ASBESTOS EXPOSURE RELATED CLAIMS

Instructor Lesson Plan

Time Required: 2 Hours

**Table of Contents**

[Lesson Description 2](#_Toc67488342)

[Introduction to Asbestos Exposure Related Claims 4](#_Toc67488343)

[Topic 1: Background Information 6](#_Toc67488344)

[Topic 2: Asbestos Related Diseases 7](#_Toc67488345)

[Topic 3: Diagnostic Tests and Codes for Asbestosis and Secondary Issues 10](#_Toc67488346)

[Excersise: Rating Asbestos Related Cases 13](#_Toc67488347)

[Practical Exercise 14](#_Toc67488348)

[Lesson Review, Assessment, and Wrap-up 15](#_Toc67488349)

|  |
| --- |
| Lesson Description |
| The information below provides the instructor with an overview of the lesson and the materials that are required to effectively present this instruction. |
| TMS # | 1306941 |
| Prerequisites | Prior to this training the trainees must have completed basic RVSR/PMC RVSR/DRO Challenge training or its equivalent. |
| target audience | The target audience for Asbestos exposure related claims is RVSR, PMC Rvsr, DRO( Post Challenge).Although this lesson is targeted to teach the RVSR, PMC RVSR, DRO (Post Challenge**).** employee, it may be taught to other VA personnel as mandatory or refresher type training. |
| Time Required | 2 hours |
| Materials/TRAINING AIDS | Lesson materials:* Asbestos Exposure Related Claims PowerPoint Presentation
* Asbestos Exposure Related Claims Trainee Handouts
* Asbestos Exposure Related ClaimsJob Aid
 |
| Training Area/Tools  | The following are required to ensure the trainees are able to meet the lesson objectives: * Classroom or private area suitable for participatory discussions
* Seating, writing materials, and writing surfaces for trainee note taking and participation
* Handouts, which include a practical exercise
* Large writing surface (easel pad, chalkboard, dry erase board, overhead projector, etc.) with appropriate writing materials
* Computer with PowerPoint software to present the lesson material

Trainees require access to the following tools: * VA TMS to complete the assessment
 |
| Pre-Planning  | * Become familiar with all training materials by reading the Instructor Lesson Plan while simultaneously reviewing the corresponding PowerPoint slides. This will provide you the opportunity to see the connection between the Lesson Plan and the slides, which will allow for a more structured presentation during the training session.
* Become familiar with the content of the trainee handouts and their association to the Lesson Plan.
* Practice is the best guarantee of providing a quality presentation. At a minimum, do a complete walkthrough of the presentation to practice coordination between this Lesson Plan, the trainee handouts, and the PowerPoint slides and ensure your timing is on track with the length of the lesson.
* Ensure that there are copies of all handouts before the training session.
* When required, reserve the training room.
* Arrange for equipment such as flip charts, an overhead projector, and any other equipment (as needed).
* Talk to people in your office who are most familiar with this topic to collect experiences that you can include as examples in the lesson.
* This lesson plan belongs to you. Feel free to highlight headings, key phrases, or other information to help the instruction flow smoothly. Feel free to add any notes or information that you need in the margins.
 |
| Training Day  | * Arrive as early as possible to ensure access to the facility and computers.
* Become familiar with the location of restrooms and other facilities that the trainees will require.
* Test the computer and projector to ensure they are working properly.
* Before class begins, open the PowerPoint presentation to the first slide. This will help to ensure the presentation is functioning properly.
* Make sure that a whiteboard or flip chart and the associated markers are available.
* The instructor completes a roll call attendance sheet or provides a sign-in sheet to the students. The attendance records are forwarded to the Regional Office Training Managers.
 |

