Annual Report for

Sandia National <u>Labo</u>ratories

Epidemiologic
Surveillance
Epidemiologic

Epidemiologic Surveillance

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Surveillance

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Foreword

The U.S. Department of Energy (DOE) is committed to assuring the health and safety of its workers through the development of epidemiologic surveillance activities. An epidemiologic surveillance program has been implemented at selected DOE sites during the past several years. This approach has been expanded to include surveillance of all medical conditions that result in an absence of 5 or more consecutive workdays, occupational injuries and illnesses, and deaths among active employees. This annual epidemiologic surveillance report provides the final summary of the 12-month period January 1, 1994, through December 31, 1994, for Sandia National Laboratories (SNL).

Caution is required when comparing this information with that of other DOE facilities. Interpretation of these data must take into account the occupational medicine program, health and safety practices, the composition of the work force, and potential occupational exposures unique to this facility; therefore, the data presented are pertinent only to SNL. Continuing surveillance and data examination may suggest emerging trends that change the preliminary interpretation of the data. Plans for future annual reports include a discussion of important

new findings and changes occurring since previous reports and the incorporation of information from the National Center for Health Statistics and the National Cancer Institute's Surveillance, Epidemiology, and End Results Program. This information will allow early recognition and investigation of possible work-related problems, as well as an

analysis of trends over time. In addition, the results of epidemiologic surveillance will be combined with those of medical and exposure surveillance to form an integrated approach to worker health protection.

SNL at a Glance: 1994

- During 1994 the SNL work force increased by about 2.5%.
 No substantial changes in the occupational composition of the work force were observed.
- About 7.5% of the SNL work force experienced at least one absence of 5 or more days due to illness or injury during 1994, slightly lower than the 9% observed in 1993.
- The highest diagnosis rate for both men and women involved respiratory diseases.
 Respiratory diagnosis rates were more than twice as high for women as for men.
- As in 1993, diagnosis rates were about 3 times higher for hourly than for salaried workers. Diagnosis rates were consistently higher among hourly occupational groups,

- but the difference may reflect under-reporting of health events by salaried workers.
- In 1994, 209 Occupational Safety and Health Administration (OSHA) events were recorded, down approximately 17% from the 252 OSHArecordable events recorded last year. The diagnosis rate for OSHA-recordable events was higher for women (35.1 per 1,000 workers) than for men (21 per 1,000 workers). For both women and men, the rate of sprains and strains was higher than the rate of other types of OSHArecordable events.

Introduction

Epidemiologic surveillance at DOE facilities consists of regular and systematic collection, analysis, and interpretation of data on absences due to illness and injury in the work force. Its purpose is to provide an early warning system for health problems occurring among employees at participating sites. Data are collected by coordinators at each site and submitted to the Epidemiologic Surveillance Data Center, located at the Oak Ridge Institute for Science and Education, where quality control procedures and analyses are carried out. Rates of absences and rates of diagnoses associated with absences are analyzed by occupation and other relevant variables. They may be compared with the disease experience of different groups within the DOE work force and with populations that do not work for DOE to identify disease patterns or clusters that may be associated with work activities.

In this annual report, the 1994 morbidity data for the Sandia National Laboratories (SNL) are summarized. These analyses focus on absences of 5 or more consecutive workdays occurring among workers aged 15-76 years. They are arranged in five sets of tables that present: 1) the distribution of the labor force by occupational category and pay status; 2) the absences per person, diagnoses per absence, and diagnosis rates for the whole work force; 3) diagnosis rates by type of disease or injury; 4) diagnosis rates by occupational category; and 5) relative risks

(RR) for specific types of disease or injury by occupational category. In addition to this information, the report contains health events that are considered recordable by the Occupational Safety and Health Administration (OSHA). The analyses of the OSHA data are presented in the same format as those presented for absences of 5 or more workdays. The OSHA-recordable events are those that occurred on the job and involve fatalities (regardless of the time between the injury and death); lost workday cases other than fatalities; and nonfatal cases without lost workdays resulting in transfer to another job, termination of employment, medical treatment other than first aid, loss of consciousness, or restriction of work or motion. Also recordable are any diagnosed occupational health events reported to the employer that are neither fatal nor result in lost workdays. Deaths occurring among active workers are listed separately; they are not included in any tables. All rates presented in this report are age-adjusted (see glossary) and represent the number of diagnoses reported per 1,000 persons in 1 year.

Throughout this report, the symbol "NA" means "not available" or "not applicable." An empty cell in a table indicates that the value of the cell is zero or that the value cannot be computed.

The tables show the results of analyses of diagnoses resulting from absences. An *absence* is defined as a period of 5 or more consecutive workdays away from work due to some health problem such as an illness or injury. In tables presenting

analyses of diagnoses, each diagnosis is counted because a diagnosis is for a specific illness or injury. A worker can have more than one diagnosis related to one absence from work. For example, a worker's single absence might involve both a back injury and pneumonia. Unlike analyses of absences, analyses of diagnoses focus on the rates of occurrence of specific types of disease and injury. Thus the worker with one absence in which he had a back injury and pneumonia would be counted twice in the analysis of diagnoses, because two separate diagnoses are recorded for this one absence.

The data included in this report are supplemental to, but do not replace those reported in other safety, industrial hygiene, and health physics reports prepared by DOE. There has been no attempt to validate diagnoses with medical records, pathology, or other laboratory reports. Also, there has been no attempt to validate occupational information reported by the site. For reporting purposes, occupational titles have been grouped into broad categories within which a great deal of diversity in tasks and exposures is likely to exist. Additional material outlining the methods used and explaining the diagnostic categories and frequently used terms can be found on the inside back cover.

Facility Overview

The original mission of SNL was research and development of nuclear weapons. However, the scope of its mission has expanded to include work on other advanced military technologies, energy programs, arms verification and control technology, and applied research.

The SNL headquarters and main laboratory are located near Albuquerque, New Mexico, at Kirtland Air Force Base. Until October 1, 1993, the multi-program research and

development facility was managed and operated by American Telephone and Telegraph for DOE.

The facility, which is now managed and operated by Lockheed Martin Energy Systems, has state-of-the-art equipment for environmental testing, radiation research, combustion research, computing, and microelectronics research and production. In addition to a primary standards

laboratory, the facility also includes transonic, supersonic, and hypersonic wind tunnels as well as design, fabrication, and process development laboratories.

Labor Force by Occupational Category and Salary Status, 1994

During 1994, there were 8,680 employees (aged 15-76) identified by SNL as participants in epidemiologic surveillance. Sixty-nine percent (5,973 workers) were men, and 31% (2,707 workers) were women. Seventy-one percent (6,123 workers) were Caucasian, and 21% (1,841 workers) were Hispanic. The remaining 8% (716 workers) included African Americans, Asians, and Native Americans.

The composition of the labor force by occupational category and salary status is given in Table 1A; the change in labor force by year is depicted in Table 1B. The occupational categories used in these tables are based on the occupation and industry codes created by the Bureau of the Census in 1980. Because workers can change occupational category over the course of a year, workers were counted in the occupational category where they spent most of their time during the year.

A small number of workers (11%) were placed in the "non-regular" category. This category includes both salaried and hourly workers who worked part-time or at regularly scheduled intervals (for example, the first 2 weeks of each month).

Seventy-two percent of the workers were salaried, whereas 17% were hourly. The occupational categories with the largest number of employees were professional staff (50%) and support staff (22%).

Compared with 1993, the labor force in 1994 increased by 208 employees (2.5%). The biggest increase was

among non-regular workers whose numbers increased 29.8%. The occupational category with the largest percentage decrease was crafts and manual labor with a 6.0% decrease from 1993.

	Occupational Category	Number of Workers in 1994	Number of Workers in 1993	% Change from Last Year
	Professional	4,342	4,247	+2.2
Salaried	Support	1,908	1,999	-4.6
Š	Subtotal	6,250	6,246	+0.1
	Clerical	693	666	+4.1
Hourly	Crafts and Manual Labor	630	670	-6.0
Ĭ	Security	141	146	-3.4
	Subtotal	1,464	1,482	-1.2
	Non-Regular	966	744	+29.8
	TOTAL	8,680	8,472	+2.5

Table 1A.
Labor
Force by
Occupational
Category and
Salary Status

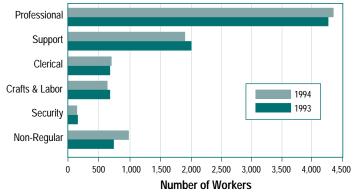


Table 1B. Change in Labor Force by Year

Absences Among Work Force, 1994

Absences per Person. In 1994, 651 SNL employees reported an absence of 5 or more consecutive workdays because of illness or injury. Eighty (12%) of these workers had two or more absences. A total of 751 absences were reported by the employees (Table 2A).

Diagnoses per Absence. A total of 1,140 diagnoses were associated with the 751 absences of 5 or more consecutive workdays. Multiple diagnoses were reported for 261 (35%) absences (Table 2B).

Diagnosis Rates for Absences. In 1994, 1,140 diagnoses noted for absences of 5 or more consecutive workdays yielded an age-adjusted rate of 126.0 diagnoses per 1,000 persons. The diagnosis rate for women (205.3 per 1,000) was more than double the rate for men (89.4 per 1,000) (Table 2C).

