:00pm–6:45pm: Exhibit Hall Opening and Reception and Resident Abstract Poster Presentations

**Monday, April 11, 2016**
8:00 am-4:00 pm: Exhibit Hall Open
8:00am-8:30 am: Complimentary Continental Breakfast
11:45am-1:15pm: Complimentary Lunch

**Tuesday, May 5, 2015**
8:00am-11:00am: Exhibit Hall Open
8:00am-8:30 am: Complimentary Continental Breakfast

AOHC’s exhibits offer attendees the opportunity to learn about the latest developments in scientific research, pharmaceuticals, equipment, supplies, and medical technology. Time spent in the exhibit hall is as rewarding as attendance at a lecture. Only paid AOHC registrants or paid guest registrants with AOHC badges will be permitted in the exhibit hall.

In fairness to those who have rented exhibit space, it is not permitted to have recruiting devices such as posters, business cards, private hospitality suites, or any other recruiting medium in use during AOHC except by those who are officially listed as exhibitors. Employment agencies and their employees or representatives who wish to enter into recruitment efforts at AOHC may contact Mary Lunn, AOHC Exhibits Coordinator, at mlunn@acoem.org
Back by Popular Demand . . .
the DigiTech Lounge

What is DigiTech Lounge?
It’s a unique technology experience with experts available to demonstrate practical technology solutions and present hands-on experiences. Lounge staff have their fingers on the pulse of the tech industry and can discuss solutions for productivity, travel and other interests.

AOHC attendees will be able to ask the experts their specific questions or book one-on-one time to discuss those burning tech questions. The DigiTech team will be there to answer questions, and provide hands-on support for using the AOHC mobile app.

What can I learn at the DigiTech Lounge?
• How to create and use a Twitter handle
• How to evaluate your website
• How to improve your LinkedIn profile or company page
• How to go paperless with your tablet
• How to evaluate and choose new hardware or devices
• How to... (insert your question here!)

The DigiTech Lounge will be located in the Chicago Ballroom Foyer near registration. Experts will be available all day Sunday, Monday, and Tuesday, as well as Wednesday morning.

CONTACT INFORMATION

ACOEM
25 Northwest Point Blvd., Suite 700
Elk Grove Village, IL  60007
Telephone: 847-818-1800
Fax (Registration): 847-818-9265
E-mail: registration@acoem.org

Conference Management
Joyce Paschall, CAE, CMP, Director of Education
E-mail: jpaschall@acoem.org

Mary Lunn, Conference & Exhibits Coordinator
E-mail: mlunn@acoem.org

Jane Hagen, Registrar and Course Coordinator
E-mail: jhagen@acoem.org

MEETING HOTEL

Conference Location
Sheraton Grand Chicago
301 East North Water Street
Chicago, IL 60611

Garage self-parking at the Sheraton Grand Chicago $65 per day, plus tax. ACOEM does not have any special parking discounts available.

About Chicago
Tuesday, April 12, 2016

Session 330: Special Centennial Event – Session and Reception at Navy Pier
CME/MOC: 1.0
Celebrate ACOEM’s 100th anniversary with your colleagues; this event is not to be missed!
NOTE: Your AOHC name badge is required for bus transportation and for entry at Navy Pier.

Schedule
3:15 pm – 4:15 pm
Buses depart from Sheraton to Navy Pier. Buses will circulate between Navy Pier and the Sheraton Grand Chicago until 8:15 pm LAST BUS DEPARTS NAVY PIER AT 8:15 PM

4:30 pm – 6:00 pm
Centennial Session – AON Grand Ballroom at Navy Pier
• ACOEM Awards Presentation
• Special Address: Phil Ponce, award-winning journalist
• Membership Meeting to include introduction of new ACOEM officers and directors and remarks from the outgoing and incoming presidents.

6:00 pm – 8:00 pm
Centennial Reception – Lakeview Terrace at Navy Pier

Featuring breathtaking views of both Lake Michigan and the Chicago Skyline, Lakeview Terrace provides a one-of-a-kind indoor setting to celebrate and recognize ACOEM’s centennial year. Food, drink, entertainment and fun are all on tap for you to enjoy, along with a few surprises. Happy birthday, ACOEM – you are 100 years old and looking great!

Additional Information
The annual membership meeting will be conducted during the Centennial Session. The Centennial Reception is included with AOHC registration. Guests may attend for $100 with advance purchase on a space-available basis. Transportation provided between the Sheraton and Navy Pier beginning at 3:15 pm and continuing until 8:15 pm LAST BUS DEPARTS NAVY PIER AT 8:15 PM Buses will depart the Sheraton from the convention entrance on the lobby level of the hotel, and deliver/pick up from Navy Pier at Entrance 1. If you choose to drive to Navy Pier, use East Parking Entrance 2 and park near door 11. Parking costs vary by season. If taking a taxi, asked to be dropped off at Entrance 1, or at the front of the Pier if you have time to spare and want to walk back to the event space. If you choose to walk from the Sheraton to Navy Pier, be sure to have comfortable shoes! It is just under one mile to the front (west) end, the pier is a half-mile long… and our events are at the far (east) end.

ON-SITE REGISTRATION INFORMATION/ NAME BADGES

Registration is required for all persons attending the conference, worksite visits, or other educational or social activities.

The AOHC Registration Desk will be located at the Sheraton Grand Chicago and will be open from Saturday morning, April 10 to Wednesday, April 13 at 12:30pm for pickup of conference badges, schedules, conference materials, and additional registration and conference information.

NAME BADGES ARE REQUIRED FOR ADMITTANCE TO ALL AOHC EVENTS AND MUST BE WORN AT ALL TIMES DURING THE CONFERENCE.
General Conference Information

Full Conference Registration
Full Conference Registration admits you to general and concurrent sessions. Additional fees are required for worksite visits and other, certain meal sessions, social events, and other activities as indicated on the conference registration form. Admission to the Wednesday membership meeting and breakfast, while free to conference registrants, requires registration by Monday, April 11 10:00am, to allow meal arrangements to be made.

One-day Conference Registration
One-day Registration admits you to concurrent sessions for the day in which you are registered only. Additional fees are required for worksite visits and other activities as indicated on the conference registration form.

Pre-conference Courses
Enrollment is limited. Course registration is separate from conference registration. Lunches are not included.

Guest Tickets
A registered attendee may purchase a ticket for a personal guest by stopping by the onsite AOHC registration desk or on the pre-registration form. Guest tickets may still be available for the following activities:

- Exhibit Hall Opening Reception $60
- Special Centennial Event at Navy Pier $100

Please note: business colleagues, friends, and family members will not be allowed to enter educational offerings or session rooms without the advance arrangement of AOHC management.

ACOEM Federal ID#
The federal employers identification number (FEIN) for ACOEM is 36-3593614. Some attendees may need this information when requesting funds for payment of conference fees from their employer.

ACOEM Membership Information
Membership information is available by calling the Membership Department at 847/818-1800, ext. 300, or by visiting the ACOEM web site at www.acoem.org or stop by the Membership booth!

Special Needs – ADA
AOHC complies with the Americans with Disabilities Act. Please contact us if you have a disability requiring accommodations or to inform us of any dietary restrictions.

Consent to Use of Photographic Images
Registration and attendance at, or participation in, ACOEM meetings and other activities constitutes an agreement by the registrant to ACOEM’s use and distribution, both now and in the future, of the registrant or attendee’s image or voice in photographs, videotapes, electronic reproductions and audio tapes of such events and activities.

Registrant Mailing List
Exhibitors are an important part of the conference experience. Even if you don’t use particular exhibitors’ products, their participation supports necessary conference costs which helps offset your registration fee and allows ACOEM to provide a better conference experience for you.

