**Section 840.305 Information Required to be Reported**

a) The Occupational Disease Registry shall consist of information on the following occupational disease incidences:

1) Elevated blood lead levels (lead poisoning);

2) Workplace fatalities;

3) Workplace nonfatal injuries and illnesses; and

4) Other specific illnesses such as asbestosis, silicosis and coal worker's pneumoconiosis.

b) Information on the occupational disease incidences shall be collected in four ways.

1) Information concerning elevated blood lead levels (lead poisoning) shall be reported to the Department by the facilities specified in Section 840.300 of this Part.

A) The Department will follow up with attending physicians or patients/cases or will contract with the local health authorities that agree to conduct interviews with patients/cases, or attending physicians as needed, to assure the accuracy and completeness of reports. The Department or contracted local health authority will perform the activities or case follow-up for elevated blood lead levels equal to or in excess of 10 mcg/dl set forth in subsection (b)(1)(B).

B) The agreement with local health authorities will contain requirements for the performance of the following activities or patient follow-up:

i) Trace the patient or case;

ii) Counsel the patient or case;

iii) Educate the patient or case;

iv) Interview the patient or case for purposes of collecting, verifying or completing the information identified in subsection (b)(1) of this Section; and

v) Submit completed reports to the Department within 30 business days after receipt of the laboratory report for adult elevated blood lead analysis.

2) Information concerning fatal occupational injuries and illnesses shall be collected from various reporting sources, including, but not limited to, death certificates, newspaper clipping services, OSHA reports and coroner's reports.

3) Information concerning nonfatal occupational injuries and illnesses shall be collected using the U.S. Department of Labor, Bureau of Labor Statistics' Survey of Occupational Injuries and Illnesses, an annual sample survey of Illinois companies and governmental units.

4) Information concerning specific illnesses shall be collected from existing data sources such as the hospital discharge database or medical records.

c) Reports of elevated blood lead levels shall be reported by facilities to the Department by manual submission (paper) or by electronic submission.

d) All completed elevated blood lead level submissions are to be mailed to the Illinois Department of Public Health, Division of Epidemiologic Studies, Occupational Disease Registry, 535 West Jefferson Street, 3rd floor, Springfield, Illinois 62761 or submitted electronically.

e) Each case's elevated blood lead level incidence report shall be sent/submitted to the Department within seven days after the date of laboratory results. A local health authority or other facility shall submit all data received from a registered, permitted or licensed clinical laboratory or hospital laboratory to the Department within three business days after the date the data are received.

f) Every hospital, clinical or hospital laboratory, or other facility shall provide representatives of the Department with access to information including specified occupational disease cases or other cases specified for research studies related to occupational disease prevention and control. The Department will conduct studies of all medical, pathological, or other pertinent records and logs related to occupational disease incidence.

g) Every hospital, clinical or hospital laboratory, or other facility shall provide the Department representatives with the patient's name and attending physician's name for the purpose of follow-up on all laboratory and existing data base reports received by the Department.

h) The mode of access and the time during which this access will be provided shall be by mutual agreement between the hospital, other reporting facilities and the Department. The Department will not require hospitals and other reporting facilities to provide information on cases that are dated more than two years before the Department's request for further information.

(Source: Amended at 36 Ill. Reg. 8379, effective May 18, 2012)