	Number of		Numb	er of Abs	sences		Total Persons	Total
Employee Category	Workers in 1994	0	1	2	3	4	Absent at Least Once	Number of Absences
Men	5,973	5,618	314	33	5	3	355	407
Women	2,707	2,411	257	31	7	1	296	344
TOTAL	8,680	8,029	571	64	12	4	651	751

Table 2A. Absences per Person

	ı	Number of I	Diagnoses p	oer Absence	е	Total	Total
Employee Category	1	2	3	4	5+	Number of Absences	Number of Diagnoses†
Men	287	74	28	11	7	407	601
Women	203	102	25	13	1	344	539
TOTAL	490	176	53	24	8	751	1,140

Table 2B. Diagnoses per Absence

Employee Category	Number of Workers in 1994	Total Number of Diagnoses†	Crude Rate per 1,000	Age- Adjusted Rate per 1,000*	Lower 95% Confidence Limit per 1,000	Upper 95% Confidence Limit per 1,000
Men	5,973	601	100.6	89.4	82.1	97.4
Women	2,707	539	199.1	205.3	187.5	224.7
TOTAL	8,680	1,140	131.3	126.0	118.5	134.1

Table 2C. Diagnosis Rates for Absences

[†] Includes all diagnoses reported with an absence of 5 or more days, including absences for pregnancy and delivery. * Standardized to age distribution of 1970 U.S. population

Diseases and Injuries by Diagnostic Category, 1994

The age-adjusted diagnosis rate for each diagnostic category is given for all workers in Table 3. Tables 4 and 5 show diagnosis rates by gender to further describe the disease and injury patterns in the work force. Diagnoses associated with pregnancy, labor, and delivery are described in Table 6.

For all workers, the three diagnostic categories with the highest rates were diseases of the respiratory system (23.5 per 1,000), pregnancy and childbirth (20.7 per 1,000), and diseases of the musculoskeletal system (18.4 per 1,000). Together these three categories accounted for 39% of all diagnoses.

Men. The diagnostic category with the highest rate among men was diseases of the respiratory system (16.2 per 1,000), with 112 diagnoses reported among 67 men. This accounted for 19% of all diagnoses among men. Of the 112 diagnoses, 52 were related to upper respiratory diseases, 28 each to pneumonia/bronchitis and chronic respiratory conditions, and 4 to other respiratory diseases. Twenty-nine men had multiple diagnoses.

The second highest rate, accounting for 17% of the total diagnoses, was injury and poisoning (15.3 per 1,000), with 105 diagnoses reported for 82 men. Within this category, several subcategories had relatively high numbers of diagnoses. Sprains and strains accounted for 28% of these diagnoses, with 29 diagnoses among 26 men. Twelve diagnoses were sprains and strains of the lower extremities, seven of the shoulder, and ten of the back. Three men had multiple diagnoses. "Other" injuries accounted for 27% of the injury and poisoning diagnoses, with 28 diagnoses among 27 men. These diagnoses included ten unspecified injuries, eight complications of

medical or surgical care, three contusions, two abrasion/friction burns, two allergies, one toxic or adverse effects due to venom, one heat stroke, and one spinal cord injury. One man had multiple diagnoses. Fractures accounted for 20% of the injury and poisoning diagnoses, with 21 diagnoses among 19 men. These diagnoses included eight fractures to the lower extremities, five to the arm, four to the ribs, two to the vertebral column, and two to the face.

Two men had multiple diagnoses. Dislocations also accounted for 20% of the injury and poisoning diagnoses, with 21 diagnoses among 19 men. These diagnoses included 17 dislocations of the knee, and 1 each of the shoulder, finger, and ankle, and an ill-defined location.

Musculoskeletal disorders (14.7 per 1,000) ranked third, with 99 diagnoses reported for 76 men. Thirty-four diagnoses were related to dorsopathies (spinal disorders), 42 to joint disease, 18 to rheumatism (excluding the back), 4 to deformities to the extremities, and 1 unspecified injury to the bone. Twenty men had multiple diagnoses.

Seventeen cancer diagnoses were reported among 15 men in 1994. Eight men had a total of eight diagnoses of prostate cancer. Two men had a total of two diagnoses of skin cancer; one man had two diagnoses for malignant melanoma of the skin. One man each had a diagnosis for cancer of the colon, liver, bladder, and brain. The man with liver cancer also had one diagnosis for secondary lung cancer.

Women. The diagnostic category with the highest rate among women was diseases of the respiratory system (41.6 per 1,000), with 107 diagnoses reported among 74 women. This accounted for 20% of all diagnoses among women. Fifty-two diagnoses were related to upper respiratory diseases, 28 to

chronic respiratory conditions, 23 to pneumonia/bronchitis, and 4 to other respiratory diseases. Twenty-one women had multiple diagnoses.

The category with the second highest rate, accounting for 13% of the total diagnoses, was diseases of the musculoskeletal system (30.2 per 1,000), with 71 diagnoses among 50 women. Of the 71 diagnoses, 23 were related to rheumatism (excluding the back); 21 to dorsopathies (spinal disorders); 19 to deformities, including 1 scoliosis; 7 to joint disease; and 1 for inflammation to the bone and cartilage. Fifteen women had multiple diagnoses.

Injury and poisoning (24.5 per 1,000) ranked third, with 61 diagnoses reported for 44 women. Within this category, three subcategories had relatively high numbers of diagnoses. Sprains and strains accounted for 41% of these diagnoses, with 25 diagnoses for 18 women. Twenty-two diagnoses were for sprains and strains to the back, and three were to the lower extremities. Seven women had multiple diagnoses. "Other" injuries accounted for 25% of the injury and poisoning diagnoses, with 15 diagnoses among 13 women. These diagnoses included five complications of medical or surgical care, three unspecified injuries, two contusions of the extremities, two unspecified effects of drugs, medicinal, or biological substances; and one diagnosis each for a late effect of an injury, a crushing injury to the thigh, and a poisoning by pituitary hormones. Two women had multiple diagnoses.

Eight cancer diagnoses were reported among eight women in 1994. Four women each had a diagnosis of breast cancer; one woman each had a diagnosis for cancer of the uterus, ovary, thyroid, and gall bladder.

Age-Adjusted Rate per 1,000* Lower 95% Upper 95% Confidence Limit per 1,000 Confidence Number of Limit per ICD9-CM Code **Category of Diagnoses Diagnosest** 001-139 2.3 4.9 Infections and parasitic diseases 30 3.3 Malignant neoplasms 140-208, 230-234 25 2.1 4.6 3.1 · Digestive organs 150-159 0.1 3 0.4 1.3 · Respiratory system 160-165 0 Breast 174-175 0.4 0.2 1.2 4 Genitourinary 179-189 11 0.8 2.6 1.4 · Nervous system 191-192 0.1 0.0 8.0 1 200-208 · Leukemia, lymphoma 0 Benign neoplasms and other 210-229, 235-239 0.8 2.4 1.4 13 Endocrine and metabolic diseases 240-279 17 1.7 1.1 2.8 Blood and blood-forming organs 280-289 3 0.2 0.1 8.0 Mental disorders 290-319 25 4.3 2.8 1.8 · Alcoholism 303 0 · Drug abuse 304-305 0 59 4.6 7.9 Nervous system and sense organs 320-389 6.0 Circulatory system 390-459 60 6.7 5.2 8.7 · Hypertension 401 8 0.8 0.4 1.6 · Acute myocardial infarction 410 8 0.9 0.4 1.7 · Ischemic disease, not M.I. 411-414, 429,2 0.7 2.4 11 1.3 430-438 · Cerebrovascular disease 4 0.5 0.2 1.4 460-519 23.5 20.5 27.1 Respiratory system 219 · Upper respiratory 460-465, 470-478 104 11.2 9.1 13.7 · Pneumonia/bronchitis 466, 480-487 7.2 51 4.1 490-496 · Chronic respiratory conditions 7.9 56 6.0 4.6 Digestive system 520-579 98 10.6 13.0 8.6 Hernias 550-553 22 3.8 2.5 1.6 · Gall bladder disease 574-575 19 1.9 1.2 3.1 Genitourinary system 580-629 69 7.2 5.7 9.3 · Benign prostatic hypertrophy 600 1 0.1 0.0 8.0 Endometriosis 617 0.4 0.1 1.0 4 · Ovarian cysts 620.0-620.2 0.2 1.2 0.4 4 · Female genital pain/bleeding 2.1 625-626 11 1.2 0.6 Pregnancy and childbirth1 630-676 53 20.7 15.5 27.8 Skin and subcutaneous tissue 680-709 16 1.5 0.9 2.6 Musculoskeletal system 710-739 170 18.4 15.7 21.5 · Dorsopathies 720-724 55 7.8 5.9 4.5 0.2 1.1 Congenital anomalies 740-759 5 0.5 Certain perinatal conditions 760-779 0 Symptoms, signs, and ill-defined conditions 780-799 58 5.0 8.7 6.6 800-999 17.6 20.7 Injury and poisoning 166 15.0 · Fractures, all sites 800-829 33 2.3 4.8 3.4 27 · Dislocations 2.8 1.9 4.2 830-839 · Sprains and strains 4.4 7.7 840-848 54 5.8 · Intracranial injuries 850-854 3 0.4 0.1 1.4 · Internal injuries 860-869 0.0 0.5 1 0.1 · Open wounds 870-897 5 0.5 0.2 1.1 Other injuries 900-999 43 3.4 4.6 6.4 Health status/health service contract V01-V82 99 54 5.4 7.3 · Family history of health problems V10-V19 6 0.6 0.3 1.3 · Circumstances related to reproduction/development V20-V28 41 5.8 4.1 8.2 · Specific procedure/aftercare V50-V59 5 0.6 0.3 1.6 126.2 Total minus pregnancies 1.087 118.5 111.3 TOTAL 118.5 134.1 1,140 126.0

Table 3.
Diseases and
Injuries by
Diagnostic
Category - Men
and Women

[†] Includes all diagnoses reported with an absence of 5 or more days.

^{*} Standardized to age distribution of 1970 U.S. population.

¹ Only women aged 18-45 were included in the calculation of the rates for these diagnostic categories.