The main benefit for exhibitor participation is access to you – onsite as well as before and after the conference. We provide exhibitors with a list of registrants for their use in contacting you to encourage you to visit their booth. Some offer discounts in their promotional message – another benefit to you. Exhibitors are limited to emailing registrants once before and once after the conference and are not allowed to add your information to their contact database for use beyond AOHC 2016. We appreciate your understanding and support of this common conference practice.
GENERAL CONFERENCE INFORMATION

Download the AOHC APP!
Download the official AOHC mobile app to enhance your onsite experience! This complimentary app is now available for free download and the password is Chicago16.

Here are some key benefits you will have access to when you install the app:

• View the full event schedule sorted by day, speaker, track and type of event
• Connect and exchange contact details with other attendees
• Follow the event on Twitter at #AOHC directly from the app
• Find session and exhibitor locations with maps of exhibit halls and session rooms
• See details about all of the exhibitors and sponsors
• Catch notifications from ACOEM about conference activities and updates, pushed directly to your device

APP Technical Support
Technical support is available Monday – Friday (9:00 am – 9:00 pm EST) at 888.889.3069, select option 1 or support@cvent.com. If contacting the support team via email, please include the device type, software version, and full detail about the issue they are experiencing.
Disclosure Policy
As a sponsor accredited by the ACCME, ACOEM must ensure balance, independence, objectivity, and scientific rigor in all of its educational activities. In accordance with the Accreditation Council for Continuing Medical Education’s Standards for Commercial Support, all CME providers are required to disclose to the activity audience the relevant financial relationships of the planners, teachers, and authors involved in the development of CME content. An individual has a relevant financial relationship if he or she has a financial relationship in any amount occurring in the last 12 months with a commercial interest whose products or services are discussed in the CME activity content over which the individual has control. Relationship information appears below:

All faculty are reminded that in addition to their disclosures listed here, that they are to verbally announce their disclosures (or lack thereof) at the beginning of their presentation.

Khafagy Abdullah*, MD, MPH
University of California San Francisco, Division of Occupational and Environmental Medicine, San Francisco, CA
Session(s): Resident Poster 142

Philip Adamo*, MD, MPH, FACOEM
Bayside Health, Pittsfield, MA
Session(s): 301
Disclosure: No relevant financial relationships

Zakaria Alabdulwahab*, MD
University of Arizona, Tucson, AZ
Session(s): Resident Poster 102

Kifah Habib Alfulayw*, MD
University of Arizona, Tucson, AZ
Session(s): Resident Poster 103

Sukainah Saeed ALHazim*, MD
University of Arizona, Tucson, AZ
Session(s): Resident Poster 104

Hanan Alruhiaman*, MD
University of Arizona, Tucson, AZ
Session(s): Resident Poster 106

Khaled Abdurrahman Altassan*, MD, MPH(C)
Yale Occupational and Environmental Medicine Fellowship, New Haven, CT
Session(s): 212
Disclosure: No relevant financial relationships

Abdulrazag Al-Salameen*, MD
University of Arizona, Tucson, AZ
Session(s): Resident Poster 107

Zainab Redha AlShaban*, MD
University Of Arizona, Tucson, AZ
Session(s): Resident Poster 108

Jennifer Rebecca Amani*, MD, MPH
University of Texas, Houston, TX
Session(s): 211
Disclosure: No relevant financial relationships

Theodore Aquino*, DO, MBA
University of South Florida, Tampa, FL
Session(s): 212
Disclosure: No relevant financial relationships

L. Kristin Arnold*, MD
ArLac Health Services, Lexington, MA
Session(s): 310
Disclosure: No relevant financial relationships
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Pulse Occupational Medicine, Greece, NY  
Session(s): 219, 407  
Disclosure: No relevant financial relationships

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Dow Chemical Company, Midland, MI  
Session(s): 103, 120  
Disclosure: No relevant financial relationships

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Army Public Health Center, Aberdeen Proving Ground, MD  
Session(s): 402  
Disclosure: No relevant financial relationships

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Canadian Pacific Railway, Minneapolis, MN  
Session(s): 221  
Disclosure: No relevant financial relationships

Basim Baragaba*, MD, MPH, CIME  
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Session(s): 212  
Disclosure: No relevant financial relationships

Deborah N. Barbeau*, MD, PhD, MSPH  
Harvard T.H. Chan School of Public Health, Boston, MA  
Session(s): Resident Poster 112

Amy J. Behrman*, MD, FACOEM, FACP  
University of Pennsylvania, Philadelphia, PA  
Session(s): 406  
Disclosure: No relevant financial relationships

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Hand to Shoulder Associates, Arlington Heights, IL  
Session(s): 216, 222  
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Raphael Carvalho Biscaro*, BS  
Faculdade de Medicina de Jundiai, Jundiaí/ São João da Boa Vista, SP Brazil  
Session(s): Resident Poster 114

Brad Black  
Center for Asbestos Related Disease, Libby, MT  
Session(s): ePoster 205

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University of California, San Francisco, CA  
Session(s): 207  
Disclosure: No relevant financial relationships

Robert C. Blink*, MD, MPH, FACOEM  
Worksite Partners Medical Group, Inc., San Francisco, CA  
Session(s): 208  
Disclosure: No relevant financial relationships

Clare Bonnema  
American Board of Preventive Medicine, Chicago, IL  
Session(s): 104, 107  
Disclosure: No relevant financial relationships

Wesley D. Boose*, MD  
USUHS, Bethesda, MD  
Session(s): Resident Poster 115

Mark Boquet*, MD, MPH, FACOEM  
Dow Chemical Company, Plaquemine, LA  
Session(s): 407, Program Planning Committee Member  
Disclosure: No relevant financial relationships

David M. Boren*, MD  
University of Utah, Salt Lake City, UT  
Session(s): Resident Poster 116

Melissa Bean*, DO, MBA, MPH, FACOEM  
Coventry, Hazelwood, MO  
Session(s): 217  
Disclosure: Coventry, a Division of Aetna (Employee)
FACULTY INDEX AND DISCLOSURE INFORMATION

Robert M. Bourgeois*, MD, MPH, FACOEM
Bourgeois Medical Clinic, Morgan City, LA
Session(s): 101, 305, Program Planning Committee Member
Disclosure: No relevant financial relationships

Barbara I. Braun, PhD
The Joint Commission, Oakbrook Terrace, IL
Session(s): 223
Disclosure: No relevant financial relationships

Ronda Brewer McCarthy*, MD, MPH, FACOEM
City of Waco Employee Health Services, University of Pennsylvania, Waco, TX
Session(s): 105, 303
Disclosure: No relevant financial relationships

Lisa M. Brosseau, ScD, CIH
University of Illinois, Chicago, IL
Session(s): 223
Disclosure: No relevant financial relationships

Marie T. Brown, MD, FACP
American College of Physicians, Chicago, IL
Session(s): 401
Disclosure: No relevant financial relationships

Susan Buchanan*, MD, MPH
University of Illinois, Chicago, IL
Session(s): 221, 321
Disclosure: No relevant financial relationships

William George Buchta*, MD, MPH, MS, FACOEM
Mayo Clinic, Rochester, MN
Session(s): 202, 406
Disclosure: No relevant financial relationships

Lawrence D. Budnick*, MD, MPH, FACOEM
Rutgers New Jersey Medical School, Newark, NJ
Session(s): 406
Disclosure: No relevant financial relationships

William B. Bunn*, MD, MPH, JD, FACOEM
Medical University of South Carolina, Hilton Head Island, SC
Session(s): 206
Disclosure: No relevant financial relationships

Benjamin Scott Burris*, MD
UT Northeast Occupational Medicine Residency, Tyler, TX
Session(s): Resident Poster 117

Wayne N. Burton*, MD, FACOEM, FACP
American Express, New York, NY
Session(s): 320
Disclosure: No relevant financial relationships

James W. Butler*, MD, FACOEM
Orthopedic Associates, Evansville, IN
Session(s): 310
Disclosure: No relevant financial relationships

