Ohio BWC Pharmacy Lock-in Program to Improve Medication Safety, Limit Abuse

Columbus – In January of this year, Ohio Bureau of Workers’ Compensation (BWC) Administrator/CEO Steve Buehrer announced new measures to improve the safety of medication prescribed to Ohioans recovering from workplace injuries and limit the practice of doctor and pharmacy shopping. The Coordinated Services Program is designed to limit the dangers that can arise when medications are prescribed by multiple physicians and are processed in different pharmacies.

“There’s a point at which prescribed medications move from being a useful and necessary part of a treatment plan to hindering an injured worker’s recovery and return to work,” said Buehrer. “Identifying where prescriptions are being used in a manner other than medically necessary will set the injured worker on a better path to recovery. It will also assist in our return-to-work effort at BWC by addressing an issue that keeps claims lingering in our system longer than they should.”

The program allows BWC, under certain circumstances, to restrict an injured worker to the use of a single pharmacy for non-emergent prescriptions. The injured worker selects the pharmacy from a list of eligible pharmacies. BWC can also restrict an injured worker convicted of a drug offense to the use of a single prescribing physician, selected by the injured worker from BWC certified physicians, in order to receive reimbursement for non-emergent prescriptions.

The lock-in program is among several recent improvements made to BWC’s pharmacy program, including BWC’s first ever outpatient prescription drug formulary, which became effective in September 2011. The industry-standard formulary focuses on the well-being of the injured worker by allowing for a thorough clinical review of each new medication, better monitoring and control of inappropriate use. The formulary is expected to save up to $15 million by the end of 2012.

BWC is also now requiring, with physician approval, generic medications when available and has established a Pharmacy and Therapeutics Committee comprised of practicing pharmacists and physicians to advise BWC leadership on issues related to the use of medications prescribed to treat injured workers. The committee is also conducting relatedness editing to ensure injured workers are receiving medications relevant to their conditions.

-Larry Wines
Discarding the cigarette: Fire regulations and the lasting impacts of your actions

A casual flick, a nonchalant drop, or a more forceful toss; many times used cigarettes are discarded without a second thought. However, cigarettes are highly flammable and remain to be burning materials that require attentive vigilance when they are discarded.

Smoking materials maintain the position as the leading cause of fires in the United States. Following fire codes and regulations can ensure your safety, and the safety of those around you. In hazardous locations, “No Smoking” signs are often posted. These are not only reserved for nonsmokers who may consider it a nuisance, but are also posted for safety reasons; therefore, blatantly ignoring these warnings can be highly dangerous. These signs shall never be defaced, damaged, or hidden, as it can be a violation against the law and an extreme hindrance to your safety.

If smoking IS permitted, there should be a surplus of noncombustible ashtrays available. If not, and there is an abundance of dried leaves, grass, vegetation, paper, boxes, combustibles, or landscaping like bark or mulch, it would be beneficial to refrain from smoking in these areas, even if no “No Smoking” sign is posted.

SMOKING IS NOT PERMITTED IN ANY RESIDENCE HALLS. While ashtrays may be provided OUTSIDE the buildings, smoking is NEVER permitted in the buildings. One should be prepared to face judicial and possible criminal charges if they chose to break these regulations.

The Impacts of Fire

Many students don’t consider the impacts of their negligence when it comes to fires. It may seem like “no big deal” to hang something from the ceiling or smoke in residential halls, but in reality,
Venomous snakes vs. Nonvenomous snakes

Ophidiophobia (n.) - The fear of snakes. One of the most common phobias, scientists believe that this phobia may have developed from our ancestors as a survival mechanism to stay alive. Regardless of its beginning, the fear of snakes is often a warranted one, as even Ohio is home to some venomous snakes that can procure debilitating and deadly effects on the human condition.

Differentiating between venomous and nonvenomous snakes can save your life. Ohio is home to three venomous snakes ( pictured right). The Eastern Massauga and Timber Rattlesnake have rattles at the ends of their tails. The third species is the Northern Copperhead. Water moccasins are not included in this listing because they are not native to Ohio and do not go further than Southern West Virginia.

Since these snakes often seek out heat and warmer climates, one must exercise caution while climbing rocks or slopes, which create heat pits that create a warm, comfortable environment for these venomous snakes.