Upper 95% Age-Adjusted Lower 95% Confidence Confidence Rate per 1,000* Limit per Limit per Number of Category of Diagnoses ICD9-CM Code 1,000 1.000 **Diagnosest** 001-139 17 3.1 1.8 5.4 Infections and parasitic diseases 140-208, 230-234 4.6 17 2.9 1.8 Malignant neoplasms · Digestive organs 150-159 2 0.3 0.1 1.4 160-165 0 · Respiratory system 174-175 0 Breast Genitourinary 179-189 9 1.6 8.0 3.1 191-192 1 0.1 0.0 1.0 · Nervous system 200-208 0 Leukemia, lymphoma 210-229, 235-239 8.0 0.3 2.0 Benign neoplasms and other 5 240-279 14 1.9 3.3 1.1 Endocrine and metabolic diseases Blood and blood-forming organs 280-289 2 0.2 0.1 1.0 290-319 3 0.7 2.8 Mental disorders 0.2 Alcoholism 303 0 304-305 0 · Drug abuse 320-389 37 5.5 3.9 7.8 Nervous system and sense organs 49 9.9 390-459 7.4 5.6 Circulatory system 401 5 0.7 0.3 1.7 · Hypertension 410 8 1.2 0.6 2.3 · Acute myocardial infarction 411-414, 429.2 3.1 · Ischemic disease, not M.I. 11 1.7 0.9 · Cerebrovascular disease 430-438 0.7 0.3 1.9 16.2 460-519 112 13.3 19.6 Respiratory system 460-465, 470-478 Upper respiratory 52 7.7 5.8 10.3 466, 480-487 28 3.8 · Pneumonia/bronchitis 2.6 5.6 490-496 28 4.0 2.8 5.9 · Chronic respiratory conditions 520-579 66 9.8 7.6 12.6 Digestive system Hernias 550-553 20 3.1 2.0 4.8 0.9 2.8 574-575 1.6 · Gall bladder disease 11 580-629 18 2.5 1.6 4.0 Genitourinary system · Benign prostatic hypertrophy 600 1 0.1 0.0 1.0 · Endometriosis 617 NA 620.0-620.2 NA · Ovarian cysts 625-626 NA · Female genital pain/bleeding Pregnancy and childbirth 630-676 NA Skin and subcutaneous tissue 680-709 9 1.1 0.6 2.1 Musculoskeletal system 710-739 99 14.7 11.9 18.2 Dorsopathies 720-724 34 4.8 3.4 6.8 Congenital anomalies 740-759 2 0.3 0.1 1.1 760-779 0 Certain perinatal conditions Symptoms, signs, and ill-defined conditions 780-799 36 5.6 3.9 7.9 800-999 105 15.3 12.4 18.8 Injury and poisoning 3.2 2.0 5.1 800-829 21 · Fractures, all sites 830-839 21 3.2 2.0 5.2 · Dislocations 840-848 29 4.2 2.8 6.3 · Sprains and strains 0.1 850-854 0.0 1.0 · Intracranial injuries 1 860-869 0 · Internal injuries 870-897 5 0.6 0.3 1.5 · Open wounds 900-999 28 2.7 5.7 Other injuries 3.9 V01-V82 10 1.4 8.0 2.7 Health status/health service contract V10-V19 4 0.6 0.2 1.5 · Family history of health problems Circumstances related to reproduction/development V20-V28 1 0.1 0.0 8.0 · Specific procedure/aftercare V50-V59 4 0.6 0.2 1.7 TOTAL 601 89.4 82.1 97.4

Table 4.
Diseases
and Injuries
by Diagnostic
Category - Men

[†] Includes all diagnoses reported with an absence of 5 or more days.

^{*} Standardized to age distribution of 1970 U.S. population.

Age-Adjusted Rate per 1,000* Lower 95% Upper 95% Confidence Limit per Confidence Limit per 1,000 Number of ICD9-CM Code **Category of Diagnoses** Diagnosest Infections and parasitic diseases 001-139 13 4.4 2.5 8.0 140-208, 230-234 Malignant neoplasms 8 3.5 1.7 7.5 · Digestive organs 150-159 0.7 0.1 5.3 1 · Respiratory system 0 160-165 Breast 174-175 1.7 0.6 5.1 4 · Genitourinary 179-189 2 0.7 0.2 3.0 · Nervous system 191-192 0 · Leukemia, lymphoma 200-208 0 Benign neoplasms and other 210-229, 235-239 8 2.7 1.3 5.8 Endocrine and metabolic diseases 240-279 3 1.0 0.3 3.3 Blood and blood-forming organs 280-289 1 0.3 0.0 1.8 290-319 Mental disorders 22 7.7 5.0 11.8 Alcoholism 303 0 304-305 Drug abuse 0 11.9 320-389 Nervous system and sense organs 22 7.7 4.9 390-459 Circulatory system 11 4.6 2.4 87 Hypertension 401 3 1.0 0.3 3.2 · Acute myocardial infarction 410 0 · Ischemic disease, not M.I. 411-414, 429.2 0 · Cerebrovascular disease 430-438 0 460-519 41.6 33.9 51.1 Respiratory system 107 26.1 460-465, 470-478 19.5 14.5 · Upper respiratory 52 466, 480-487 5.8 · Pneumonia/bronchitis 23 14.1 9.1 · Chronic respiratory conditions 490-496 17.3 28 11.5 7.7 Digestive system 520-579 32 11.6 8.1 16.6 Hernias 550-553 2 0.1 2.4 0.6 · Gall bladder disease 574-575 5.9 8 2.9 1.4 Genitourinary system 580-629 51 18.4 13.7 24.6 · Benign prostatic hypertrophy 600 NA Endometriosis 617 0.5 3.5 1.3 4 620.0-620.2 0.5 4.8 · Ovarian cysts 4 1.6 · Female genital pain/bleeding 625-626 4.4 2.3 8.3 11 20.7 27.8 Pregnancy and childbirth1 630-676 53 15.5 Skin and subcutaneous tissue 680-709 7 3.0 1.3 6.8 Musculoskeletal system 710-739 71 30.2 23.6 38.8 Dorsopathies 720-724 21 8.2 5.3 12.7 Congenital anomalies 740-759 0.8 0.3 2.5 3 Certain perinatal conditions 760-779 0 Symptoms, signs, and ill-defined conditions 780-799 5.2 22 8.0 12.4 Injury and poisoning 800-999 24.5 32.2 61 18.7 · Fractures, all sites 800-829 12 4.3 2.3 8.2 Dislocations 830-839 2.1 0.9 4.9 6 · Sprains and strains 840-848 25 10.5 6.9 15.9 · Intracranial injuries 850-854 6.0 2 1.5 0.4 Internal injuries 860-869 0.3 0.0 1.8 1 Open wounds 870-897 0 · Other injuries 900-999 15 5.8 3.4 10.1 Health status/health service contract V01-V82 16.4 12.0 22.5 44 · Family history of health problems V10-V19 2 0.7 0.2 3.0 · Circumstances related to reproduction/development 19.7 V20-V28 40 14.2 10.3 · Specific procedure/aftercare V50-V59 0.7 0.1 5.3 Total minus pregnancies 486 186.5 169.5 205.2 TOTAL 539 205.3 187.5 224.7

Table 5. Diseases and Injuries by Diagnostic Category - Women

[†] Includes all diagnoses reported with an absence of 5 or more days. * Standardized to age distribution of 1970 U.S. population.

¹ Only women aged 18-45 were included in the calculation of the rates for these diagnostic categories.

Diagnoses Associated with Pregnancy, Labor, and Delivery

During 1994, 53 pregnancy-related diagnoses were reported among 46 women (Table 6). Six women had multiple diagnoses. There were 17 diagnoses for complications related to pregnancy — 3 for complications of labor, delivery, and puerperium; 1 diagnosis for ectopic and molar pregnancy/abortive outcomes; and 1 for other indications for care in pregnancy, labor, and delivery. Thirty-one women had normal deliveries.

Diagnoses by Occupational Category, 1994

During 1994, the age-adjusted diagnosis rate for all employees (Table 7) was more than 3 times higher among hourly workers than salaried workers (351.4 versus 110.3 per 1,000 persons). Workers in the crafts and manual labor category, who comprised 7% of the work force, had the highest diagnosis rate (352.4 per 1,000), with 232 diagnoses reported for 116 workers. Clerical workers had the second highest diagnosis

rate (325.5 per 1,000), with 191 diagnoses reported among 104 persons. Security workers ranked third, with 31 diagnoses reported for 16 workers (215.6 per 1,000). Nonregular workers had the lowest rate (8.0 per 1,000 workers), with nine diagnoses among six workers.

Men. The diagnosis rate among men (Table 8) was 3 times higher for hourly workers (239.7 per 1,000) than for salaried workers (75.3 per 1,000). Crafts and manual labor workers had the highest rate (316.0 per 1,000), with 172 diagnoses reported for 92 men. The second highest rate was among the clerical workers (170.2 per 1,000), with 25 diagnoses reported among 10 men. Support staff ranked third, with 130 diagnoses reported among 76 men (101.6 per 1,000). Non-regular workers had the lowest rate (1.5 per 1,000), with two diagnosis for two men.

Women. The diagnosis rate among women (Table 9) was twice as high for hourly workers (410.3 per 1,000) as for salaried workers (202.3 per 1,000). Security workers had the highest rate (910.9 per 1,000), with 14 diagnoses reported among 5 women. The second highest rate was among the crafts and manual labor workers (604.1 per 1,000), with 60 diagnoses reported among 24 women. Clerical workers ranked third, with 166 diagnoses reported among 94 women (328.6 per 1,000). Non-regular workers had the lowest rate (18.9 per 1,000), with seven diagnoses among four women. Women had higher diagnosis rates than the men; this suggests a greater tendency among women to report injury or illness.

Category of Diagnoses	ICD9-CM Code	Number of Diagnoses†	Age- Adjusted Rate per 1,000*	Lower 95% Confidence Limit per 1,000	Upper 95% Confidence Limit per 1,000
Ectopic and Molar Pregnancy/Abortive Outcome	630-639	1	0.3	0.0	1.8
Complications Related to Pregnancy	640-648	17	7.4	4.5	12.3
Normal Delivery	650	31	11.7	8.0	17.2
Other Indications for Care in Pregnancy, Labor, and Delivery‡	651-659	1	0.3	0.0	1.8
Complications of Labor, Delivery, and Puerperium	660-676	3	1.1	0.3	3.8
TOTAL		53	20.7	15.5	27.8

Table 6.
Diagnoses
Associated with
Pregnancy, Labor,
and Delivery

 $[\]ensuremath{^{\dagger}}$ Includes all diagnoses reported with an absence of 5 or more days.