Teresa S. Calhoun*
American Chemistry Council Phosgene Panel, Research Triangle Park, NC
Session(s): ePoster 206

William H. Cann*, MD, MPH
University of Washington, Seattle, WA
Session(s): Resident Poster 118

Yohama Caraballo-Arias, MD
Universidad Central de Venezuela, Caracas, Distrito Federal, Venezuela
Session(s): ePoster 207, ePoster 208

Jason Mark Carlton, JD
Gitto & Niefer, LLP, Binghamton, NY
Session(s): 205
Disclosure: No relevant financial relationships

Linda Carter Batiste, JD
Job Accommodations Network, Morgantown, WV
Session(s): 218
Disclosure: No relevant financial relationships

Garson M. Caruso*, MD, MPH, FAADEP, FACOEM
Garson M. Caruso, MD, MPH, PA, Mechanicsburg, PA
Session(s): 311
Disclosure: No relevant financial relationships

Catherine Champi, CRNP, MSN, BC
Geisinger Health System, Wilkes Barree, PA
Session(s): Program Planning Committee Member
Disclosure: No relevant financial relationship
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CSI Solutions, LLC, Bethesda, MD
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Disclosure: No relevant financial relationships

Cammie Chaumont Menendez, PhD, MPH, MS
NIOSH/CDC, Morgantown, WV
Session(s): 315
Disclosure: No relevant financial relationships

Philip Cheng, PhD
Henry Ford Health System, Detroit, MI
Session(s): 309
Disclosure: No relevant financial relationships

Andy Chern*, MD
Uniformed Services University, Bethesda, MD
Session(s): Resident Poster 120

Timothy Hyunchan Cho*, MD, FS
U.S. Army Aerospace and Occupational Medicine Residency, Fort Rucker, AL
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Jennifer H. Christian*, MD, MPH, FACOEM
Webility Corporation, Wayland, MA
Session(s): 311, 319
Disclosure: No relevant financial relationships

Mark Ciagne*, MD
HealthPartners, St. Paul, MN
Session(s): 122

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Managed Care Advisors, Inc., Bethesda, MD
Session(s): 208, 217, 307, 319, Program Planning Committee Member
Disclosure: No relevant financial relationships

Robert A. Cohen, MD, FACP
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Session(s): 302
Disclosure: No relevant financial relationships

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Session(s): 115
Disclosure: No relevant financial relationships

Daniel J. Conti, PhD
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Session(s): 113
Disclosure: No relevant financial relationships

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MEDICHEM, Centurion, South Africa
Session(s): 403
Disclosure: No relevant financial relationships

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IMCS Group, Inc., West Palm Beach, FL
Session(s): 316
Disclosure: No relevant financial relationships

Corey M. Cronrath*, DO, MPH
US Army, Pensacola, FL
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Fabrice Czarnecki*, MD, MA, MPH, FACOEM
Transportation Security Administration, Arlington, VA
Session(s): 310, 800
Disclosure: No relevant financial relationships

Bethany Ann Davidson
Army Public Health Center, Aberdeen Proving Ground, MD
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Disclosure: No relevant financial relationships

Brandon Dawkins*, MD
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Session(s): Resident Poster 124

Deidre M. Defoe*, MD, MPH
Annandale, VA
Session(s): 105
Disclosure: No relevant financial relationships

Cristina Demian*, MD, MPH
University of Rochester Medical Center/Finger Lakes Occupational Health Services, Rochester, NY
Session(s): ePoster 210
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<td>David L. DeRegis*&lt;sup&gt;†&lt;/sup&gt;, MD, MPH</td>
<td>Ithaca, NY</td>
<td>407, Program Planning Committee Member</td>
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<tr>
<td>James H. Diaz*&lt;sup&gt;†&lt;/sup&gt;, MD, MHA, MPH, DrPH, FACOEM</td>
<td>LSU Health Sciences Center, New Orleans, LA</td>
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<tr>
<td>Juan C. Diaz*&lt;sup&gt;†&lt;/sup&gt;, MD</td>
<td>US ARMY Uniformed Services University, Bethesda, MD</td>
<td>Resident Poster 125</td>
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<tr>
<td>Katelynn E. Dodd, MPH</td>
<td>National Institute for Occupational Safety and Health (NIOSH), Centers for Disease Control and Prevention (CDC), Morgantown, WV</td>
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<tr>
<td>Aletheia Donahue*&lt;sup&gt;†&lt;/sup&gt;, MD</td>
<td>Mount Sinai Department of Occupational and Environmental Medicine, New York, NY</td>
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<td>Brent C. Doney, PhD, MS, MPH, CIH</td>
<td>NIOSH/CDC, Morgantown, WV</td>
<td>ePoster 211</td>
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<td>John W. Downs*&lt;sup&gt;†&lt;/sup&gt;, MD, MPH, FACP</td>
<td>US Army, Fort Campbell, KY</td>
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<td>Myles Druckman*&lt;sup&gt;†&lt;/sup&gt;, MD</td>
<td>International SOS, Trevose, PA</td>
<td>201, 321</td>
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<td>Daniel Patrick Dunham, MD, FACP</td>
<td>Rush University Medical Center, Chicago, IL</td>
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<tr>
<td>Joyce Edmondson, RN</td>
<td>Veterans Health Administration, Baltimore, MD</td>
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<tr>
<td>Parvaneh Ehsanzadeh, MD, MPH</td>
<td>University of Texas, Houston, TX</td>
<td>Resident Poster 127</td>
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<tr>
<td>Barry S. Eisenberg*&lt;sup&gt;†&lt;/sup&gt;, CAE</td>
<td>American College of Occupational and Environmental Medicine (ACOEM), Elk Grove Village, IL</td>
<td>301, ACOEM Staff</td>
<td>No relevant financial relationships</td>
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<tr>
<td>LCDR Judith Eisenberg*&lt;sup&gt;†&lt;/sup&gt;, MD, MS, FACEP</td>
<td>NIOSH, Cincinnati, OH</td>
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<tr>
<td>Mohamed Elhelali Nasredin Elhelali Ibrahim; PhD, MSc., MD</td>
<td>King Abdulaziz Medical City - Mansoura University, Egypt, Riyadh, Riyadh, Saudi Arabia</td>
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<tr>
<td>German L. Ellsworth*&lt;sup&gt;†&lt;/sup&gt;, MD, MPH</td>
<td>University of Utah Rocky Mountain Center for Occupational and Environmental Health, Salt Lake City, UT</td>
<td>Resident Poster 128</td>
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<tr>
<td>Mehmet Erdem Alagüney, MD</td>
<td>Hacettepe University, Faculty of Medicine, Department of Occupational Medicine, Ankara, Turkey</td>
<td>202, ePoster 203</td>
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<tr>
<td>Michael Erdil*&lt;sup&gt;†&lt;/sup&gt;, MD, FACOEM</td>
<td>OEHN/UCHC, Marlborough, MA</td>
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<tr>
<td>Stephanie Estala*&lt;sup&gt;†&lt;/sup&gt;, DNP, RN, FNP-BC</td>
<td>Chevron Corporation, Houston, TX</td>
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Raymond Fabius*, MD  
AB3Health, LLC, Newton Square, PA  
Session(s): 100  
Disclosure: Harvard School of Public Health (Honorarium); HealthNEXT (Stock Shareholder/Co-Founder); HealthRight, Carnary Health, Claritas Mindsciences (Other-Advisory Board)

Wigdan Hassan Eltayeb Farah, MBBS  
Mayo Clinic, Rochester, Minnesota  
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CAPT Margaret S. Filios, MSc, BSN, USPHS  
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Session(s): 118  
Disclosure: No relevant financial relationships

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Session(s): 212  
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Session(s): 313
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Disclosure: No relevant financial relationships

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Disclosure: No relevant financial relationships

