

# New Norwegian regulation for medical examination of offshore workers

An introduction to the regulation and guideline

Jan Risberg



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- OLF working group
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## Background

- Last regulation issued 1990
  - Need for revision based on time lapsed and medical status
    - Simplicity
    - Risk assessment
    - Better guidance for approved doctors
    - Incorporation of practice from Rogaland County Medical Officer appeal committee
    - Harmonizing to international (UK) regulation
    - (Harmonizing to other work groups where medical certificates are enforced (seamen, divers))
- Norwegian Directorate of Health (HDir)
  - Provisional regulation drafted May 2010
  - Hdir accepted OLF suggested guideline Sep 2010 (tbc) - this draft was with a few exceptions included in the final official guideline
  - Hdir arranged meetings with worker unions, Rogaland County Medical Officer and OLF Nov/Dec 2010
  - New regulation issued 20.12.10, official guideline issued Feb 2011.



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## OLF Workgroup

- OLF workgroup nominated spring 2009
  - Drafted (systematically) a new guideline, presented to HDir Sep 2010
- Members
  - Erik Dahl-Hansen (ExxonMobil)
  - Marit Bergeland (Rogaland County Medical Officer, retired from WG spring 2010)
  - Gaute Bjaanes (Transocean)
  - Christian Cappelen Smith (Seadrill)
  - Lene Håland (OLF, retired from WG autumn 2009)
  - Jan Risberg (OLF, WG leader)
  - Kjetil Todnem and Geir Størseth (Statoil)



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## Regulation main headlines

- Regulations regarding health requirements for persons working on installations in petroleum activities offshore
  - Sect 2: Petroleum doctors and diving doctors should be authorized (Hdir) and should be formally trained and receive CME.
    - 3-annual recertification
    - Separate training courses for petroleum doctors and diving doctors
    - Diving doctors must be petroleum doctors as well



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## Regulations main headlines (contd)

- Ch 3 - Medical examination
  - Self-declaration and clinical examination (as previous)
  - Health requirements
    - be in appropriate physical and mental condition to cope with living and working on the installation and with an evacuation situation
    - be able to work safely offshore
    - not have a condition that could lead to alarms not being registered
    - not have a disorder that, due to the lack of necessary medication or for other reasons could lead to a serious danger to the health and safety of him or herself or others.



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### Regulation main headlines (contd)

- Prescriptive health requirements (vision, hearing, lungs etc.), not specified though:
  - No epilepsy or insulin dependent diabetes mellitus
  - "There must be no degree of obesity that would represent a safety risk in an emergency situation."



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### Regulation main headlines

- Section 4-5
  - Validity period 2 years (as previous)
  - If the petroleum doctor concludes that the health requirements are not met
    - Issue a declaration of medical unfitness
    - Inform the applicant that Rogaland County Governor (FMRO) may review the application
      - Dispensation: "...if there are specific reasons and if considerations of safety do not suggest otherwise."
  - If dispensation is not granted (FMRO)
    - Complaints commission (4)



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### Regulation - what is new?

- Requirement for authorization of petroleum doctors
- Adjustment of overall health requirements. No prescriptive requirements for visual acuity and hearing.
- Risk assessment of overweight prescribed



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## Guideline

- Detailed guideline to support the petroleum doctor in health risk assessment
- Main requirement
  - " ...not representing a danger to themselves or to others or to the safe operation of the installation because of the condition of their health."
    - ...or be a serious dangers for rescue personnel
  - Be able to evacuate OI
  - Able to recognize alarms



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## Guideline

- Minimum contents
  - Medical history
    - Self declaration
      - "Old" form
    - Clinical interview
  - Clinical examination
    - Conventional clinical examination
    - BMI (Height/weight), HR, BP
    - Visual acuity, field of vision
      - Color vision at first examination
    - Hearing
      - Audiometry (min 500-4000 Hz)
      - Speech recognition 2m
    - Urine dip-stix
  - Other examinations blood chemistry, ECG, spirometry, specialist referral as individually considered necessary.



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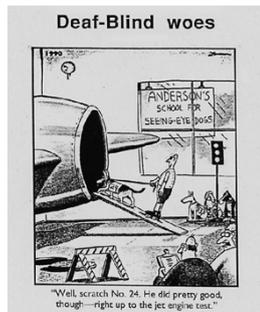
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## Health requirements - some clues

- Eyes
  - Visual acuity uncorrected 0.1, corr 0.5
  - Normal field of vision on one eye
- Hearing
  - Speech at 2m (both ears)
    - Hearing device OK
  - Consultant (ENT) referral if *mean* hearing loss >35dB for 500-2000 Hz *or* >60 dB for 3-4 kHz



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### Health requirements - some clues

- Cardiovascular
  - Ischemic heart disease
    - Health certificate may be issued 6w after PCI
    - Pending cardiologist statement/risk assessment
  - Hypertension
    - <140/90=OK
    - 140-180/90-110: Risk assessment
    - >180/110: Unfit
  - ICD: Contraindication
  - Cerebrovascular illness:
    - May be approved 6mo after insult
    - Requirement to assess presence of cognitive impairment
  - Cardiac arrhythmia:
    - If loss of consciousness: Minimum 12mo observation
    - After ablation: 3mo observation
    - Otherwise based on risk assessment



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### Health requirements - some clues

- Episodic brain disturbances (epilepsy +++)
  - Discussed in depth
  - Specialist referral necessary
  - Can be approved if recurrence risk is minimal and observed for at least 12 mo
  - 6mo observation after intracranial trauma with risk of post traumatic epilepsy
- ADD
  - Dispensation required
  - Use of drugs not by itself a contraindication in relation to dispensation approval
- Type I diabetes and LADA
  - Dispensation application required
  - Guideline provide detailed requirements needed to be fulfilled for approval of dispensation



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### Health requirements - some clues

- Drug abuse
  - In general: Strict risk assessment
  - Unfit if current abuse
  - If rehab. treatment
    - Restrict period of validity (6 mo)
    - If illegal drug abuse: Acceptance for drug testing for 2 years
  - Medication assisted rehab
    - Apply for dispensation
- Pulmonary function
  - Usually fit if FEV<sub>1</sub>>60%, FVC>70% and ability to walk three stories by stairs without obvious respiratory distress
- Drugs
  - Warfarin not an absolute contraindication (guidance provided)



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## Overweight

- Extremely controversial
  - The single medical topic which was vigorously challenged by worker unions
  - BMI (height/weight) to be measured on all
    - Waist circumference to be measured if BMI > 30
  - Risk assessment
    - No absolute accept criteria
    - Consider ability to evacuate and risk for rescue personnel
    - Consider these parameters:
      - BMI > 35
      - Waist/hip ratio > 1 (men) and > 0.85 (women)
      - Body weight > 120 kg
      - Waist circumference > 115 cm



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## Conditions *not* precluding health certificate

- Medical condition affecting ability to perform a certain work task but generally not affecting offshore work in general
- Medical condition affecting capacity to act as a member of the emergency response team



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## Questions?



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