

## Frequently Asked Questions

### Health Services managed by eScreen

#### **Who are these health services for?**

*This is a NEW product launch for eScreen and is currently implemented for a just few national accounts with more to come. We thought it was very important for all network partners to be notified that this is a new offering for eScreen and that your facility could begin to see these requests from donors.*

***\*\*Please note: this is not a notice for clinics to begin ordering extra supplies specific to these services – this correspondence is an effort to educate all EOHN clinics that eScreen is starting the rollout process of these types of services. Please contact your Regional Manager for questions specific to your collection location.***

#### **Am I currently set up to provide these services through eScreen and what are the reimbursement fees?**

*Our first step in this new service launch was to reach out and ensure that all EOHN partners that wanted to be considered for these services were set up through eScreen to provide them. If you want to participate, it is important to check in with eScreen to ensure you are listed as a provider of these services.*

*Any agreements since October 1, 2010 include these services and their reimbursement fees. Please refer to your contract for this detail or contact eScreen to assist you in reviewing your agreement.*

#### **Are these Scheduled events with ePassports?**

*Today – all these health service events are required to be scheduled through MyeScreen.com, therefore, the donors should have an ePassport and appropriate paperwork when they present at your site.*

#### **What are the new services (as seen on the eScreen agreements)?**

***\*The follow definitions are provided to help clarify the meaning of the services; it is not intended to prompt collection sites to purchase supplies for eScreen national accounts. Any collection site with questions regarding ordering supplies (especially vaccines) is recommended to contact their Regional Manager for specific details:***

**Audiogram** : A standard way of representing a person's hearing loss [1]. Most audiograms cover the limited range 100 Hz to 8000 Hz (8 kHz) which is most important for clear understanding of speech, and they plot the threshold of hearing relative to a standardized curve that represents 'normal' hearing, in dBHL. They are not the same as equal-loudness contours, which are a set of curves representing equal loudness at different levels, as well as at the threshold of hearing, in absolute terms measured in dB SPL (sound pressure level). Audiograms are set out with frequency in hertz (Hz) on the horizontal axis, most commonly on a logarithmic scale, and a linear dBHL scale on the vertical axis. Normal hearing is classified as being between -10dBHL and 15dBHL, although 0dB from 250 Hz to 8 kHz is deemed to be 'average' normal hearing.

**Vision test Titmus** : Titmus has set the industry standard in vision screening instruments since 1959. The Titmus Vision Screener tests for Acuity (Near-14 inches and Far-20 feet), Depth Perception, Color Perception, Muscle Balance (Lateral and Vertical Phoria), Horizontal Visual Fields (Peripheral vision of 130 degrees in each eye) in one lightweight, compact and easy-to-use instrument. The Titmus Vision Screener can also screen for visual acuity at Intermediate Distances (40, 32, 26, 22 and 19 inches).

Vision test-Ishihara: The Ishihara Color Test is a test for red-green color deficiencies. It was named after its designer, Dr. Shinobu Ishihara, a professor at the University of Tokyo, who first published his tests in 1917. The test consists of a number of colored plates, called Ishihara plates, each of which contains a circle of dots appearing randomized in color and size. Within the pattern are dots which form a number visible to those with normal color vision and invisible, or difficult to see, for those with a red-green color vision defect. The full test consists of 38 plates, but the existence of a deficiency is usually clear after a few plates. Testing the first 24 plates gives a more accurate diagnosis of the severity of the color vision defect. Common plates include a circle of dots in shades of green and light blues with a figure differentiated in shades of brown, or a circle of dots in shades of red, orange and yellow with a figure in shades of green; the first testing for protanopia and the second for deuteranopia.

OSHA Respirator Questionnaire: When OSHA requires a respirator, the employee must fill out a questionnaire as part of the medical evaluation.