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Session(s): Resident Poster 136

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Session(s): 303, 307
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Session(s): 105
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Tee Guidotti*, MD, MPH, FFOM, FRCPC, FACOEM
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Gretchen C. Guzek*, MD, MPH
Yale Occupational and Environmental Medicine Fellowship Program, Yale University, New Haven, CT
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Nelson S. Haas*, MD, MPH, MA, FACOEM
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Philip T. Hagen*, MD
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Thomas Hales*, MD, MPH, FACOEM
NIOSH, Cincinnati, OH
Session(s): 310
Disclosure: No relevant financial relationships

Philip Harber*, MD, MPH, FCCP, FACOEM
University of Arizona, Tucson, AZ
Session(s): 119, 223
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<tr>
<td>Deanna K. Harkins, MD, MPH</td>
<td>Army Public Health Center, Aberdeen Proving Ground, MD</td>
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<tr>
<td>Jeffrey S. Harris*, MD, MPH, MBA, FACOEM</td>
<td>The Permanente Medical Group, Mill Valley, CA</td>
<td>404</td>
<td>No relevant financial relationships</td>
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<tr>
<td>Ryan Harris*, MD</td>
<td>UT Health Northeast, Tyler, TX</td>
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<td>Robert Harrison*, MD, MPH</td>
<td>University of California, San Francisco, CA</td>
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<td>Natalie P. Hartenbaum*, MD, MPH, FACOEM</td>
<td>OccuMedix, Dresher, PA</td>
<td>101, 102, 108, 116, 210, 219, 307, Program Planning Committee Chair</td>
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<tr>
<td>Todd G. Hastings*, DO</td>
<td>Uniformed Services University of the Health Sciences, Bethesda, MD</td>
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<td>Kurt T. Hegmann*, MD, MPH, FACOEM</td>
<td>University of Utah Rocky Mountain Center, Salt Lake City, UT</td>
<td>210, 309, 404</td>
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<tr>
<td>Tanis Hernandez, MSW, LCSW</td>
<td>Center for Asbestos Related Disease, Libby, MT</td>
<td>ePoster 216</td>
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<tr>
<td>Richard JL Heron*, MD, FRCP, FACOEM</td>
<td>BP International, Sudsbury on Thames, England</td>
<td>213, 319, 403</td>
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<td>James A. Hill, MD</td>
<td>Northwestern University Feinberg School of Medicine, Chicago, IL</td>
<td>216, 222</td>
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<tr>
<td>Stella E. Hines*, MD, MSPH</td>
<td>University of Maryland-Baltimore School of Medicine, Baltimore, MD</td>
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<td>Ryan Harris*, MD</td>
<td>UT Health Northeast, Tyler, TX</td>
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<td>Natalie P. Hartenbaum*, MD, MPH, FACOEM</td>
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<td>101, 102, 108, 116, 210, 219, 307, Program Planning Committee Chair</td>
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<td>Kurt T. Hegmann*, MD, MPH, FACOEM</td>
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Fikry W. Isaac*, MD, MPH, FACOEM
Johnson & Johnson, New Brunswick, NJ
Session(s): 320
Disclosure: No relevant financial relationships

Elizabeth A. Jennison*, MD, MPH, MBA, FACOEM
Honeywell, Morrisstown, NJ
Session(s): 320
Disclosure: No relevant financial relationships

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Session(s): 215
Disclosure: No relevant financial relationships

Allison L. Jones*, MD, MS, FACOEM
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William Judge, JD, LLM
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Session(s): 114
Disclosure: No relevant financial relationships

Stefanos N. Kales*, MD, MPH, FACP, FACOEM
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Session(s): 309
Disclosure: No relevant financial relationships

Medhat Kalliny*, MD, PhD
Meharry Medical College, NASHVILLE, TN
Session(s): 212
Disclosure: No relevant financial relationships

Edward Andrew Kapp, PhD, CSP, CHMM
Underwriters Laboratories, Inc., Northbrook, IL
Session(s): 224
Disclosure: No relevant financial relationships

Gregory D. Kearney*, DrPH, MPH
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Disclosure: No relevant financial relationships

Denece O. Kesler*, MD, MPH, FACOEM
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Disclosure: No relevant financial relationships

Mariah Kieffer
South Dakota State University (work done as a summer intern at Mayo Clinic), Brookings, SD
Session(s): ePoster 220

Ikechi Konkwo*, MBBS, MPH
University of Rochester Medical Center, Rochester, NY
Session(s): Resident Poster 143, 144

Gu Ja Kook
CDC/NIOSH, Morgantown, WV
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Michael J. Kosnett, MD, MPH
Colorado School of Public Health, Denver, CO
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Disclosure: LivWell (Consultant)

Allen Kraut, MD, FRCPC
University of Manitoba, Winnipeg, MB, Central African Republic
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Silpa Dhoma Krefft*, MD
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Disclosure: No relevant financial relationships

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NIOSH/CDC, Morgantown, WV
Session(s): ePoster 222

Michael Kulczycki, MBA, FASAE
The Joint Commission, Oakbrook Terrace, IL
Session(s): 215
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Zachary Landman*, MD
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Johan Lane, MD, FACP
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Maria C. Lanzi*, MS, MPH, APN-BC, COHN-S
MCL Global Health, LLC, Hamilton, NJ
Session(s): 406
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US Navy Bureau of Medicine and Surgery, Falls Church, VA
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Disclosure: No relevant financial relationships

Christopher Lee*, MD
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Session(s): Resident Poster 147

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Disclosure: No relevant financial relationships

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Xianling Liu*, MD, PhD, MSPH
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Ronald Loeppke*, MD, MPH, FACOEM
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Kevin Loh*, DO, MPH
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W. Greg Lotz, PhD, Captain, USPHS
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Session(s): 306
Disclosure: No relevant financial relationships

Thomas D. Louwers*, MD
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Session(s): Resident Poster 151
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Unity Point Clinic - Occupational Medicine, Sioux City, IA  
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Disclosure: No relevant financial relationships

Jacek M. Mazurek, MD, MS, PhD  
CDC, NIOSH, Morgantown, WV  
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Katie McBee, DPT, MS, OCS, CEAS  
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Melissa A. McDiarmid*, MD, MPH, DABT, FACOEM  
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Session(s): 221  
Disclosure: No relevant financial relationships

Robert K. McLellan*, MD, MPH, FAAFP, FACOEM  
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Disclosure: No relevant financial relationships

Tracy McNew, LPN, MPA  
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Session(s): 105  
Disclosure: No relevant financial relationships

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Session(s): 218  
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Session(s): 212, 213, 221  
Disclosure: No relevant financial relationships

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Disclosure: No relevant financial relationships

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EXHIBIT HALL HOURS & HIGHLIGHTS

Sunday, April 10
5:00 pm – 6:45 pm
AOHC Exhibit Hall Opening Reception
& Resident Abstract Poster Presentations

Monday, April 11
8:00 am – 4:00 pm
Complimentary Breakfast
Complimentary Lunch (12:00 pm)
Refreshment Breaks

Tuesday, May 5
8:00 am – 11:00 am
Complimentary Breakfast
Refreshment Breaks

HOW TO MAKE THE MOST OF YOUR TIME IN THE EXHIBIT HALL

Review the Company/Organization Descriptions that are provided in this guide. Each exhibitor has summarized the resources, products and services they offer.

Mark the Exhibitors that you would most like to visit, ensuring your time in the hall remains focused on your goals while attending AOHC.

Keep an Open Mind while you’re in the exhibit hall. Take a minute to speak with a company or organization you’re unfamiliar with – just because you don’t use their product or service today, doesn’t mean you won’t need them tomorrow.