The main differences between venomous and nonvenomous snakes, apart from the rattles, can be seen in the eyes of the snake (though not advised to peer into voluntarily). Nonvenomous snakes have round pupils while venomous snakes have elliptical, with more triangular heads. Venomous snakes have pits along with nostrils while nonvenomous only have nostrils.

If bitten by a venomous snake, one would know it. Symptoms such as slurred speech, weakness, tingling, nausea, vomiting, shortness of breath, loss of consciousness, and paralysis may develop. Seek medical attention immediately. For more information, please visit: http://www.dnr.state.oh.us/wildlife/home/resources/reptiles/poisonoussnakes/tabid/5685/default.aspx

Impacts of Fire (continued)

the repercussions can be deadly. The effects and costs of fires in any location can range from economic impacts to legal and psychological impacts.

Economic Impact
This is the immediate effect of any fire, whether it is small and contained to large and destructive. Damage is always the result of fires and the costs that coincide with that can be found in higher insurance premiums, medical costs, reconstruction costs, lost jobs, and much more. Breaking a fire regulation can change your life in a second to a slippery-slope of payments and a life of economic struggle.

Organizational Impact
An occurrence like fires that can cause serious injury or death, can have an impact, in a larger scale, on an entire community. These effects include a decrease in morale, recruitment for jobs or habitants, and cost in funds by the community.

Legal Impact
Aggravated arson is defined as, “no person, by means of fire or explosion, shall knowingly… (1) create a substantial risk of serious physical harm to any person other than the offender; (2) create physical harm to any occupied structure; (3) create, through the offer or acceptance of an agreement for hire or other consideration, a substantial risk of physical harm to any occupied structure (Ohio Revised Code, §2909.02 (A), 1996).” Even if a structure is vacant, a person can be guilty of aggravated arson if the fire creates a “substantial risk of serious physical harm to others in the vicinity,” including the firefighters who battle the fire. This was illustrated in State v. Eggeman, 2004 Ohio 6495 (2004) from Ohio’s Third District Court of Appeal.

Arson is a felony and by breaking regulations or carelessly discarding a burning cigarette, you can face years in jail.

Psychological Impact
Injuries or deaths can cause psychological effects on more than just the people involved.

Most college students have lived that moment, usually during your freshman year, in which you are bustling to a large lecture class you are already late to and encounter a full room with staring eyes and no apparent open seats. The obvious shameful move is to scurry to the floor or sit in the aisle, hopefully unnoticed. However, this act, apart from embarrassing, is a violation of fire code and regulation.

Egress is defined as the evacuation or route of evacuation, in this case of a fire. By sitting in an aisle or obstructing the path between doors, stairs, aisles, or between seats, you are obstructing the means of easy egress. In the case of a fire, this can be dangerous and deadly. The paths of egress should always be clear and free of obstructions.

Being knowledgeable on your path of egress is essential to your safety. Every student and employee should be familiar with their evacuation route and receive regular reminders and practices by means of the Residential Advisor if applicable, or fire drills.

There are many auxiliaries to egress about which you may be unfamiliar. When a fire occurs, the smoke may obscure your vision, and when located on a higher floor level, knowing which floor you are on may be difficult. For this reason, reflective floor numbers are located on the doors of egress. It is important that these are never defaced or removed, because they are present for the safety of the entire residential hall.

Also, stacking anything against any door in the residential hall is prohibited. Doors, especially exit doors, are the main and most important means of egress. Current codes require a landing at least as wide as the door and at least 44 inches long in the direction of exit travel. Putting a couch, furniture, or anything in closer proximity of the door than that can restrict traffic flow.

Apart from the traffic paths and obstructing egress paths, it must be stated that poor housekeeping, even not in a path of egress, can be detrimental to your safety. A dormitory room that is messy and disorganized can be difficult to escape from in the case of a fire. Also, many conditions can prevent the fire prevention steps from taking place. For example, storage to the ceiling may hinder the sprinklers from performing their duty to stop a fire. In nonsprinklered buildings, storage should be arranged so it is at least 24 inches below the ceiling. In sprinklered buildings, that height is reduced to 18 inches.

Hanging anything from the ceilings is always a fire hazard.

Workers Compensation

The mission of the Workers Compensation department is to provide administrative services to Ohio University employees who have had an occupational injury or disease. Larry Wines joins the RMS team this year.

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www.ohio.edu/riskandsafety
Dressed to impress.

Warm weather does not remove need for proper lab attire!