^{*} Only women aged 18-45 were included in the calculation of the rates for these diagnostic categories.

[‡] Includes delivery by cesarian section and multiple births.

Upper 95% Confidence Limit per 1,000 Lower 95% Number of Age-Adjusted Confidence Limit per 1,000 Number of Diagnoses† Workers Rate per 1,000* **Occupational Category** in 1994 Professional 4,342 380 85.5 74.5 98.0 Salaried Support 1,908 297 165.1 142.0 192.0 Subtotal 99.5 6,250 677 110.3 122.3 Clerical 693 191 325.5 268.3 395.0 Crafts and Manual Labor 630 232 352.4 262.2 473.8 Security 31 215.6 137.6 337.8 141 Subtotal 1,464 454 351.4 306.5 402.9 Non-Regular 966 9 8.0 3.7 17.5 TOTAL 8,680 1,140 126.0 118.5 134.1

Table 7.
Diagnoses by
Occupational
Category - Men
and Women

	Occupational Category	Number of Workers in 1994	Number of Diagnoses†	Age- Adjusted Rate per 1,000*	Lower 95% Confidence Limit per 1,000	Upper 95% Confidence Limit per 1,000
2	Professional	3,517	255	68.7	57.6	81.9
Salaried	Support	1,187	130	101.6	83.2	124.0
<i>O</i> ,	Subtotal	4,704	385	75.3	65.9	86.0
	Clerical	87	25	170.2	110.5	262.2
Hourly	Crafts and Manual Labor	553	172	316.0	218.1	457.8
면 면	Security	127	17	86.9	48.6	155.2
	Subtotal	767	214	239.7	199.3	288.4
	Non-Regular	502	2	1.5	0.4	6.2
	TOTAL	5,973	601	89.4	82.1	97.4

Table 8.
Diagnoses by
Occupational
Category - Men

	Occupational Category	Number of Workers in 1994	Number of Diagnoses†	Age- Adjusted Rate per 1,000*	Lower 95% Confidence Limit per 1,000	Upper 95% Confidence Limit per 1,000
g	Professional	825	125	157.9	119.2	209.1
Salaried	Support	721	167	264.5	216.8	322.8
S	Subtotal	1,546	292	202.3	174.5	234.5
	Clerical	606	166	328.6	268.8	401.6
Hourly	Crafts and Manual Labor	77	60	604.1	466.7	782.0
H	Security	14	14	910.9	500.1	1,659.3
	Subtotal	697	240	410.3	346.6	485.8
	Non-Regular	464	7	18.9	7.9	45.3
	TOTAL	2,707	539	205.3	187.5	224.7

Table 9.
Diagnoses by
Occupational
Category Women

[†] Includes all diagnoses reported with an absence of 5 or more days, including absences for pregnancy and delivery.

^{*} Standardized to age distribution of 1970 U.S. population.

Deaths Among Active Workers, 1994

There were 15 deaths reported among active workers in 1994. Five were due to cancer, three to external causes, two to diseases of the genitourinary system, two to endocrine and metabolic diseases, two to heart disease, and one to an infectious disease.

Relative Risk for All Diseases and Injuries by Occupation

In Table 10, the risk of one or more absences associated with selected diagnostic categories for specific occupational categories is compared with all other occupational categories in the SNL work force. This com-

parison takes into account the possible confounding effects of age and gender. In contrast to the previous series of tables, these analyses examine the risk of a worker having one or more absences for 5 or more consecutive workdays during 1994. This was done to minimize the problem associated with one person having multiple absences for the same condition.

Throughout this report, various tables and discussions refer to rates of illness or injury. Rates in this report reflect the number of events (e.g., absences, diagnoses) per 1,000 "person-years." A "person-year" is

a unit of measurement combining persons and time; it is equivalent to one person followed up for 1 year. When an individual worker remains in the work force for the entire year, she or he contributes one person-year to the calculation of rates of disease and injury presented in the report. Rates of disease and injury are often presented as the number of diagnoses or absences from work per thousand workers per year, or per 1,000 person-years.

The statistical methods used to compare the incidence of absences are the relative risk and the 95% confidence interval.

4,342	fessional Person-Years			1,908 Pe	pport erson-Years			693 P	lerical erson-Years			Man 630 P	afts and ual Labo erson-Year	s	
Disease	Constitute Pos	Confidence	e Limit	Set One Che	Relative Ask	Confidence	Limit Una	Least One Cle	Relative Pisa	Confidence	Limit Uppo	Least One file	Relative Pisa	Confidence	Limit Unar
All Diseases and Injuries	239	0.6	0.5	0.7	170	1.1	0.9	1.3	104	1.4	1.1	1.8	116	3.0	2.5
Infections and Parasitic Diseases	13	0.8	0.3	1.9	8	1.2	0.5	2.8	5	1.8	0.5	6.2	2	1.0	0.2
Malignant Neoplasms	13	1.1	0.4	3.0	6	1.2	0.5	3.1	4	1.7	0.5	6.0	0		
Benign Neoplasms	5	0.7	0.2	2.1	4	1.3	0.4	4.7	1	0.4	0.05	3.0	3	5.4	1.3
Endocrine and Metabolic Diseases	3	0.1	0.04	0.5	5	1.7	0.6	5.1	1	0.8	0.1	8.5	7	8.9	3.1
Nervous System and Sense Organs	17	0.4	0.2	0.8	11	0.8	0.4	1.6	13	3.3	1.5	7.2	9	2.8	1.3
Circulatory System	28	0.9	0.5	1.6	9	0.8	0.4	1.7	2	0.6	0.2	2.0	9	2.3	1.1
Respiratory System	38	0.4	0.3	0.6	36	1.1	0.7	1.5	32	1.9	1.3	2.9	30	4.0	2.6
Digestive System	33	0.5	0.3	0.8	20	1.0	0.6	1.7	16	2.4	1.3	4.4	12	2.0	1.1
Genitourinary System	18	0.8	0.5	1.5	19	1.7	1.0	3.1	5	0.5	0.2	1.1	3	1.2	0.4
Musculoskeletal System	37	0.4	0.3	0.6	37	1.3	0.9	1.9	12	0.7	0.3	1.3	35	5.2	3.4
Symptoms, Signs and III-Defined Condition	ns 19	0.4	0.2	0.8	14	1.2	0.6	2.1	9	1.9	0.8	4.2	13	4.0	2.1
Injury and Poisoning	36	0.4	0.2	0.5	29	1.0	0.6	1.4	22	2.2	1.2	3.8	36	4.9	3.3
Injury and Poisoning: Fractures	9	0.4	0.2	0.9	9	1.3	0.6	2.9	5	2.0	0.6	6.2	7	3.7	1.6
Injury and Poisoning: Sprains and Strains	10	0.3	0.2	0.6	11	1.0	0.5	2.0	8	1.8	0.8	4.4	13	5.5	2.8
Injury and Poisoning: "Other" Injuries	13	0.4	0.2	0.8	7	0.7	0.3	1.6	8	2.9	1.1	7.3	11	4.6	2.2

^{*} Persons with multiple absences during the time period were counted only once.

** Adjusted for age and gender — compared with all occupational categories.

The relative risk is the rate of absence in one group divided by the rate in a reference (comparison) group. The reference group is all workers other than the occupational category of primary interest. A relative risk of 1.0 indicates that both groups have the same risk of absence. A relative risk greater than 1.0 indicates that workers in a selected occupational category have a higher risk of absence than workers in all other occupational categories combined. A relative risk less than 1.0 implies that the selected occupational group has a lower risk of absence compared to all other occupational categories combined.

The confidence interval is a statistical measure of the precision of the risk estimate. A 95% confidence interval indicates the range in which one would expect the relative risk to fall 95% of the time. If the confidence interval includes the value 1.0, then the rate of absence is likely to have occurred by chance; in other words, the relative risk is not statistically significant at the 95% confidence level. For example, a relative risk of 2.0 with a confidence interval of 0.9 to 2.1 would not be considered statistically significant, whereas a relative risk of 1.4 with a confidence interval of 1.2 to 1.7 would be considered statistically significant.

The width of the confidence interval indicates the amount of uncertainty in the risk estimate and is affected by sample size and the number of events in the diagnostic category.

Clerical workers (RR=1.4), crafts and manual labor workers (RR=3.0), and security workers (RR=2.0) had a statistically significant increased risk of being absent 5 or more consecutive workdays in 1994 due to disease or injury (Table 10). Professional workers (RR=0.6) had a statistically significant decreased risk of absence.

Table 10.
Relative Risk for Selected Disease and
Injury Categories by Occupation

Relative Risk for Selected Disease and Injury Categories by Occupation

Table 10 also presents the relative risks of absences of 5 or more consecutive workdays for selected disease categories among workers by each occupational category.

Clerical workers were significantly more likely to be absent at least once during 1994 for diseases of the nervous system and sense organs (RR=3.3); diseases of the respiratory system (RR=1.9); diseases of the digestive system (RR=2.4); injury and poisoning (RR=2.2), as a whole; and "other" injuries (RR=2.9) as a subcategory of injury and poisoning. Crafts and manual labor workers were significantly more likely to be absent at least once during 1994 for benign neoplasms (RR=5.4); endocrine and metabolic diseases (RR=8.9); diseases of the nervous system and sense organs (RR=2.8); diseases of the circulatory system (RR=2.3); diseases of the respiratory system (RR=4.0); diseases of the digestive system (RR=2.0); diseases of the musculoskeletal system

(RR=5.2); symptoms, signs, and ill-defined conditions (RR=4.0); injury and poisoning (RR=4.9) as a whole; and fractures (RR=3.7), sprains and strains (RR=5.5), and "other" injuries (RR=4.6) as subcategories of injury and poisoning.