The presence of commercial exhibits and/or sponsors at AOHC does not imply endorsement by ACOEM.
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Booth #225

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ABC Spirometry Training, LLC
Booth #108

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American Board of Preventive Medicine
Booth #311

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www.theabpm.org

The American Board of Preventive Medicine certifies physicians in the specialties of Aerospace Medicine, Occupational Medicine, and Public Health and General Preventive Medicine, as well as the subspecialties of Clinical Informatics, Medical Toxicology, and Undersea and Hyperbaric Medicine. The ABPM is one of the 24 Member Boards of the American Board of Medical Specialties (ABMS).
Established since 1935, Amplivox are proven specialists with complete global solutions to meet the occupational/worksplace health screening requirements for all operations from single operators to multinational and public sector organizations. The current range of audiometers, spirometers and vision screeners combine technology, reliability and ease of use. Amplivox products are supplied on a global basis and can be used for both static and mobile requirements as well as link into various EMR systems. In addition Amplivox supports/calibrates equipment and can offer tailor made training courses that meet many international standards.

Aureus Medical Group
Booth #405

13609 California Street
Omaha, NE 68154
866-795-6650
physicians@aureusmedical.com
www.aureusmedical.com

Aureus Medical is a nationwide leader in physician staffing and recruitment, serving the direct hire needs of healthcare organizations. With more than 30 years of medical staffing experience, our consultative, results-focused approach, extensive network, and superior vetting process are complemented by service that’s personal, professional, and responsive.

Automated Healthcare Solutions
Booth #305

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Miramar, FL 33027
Melissa Goetze
786-207-4363
mgoetze@ahcs.com
www.ahcs.com

Our ezDispense Workers Compensation medication dispensing program allows your patient to receive medications while in your office. Our proprietary software ensures the practice remains compliant while capturing ancillary revenue.

Benson Medical Instruments Co.
Booth #201

310 Fourth Avenue, S., Suite 5000
Minneapolis, MN 55415
David Mayou
612-827-2222
sales@bensonmedical.com
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Seamless solutions means seamlessly integrated systems for occupational health compliance that are more powerful and easier to use than others. Come see why the CCA-200mini Plus Audiometer is the leading audiometer for occupational health programs, and why the new CCS-200 Plus Spirometer received an A rating from our users. Companies that integrate the audiometer and spirometer get advantages of consistent operation and support, and do not need to enter duplicate information in two systems because they share the same database. Benson Medical Intruments Co. designs and manufactures audiometers, spirometers, and software to help companies manage their hearing conservation and occupational spirometry programs.
ALPHABETICAL LISTING OF EXHIBITORS

Center for Asbestos Related Disease (CARD)
Booth #502

214 East 3rd Street
Libby, MT 59923
Dusti Thompson
406-293-9274
info@libbyasbestos.org
www.libbyasbestos.org

The Center for Asbestos Related Disease (CARD) is a non-profit specialty asbestos clinic devoted to healthcare, research, outreach and education to benefit all people impacted by exposure to Libby Amphibole Asbestos. CARD evolved in 2000 as a response to raised awareness of widespread asbestos exposure in Libby, MT. CARD’s mission is to provide long term screening, health monitoring, disease diagnosis, specialized asbestos healthcare and counseling to all people impacted by Libby Amphibole.

Central States Occupational and Environmental Medicine Association
Booth #124

6 Phillippi Creek
Elgin, IL 60120
Marlyce J. Nutt
630-497-0286
marlyce@csoema.org
www.csoema.org

The Central States Occupational and Environmental Medicine Association (CSOEMA) is one of ACOEM’s largest components, serving a local area of seven states, including Iowa, Illinois, Indiana, Minnesota, Missouri, North Dakota, and Wisconsin. It is the home component for ACOEM Headquarters. Their mission is to promote and protect the health of the people at work and in their environment through preventive service, clinical care, research, education, and a code of ethical conduct. CSOEMA exists for the purposes of uniting physicians who practice occupational medicine and providing high quality education to physicians, nurses, and other health professionals. CSOEMA holds three seminars each year to teach new skills, update knowledge, and offer leadership opportunities in occupational and environmental medicine.

Cerner Corporation
Booth #218

2800 Rockcreek Parkway
Kansas City, MO 64117
Audry Gregory
816-571-6279
audrey.gregory@cerner.com
www.cerner.com

At Cerner, we’re continuously building on our foundation of intelligent solutions at more than 20,000 facilities worldwide. Cerner believes the best way to manage the health of a population is one person at a time. Our customizable, comprehensive suite of solutions and services enables organizations to know a population, engage each person and manage to an optimal outcome. We facilitate high-performing networks and align, engage and empower stakeholders through our industry-recognized platform, technology and services. Our value-driven, community-wide approach supports clinical, financial and operational needs for providers, health organizations, employers, payers and governments across the continuum for today and tomorrow.

Concentra
Booth #309

5080 Spectrum Drive, West Tower
Addison, TX 75001
www.concentra.com/careers

Concentra is a national health care company focused on improving America’s health, one patient at a time. Through its affiliated clinicians, the company provides primary care, occupational medicine, urgent care, physical therapy, and wellness services from nearly 600 medical centers and work-sites in 40 states. From our competitive benefits and compensation to our focus on employee wellness and healthy work/life balance, Concentra colleagues enjoy a unique and rewarding work experience that fosters stability, success, and satisfaction.
Corporate Health Resources, Inc.
Booth #202

1375 Piccard Dr., Suite 275
Rockville, MD 20850
Karen W. Cohen
240-813-2800
kcohen@chr.com
www.chr.com

CHR has over 28 years of experience and is known as the company you call whether you need a drug screen collection in Wyoming, a DOT exam in Texas, an IME in Denver, and/or periodic exams for your sales force scattered throughout the country. CHR is a nationwide examiner network that provides occupational health exams in all 50 states and many international locations as well.

Council for Accreditation in Occupational Hearing Conservation (CAOHC)
Booth #306

555 E. Wells Street, Suite 110
Milwaukee, WI 53202
Marina Pappas
414-276-5338
mpappas@caohc.org
www.caohc.org

The Council for Accreditation in Occupational Hearing Conservation (CAOHC) is a professional organization dedicated to providing consumer safety and protection by offering credentialing to those working to prevent noise-induced hearing loss. CAOHC’s certified occupational hearing conservationists (COHCs), Professional Supervisors of the Audiometric Monitoring Program (CPS/As), and Course Directors (CDs) provide training, consultation, audiometric testing and hearing protection fitting in occupational settings such as manufacturing plants and other facilities with overexposure to high noise levels. Today, more than 21,000 COHCs, CPS/As and CDs are working to protect the hearing of workers throughout North America and around the globe.

CRAssociates, Inc.
Booth #117

8560 Cinderbed Road, Suite 2400
Newington, VA 22122
877-272-8960
crassoc.com

CRAssociates, Inc. (CRA) is a veteran-owned health care services business located in the Washington, DC metropolitan area. CRA specializes in streamlining healthcare services to government and private industry with effective recruitment of highly-skilled medical professionals and support staff. We employ medical professionals and support personnel throughout the United States.

Electronic Waveform Lab, Inc.
Booth #300

5702 Bolsa Avenue
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Julie McNally
773-571-8954
jmcnally@h-wave.com
hwave.com

H-Wave is a completely unique form of electrotherapy. We understand that the leading cause of workforce disability is inflammation of joints and compartmental swelling. Therefore, our goal is to address the root causes of these symptoms and provide a more rehabilitative benefit by greatly improving circulation and lymphatic drainage. H-wave improves range of motion, spasm, atrophy as well as pain all through this rehabilitative means. Additionally, H-Wave is so effective at shutting down pain that one of our four FDA clearances is for electronic anesthesia in dentistry. (No side effects/no addictive factors).
Emergency Physicians Insurance Exchange RRG
Booth #415

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David Hambright
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dhambright@epixrrg.com
www.epixrrg.com

Emergency Physicians Insurance eXchange Risk Retention Group offers a partnership with independent emergency medicine groups. Founded and managed by emergency physicians, EPIX has a unique insight into the challenges emergency medicine groups face. Our holistic approach to providing independent groups with medical professional liability insurance incorporates emergency medicine specific risk management and claims management. For further information, please contact David Hambright at 888-357-0177 or dhambright@epixrrg.com or www.epixrrg.com.