**Always wear long-sleeved and long-legged clothing; do not wear short-sleeved shirts, short trousers, or short skirts.**

Always wear shoes in the laboratories. Sandals, open-toed shoes, and shoes with woven uppers, are not recommended because of the danger of spillage of corrosive or irritating chemicals.

**Gloves**

When handling chemicals, it is recommended that the correct gloves be used to protect the worker from accidental spills or contamination. If the gloves become contaminated they should be removed and discarded as soon as possible. There is no glove currently available that will protect a worker against all chemicals. Finger rings or other tight jewelry which are not easily removed should be avoided because of the danger of corrosive or irritating liquids getting underneath the piece and producing irritation.

**Lab Coats**

Lab coats should be worn at all times in the lab areas. Do not take them out of laboratory area.

**Respirators**

If respirators are used, then ensure that they are used properly, have been fit tested, ensure that proper cleaning is done each time they are used. Respirator use should be avoided if at all possible. Engineering controls should be used to minimize exposure.

**Eye Protection**

Eye protection is mandatory in all areas where there is potential for injury. This applies not only to persons who work continuously in these areas, but also to persons who may be in the area only temporarily, which is all who enter the lab. All eye protective equipment shall comply with the requirements set forth in the American National Standard for Occupational and Educational Eye and Face Protection, Z 87.1-1968, and the Oklahoma Eyeglass Protection Law of 1961. The type of eye protection required depends on the hazard. For most situations, safety glasses with side shields are adequate. When there is a splash concern goggles are preferred.

**Aprons**

They are used to protect clothing from chemical use when washing glassware and handling large amounts of chemicals.

For more information on lab safety, please visit [www.ohio.edu/riskandsafety](http://www.ohio.edu/riskandsafety)
Total number of (1) Injury decreased from 104 in last year’s OSHA 300 to 79.

Recordable cases are cases involving a death, injury, or illness that is work-related, new, and meets OSHA recording criteria. In 2011, 94 were recordable cases. Only 40 resulted in days away from work.

This has decreased from 122 recordable cases in 2010 with 66 days away from work.
Ticks can barely be seen, and Lyme disease is a dangerous result; prevention is key.

**Prevention**

While most people envision ticks with Spiderman jumping skills, hopping from one host to another, ticks do not jump, fly, or fall from trees. Ticks wait in wooded and low brushy areas until an unsuspecting person or animal brushes against the brush. They then seize the opportunity for their next meal. Tick bites and diseases can be reduced by following these precautions:

- Avoid tick-infested areas such as tall grass and dense vegetation.
- Tuck your pants into sock tops or boots.
- Wear light-colored clothing to make it easier to find crawling ticks.
- Use repellants and follow label instructions carefully.
- Check yourself and pets frequently for ticks.
- Bathe or shower after exposure to tick habitat (preferably within two hours) to wash off and more easily find ticks that may be crawling on you.

**Symptoms and Treatment**

**Rocky Mountain Spotted Fever (RMSF)**—Caused primarily by the Amerian dog tick, symptoms typically appear after a week and include high fever, headache, and aching muscles. A pink rash may also develop in some cases. Seek medical help as soon as symptoms develop. Blood tests can confirm the disease.

**Ehrlichiosis and Anaplasmosis**—Transmitted by the bacteria in ticks, these two illnesses are the most common. They are acquired typically by the Lonestar tick found in Southern Ohio and can produce symptoms up to 10 days after the bite that include mild to severe fever, headache, muscle pain, vomiting and general discomfort. Diagnosis is aided by the use of blood tests. Both HME and HGE respond to certain antibiotics and treatment should be based on symptoms and history of tick exposure.

**Lyme Disease**—Lyme Disease is found more commonly in Midwestern and Northeastern states like Ohio. However, transmission in Ohio remains relatively low. Most, but not all infected people develop a circular, ring-like rash called erythematous. Other early symptoms include fever, fatigue, headache and joint pain. Some symptoms of Lyme disease may not appear until weeks, months or years after a tick bite, affecting joints, nervous system and heart.

**Tick Removal**

- If a tick is attached, remove it as soon as possible to reduce your risk of infection.
- Shield fingers with a paper towel or use tweezers. Grasp the tick close to the skin. With steady pressure, pull the tick straight up and out.
- Avoid crushing the tick.
- Do not use a hot match, cigarette, nail polish, petroleum jelly or other products to remove a tick.
- After removing a tick, thoroughly disinfect the bite site and wash hands with soap and water.