Security workers were found to have a statistically significant elevated risk associated with diseases of the digestive system (RR=3.9), and diseases of the genitourinary system (RR=9.1).

The lower overall diagnosis rates observed among salaried workers were also apparent in the relative risk analyses. Professional workers were significantly less likely to be absent at least once during 1994 for endocrine and metabolic diseases (RR=0.1); diseases of the nervous system and sense organs (RR=0.4); diseases of the respiratory system (RR=0.4); diseases of the digestive system (RR=0.5); diseases of the musculoskeletal system (RR=0.4); symptoms, signs, and ill-defined conditions (RR=0.4); injury and poisoning (RR=0.4) as a whole; and fractures (RR=0.4), sprains and strains (RR=0.3), and "other" injuries (RR=0.4) as subcategories of injury and poisoning. Non-regular

workers had a statistically significant decreased risk of diseases of the respiratory system (RR=0.1).

The reasons for the large differences in overall diagnosis rates and relative risks for particular diagnostic categories among different occupational categories may be due to small numbers. However, the consistency of the differences across broad diagnostic categories suggests that compliance with reporting back to work through an occupational physician varies among occupational categories.

OSHA-Recordable Events Among SNL Employees, 1994

OSHA-Recordable Events per Person. In 1994, 199 SNL employees had an OSHA-recordable event. Ten (5.0%) of these workers had two or more events. There was a total of 209 OSHA-recordable events among all employees (Table 11A). Diagnoses per OSHA-Recordable Event. A total of 228 diagnoses were associated with the 209 OSHA-recordable events recorded during 1994. Multiple diagnoses were reported for 18 (9%) of the events (Table 11B).

Diagnosis Rates for OSHA-Recordable Events. In 1994, the 228 diagnoses noted for the OSHA-recordable events yielded an ageadjusted rate of 25.2 per 1,000 persons. The age-adjusted diagnosis rate for women (35.1 per 1,000) was higher than the rate for men (21.0 per 1,000) (Table 11C).

Employee Category	Number of Workers in 1994	Number of	OSHA-Record	able Events	Total Persons	Total
		0	1	2	with at Least One Event	Number of Events
Men	5,973	5,852	114	7	121	128
Women	2,707	2,629	75	3	78	81
TOTAL	8,680	8,481	189	10	199	209

Table 11A.
OSHARecordable
Events per Person

	Number of	Diagnoses per O	SHA Event	Total	Total	
Employee Category	1	2	3	Number of Events	Number of Diagnoses	
Men	119	9	0	128	137	
Women	72	8	1	81	91	
TOTAL	191	17	1	209	228	

Table 11B.
Diagnoses
per OSHARecordable Event

Employee Category	Number of Workers in 1994	Number of Diagnoses	Crude Rate per 1,000	Age- Adjusted Rate per 1,000*	Lower 95% Confidence Limit per 1,000	Upper 95% Confidence Limit per 1,000
Men	5,973	137	22.9	21.0	17.4	25.3
Women	2,707	91	33.6	35.1	28.2	43.8
TOTAL	8,680	228	26.3	25.2	21.9	29.0

Table 11C.
Diagnosis Rates
for OSHARecordable
Events

^{*} Standardized to age distribution of 1970 U.S. population.

OSHA-Recordable Diseases and Injuries by Diagnostic Category, 1994

The age-adjusted diagnosis rate for each diagnostic category is presented for all workers combined in Table 12. Tables 13 and 14 show diagnosis rates by gender to further describe the disease and injury patterns in the work force.

For all workers (Table 12), the diagnostic category with the highest rate was injury and poisoning (18.0 per 1,000), with 163 diagnoses reported for 149 people, which accounted for 71% of all the diagnoses. Within this category were two subcategories with relatively higher rates: sprains and strains (9.5 per 1,000), with 85 diagnoses among 80 workers, and "other" injuries (4.8 per 1,000), with 44 diagnoses among 44 workers.

Men. The leading diagnostic category among men (Table 13), accounting for 77% of all diagnoses, was injury and poisoning (16.1 per 1,000), with 105 diagnoses among

97 men. Within this category were two subcategories with relatively higher rates. Sprains and strains (8.0) per 1,000) accounted for 48% of the diagnoses, with 50 diagnoses among 48 men. Seven diagnoses were sprains and strains of the back, 3 of the lower body, 2 of the upper body, and 38 of unspecified sites. Two men had multiple diagnoses. "Other" injuries (4.5 per 1,000) accounted for 29% of the injury and poisoning diagnoses, with 30 diagnoses among 30 men. These included 11 diagnoses for contusion: 6 toxic effects, 5 unspecified injuries, 3 abrasion/friction burns, 2 burns of unspecified degree, 2 superficial injuries to the eye, and 1 insect bite.

Women. The diagnostic category with the highest rate was the same among women as for men (Table 14). Injury and poisoning (23.1 per 1,000) accounted for 64% of all diagnoses, with 58 diagnoses among 52 women.

Within this category were two subcategories with relatively higher rates. Sprains and strains (13.7 per 1,000) accounted for 60% of the diagnoses, with 35 diagnoses for 32 women. Five of these were sprains and strains of the back, 3 of the lower extremities, 1 of the shoulder, and 26 of unspecified sites. Two women had multiple diagnoses. "Other" injuries (5.3 per 1,000) accounted for 24%, with 14 diagnoses for 14 women. These included five diagnoses for contusions, three toxic effects, two unspecified injuries, two abrasion/friction burns, one burn of unspecified degree, and one heat exhaustion.

Upper 95% Confidence Limit per 1,000 Age-Adjusted Rate per 1,000* Lower 95% Confidence Number of Limit per ICD9-CM Code **Category of Diagnoses** Diagnoses† 1,000 Infections and parasitic diseases 001-139 0 140-208, 230-234 0 Malignant neoplasms 0 · Digestive organs 150-159 · Respiratory system 160-165 0 174-175 0 Breast Genitourinary 179-189 0 191-192 0 · Nervous system 200-208 · Leukemia, lymphoma 0 Benign neoplasms and other 210-229, 235-239 0.2 0.0 1.2 240-279 0 Endocrine and metabolic diseases Blood and blood-forming organs 280-289 0 290-319 0 Mental disorders · Alcoholism 0 303 · Drug abuse 304-305 0 5 0.5 0.2 1.2 Nervous system and sense organs 320-389 Circulatory system 390-459 0.1 0.0 8.0 1 Hypertension 401 0 · Acute myocardial infarction 410 0 · Ischemic disease, not M.I. 411-414, 429.2 0 430-438 0 · Cerebrovascular disease Respiratory system 460-519 3 0.3 0.1 0.9 460-465, 470-478 3 0.3 0.1 0.9 · Upper respiratory · Pneumonia/bronchitis 466, 480-487 0 · Chronic respiratory conditions 490-496 0 Digestive system 520-579 1 0.1 0.0 0.7 Hernias 550-553 1 0.1 0.0 0.7 · Gall bladder disease 574-575 0 Genitourinary system 580-629 0 · Benign prostatic hypertrophy 600 0 0 · Endometriosis 617 · Ovarian cysts 620.0-620.2 0 0 · Female genital pain/bleeding 625-626 Pregnancy and childbirth 630-676 0 Skin and subcutaneous tissue 680-709 3 0.3 0.1 0.9 710-739 Musculoskeletal system 32 3.5 2.4 5.1 · Dorsopathies 720-724 8 0.7 0.3 1.4 Congenital anomalies 740-759 0 Certain perinatal conditions 760-779 0 Symptoms, signs, and ill-defined conditions 780-799 19 2.3 1.4 3.7 Injury and poisoning 800-999 163 18.0 15.2 21.3 · Fractures, all sites 800-829 11 0.5 1.7 1.0 0.5 · Dislocations 830-839 0.1 0.0 1 · Sprains and strains 840-848 85 9.5 7.6 12.0 · Intracranial injuries 850-854 0 · Internal injuries 860-869 0 · Open wounds 870-897 22 2.6 1.7 4.1 · Other injuries 900-999 44 4.8 3.5 6.6 Health status/health service contract V01-V82 0 · Family history of health problems V10-V19 0 · Circumstances related to reproduction/development V20-V28 0 V50-V59 · Specific procedure/aftercare 0 228 25.2 21.9 29.0 Total minus pregnancies **TOTAL** 228 25.2 21.9 29.0

Table 12.
OSHARecordable
Diseases and
Injuries by
Diagnostic
Category - Men
and Women

[†] Includes all diagnoses reported with an absence of 5 or more days.

Standardized to age distribution of 1970 U.S. population.