Pulmonary Function Test: Pulmonary function tests are a group of tests that measure how well the lungs take in and release air and how well they move gases such as oxygen from the atmosphere into the body's circulation. In a spirometry test, you breathe into a mouthpiece that is connected to an instrument called a spirometer. The spirometer records the amount and the rate of air that you breathe in and out over a period of time. For some of the test measurements, you can breathe normally and quietly. Other tests require forced inhalation or exhalation after a deep breath. Lung volume measurement can be done in two ways:

- The most accurate way is to sit in a sealed, clear box that looks like a telephone booth (body plethysmograph) while breathing in and out into a mouthpiece. Changes in pressure inside the box help determine the lung volume.
- Lung volume can also be measured when you breathe nitrogen or helium gas through a tube for a certain period of time. The concentration of the gas in a chamber attached to the tube is measured to estimate the lung volume.

To measure diffusion capacity, you breathe a harmless gas for a very short time, often one breath. The concentration of the gas in the air you breathe out is measured. The difference in the amount of gas inhaled and exhaled measures how effectively gas travels from the lungs into the blood.

Respirator Fit Test, qualitative, Respirator Fit Test, quantitative: There are two basic types of fit tests: (1) qualitative (QLFT) and quantitative (QNFT). The *qualitative* test is a pass/fail test relying on the subject's voluntary or involuntary response to a challenge agent; i.e., taste, smell, or irritation. IHR staff encourages the use of the more sophisticated *quantitative* fit test. The *quantitative* fit test measures the challenge agent leakage into the respirator without dependence on a test subject's voluntary or involuntary response to the challenge agent. The instrumentation is typically capable of measuring fit factors of 10,000 and higher. Respirators that require a fit factor above 100 must be fit tested using the quantitative (QNFT) test method. We strongly encourage quantitative fit testing for all workers potentially exposed to asbestos, lead, arsenic, cadmium, and other cancer-causing toxic agents. Workers that utilize air purifying respirators (APRs) should be "fit tested", and retrained in their proper use periodically. In the case of the asbestos standard in the US, OSHA requires fit testing of the worker annually, and this testing would also apply to workers that are exposed to lead (Pb), arsenic (As), mold spores, and other toxic materials. IHR's experienced staff will help you select the proper APRs for the application, train your workers in the proper use of the APR, and perform quantitative fit testing (QNFT) of the individual workers. With the use of a fit testing adaptor, testing can be accomplished for the worker with their own, personal air purifying respirator.

Chest Xray- one view / Chest Xray- two views: A chest radiograph, commonly called a chest x-ray (CXR), is a projection radiograph of the chest used to diagnose conditions affecting the chest, its contents, and

nearby structures. Chest radiographs are among the most common films taken, being diagnostic of many conditions. They may be taken in different views depending on the presenting symptoms.

Back Xray- three views (chest Wall Unit required): These are pictures of the spine that are taken to find out if there is any disease or any injuries in the joints or the discs of the spine. The injuries could include disc disease, bone spurs, tumors, dislocations, infections, and spinal fractures. Scoliosis back X-ray is done to check scoliosis or the curvature of the spine or for spinal defects. Back X-rays are radiation that is focused in a beam and can pass through the human body. The pictures created by the X-rays strike a detector and send a picture to the computer or expose a film. Bones and dense tissues in the body can absorb some of the X-rays and that's why they look white on a picture. Other tissues that are less dense look grey on the X-ray picture. They may be taken in different views depending on the presenting symptoms.

EKG 12 lead: A transthoracic interpretation of the electrical activity of the heart over time captured and externally recorded by skin electrodes.[1] It is a noninvasive recording produced by an electrocardiographic device. The ECG works mostly by detecting and amplifying the tiny electrical changes on the skin that are caused when the heart muscle "depolarizes" during each heart beat. At rest, each heart muscle cell has a charge across its outer wall, or cell membrane. Reducing this charge towards zero is called de-polarization, which activates the mechanisms in the cell that cause it to contract. During each heartbeat a healthy heart will have an orderly progression of a wave of depolarisation that is triggered by the cells in the sinoatrial node, spreads out through the atrium, passes through "intrinsic conduction pathways" and then spreads all over the ventricles. This is detected as tiny rises and falls in the voltage between two electrodes placed either side of the heart which is displayed as a wavy line either on a screen or on paper. This display indicates the overall rhythm of the heart and weaknesses in different parts of the heart muscle. Usually more than 2 electrodes are used and they can be combined into a number of pairs (For example: Left arm (LA), right arm (RA) and left leg (LL) electrodes form the pairs: LA+RA, LA+LL, RA+LL). The output from each pair is known as a lead. Each lead is said to look at the heart from a different angle. Different types of ECGs can be referred to by the number of leads that are recorded, for example 3-lead, 5-lead or 12-lead ECGs (sometimes simply "a 12-lead"). A 12-lead ECG is one in which 12 different electrical signals are recorded at approximately the same time and will often be used as a one-off recording of an ECG, typically printed out as a paper copy.