Visit [http://www.odh.ohio.gov](http://www.odh.ohio.gov) for more information.

**Natural Habitat...**

The black-legged tick is more likely to be found in wooded or brushy areas and in the edge area between lawns and woods.

**USE EXTRA PRECAUTION IN THESE AREAS!**
Carbon Monoxide Toxicity: The Silent Killer

The childhood fear was the Boogeyman lurking in your closet that tormented your sleep. As an adult, your fear has most likely been transformed to the more possible lurking danger of carbon monoxide suffocating you and your family as you peacefully sleep unknowingly.

Carbon monoxide (CO) is a colorless, odorless, toxic gas that much like the Boogeyman, can not be seen, but unlike the Boogeyman, is a real and present danger. CO can kill a person without them even realizing its presence. Being knowledgeable about CO can make all the difference.

Sources of CO
CO can come from unvented kerosene and gas space heaters; leaking chimneys and furnaces; back-drafting from furnaces, gas water heaters, wood stoves, and fireplaces; gas stoves; generators and other gasoline powered equipment; automobile exhaust from attached garages; and tobacco smoke. The most common cause is worn combustion devices.

Below is a listing of potential symptoms at different levels of exposure. Recognizing the early stages is key to survival.

Preventing Carbon Monoxide Poisoning
► Keep gas appliances properly adjusted.
► Consider purchasing a vented space heater when replacing an unvented one.
► Use proper fuel in kerosene space heaters.
► Install and use an exhaust fan vented to outdoors over gas stoves.
► Open flues when fireplaces are in use.
► Choose properly sized wood stoves that are certified to meet EPA emission standards. Make certain that doors on all wood stoves fit tightly.
► Have a trained professional inspect, clean, and tune-up central heating system (furnaces, flues, and chimneys) annually. Repair any leaks promptly.
► Do not idle the car inside garage.
► Invest in a carbon monoxide detector. It looks similar to a fire detector. These must also be checked regularly.

For more information and links, visit: http://www.epa.gov/iaq/co.html

The U.S. Consumer Product Safety Commission (CPSC) recommends that every home have carbon monoxide (CO) alarms on each level outside each sleeping area.

<table>
<thead>
<tr>
<th>CO Airborne Exposure (ppm)</th>
<th>Average Duration (minutes)</th>
<th>Typical Symptoms</th>
</tr>
</thead>
<tbody>
<tr>
<td>100</td>
<td>120-180</td>
<td>Slight headache</td>
</tr>
<tr>
<td>400</td>
<td>60-120</td>
<td>Frontal headache</td>
</tr>
<tr>
<td>400</td>
<td>150-210</td>
<td>Widespread headache</td>
</tr>
<tr>
<td>800</td>
<td>45</td>
<td>Dizziness, nausea, seizure</td>
</tr>
<tr>
<td>1,600</td>
<td>20</td>
<td>Headache, dizziness, nausea</td>
</tr>
<tr>
<td>1,600</td>
<td>60-120</td>
<td>death</td>
</tr>
<tr>
<td>3,200</td>
<td>5-10</td>
<td>Headache, dizziness, nausea</td>
</tr>
<tr>
<td>3,200</td>
<td>60</td>
<td>death</td>
</tr>
<tr>
<td>6,400</td>
<td>1-2</td>
<td>Headache, dizziness, nausea</td>
</tr>
<tr>
<td>6,400</td>
<td>25-30</td>
<td>death</td>
</tr>
<tr>
<td>12,800</td>
<td>1-3</td>
<td>death</td>
</tr>
</tbody>
</table>
Weather can play an important role in your appearance of allergy symptoms. This is why spring is commonly known to cause unprecedented allergies due to the higher pollen count.

There are many websites available that can calculate the presence of your particularly allergy. Weather forecasts usually also include these calculations.

But what if you don’t know what you are allergic to? In many instances, like food or medicine allergies, the person would know immediately upon contact with the substance if they were allergic to it. In the case of airborne allergens, doctors can help you identify the source. By scratching the skin or making a small injection right underneath the skin, the doctor can observe your reactions.

In other cases, doctors will ask you about your family history with allergies and ask you general questions about your activities to help gather an idea of the source.

Allergy Forecast’s are available through [http://www.pollen.com/allergy-weather-forecast.asp](http://www.pollen.com/allergy-weather-forecast.asp)