Upper 95% Confidence Limit per 1,000 Lower 95% Age-Adjusted Confidence Rate per 1,000* Limit per Number of 1,000 **Category of Diagnoses** ICD9-CM Code Diagnoses† 001-139 Infections and parasitic diseases 0 140-208, 230-234 0 Malignant neoplasms · Digestive organs 150-159 0 · Respiratory system 160-165 0 174-175 0 Breast 179-189 0 · Genitourinary · Nervous system 191-192 0 · Leukemia, lymphoma 200-208 0 0.2 0.0 210-229, 235-239 1 1.5 Benign neoplasms and other 240-279 0 Endocrine and metabolic diseases Blood and blood-forming organs 280-289 0 Mental disorders 290-319 0 0 Alcoholism 303 304-305 0 Drug abuse 0.2 Nervous system and sense organs 320-389 2 0.1 1.0 Circulatory system 390-459 0 401 0 · Hypertension · Acute myocardial infarction 410 0 411-414, 429.2 0 · Ischemic disease, not M.I. · Cerebrovascular disease 430-438 0 460-519 0 Respiratory system 460-465, 470-478 0 · Upper respiratory 466, 480-487 0 · Pneumonia/bronchitis 490-496 · Chronic respiratory conditions 0 Digestive system 520-579 0.1 0.0 1.0 1 550-553 1 0.1 0.0 1.0 Hernias 574-575 0 · Gall bladder disease 580-629 0 Genitourinary system 600 0 · Benign prostatic hypertrophy NA 617 Endometriosis 620.0-620.2 NA · Ovarian cysts 625-626 NA Female genital pain/bleeding Pregnancy and childbirth 630-676 NA 680-709 0 Skin and subcutaneous tissue 710-739 18 2.6 1.6 4.2 Musculoskeletal system 720-724 8.0 0.4 1.8 · Dorsopathies 7 Congenital anomalies 740-759 0 760-779 0 Certain perinatal conditions 780-799 10 1.7 0.8 3.5 Symptoms, signs, and ill-defined conditions 800-999 105 13.0 20.0 16.1 Injury and poisoning 1.0 0.5 2.0 · Fractures, all sites 800-829 8 830-839 0.1 0.0 8.0 · Dislocations 1 8.0 5.9 11.0 840-848 50 · Sprains and strains 0 850-854 · Intracranial injuries 860-869 0 · Internal injuries · Open wounds 870-897 16 2.4 1.4 4.2 Other injuries 900-999 30 4.5 3.0 6.8 V01-V82 0 Health status/health service contract V10-V19 0 · Family history of health problems · Circumstances related to reproduction/development V20-V28 0 · Specific procedure/aftercare V50-V59 0 TOTAL 137 21.0 17.4 25.3

Table 13.
OSHARecordable
Diseases and
Injuries by
Diagnostic
Category - Men

[†] Includes all diagnoses reported with an absence of 5 or more days.

Standardized to age distribution of 1970 U.S. population.

Lower 95% Upper 95% Age-Adjusted Confidence Confidence Number of Rate per 1,000* Limit per Limit per ICD9-CM Code **Category of Diagnoses** Diagnoses† 1,000 1,000 001-139 Infections and parasitic diseases 0 Malignant neoplasms 140-208, 230-234 0 · Digestive organs 150-159 0 · Respiratory system 160-165 0 Breast 174-175 0 Genitourinary 179-189 0 · Nervous system 191-192 0 200-208 · Leukemia, lymphoma 0 210-229, 235-239 Benign neoplasms and other 0 240-279 Endocrine and metabolic diseases 0 Blood and blood-forming organs 280-289 0 Mental disorders 290-319 0 0 · Alcoholism 303 · Drug abuse 304-305 0 Nervous system and sense organs 320-389 1.3 0.3 3 4.6 390-459 0.4 0.1 3.1 Circulatory system 1 401 · Hypertension 0 · Acute myocardial infarction 410 0 · Ischemic disease, not M.I. 411-414, 429.2 0 · Cerebrovascular disease 430-438 0 Respiratory system 460-519 3 1.0 0.3 3.2 · Upper respiratory 460-465, 470-478 3 1.0 0.3 3.2 466, 480-487 0 · Pneumonia/bronchitis · Chronic respiratory conditions 490-496 0 Digestive system 520-579 0 Hernias 550-553 0 · Gall bladder disease 574-575 0 Genitourinary system 580-629 0 · Benign prostatic hypertrophy 600 NA Endometriosis 617 0 · Ovarian cysts 620.0-620.2 0 · Female genital pain/bleeding 625-626 0 Pregnancy and childbirth 630-676 0 Skin and subcutaneous tissue 680-709 3 1.0 0.3 3.3 710-739 5.1 8.9 Musculoskeletal system 14 2.9 Dorsopathies 720-724 0.3 0.0 2.1 1 Congenital anomalies 740-759 0 Certain perinatal conditions 760-779 0 Symptoms, signs, and ill-defined conditions 780-799 9 3.2 6.2 1.6 Injury and poisoning 800-999 58 23.1 17.5 30.5 · Fractures, all sites 800-829 3 1.0 0.3 3.1 830-839 0 · Dislocations 9.5 19.6 · Sprains and strains 840-848 35 13.7 · Intracranial injuries 850-854 0 · Internal injuries 860-869 0 · Open wounds 870-897 3.2 7.4 6 1.4 900-999 · Other injuries 14 5.3 3.0 9.3 Health status/health service contract V01-V82 0 V10-V19 0 · Family history of health problems · Circumstances related to reproduction/development V20-V28 0 Specific procedure/aftercare V50-V59 n 35.1 28.2 43.8 Total minus pregnancies 91 91 35.1 28.2 43.8 **TOTAL**

Table 14.
OSHARecordable
Diseases and
Injuries by
Diagnostic
Category Women

[†] Includes all diagnoses reported with an absence of 5 or more days.

Standardized to age distribution of 1970 U.S. population.

OSHA-Recordable Diagnoses by Occupational Category, 1994

During 1994, the age-adjusted diagnosis rate among all employees (Table 15) was more than 5 times higher for hourly workers than for salaried workers (84.9 versus 16.1 per 1,000 persons). Crafts and manual labor workers, who comprised 7% of the work force, had the highest diagnosis rate (124.1 per 1,000), with 79 diagnoses reported for 65 persons. The second highest diagnosis rate was among security workers (101.6 per 1,000), with 12 diagnoses for 12 persons. Clerical workers (50.7 per 1,000) ranked third, with 41 diagnoses among 34 workers. The diagnosis rate for workers in the category of non-regular workers was substantially lower than all other occupational categories (4.2 per 1,000 workers), with eight diagnoses for eight workers.

Men. The diagnosis rate among men (Table 16) was over 10 times higher for hourly workers (120.0 per 1,000) than for salaried workers (11.7 per 1,000). Crafts and manual labor workers had the highest rate (120.7 per 1,000), with 63 diagnoses reported for 53 men. Security workers ranked second (102.2 per 1,000), with ten diagnoses among ten men. Clerical workers followed, with seven diagnoses for five men (54.3 per 1,000). As seen with the combined groups, non-regular workers had the lowest rate (0.8 per 1,000) with only one diagnosis reported.

Women. The diagnosis rate among women (Table 17) was more than 2 times higher for the hourly workers (63.7 per 1,000) than for the salaried workers (26.0 per 1,000). The diagnosis rate for workers in the crafts and manual labor category (143.9 per 1,000) was the highest with 16 diagnoses reported among 12 women. Security workers (137.1 per 1,000) ranked second with two diagnoses for two women. The third highest rate occurred in the category of clerical workers (49.4 per 1,000), with 34 diagnoses among 29 women. The diagnosis rate was the lowest among the non-regular workers (8.6 per 1,000) with seven diagnoses for seven women.

	Occupational Category	Number of Workers in 1994	Number of Diagnoses†	Age- Adjusted Rate per 1,000*	Lower 95% Confidence Limit per 1,000	Upper 95% Confidence Limit per 1,000
훘	Professional	4,342	40	11.4	7.2	18.2
Salaried	Support	1,908	48	27.0	18.7	39.1
S	Subtotal	6,250	88	16.1	12.0	21.7
	Clerical	693	41	50.7	35.5	72.5
Hourly	Crafts and Manual Labor	630	79	124.1	69.6	221.2
원	Security	141	12	101.6	52.0	198.2
	Subtotal	1,464	132	84.9	66.8	107.8
	Non-Regular	966	8	4.2	1.8	9.9
	TOTAL	8,680	228	25.2	21.9	29.0

Table 15. OSHA-Recordable Diagnoses by Occupational Category - Men and Women

	Occupational Category	Number of Workers in 1994	Number of Diagnoses†	Age- Adjusted Rate per 1,000*	Lower 95% Confidence Limit per 1,000	Upper 95% Confidence Limit per 1,000
p	Professional	3,517	23	6.9	3.7	12.9
Salaried	Support	1,187	33	26.6	17.3	40.9
0,	Subtotal	4,704	56	11.7	8.0	17.0
	Clerical	87	7	54.3	24.9	118.4
Hourly	Crafts and Manual Labor	553	63	120.7	61.6	236.8
훈	Security	127	10	102.2	48.9	213.3
	Subtotal	767	80	120.0	79.8	180.4
	Non-Regular	502	1	0.8	0.1	5.5
	TOTAL	5,973	137	21.0	17.4	25.3

Table 16. OSHA-Recordable Diagnoses by OccupationalCategory - Men

	Occupational Category	Number of Workers in 1994	Number of Diagnoses†	Age- Adjusted Rate per 1,000*	Lower 95% Confidence Limit per 1,000	Upper 95% Confidence Limit per 1,000
æ	Professional	825	17	19.9	10.5	37.6
Salaried	Support	721	15	27.6	14.5	52.6
0)	Subtotal	1,546	32	26.0	16.6	40.9
	Clerical	606	34	49.4	33.6	72.8
Hourly	Crafts and Manual Labor	77	16	143.9	87.4	237.2
Ho	Security	14	2	137.1	26.1	719.0
	Subtotal	697	52	63.7	46.9	86.4
	Non-Regular	464	7	8.6	3.0	24.2
	TOTAL	2,707	91	35.1	28.2	43.8

Table 17. OSHA Diagnoses by Occupational Category - Women

[†] Includes all diagnoses resulting from an OSHA-recordable event.

* Standardized to age distribution of 1970 U.S. population

OSHA-Recordable Relative Risk for All Diseases and Injuries by Occupation

In Table 18 and Tables 19A through 19F, the risk of one or more OSHA-recordable events associated with selected diagnostic categories for specific occupational categories is compared with all other occupational categories in the SNL work force.

In contrast to the previous series of tables, these analyses examine the risk of a worker having one or more OSHA-recordable events during 1994. This was done to minimize the problem associated with one person having multiple events for the same condition.

Clerical workers (RR=2.0), crafts and manual labor workers (RR=7.0), and security workers (RR=4.3) had statistically significant increased risks of an OSHA-recordable event in 1994 (Table 18). Professional workers (RR=0.2) and non-regular workers (RR=0.3) had a statistically significant decreased risk of an event.

OSHA-Recordable Relative Risk for Selected Disease and Injury Categories by Occupation

Tables 19A through 19F present the relative risk of an OSHA-recordable event for selected disease categories among workers by each occupational category.