Genotox Laboratories
Booth #507

2170 Woodward Street, Suite 100
Austin, TX 78744
Bobby Garcia
512-600-6601
bgarcia@genotoxlabs.com
www.genotoxlabs.com

Genotox Laboratories is a toxicology and pharmacogenetic laboratory with a first of it’s kind, patent pending validity measure to ensure cheating a UDT is a thing of the past.

Enterprise Health
Booth #207

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Fort Wayne, IN 46804
Jeff Donnell
888-498-3484, Option #3
jdonnell@enterprisehealth.com
www.enterprisehealth.com

Enterprise Health is the only standard health IT solution that combines occupational health and compliance, clinical care and employee engagement on a single, highly-interoperable, cloud-based platform — helping enterprise clients create a cost-effective culture of health. Enterprise Health has a proven track record with blue chip clients ranging from Fortune 500 companies to federal and state government agencies — including Federal Occupational Health, a division of the United States Department of Health and Human Services that provides occupational health services to more than 360 federal agencies.

Georgetown University, Executive Master’s Program in Health Systems Administration
Booth #109

St. Mary’s Hall, 3700 Reservoir Road, NW
Washington, DC 20057
Elizabeth Thompson
et504@georgetown.edu
executivemhsa.georgetown.edu

The Georgetown executive master’s program in health systems administration is designed for working health care professionals in both clinical and non-clinical environments, and gives them the opportunity to build the skills and knowledge they need to take executive leadership roles in the health care sector. This two-year program uses a hybrid format of online learning and 4 week-long intensives — three of which are on-campus and one of which is an offsite. The curriculum is competency-based, providing management and leadership skills, and health systems administration tools and practices that enable students to assume executive-level roles in the future. This Georgetown University program is shaped by the holistic, analytical, and reflective approach that is consistent with Jesuit values, and by the unique perspectives of its faculty who are leaders in their fields.
ALPHABETICAL LISTING OF EXHIBITORS

Group Health Physicians
Booth #406
320 West Luke Avenue N
Seattle, WA 98109
Jenelle Van Assen
206-448-6192
vanassen.j@ghc.org
www.grouphealthphysician.org

Group Health Physicians, the largest group practice in the Northwest, is a multi-specialty, integrated medical group on the cutting edge of clinical medicine and research. Not only do we pride ourselves on providing the best quality coordinated care, but Group Health Physicians encourages its staff to maintain care-focused patient relationships and manage innovative practices, while advocating a well-balanced life and personal health. As a practitioner at Group Health Physicians you will join a collaborative team in a professionally satisfying, patient-centered environment. Please come by our booth to learn more about the great opportunities awaiting you today at Group Health!

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Adem Kutlug
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ademkutlug@gmail.com
www.unimedmassager.com

HealtheCareers
Booth #224
6465 South Greenwood Plaza Blvd.
Centennial, CO 80111
Kristin King
303-601-3245
kristen.king@healthecareers.com
healthecareers.com

The ACOEM Career Center is the official career center for ACOEM and is your resource for highly sought after jobs and high quality job applications in the field of occupational and environmental medicine.

HSHS Medical Group
Booth #513
3051 Hollis Drive
Springfield, IL 62704
Brandy Zanger
217-971-2287
brandy.zanger@hshs.org
www.hshs.org

HSHS Medical Group is the physician organization of Hospital Sisters Health Systems (HSHS). HSHS is a fully integrated health care system that sponsors 14 hospitals in 13 communities across Illinois and Wisconsin. HSHS Medical Group works in partnership with HSHS Hospitals to give providers the support they need to provide the highest level of patient care possible. In addition, HSHS is affiliated with the nationally recognized cardiology group, Prairie Cardiovascular Consultants. HSHS generates more than $1.5 billion in revenue annually and employs more than 14,000 people. HSHS Medical Group has a network of clinical providers that includes physicians, nurse practitioners, physician assistants, nurses and other medical professionals.
**ALPHABETICAL LISTING OF EXHIBITORS**

<table>
<thead>
<tr>
<th><strong>InfoTech, Inc.</strong></th>
<th><strong>Kahntact USA</strong></th>
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<tbody>
<tr>
<td>Booth #304</td>
<td>Booth #408</td>
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<tr>
<td>200 - 52 Donald Street</td>
<td>37 N. Hillside Avenue</td>
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<tr>
<td>Winnipeg, Manitoba, Canada R3CIL6</td>
<td>Hillside, IL 60162</td>
</tr>
<tr>
<td>Mike Hicks</td>
<td>Mayra Jaramillo</td>
</tr>
<tr>
<td>204-788-1500</td>
<td>708-449-5470</td>
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<tr>
<td><a href="mailto:mike.hicks@wellnesscheckpoint.com">mike.hicks@wellnesscheckpoint.com</a></td>
<td><a href="mailto:gkahn@kahntactusa.com">gkahn@kahntactusa.com</a></td>
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<tr>
<td><a href="http://www.wellnesscheckpoint.com">www.wellnesscheckpoint.com</a></td>
<td><a href="http://www.kahntactusa.com">www.kahntactusa.com</a></td>
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InfoTech Inc. is a recognized leader in health and productivity risk management. A Canadian company with a global reach, InfoTech’s Wellness Checkpoint® health risk assessment (HRA) was the first online, interactive health risk assessment. Since its initial release in 1990, Wellness Checkpoint has evolved into a multilingual, global web-based service used by many Global Fortune 500 companies to drive informed decisions. Delivered as an online, multilingual (26 languages and 8 regional variances), global hosted Software as a Service, Wellness Checkpoint seamlessly integrates into the business fabric of health, benefits, HR and risk management. Wellness Checkpoint extends beyond lifestyle, biometrics and health status to consider the whole person within the context of their work and their life outside of work, including organizational factors and personal challenges that correlate strongly to health and productivity. Wellness Checkpoint – Driving Informed Decisions.

Kahntact USA is your best source for quality new, refurbished, and used medical equipment and medical supplies. However, we don’t stop there. We also can provide solutions to all your training, testing and diagnostic needs. What sets us apart is our dedication to advising and serving you. Our job is helping you make the most informed product and service choices and making sure you are properly trained in their use. With our live technician Skype trainings offered 365 days a year in Breath Alcohol, Urine Collection, and Spirometry we give our trainees the best one on one attention making their trainings the best experience possible. With the ability to have the course completed at your best convenience, all around the world with just a click away. Our pledge is to provide you in the health care industry and professions with high quality devices, expertise and supplies that help your organization enhance its diagnostic capabilities and services.
**Kaiser Permanente**
**Booth #400**

1800 Harrison Street 7th Fl  
Oakland, CA 94612  
Lisa Holthaus  
800-777-4912  
mdrecruitment.tpmg@kp.org  
http://physiciancareers.kp.org

Kaiser Permanente is one of the largest providers of occupational health services in California. Our program has been operational since 1993 and provides a wide range of workers’ compensation medical care and occupational health and safety services to employers, unions, health and welfare trust funds, and insurers. We have an extensive employer base that is comprised of private businesses and public sector clients such as municipalities and state and federal government departments. We emphasize preventive services, convenient access to medical care, appropriate utilization, timely communication and claims handling, and case management. KOJ (Kaiser On-the-Job) operates 49 occupational health centers in our Northern and Southern California regions. Our occupational health centers are staffed by physicians who specialize in treating workplace injuries and illnesses and are experience in return-to-work strategies. We offer an excellent compensation and benefits package. To discuss available opportunities, please visit us in Booth #400.

