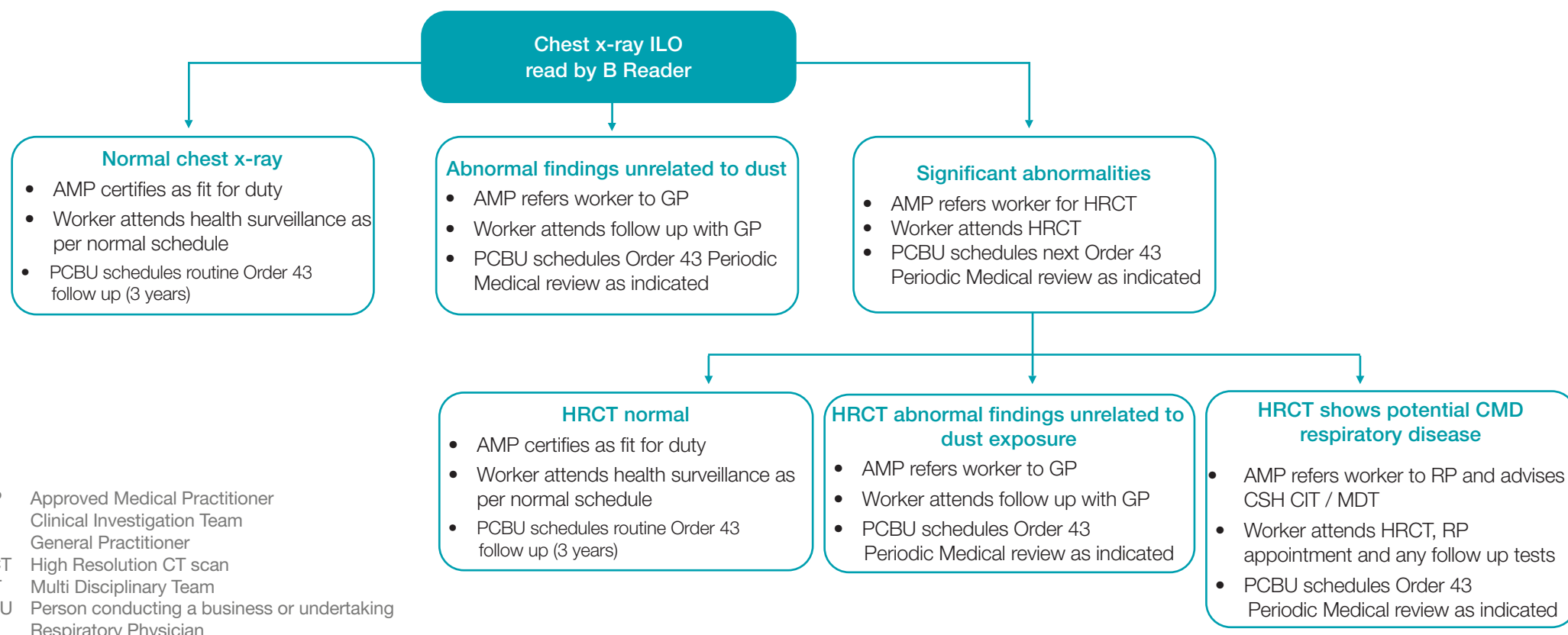


# Clinical pathways for coal mine dust lung disease monitoring (roles defined)

These pathways are designed for Approved Medical Practitioners to use with coal mine workers not already known to have coal mine dust lung disease (CMDLD) or currently under investigation for possible disease.

The coal mine worker (worker) is assessed under three pathways: chest x-ray, clinical findings and symptoms and spirometry. Positive findings under any pathway in isolation, or with others, can result in further investigation.

If an Approved Medical Practitioner (AMP) has any doubts in regards to the management of a case, the AMP must contact the CS Health Clinical Investigation Team to discuss.



## Spirometry / Symptoms

- Spirometry normal and
- no serial decline of 15% or greater from baseline or previous spirometry and
- no unexplained significant respiratory symptoms

Yes

### Normal spirometry

- AMP certifies as fit for duty
- Worker attends health surveillance as per normal schedule
- PCBU schedules routine Order 43 follow up (3 years)

No

### Abnormal Spirometry

Worker completes BRT as part of medical

Positive response to BRT  
and no other factors

- AMP refers worker to GP and certifies as fit for duty with 6-month review
- Worker sees GP for assessment and management; returns for Order 43 Periodic Medical review in 6 months
- PCBU schedules Order 43 Periodic Medical in 6 months

Negative response to BRT, or  
positive response to BRT with  
other factors

- AMP refers worker for a CLFT
- Worker attends CLFT

CLFT Normal

- AMP certifies as fit for duty
- Worker attends health surveillance per normal schedule
- PCBU schedules routine Order 43 follow up (3 years)

CLFT shows  
mild abnormality

- AMP refers worker for HRCT
- Worker attends HRCT
- PCBU schedules Order 43 Periodic Medical review as indicated

CLFT shows more  
severe abnormality

- AMP refers worker for HRCT and RP
- Worker attends HRCT, RP appointment and any follow up tests
- PCBU schedules Order 43 Periodic Medical review as indicated

### HRCT normal

- AMP consults with CS Health CIT / MDT and may certify according to lung function findings
- Worker attends health surveillance as per normal schedule
- PCBU schedules routine Order 43 follow up (3 years)

HRCT shows  
potential  
CMDLD  
respiratory  
disease

- Findings escalated to CS Health CIT / MDT for determination of possible restrictions and medical certification

No

- AMP refers worker for a CLFT
- Worker attends CLFT

Serial decline of 15%  
or more in spirometry, or  
unexplained significant  
respiratory symptoms  
confirmed

No

- AMP certifies as fit for duty
- Worker attends health surveillance per normal schedule
- PCBU schedules routine Order 43 follow up (3 years)

Yes

- AMP refers worker for a HRCT and RP
- Worker attends HRCT and RP appointment

AMP	Approved Medical Practitioner
BRT	Bronchodilator Responsiveness Test
CIT	Clinical Investigation Team
CLFT	Complex Lung Function Test
CMDLD	Coal Mine Dust Lung Disease
GP	General Practitioner
HRCT	High Resolution CT scan
MDT	Multi Disciplinary Team
PCBU	Person conducting a business or undertaking
RP	Respiratory Physician