Clerical workers were significantly more likely to have at least one OSHA-recordable event during 1994 for injury and poisoning (RR=1.8) as a whole, and sprains and strains (RR=2.1), as a subcategory of injury and poisoning. Crafts and manual labor workers were also significantly more likely to have at least one OSHA-recordable event during 1994 for diseases of the musculoskeletal system (RR=9.9); injury and poisoning (RR=7.8) as a whole; and fractures (RR=4.5), sprains and strains (RR=9.4), open wounds (RR=4.6), and "other" injuries (RR= 9.9), as subcategories of injury and poisoning. Security workers were significantly more likely to have at least one OSHA-recordable event during 1994 for injury and poisoning (RR=5.6) as a whole, and fractures (RR=11.8), sprains and strains

(RR= 6.1), and "other" injuries (RR= 4.1), as subcategories of injury and poisoning.

Professional workers had a statistically significant decreased risk of having an OSHA-recordable event due to diseases of the musculoskeletal system (RR=0.2); injury and poisoning (RR=0.2) as a whole; and sprains and strains (RR=0.1), open wounds (RR=0.3), and "other" injuries (RR=0.2), as subcategories of injury and poisoning. Non-regular workers were also at a significantly decreased risk for injury and poisoning (RR=0.3) as a whole, and "other" injuries (RR=0.2), as a subcategory of injury and poisoning.

Occupational Category	Person-Years	Persons with at Least One Event*	Relative Risk**	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Professional	4,342	36	0.2	0.2	0.3
Support	1,908	44	0.9	0.7	1.3
Clerical	693	34	2.0	1.3	3.0
Crafts and Manual Labor	630	65	7.0	5.1	9.6
Security	141	12	4.3	2.4	7.7
Non-Regular	966	8	0.3	0.1	0.6
TOTAL	8,680	199			

<sup>Persons with multiple absences during the time period were counted only once.
Adjusted for age and gender — compared with all occupational categories.</sup>

Table 18.
All OSHARecordable
Diseases and
Injuries by
Occupational
Categories

Occupational Category	Person-Years	Persons with at Least One Event*	Relative Risk**	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Professional	4,342	5	0.2	0.1	0.5
Support	1,908	8	1.2	0.5	2.8
Clerical	693	5	1.8	0.7	4.7
Crafts and Manual Labor	630	11	9.9	4.2	23.5
Security	141	0			
Non-Regular	966	1	0.2	0.01	4.8
TOTAL	8,680	30			

Table 19A. Diseases of the Musculoskeletal System

Occupational Category	Person-Years	Persons with at Least One Event*	Relative Risk**	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Professional	4,342	26	0.2	0.1	0.3
Support	1,908	29	0.8	0.5	1.2
Clerical	693	22	1.8	1.1	3.1
Crafts and Manual Labor	630	54	7.8	5.4	11.0
Security	141	12	5.6	3.1	10.3
Non-Regular	966	6	0.3	0.1	0.8
TOTAL	8,680	149			

Table 19B. Injury and Poisoning

Occupational Category	Person-Years	Persons with at Least One Event*	Relative Risk**	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Professional	4,342	4	0.5	0.2	1.6
Support	1,908	1	0.3	0.04	2.3
Clerical	693	1	1.4	0.1	21.6
Crafts and Manual Labor	630	3	4.5	1.1	18.4
Security	141	2	11.8	2.4	56.8
Non-Regular	966	0			
TOTAL	8,680	11			

Table 19C. Injury and Poisoning: Fractures

Occupational Category	Person-Years	Persons with at Least One Event*	Relative Risk**	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Professional	4,342	10	0.1	0.1	0.3
Support	1,908	15	0.8	0.4	1.3
Clerical	693	15	2.1	1.1	4.1
Crafts and Manual Labor	630	32	9.4	5.9	14.9
Security	141	6	6.1	2.6	14.2
Non-Regular	966	2	0.1	0.02	1.2
TOTAL	8,680	80			

Table 19D. Injury and Poisoning: Sprains and Strains

^{*} Persons with multiple absences during the time period were counted only once.
** Adjusted for age and gender — compared with all occupational categories.

Occupational Category	Person-Years	Persons with at Least One Event*	Relative Risk**	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Professional	4,342	5	0.3	0.1	0.8
Support	1,908	5	1.0	0.4	2.8
Clerical	693	2	1.1	0.2	5.1
Crafts and Manual Labor	630	6	4.6	1.7	12.2
Security	141	1	2.7	0.3	20.9
Non-Regular	966	3	2.0	0.1	33.9
TOTAL	8,680	22			

Table 19E. Injury and
Poisoning:
Open Wounds

Occupational Category	Person-Years	Persons with at Least One Event*	Relative Risk**	Lower 95% Confidence Limit	Upper 95% Confidence Limit
Professional	4,342	8	0.2	0.1	0.5
Support	1,908	9	0.9	0.4	1.8
Clerical	693	5	1.7	0.5	5.3
Crafts and Manual Labor	630	18	9.9	5.2	19.1
Security	141	3	4.1	1.3	13.3
Non-Regular	966	1	0.2	0.05	0.9
TOTAL	8,680	44			

Table 19F. Injury and
Poisoning:
"Other" Injuries

^{*} Persons with multiple absences during the time period were counted only once. ** Adjusted for age and gender — compared with all occupational categories.