**LHI**
**Booth #110**

328 Front Street, South  
LaCrosse, WI 54601  
Carissa Dembraski  
608-782-0404  
cdembraski@logisticshealth.com  
www.logisticshealth.com

LHI is care for mission critical. We are dedicated to providing the best in health care for the men and women who keep America safe and running. Established in 1999, LHI is supported by a robust nationwide network of more than 28,000 medical, dental and behavioral health providers. As an organization committed to caring for the people who protect our country, LHI designs, implements and manages a broad spectrum of services administered in-clinic or on-location, including medical and dental readiness services. LHI is committed to responsible corporate citizenship through volunteerism, community service and philanthropy. Learn more about LHI at www.logisticshealth.com.

**MAXIMUS Federal Services**
**Booth #402**

625 Coolidge Drive, Suite 100  
Folsom, CA 95630  
Jeff Tzeng, DO, MPH  
jeffstzeng@maximus.com  
www.maximus.com

MAXIMUS Federal Services helps federal government agencies deliver citizen-centric services through improved operational efficiency and better results. We deliver our solutions through the skilled application of government business process management expertise, program experience, subject matter knowledge and technology tools. We focus on the outcomes of federal programs and how to best enhance the experience for citizens receiving government services.
**ALPHABETICAL LISTING OF EXHIBITORS**

**Medgate, Inc.**  
*Booth #211*  
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Toronto, Ontario, Canada M4V1N6  
Dina Savana  
416-863-6800 x 218  
dsavana@medgate.com  
www.medgate.com

Medgate is the industry’s leading Environmental Health and Safety software solution, used by health & safety professionals across a wide range of industries around the world. Our software is developed and implemented by accredited EHS professionals with real world experience. With Medgate software, you can: integrate data between EHS functions; standardize workflows and processes; and track performance and identify risks, trends and problem areas with key metrics.

**Medlock Consulting**  
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6306 93rd Street  
Lubbock, TX 79424  
Nyla Medlock  
806-239-NYLA (6952); 806-744-5250  
nmedlock@medlockconsulting.com  
www.medlockconsulting.com

Medlock Consulting specializes in Preventive & Occupational Medicine physician and professional needs by focusing on consultation, specialization and stability. We have successfully completed assignments for Physician Executives, Medical Directors, and Leaders/Clinicians for Fortune Global 500 Corporations, medical health systems, hospitals, clinics, and academia. Medlock Consulting places Physicians, NPs, PAs, RNs and COHN’s. With the support of William B. Bunn, III, MD, JD, MPH, a leader in International Occupational and Environmental Medicine and a senior advisor to Medlock Consulting, Nyla Medlock, Founder and Owner of Medlock Consulting was able to launch two additional companies. The first being MDOccHealthConsulting, an international and global healthcare consulting company specializing in the delivery of patient-focused market expansion strategies for Fortune 500 companies, and GlobalMedicalDirector.com, a company specializing in the investment of long-term client relationships, goals and culture. Together all three companies celebrate success for Preventive & Occupational Medicine physicians and professionals around the globe.
Mercy Clinic
Booth #216
1965 S. Fremond Avenue
Springfield, MO 65804
Bobby Norman
417-820-3549
bobby.norman@mercy.net
www.mercy.net

Mercy is the fifth largest Catholic health care system in the U.S. and serves millions annually. Mercy includes 34 acute care hospitals, nearly 700 clinic and outpatient facilities, 40,000 co-workers and more than 2,000 integrated physicians in Arkansas, Kansas, Missouri and Oklahoma. Mercy also has outreach ministries in Louisiana, Mississippi and Texas. Mercy Clinic is a strong, physician-led and professionally managed integrated health care system. When a low cost of living, amenity rich communities & state-of-the-art technology align with a mission to deliver exceptional healthcare, then you’ve arrived at MERCY. We’ll afford you the opportunity to care for patients in need, while we take care of the rest. At Mercy, you’ll work with the area’s finest physicians receive competitive compensation and benefits.

Moore Medical, LLC
Booth #104
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Farmington, CT 6032
Ceynnon Bradley
800-234-1464
ceynnon.bradley@mooremedical.com
www.mooremedical.com

Moore Medical supports medical professionals with products programs and ideas to enhance you organization and improve the health and care of the people you serve. Visit our booth to learn how Moore Medical can help support your organization.

MROLink, LLC
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1451 Tallevast Road
Sarasota, FL 34243
Christopher Keeler
855-224-2345
ckeeler@mrolink.com
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An MRO management platform that enables medical review officers to manage daily tasks efficiently, expeditiously and economically. Our software allows the MRO and their staff, with a few clicks, to manage positive as well as negative results received from various laboratories. The program reduces the cost of managing drug test results for the MRO by automating work typically performed by staff both in preparation of the data and the release of the reports after the MRO conducts a review. This cost reduction can be the difference between greater profits or more volume. Come see a hands-on demo at booth 416.

Net Health
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Net Health is the leader in software solutions for specialized outpatient care. AgilityOM is the only certified EHR and fully integrated practice management software designed to meet the unique needs of independent and hospital-owned occupational medicine providers—conquer employer protocols, billing complexity, and compliance. Experts in The Art of the Right Fit®, Net Health drives workflow and documentation in more than 3,500 facilities. Learn more at rightfit.nhsinc.com/AboutAgility.
NIOSH
Booth #403
626 Cochrans Mill Road, Building 19A
Pittsburgh, PA 15236
Jackie Krah Cichowicz
412-386-5368
jkrah@cdc.gov
www.cdc.gov/niosh

The National Institute for Occupational Safety and Health (NIOSH) is the U.S. federal agency that conducts research to prevent worker injury and illness. NIOSH produces scientific knowledge and provides practical solutions vital to reducing risks of injury and death in a wide range of industries. The National Personal Protective Technology Laboratory within NIOSH leads the strategic planning activities, program development, and monitoring to sustain the personal protective technology (PPT) program. About 20 million workers use personal protective equipment (PPE) to protect them from job hazards. PPE protects workers from death, disabling injuries, and illnesses as well as protecting from the specific threats of exposures to certain airborne biological particles, chemical agents, splashes, noise exposures, fall hazards, head hazards, and fires. Improvements in PPT are realized through standards and regulations, revisions to existing standards, subsequent availability of PPE complying with the standards and regulations, and demonstration of PPE use.

OEM Health Information, Inc.
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978-921-7300
curtis@oempress.com
www.oempress.com

OEM Press specializes in providing books and eBooks for occupational health professionals. We are publishers of Swotinsky: The Medical Review Officer’s Manual 5/e; Hartenbaum: The DOT Medical Examination: A Guide to Commercial Drivers’ Medical Examination 5/e; and Ferguson: The MRO Team Manual 2/e. We are your one stop resource for all your book needs!

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OHD, Inc. specializes in Occupational Health & Industrial instrumentation and software to help protect your employee’s health & manage your occupational risks. Whether you are looking for the Quantifit® Respirator Fit Tester, Noise Dosimeters, Sound Level Meters, Environmental Noise Monitoring Systems, Spirometers, or Audiometers we can provide you with a complete solution. With a full service calibration and service department, OHD’s goal is to serve each client with the excellence and professionalism expected by today’s competitive market. Website: www.ohdusa.com

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jccp@novonordisk.com
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As a world leader in therapeutic proteins and specialized health care, Novo Nordisk does more than produce medicines. We work to close the gap between the number of people who need care and those who receive it, and help improve access to adequate health care for people with chronic conditions wherever they live. To learn more, visit NovoNordisk-US.com.
ALPHABETICAL LISTING OF EXHIBITORS

Oxford Immunotec
Booth #100
700 Nickerson Road, Suite 200
Marlborough, MA 01757
Amy Tolivaisa
508-481-4648
atolivaisa@tspot.com
tspot.com

Oxford Immunotec Global PLC is a global, commercial-stage diagnostics company focused on developing and commercializing proprietary tests for the management of immune-regulated conditions. The Company’s first product is the T-SPOT®.TB test, which is used to test for tuberculosis infection. The TSPOT. TB test has been approved for sale in over 50 countries, including the United States, where it has received pre-market approval from the Food and Drug Administration, Europe, where it has obtained a CE mark, as well as Japan and China. The Company is headquartered near Oxford, U.K. and in Marlborough, Mass. Additional information about the T-SPOT.TB test can be found at www.tspot.com. T-SPOT and the Oxford Immunotec logo are trademarks of Oxford Immunotec Ltd.