Muscle strength and flexibility screen – Kraus Weber Test: The Kraus-Weber (K-W) Test of Minimum Muscular Fitness has six components. This test measures several large muscle groups for flexibility and strength. The higher the degree of test rating, the greater presumably is the muscular function of the body as a whole. The K-W Test is done as follows:

*Kraus Weber Test No. 1.* With his feet held on the ground by the examiner, the subject lies flat on his back with his hands behind the neck. Perform one sit-up.

*Kraus Weber Test No. 2.* The subject is in the same position except that his knees are bent with his ankles close to the buttocks. Perform one sit-up.

*Kraus Weber Test No. 3.* The subject lies flat on his back with his hands behind his neck. The legs straight are lifted 10 inches off the floor. Hold this position for 10 seconds.

*Kraus Weber Test No. 4.* The subject lies on his stomach with a pillow under his lower abdomen and groin. The examiner holds his feet down. Lift head, shoulders, and chest off the floor and hold for 10 seconds.

*Kraus Weber Test No. 5.* The subject's position is the same, but the examiner holds the chest down. With knees straight, lift legs off floor and hold for 10 seconds.

*Kraus Weber Test No. 6.* The subject stands erect, barefooted, and with feet together. The examiner holds the knees straight. Bend over slowly and touch the floor with the fingertips. Hold this position for 3 seconds.

1-Step TB Test (TST): Tuberculin skin tests (TST) are administered to detect the presence of *Mycobacterium tuberculosis*, the bacterium that causes tuberculosis (TB). The terms Mantoux, TB skin test, tuberculin skin test, and PPDs are often used interchangeably. Mantoux refers to the technique for administering the test. Tuberculin (also called purified protein derivative or PPD) is the solution used to administer the test. The preferred term for the test is tuberculin skin test, or TST. The TST is an intradermal injection of 0.1 ml of tuberculin (PPD) on the inner surface of the forearm. The skin test reaction should be read between 48 and 72 hours after administration. If the test is not read within 72 hours, another TST should be placed unless the amount of induration is  $\geq 10$  mm within 7 days after placement. The reaction should be measured in millimeters of induration (palpable, raised, hardened area or swelling). Do not measure erythema (redness). The indurated area should be measured across the forearm (perpendicular to the long axis). Healthcare workers (HCWs), patients, or their family members should not be allowed to record their own TST results.

Single Injection 0.1 mL of PPD; follow-up evaluation within 48-72 hours; result reporting to eScreen:

Tuberculin Purified Protein Derivative (PPD) is used for detecting tuberculosis (TB) infection. It is a diagnostic agent. It works by causing a mild, delayed allergic reaction in patients infected with TB or who have had a past infection, which allows for detection of TB.

Hepatitis B Vaccination: HEPATITIS B VACCINE is a vaccine. It is used to prevent from an infection with the hepatitis B virus.

MMR Vaccination: The MMR vaccine is an immunization shot against measles, mumps and rubella (also called German measles). It was first developed by Maurice Hilleman while at Merck in the late 1960s.

Varicella Vaccination: The varicella vaccine is a live (attenuated) vaccine that protects against the viral disease commonly known as chickenpox, Herpes zoster, and Postherpetic neuralgia. It is marketed as Varivax in the U.S. by Merck. Furthermore, Zostavax (the vaccine for shingles (aka Herpes Zoster)) is simply a larger-than-normal dose of Varivax, as shingles is caused by the very same virus, Varicella Zoster Virus (VZV), that causes chickenpox.

Still have questions?

If you would like answers to questions regarding your specific collection site, please call 1-800-881-0722, option 5 or your dedicated eScreen Regional Manager.

Thank you!