

How can I report asbestosis cases?

- Report cases directly to the Environmental & Injury Epidemiology & Toxicology Branch, DSHS, by calling our toll-free number **(800) 588-1248**.
- Fax case reports to **(512) 458-7222**.
- Mail case reports to:

**Environmental & Injury
Epidemiology & Toxicology Branch
PO Box 149347 — MC 1964
Austin, TX 78714-9347**

- Case reports can also be reported to a local or regional DSHS staff member.
- Download Asbestosis Case Report forms: **www.dshs.state.tx.us/epitox**.

What information does DSHS need on the report forms?

Case reports should contain the following information at a minimum:

- Diagnosis
- Patient name and address
- Date of birth
- Gender
- Race and ethnicity
- Smoking history
- Occupational history (employer, dates of employment, occupation/job activities)
- Diagnosing physician's name and address
- Reporting physician's name and address

How are the data used?

- To help public health authorities identify ongoing hazardous exposures and the extent of exposures
- To identify exposure incidents, provide assistance and make recommendations to prevent and control future exposures
- To develop targeted education and prevention materials

Where can I get more information?

Texas Department of State Health Services
<http://www.dshs.state.tx.us/epitox>

National Institute for Occupational Safety and Health
<http://www.cdc.gov/niosh>

Agency for Toxic Substances and Disease Registry
<http://www.atsdr.cdc.gov>

National Cancer Institute
<http://www.cancer.gov>

Occupational Safety and Health Administration
<http://www.osha.gov>

The majority of the source material from this brochure was adapted from the Agency for Toxic Substances and Disease Registry (ATSDR) and the National Institute for Occupational Safety and Health (NIOSH) websites.



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What Healthcare Providers Need to Know about Reporting Asbestosis

Environmental & Injury
Epidemiology & Toxicology Branch
Texas Department of State Health Services

What is asbestosis?

Asbestosis is a chronic, fibrotic lung disease that results from the long-term inhalation of respirable asbestos fibers. Individuals who have had at least 10 years of moderate to severe asbestos exposure are most at risk of developing asbestosis.

Asbestosis is required to be reported to the Texas Department of State Health Services (DSHS) in accordance with the Texas Occupational Condition Reporting Act, Health and Safety Code, Chapter 84. All information reported to DSHS is confidential.

Other diseases that may be associated with asbestos exposure are lung cancer and mesothelioma.

What are some symptoms of asbestosis?

- Shortness of breath
- Cough
- Chest pain or tightness
- Hemoptysis (coughing up blood)
- Recurrent respiratory infections

What is asbestos?

Asbestos is a group of naturally occurring fibrous minerals that are mined or released from native rock sources. There are many types of asbestos fibers, but the chrysotile, amosite, and crocidolite varieties are of most commercial importance.



The physical nature of asbestos fibers makes them strong, heat resistant, and unreactive. Because asbestos is a good insulator, industry has used asbestos in hundreds of commercial products. The following are examples of Asbestos Containing Material (ACM):

- Roofing materials
- Floor covering and ceiling tiles
- Fire and noise proofing insulations
- Asbestos cement products
- Automotive brake and clutch parts
- Boiler, heating, and refrigeration system insulations
- Heat-resistant fabrics

How can asbestos exposure occur?

Asbestos exposure can occur when ACM is handled. Fibers can be released into the air and inhaled by the workers when ACM is manufactured or used. Asbestos fibers do not break down in the environment.

Airborne exposures can occur as ACM is disturbed during maintenance, repair, abatement, and demolition of buildings and industrial facilities. When ACM is disturbed, microscopic fibers and particles can be released into the air of places of employment and the environment.

Unless proper controls and work practices are used at these sites, asbestos can be:

- Released to the outdoor air, water, or soil where residents or other workers also can be exposed to the fibers
- Carried home on the clothing or skin of workers and can result in exposures to their families and friends

How does asbestos enter and leave the body?

Inhaling asbestos-containing air into the lungs is one way that asbestos enters the body. This is the exposure route of greatest concern. Some of the asbestos fibers reaching the lungs are exhaled out; others are coughed from the lungs in mucus. The fibers that reach the deepest air passages of the lungs can become trapped in the lung tissue and can cause the most damage.

Asbestos can also be ingested when mucus cleared from the lungs and nasal passages is swallowed, or by drinking contaminated liquids. A small number of asbestos fibers may penetrate the cells lining the digestive system, but only a few of these will reach the bloodstream. These fibers will then be released in the urine. Asbestos fibers rarely pass through the skin into the body.

What occupations are at risk of exposure to asbestos?

Any occupation that handles ACM is at risk for exposure. Some examples include:

- Asbestos abatement workers
- Demolition workers
- Automobile mechanics and brake repairers
- Heating, ventilation, and air conditioning technicians
- Masons
- Carpenters
- Plumbers
- Roofers
- Laborers
- Floor maintenance workers
- Building inspectors

How can workers prevent asbestos exposure?

- Use proper level of personal protective equipment and respiratory protection.
- Change clothes before leaving work.
- If possible, shower before leaving work.
- Leave soiled clothes at work.
- Store non-work clothes separately from work clothes.
- Wash work clothes separately from non-work clothes and family clothes.
- Do not take tools, scraps, packaging, and similar items home.
- Prevent family members from visiting the work area.



Who is responsible for reporting the asbestosis cases?

- Physicians
- Health professionals
- Laboratory directors
- Persons in charge of a clinical or hospital laboratory, blood bank, mobile unit or other facility