Practice Velocity/Urgent Care Consultants
Booth #103
8777 Velocity Drive
Machesney Park, IL 61115
Juely Bartholomew
888-357-4209
jbartholomew@practicevelocity.com
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Practice Velocity delivers best-in-class urgent care EMR and practice management software along with contracting and credentialing, billing and consulting services for urgent care clinics.

Premise Health
Booth #102
5500 Maryland Way, Suite 400
Brentwood, TN 37064
Molly Stokes
844-407-7557
molly.stokes@premisehealth.com
www.premisehealth.com

Premise Health was formed as a result of two industry pioneers – Take Care Employer Solutions and CHS Health Services – coming together. We believe healthcare should be about helping people get, stay and be well. As the leading worksite health company in the nation, our onsite health and patient engagement services are connecting millions of Americans every day with the care that they need; leading to healthier communities, a more productive workforce and lower healthcare costs. We are changing the way employers and employees view and experience healthcare. We are uniquely positioned to do this because of our convenient proximity to patients, affordability of services, and customized holistic approach to care. With more than 40 years of experience, Premise Health manages over 500 centers across the country. The company serves more than 200 of the nation’s leading employers, including a significant number of the Fortune 1000. For more information on Premise Health, visit www.premisehealth.com.
Because of exceptional departmental growth, Prevea Health is seeking a second BC/BE physician to join the Occupational Medicine department. This 100% Occupational Medicine practice will encompass the full spectrum of general Occupational Medicine, including preventive medicine and pre-employment exams, workers’ comp injury management and all phases of interaction with occupational health personnel. Midlevel and case managers provide return to work interface services and support as a part of the integrated Prevea WorkMed program. A well-developed, expanding occupational health nursing outreach program compliments the practice and provides a steady referral network. Physical and Occupational therapy is available through the clinic’s Sports Medicine Department.

Founded in 2000, ProcessMAP Corporation is a leading provider of cloud-based enterprise software solutions that empowers organizations to manage risk in three key areas: Employee Health & Safety; Environment & Sustainability; and Enterprise Compliance. Our software supports over 1 million users from global conglomerates to mid-sized companies across 95 countries in more than 25 languages. ProcessMAP’s Software-as-a-Service (SaaS) delivery model provides customers with a single source solution that embodies industry’s best practices, world-class hosting infrastructure, one-stop implementation services, and the industry’s only 24x7 technical support and help desk services with a predictable fixed subscription cost. True customer intimacy, enabled by our Customer Success and Account Management functions, ensure ongoing strategic alignment.
Psychemedics Corporation
Booth #206

5220 Spring Valley Road, Suite 603
Dallas, TX 75254
Sheryl Maddox
972-490-8001
sherylm@psychemedics.com
www.psychemedics.com

Psychemedics Corporation is the world’s largest provider of hair testing for the detection of drugs of abuse. The company’s patented process is used by thousands of US and international clients, including over 10% of the Fortune 500 companies, for pre-employment and random drug testing. Major police departments, Federal Reserve Banks, schools, and other public entities also rely on our unique drug testing process. Psychemedics pioneered the use of hair testing for drugs of abuse over 25 years ago, and continues to offer the most effective hair testing technology based on scientifically validated drug testing methods. Psychemedics established its scientific and market leadership position by setting the industry standards for sensitivity, robustness, quality and consistency, and continues to advance the science of hair testing.

RAECO Rents, LLC
Booth #208

135 Bernice Drive

Bensenville, IL 60106
Randy Walkowiak
866-736-8347
randyw@raecorents.com
www.raecorents.com

RAECO Rents is a national rental service (US and Canada) for portable environmental testing, industrial health and safety test and measurement instruments. Our instrument kits come complete with everything you’ll need to get the job done, and they are backed by a factory-trained staff and our no-hassle service policies and practices.

Reed Group, Ltd.
Booth #209

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Westminster, CO 80021
Joe Guerriero, SVP MDGuidelines
303-247-1860
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Reed Group, Ltd., a wholly owned subsidiary of the Guardian Life Insurance Company of America, provides absence and healthcare management services to over half of the Fortune 100 companies. With over 1,300 employees, Reed Group has operations across the United States, Canada, and India. For more than 30 years, Reed Group has been building, adapting and innovating our evidence-based clinical content and guidelines to provide the highest quality, most dependable decision support tool in the industry — thoroughly and rigorously backed by medical evidence and scientific fact. Reed Group’s flagship product, MDGuidelines, is the industry’s leading solution for total health management and workplace productivity. MDGuidelines features the world’s most trusted disability duration tables, predictive modeling, analytic services, and evidence-based Practice Guidelines from ACOEM. MDGuidelines is used in 47 different countries around the world, by healthcare providers, physicians, employers, government agencies, case managers, and insurers.
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SafeLane Health offers an online tool for “DOT” medical examiners. The comprehensive Commercial Driver Exam tool helps: assure exam data is complete and accurate; standardize decision-making processes; provide prompt evidence-based certification guidance; safely and securely store records for subsequent exams; and economize DOT exam scheduling.

SafeWay Driver Fitness Centers
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SafeWay Driver Fitness Centers utilize cutting-edge technology to assess cognitive fitness to drive in the medically at-risk driver. Our computerized and on-road assessments are standardized, peer-reviewed and objective and are found across the world. We offer healthcare professional, commercial groups and government agencies many different avenues implement and utilize these evidence-based solutions. Demonstrating how these solutions will add an extreme amount of value to your practice will be the fun part!

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The Select Medical WorkStrategies Program provides solutions for workers’ compensation through the delivery of services from injury prevention to injury management and case closure. The main objectives are to: reduce the frequency and severity of injuries, achieve higher levels of employee productivity, and reduce the employer’s total cost for workers’ compensation and lost work time. The Select Medical team partners with employers, case managers, claims managers, TPAs, brokers and insurance companies to ensure timely and effective solutions. WorkStrategies is exclusively provided by Select Medical’s outpatient division family of brands, including Select Physical Therapy, NovaCare Rehabilitation, KORT, Saco Bay Physical Therapy, Kessler Rehabilitation, SSM Physical Therapy, Emory Rehabilitation Outpatient Center and Baylor Institute for Rehabilitation – Outpatient Services. We are pleased to welcome Physical Therapy Associates to the Select Medical family as of March 4, 2016.

Spectrum Health
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Spectrum Health is a not-for-profit health system, based in West Michigan, offering a full continuum of care through the Spectrum Health Hospital Group, which is comprised of 12 hospitals, including Helen DeVos Children’s Hospital; 183 ambulatory and service sites; more than 3,100 physicians and advanced practice providers, including 1,200 members of the Spectrum Health Medical Group; and Priority Health, a health plan with about 654,000 members. Spectrum Health is West Michigan’s largest employer, with 23,400 employees. The organization provided $283 million in community benefit during its 2015 fiscal year. Spectrum Health is the only health system in Michigan to be named one of the nation’s 15 Top Health Systems by Truven Health Analytics for 2015. This is the fourth time the organization has received this recognition.

St. Vincent Healthcare/SCL Health
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Billings, MT 59101
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Sutter Health  
**Booth #504**

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The Joint Commission
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