March 31, 2020

David G. Zatezalo
Assistant Secretary of Labor for Mine Safety and Health
200 Constitution Ave., NW
Washington, DC 20210

Dear Assistant Secretary Zatezalo:

On March 24, 2020, the Council for Accreditation in Occupational Hearing Conservation (CAOHC) concluded that audiometric testing should be suspended during the COVID-19 pandemic.¹ The American College of Occupational and Environmental Medicine (ACOEM) shares this opinion, and we will soon recommend that our members suspend routine audiometry for surveillance purposes. This is consistent with the Federal Emergency Declaration and the Center for Disease Control and Prevention’s public health recommendation to “delay all elective ambulatory provider visits.”

While audiometry is an important part of occupational hearing protection programs, its primary value is to show trends in employee hearing over time. These required exams are rarely urgent. At the current time, performing these exams pose avoidable COVID infection risks to the workers, physicians, and health care staff. In addition, availability of physicians and health care staff could be affected as they may be needed to address more urgent health care needs.

Because during audiometry the patient sits in a very small sound-insulated booth wearing headphones and holding a pushbutton, we are concerned that the booth and other equipment will be subject to contamination from infected workers. This equipment is not typically designed to be easily cleaned or disinfected. Given the high prevalence of minimally symptomatic persons among those infected with the virus, there is no good way to identify such people in advance and prevent them from visiting the clinic. If the audiometric examination for surveillance is the only reason for the visit, it should be postponed. Diagnostic testing for evaluation of work-related hearing loss should not be deferred.

Consistent with our general recommendations of March 18, 2020. We now urge the Department of Labor to issue additional temporary guidance regarding required medical surveillance exams under 29 CFR 1910.95, the Hearing Conservation Amendment to the Occupational Safety and Health Administration (OSHA) occupational noise

¹ https://www.caohc.org/UserFiles/PositionstatementCOVID-191.pdf
exposure standard, and 30 CFR Part 62, Occupational Noise Exposure, of the Federal Mine Safety and Health Act of 1977. We recommend that the guidance allow employers to delay surveillance audiometry as necessary during this pandemic. Guidance should account for the fact that various employers schedule audiometry differently, some requiring completion within a calendar year, and others within 365 days. At present, employers and clinicians are in a bind, having to choose between best practices in patient safety and compliance with medical surveillance requirements.

The goals of our recommendation are to enhance efforts to reduce spread of the virus, alleviate current excess demands on the health care system, and protect health care workers and their patients from avoidable infections. We believe that such short-term relief would not adversely impact the efforts of OSHA or Mine Safety and Health Administration to ensure the safety of our workforce.

Thank you for your leadership at this important time.

Sincerely,

Stephen A. Frangos, MD, MPH, FACOEM
President