GUIDELINES FOR COMPLETING THE EPIDERMD REPORTING CARD/WEBFORM

Only **NEW** cases, first diagnosed by you during the specified month as being caused by exposure or conditions at work, should be entered on the reporting card. Cases diagnosed by you outside the specified month should not be reported as this would lead to a substantial overestimation of cases. We are always glad to hear of cases of special interest; if these occur outside the specified month please send a brief case history on a separate sheet or visit:

http://www.population-health.manchester.ac.uk/epidemiology/COEH/research/thor/schemes/thorextra/

The definition of occupational disease used in THOR is as follows:

The reporting physician considers it more likely than not, on a balance of probabilities, that the condition has been caused or aggravated by work, bearing in mind that the workplace exposure need not be the *sole* cause of the condition.

This definition means:

- Doctors should report conditions to THOR where, in their opinion, work has either caused, or aggravated the condition
- The burden of proof you should use is "on a balance of probabilities", i.e. that you consider it more likely than not that the condition has been caused or aggravated by work
- Work does not have to be the *sole* cause of the condition.

**Cases of work-related skin disease can be reported to EPIDERM under the following diagnostic categories:**

- **Contact dermatitis** includes both allergic and irritant (please specify on the back of the card).
- **Contact urticaria** is denoted by immediate hypersensitivity.
- **Inflammatory** includes acne and folliculitis.
- **Infective** includes, for example, tinea, warts and orf.
- **Traumatic** includes dermatitis and callosities caused by mechanical trauma.
- **Neoplasms** include skin neoplasia (keratosis, basal and squamous cell carcinomas and melanomas - please specify on back) caused by radiation, occupational sun exposure or chemicals.
- **Nail problems** include chronic paronychia and dystrophies caused by physical or chemical occupational contact.
- **Other dermatoses** of interest include low humidity dermatitis, scleroderma-like disorders and ulceration.

*Please enter the details of each case on the back of the reporting card. Note in particular:*

**Diagnosis:** Give sufficient detail to code, noting location (e.g. elbow) where appropriate.

**Reference number:** This is your reference to help you identify the case if there is a query.

**Age:** Age at time of diagnosis.

**Postcode or town:** Please give the first half of the postcode, if possible; or town, if not.
Job: Type of work (e.g. florist or welder). Be as specific as possible (machinist, assembler, process worker are difficult to code without more detail).

Industry: The industrial group of the patient's employer. Be as specific as possible (e.g. for engineering we need to know the product manufactured, and for cleaning we need the site of work).

Agent/exposure/activity: Please be as specific as possible, e.g. 'fibre glass' rather than 'irritant dust', or 'chicken de-boning' rather than 'repetitive work'. If giving proprietary names, please try to identify the active agent.

Reason: Please record the letter (A-H) appropriate for the reason the patient was seen (see bottom of card for categories). You may use more than one reason if necessary.

Symptom onset date: Wherever possible, please specify the month and year when the current symptoms began.

If you have not seen any NEW CASES of disease caused by work in the reporting month, please tick the box at the bottom left of the card. You may also wish to record the reason for the nil return (e.g. no clinical work this month, annual leave, etc.).

The completed card should be returned in the enclosed addressed envelope at the end of the reporting month. If you have any queries about the completion of the EPIDERM card, please telephone 0161 275 5284 for further information.

EPIDERM ONLINE REPORTING:

Cases can also be reported via the web using the link: http://www.population-health.manchester.ac.uk/epidemiology/COEH/research/thor/schemes/epiderm/electronicreporting/

A username and password will be sent to you with your reporting card, giving you the choice of how you return the data. The web forms contain the same fields as the reporting cards and should be completed using the same guidelines as above.

THOR-EXTRA

THOR-EXTRA is a supplementary form of reporting exclusively online. The main indicators for using THOR-EXTRA are the following:

1) If you see a new incident case of occupational disease or work related ill health which is outside your randomly selected reporting month, but which you feel merits reporting for special reasons (e.g. a possible new cause of occupational disease).
2) If you have already submitted a new incident case but you wish to provide additional supplementary information.

THOR-extra can be accessed via the link: http://www.population-health.manchester.ac.uk/epidemiology/COEH/research/thor/schemes/thorextra/