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behavior and unspecified nature 7. Foreign nutrition and metabolic diseases, and 7. Foreign nutrition and metabolic diseases, and 7. Foreign nutrition and metabolic diseases, and 7. Foreign nutrition and metabolic diseases, such as disablets and gruit, and 7. Foreign nutrition and metabolic diseases, such as disablets and gruit, and 7. Foreign nutrition of the innume system 7. Foreign nutrition of the days and metabolic diseases, such as disablets and gruit, and 7. Foreign nutrition of the days and the properties of the days and includes interesting and the properties of the days and the days and the properties of the days and the properties of the days and the properties of the days and the days and the properties of the days and the days and the properties of the days and the properties of the days and the days and the properties of the days and the properties of the days and the	Malignant neoplasms		All cancers, regardless of the part of the body affected.
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Deceases of the nervous system and sense organs 32.389 Deceases of the nervous system and sense organs 32.389 Deceases of the circuitatory system 394-69 Deceases of the circuitatory system 394-69 Deceases of the circuitatory system 460-519 Deceases of the respiratory system 460-519 Deceases of the respiratory system 460-519 Deceases of the decease of the perivation of the system of the syste	Diseases of the blood and blood-forming organs	280-289	Includes anemia and hemophilia, but excludes leukemia.
encephalitis herefullary deseases, such as Hainingians schrores. Alzheimer's and Patriarian's diseases; epitary mighle schrors, mighles decreases in might be early activated as conductive hearing to sail and distance and discourse of the early such as conductive hearing to sail and distance and discourse and discourse and the early such as conductive hearing to sail and distance in the early such as conductive hearing to sail and distance when the early such as conductive hearing to sail and distance when the early such as conductive hearing to sail and distance when the early such as conductive hearing to sail and distance when the early sail and sail and the early sail and the early sail and the early sail and the early sail and early places of the respitatory system. Diseases of the digistive system 520-579 Diseases of the digistive system 520-579 Diseases of the genitourinary system 580-629 Diseases of the genitourinary system 580-629 Diseases of the genitourinary system 680-629 Diseases as affecting the leaf and mouth, sailvary glands, digistive tract, and the abdominate and places of the claricy glastic system and control and places of the claricy glastic system and control and the early places of the claricy glastic system and control and the early places of the early glastic system and the early places of the early glastic system and places of the musculoskeletal system and 710-739 Includes an early system is provided the early system system system and the early places of the musculoskeletal system and 710-739 Includes an early system is system and 710-739 Symptoms, signs, and II-defined conditions 780-799 Symptoms, signs, and III-defined	Mental disorders	290-319	Psychiatric diagnoses, such as dementia, schizophrenia, depression, and anxiety disorders; alcoholism; drug dependence; and eating disorders, such as bulimia.
heumatic fever, hoart numurus, hear attacks, angina, hardening of the arferies, variouse evens, hearnormicis, and phobbids. Diseases of the respiratory system 460 519 lockudes colds, sinusitis, laryngitis, pneumonia and influenza, chronic tronchilis, asthma, and emphysical feet and mouth, salivary glands, digastive tract, and the abdoninal houses, some special propriets (and the land and propriets). Diseases affecting the feeth and mouth, salivary glands, digastive tract, and the abdoninal houses, and including all public propriets in the land photosocial public propriets. Diseases of the genillourinary system 560-629 Diseases affecting the kidneys, the prostrate, and testes, buring breast diseases, and including public influential propriets. Complications of pregnancy, childrith, and public and the land propriets. Diseases of the genillourinary system 680-79 Diseases affecting the kidneys, the prostrate, and testes, buring breast diseases in the unappear of the musculoskalerial system and connective fissase of the six and subcultaneous issue 680-709 Includes miscarriage, complications of pregnancy, such as hemorrhage pregnancy-related high blood pressure; pre-eclamptaic premiume liker or other complications of blood interestication of the musculoskalerial system and connective fissase of the musculoskalerial propriets and produce perinated lines of connective fissases. Corganital anomalies 740-759 Ahomenial anatomical development present a british includes spin financial produce perinated lines of connectivities, such as financial produce perinated lines of connectivities, such as financial produces of the musculoskalerial produces of the musculoskalerial system and strains of joints an	Diseases of the nervous system and sense organs	320-389	
Diseases of the digestive system 520-579 Diseases affecting the teeth and mouth, salivary glands digestive trad, and the abdominal polytics. Diseases of the genitourinary system 580-629 Diseases of the genitourinary system 580-629 Diseases affecting the kidneys, the prostratie, addominal herea, and intestinal polytics. Diseases of the genitourinary system 580-629 Diseases of the manufacture of general diseases, intertility intelled and ternalely pelvic inflammatory diseases; diseases to the overy and mensional diseased. Complications of pregnancy, childrich, and purpertium 180-868-760 Includes arms, cellulitis, sunburn, positiasis, and sebornhea. Diseases of the musculosdeletal system and connective tissue 180-870 Diseases of the musculosdeletal system and connective tissue Congenital anomalies 180-799 Ahonormal anatomical development present birth. Includes spin billida, cell palate, hareligh and various chromosomal anomalies, such as Kinneldelers syndrome. Certain conditions originaling in the perinatal period 180-799 Symptoms, signs, and ill-defined conditions 780-799 Diseases of the mother that can produce perinatal illiness of each of the felture or newtoms. Examples include maternal high blood pressure, maternal manufaction, cetopic pregnancy, and treech thirth. Also includes distoratory or other tests, and conditions for which no specific diagnosis has been made. Examples include maternal high blood pressure, maternal manufaction, cetopic pregnancy, and beech thirth. Also includes bibockout, chils, distribution, cetopic pregnancy, and breath thirth. Also includes of the conditions originaling in the perinatal period or newtoms. Examples include maternal high blood pressure, maternal manufaction, cetopic pregnancy, and treatment in process. The process of the mother that can produce perinatal illi	Diseases of the circulatory system	390-459	rheumatic fever, heart murmurs, heart attacks, angina, hardening of the arteries, varicose
cavity. Examples include dental abscess, uters's, appendicis, padernian pateits, excluding viral repatitis, critomiss of the her, galistones, portarelist, addornian pateits, and includes miscarriage; complications of pregnancy, such as homorrhage; pregnancy-related right blood pressure; pre-ectamysts, premalure libor or other complications of labor. Diseases of the skin and subcutaneous tissue 680-709 Includes ance, cellulists, subman, protraiss, and absorbrea. Includes arthritis, systemic lupus erythematosus, antylosing spondyfilis, herniated connective tissue Congenital anomalies 740-759 Includes arthritis, systemic lupus erythematosus, antylosing spondyfilis, herniated advorced tissue anomalies. Certain conditions originating in the perinatal period 760-779 Conditions or diseases of the mother that can produce perinations. Certain conditions originating in the perinatal period 760-779 Conditions or diseases of the mother that can produce perinations. Symptoms, signs, and ill-defined conditions 780-799 Symptoms, signs, abnormal results of laboratory or other tests, and conditions for which no specific diagnosis has been made. Examples include blockout, chills, diztriess, failpue, pallor, advormal limpty and poisoning 180-899 Dislocations of joints, and associated muscles; concussions: brushes; civic infernal injuries or long the status and complications of medical or surgical care. Fractures, all sites Proclares, all sites 180-890 Symptoms, signs, and strains of joints and associated muscles; concussions: brushes; civic infernal injuries or overextending the lagraneits of a site in strain injuries. The case of the chest, abdomen, and periods or surgical care. 180-891 Includes animal brushes to m	Diseases of the respiratory system	460-519	
Complications of pregnancy, childbirth, and puerpetitum descretes. Complications of pregnancy, childbirth, and puerpetitum descretes. Complications of pregnancy, childbirth, and puerpetitum descretes. Essages of the skin and subcultaneous lissue 680-709 Includes aniscarliage; complications of pregnancy, such as hemorrhage; pregnancy-related high blood pressure; pre-éclampia; premature labor or other complications of labor. The present of the skin and subcultaneous lissue 680-709 Includes arthrills, systemic lupus erythematosus, ankylosing spondylitis, herniated intervertebral disc ("Slipped disc"), lumbago, scialitia, finematism, tendinitis, and decopronrise connective fissue Congenital anomalies 740-759 Abordan anomalies in the perinatal period of the present anomalies and anomalies of section and anomalies south as Klinefeller's syndrome. Certain conditions originaling in the perinatal period and various chromosomal anomalies, such as Klinefeller's syndrome. Conditions originaling in the perinatal period such as feed in the fotus or newborn. Examples include black perinatal liness or death of the fotus or newborn. Examples include that produce perinatal liness or death of the fotus or newborn. Examples include that are produce perinatal liness or death of the fotus or newborn. Examples include that the state of the produce state to the lines and perinatal period such as fell maliturition or stoy growth, injuries related to thirt bins and perinatal period surface. Self-malitum perinatal period surface and self-malitum period sourch as fell maliturition or stoy growth, injuries related to thirt bins and perinatal period sourch as fell maliturition or stoy growth, injuries related to thirt bins and perinatal period sourch as fell maliturition or stoy growth, injuries related to the lates and period to a sourch as fell maliturition or stoy growth, injuries related to the lates and period to a sourch as fell maliturition or stoy growth, injuries to frenched muscles sourch as fell maliturition or stoy growt	Diseases of the digestive system	520-579	cavity. Examples include dental abscess, ulcers, appendicitis, hepatitis (excluding viral hepatitis), cirrhosis of the liver, gallstones, pancreatitis, abdominal hernia, and intestinal
high blood pressure; pre-eclampsis, premàture labor or other complications of labor. Diseases of the skin and subcutaneous tissue 700-739 Includes acne, cellulitis, sunburn, psoriasis, and seborrhea. 700-739 Includes arthritis, systemic lupus erythematosus, anlykoning spondylitis, hemiated intervertebral disc (Salpped disc*), lumbago, stalita, meumalism, tendinitis, and osleoprosis concentrated in the presentation of the complex of the most of the most of the presentation of the feture or newborn. Examples include maternal high blood pressure, maternal material flight blood pressure, maternal material period or newborn. Examples include maternal high blood pressure, maternal material period various chromosomal anomalies, such as Killendiers syndrome. Certain conditions originating in the perinatal period or 760-779 Conditions or diseases of the mother that can produce perinatal illness or death of the feture or newborn. Examples include branch as Killendiers syndrome. Certain conditions originating in the perinatal period various chromosomal anomalies, such as Killendiers of soften conditions or originating in the perinatal period such as Killendiers of which the feture or newborn. Examples include blackut, chills, distrations or distration of sort originating or the tests, and conditions or which no such as the maternal high blood pressure, maternal material period such as fella individual or 3 or	Diseases of the genitourinary system	580-629	(male and female); pelvic inflammatory disease; diseases of the ovary; and menstrual
Diseases of the musculoskeletal system and connective lissue Tion-739 Includes arthritis, systemic tupus erythematosus, ankylosing spondyllitis, herniated intervertebral disc ("Sipped disc"), lumbago, sciatica, rheumatism, tendinitis, and osteoprorsis and various chromosomal annomalies. Such as Klinefelter's syndrome. Certain conditions originating in the perinatal period 760-779 Abnormal anatomical development present at birth. Includes spina birdia, clift palate, hareling and various chromosomal anomalies, such as Klinefelter's syndrome. Certain conditions originating in the perinatal period such assessing include maternal hingh blood pressure and maintrificinion, ectopic pregnancy, and treech birth. Also includes other conditions originating in the perinatal period such as fetal mainutrition or slow growth, injuries related to birth trauma, and perinatal period submitted. Symptoms, signs, and ill-defined conditions Roborgo Symptoms, signs, abnormal results of laboratory or other tests, and conditions for which no specific diagnosis has been made. Examples include Blackout, chilis, dizziness, fatigue, pallor, abnormal veight loss, undiagnosed chest pain, and hearthum. Injury and poisoning Roborgo Symptoms, signs, abnormal results of laboratory or other tests, and conditions for which no specific diagnosis has been made. Examples include Blackout, chilis, dizziness, fatigue, pallor, abnormal weight loss, undiagnosed chest pain, and hearthum. Roborgo Symptoms and strains of laboratory or other tests, special care, special care, so internal injuries with the torushing, purcture, tearing, or blunt impact burns: birdiscallorists; polasning; robosing; prostible; heat stroke; and complications of medical or surgical care. Fractures, all sites Robosal Symptoms and strains of joints and associated muscless. Robosal strains of joints and adjacent muscles Robosal strains of joints and strains of joints and sacciated muscless of the chest, and complications or medical or surgical area. Fractures, all sites		630-676	
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	Supplementary classifications related to health care for reproduction and child development	V20-V28	Includes problems related to pregnancy, postpartum care, contraception, outcome of delivery, and physical development of child.
		V50-V59	Includes care for workers who have been treated previously for an illness or injury that is no longer present but who receive care to complete treatment or prevent recurrence.

GLOSSARY

Adjustment - A mathematical procedure for rates in which the effects of differences (such as age) in groups have been removed. The purpose of adjustment is to allow comparisons between two or more groups.

Epidemiologic Surveillance - The regular and systematic collection of data and interpretation of the distribution of illness, injury, and death in the DOE labor force over time.

ICD-9-CM - The ICD-9-CM (International Classification of Diseases-9th Revision-Clinical Modification) is based on the ICD-9 originally published by the World Health Organization and widely accepted as a standard for the coding of cause of death. The ICD-9-CM is required for the reporting of morbidity to all U.S. Public Health Service programs.

Diagnoses Rate - The number of new, reported health events observed among DOE workers per thousand DOE workers at risk during a given period of time.

Person-year - A unit of measurement combining persons and time equivalent to one person followed up for one year. In Epidemiologic Surveillance reports, rates are often expressed as the number of events (e.g., illness absences, injuries) per 1,000 personyears.

STATISTICAL NOTE

The age-adjusted rate was calculated using the 1970 U.S. population. The age-adjusted rate represents the hypothetical rate that would have been observed if the 1993 group had the same age distribution as the 1970 U.S. population. The age-adjusted rate is used to compare populations that differ in age. The 1970 U.S. population was selected because it is the standard most used for published morbidity data.

The illness and injury absence rate is defined as an absence due to illness or injury of 5 or more consecutive work days, divided by the total number of workers. OSHA-recordable events may or may not involve an absence fromwork.

The 95% confidence interval is based on the normal approximation to the binomial distribution where the calculated illness and injury absence rate falls within the interval. The true rate lies within this interval 95% of the time.