|  |
| --- |
| Introduction to Asbestos Exposure Related Claims |
| INSTRUCTOR INTRODUCTION | Complete the following:* Introduce yourself
* Orient learners to the facilities
* Ensure that all learners have the required handouts
 |
| time required | 2 hours |
| Purpose of LessonExplain the following: | This lesson is intended to review the requirements of an asbestos exposure related claims. This lesson will contain discussions and exercises that will allow you to gain a better understanding of: * Background Information
* Asbestos related diseases
* Diagnostic tests and codes for Asbestosis and secondary issues Rating asbestosis
* Rating asbestos related cases
 |
| Lesson ObjectivesDiscuss the following:Slide 2 Handout 2 | In order to accomplish the purpose of this lesson, RVSR, PMC RVSR, DRO (Post Challenge)will be required to accomplish the following lesson objectives.TheRVSR, PMC Rvsr, DRO (Post Challenge)will be able to: * Define the term asbestos and asbestosis
* Identify military occupations impacted by asbestos exposure
* Review the manual references concerning asbestos related cases
* Identify the asbestos related diseases
* Describe possible secondary diseases
* Identify diagnostic codes used for asbestosis
* Identify possible secondary conditions’ diagnostic codes
* Prepare a rating decision for claimed asbestosis
 |
| Explain the following: | Each learning objective is covered in the associated topic. At the conclusion of the lesson, the learning objectives will be reviewed. |
| Motivation | Everyone has the risk of asbestos exposure since it occurs naturally in the environment. Usually, these are expelled before they reach the deeper areas of your lungs, but even if they do, a few fibers won't create signs and symptoms of asbestosis. Servicemembers may have an increased risk of exposure to to their military occupation and/or working environments. While this may be true, it is the long term exposure and its residuals that is the focus of this lesson. |
| STAR Error code(s) | TBD |
| ReferencesSlide 3 Handout 3 | Explain where these references are located in the workplace.* [**M21-1Part IV, Subpart ii, 2.C - Service Connection (SC) for Disabilities Resulting From Exposure to Environmental Hazards or Service in the Republic of Vietnam (RVN)**](https://vaww.compensation.pension.km.va.gov/system/templates/selfservice/va_ka/#!agent/portal/554400000001034/article/554400000014556/M21-1-Part-IV-Subpart-ii-Chapter-2-S)
* **[M21-1, Part IV, Subpart ii, 1, I -](https://vaww.compensation.pension.km.va.gov/system/templates/selfservice/va_ka/%22%20%5Cl%20%22%21agent/portal/554400000001034/article/554400000033326/M21-1-Part-IV-Subpart-ii-Chapter-1-S)****[Developing Claims for Service Connection (SC) Based on Other Exposure Types](https://vaww.compensation.pension.km.va.gov/system/templates/selfservice/va_ka/%22%20%5Cl%20%22%21agent/portal/554400000001034/article/554400000033326/M21-1-Part-IV-Subpart-ii-Chapter-1-S)**
* [**38 CFR 4.97 Schedule of Ratings-Respiratory System**](http://vbaw.vba.va.gov/bl/21/publicat/Regs/Part4/4_97.htm)
 |

|  |
| --- |
| Topic 1: Background Information |
| Introduction | This topic will allow the trainee to Understand Asbestos and Asbestosis and the impact within Military occupations. |
| Time Required | 0.25 hours |
| OBJECTIVES/Teaching Points | Topic objectives:* Define the term asbestos and asbestosis
* Identify military occupations impacted by asbestos exposure
* Review the manual references concerning asbestos related cases

The following topic teaching points support the topic objectives: * Definitions
* MOS Handout and Manual References
 |
|  *Definitions* Slide 4Handout 4 | **Asbestos**: Either of two incombustible, chemical-resistant, fibrous mineral forms of impure magnesium silicate; used for fireproofing, electrical insulation, building materials, brake linings, and chemical filters. A fibrous form of silicate mineral of varied chemical composition and physical configuration, derived from serpentine and amphibole ore bodies.**Asbestosis**: a chronic, progressive inflammation of the lung. It is not contagious. There may be side-effects due to asbestos exposure as well.Asbestosis is a consequence of prolonged exposure to large quantities of asbestos, a material once widely used in construction, insulation, and manufacturing. When asbestos is inhaled, fibers penetrate the breathing passages and irritate, fill, inflame, and scar lung tissue. In advanced asbestosis,, the lungs shrink, stiffen, and become honeycombed (riddled with tiny holes). |
| Discuss the MOS handout and manual references with the trainees.Slide 7Handout 5MOS Handout 11Attachment A |

|  |
| --- |
| What military occupational skills were exposed and are considered highly probable for exposure? While the list contains quite a few differing MOS’, each claim must be adjudicated on its own merit. Review Attachment 1 – Asbestos MOS Handout. High exposure to asbestos and a high prevalence of disease have been noted in insulation and shipyard workers. During World War II, several million people employed in US Shipyards and US Navy Veterans were exposed. Many of these people have only recently come to the attention of the medical community due to the latent period that varies from 10 to 45 years or more from first exposure and development of the disease. Ask the trainees to look at M21-1, Part IV, Subpart ii,1,I - Developing Claims for Service Connection (SC) Based on Other Exposure Types , and Developing claims for Service Connection for Asbestos-Related Diseases. |
| Have the trainees look at  [M21-1Part IV, Subpart ii,2.C - Service Connection (SC) for Disabilities Resulting From Exposure to Environmental Hazards or Service in the Republic of Vietnam (RVN)](https://vaww.compensation.pension.km.va.gov/system/templates/selfservice/va_ka/#!agent/portal/554400000001034/article/554400000014556/M21-1-Part-IV-Subpart-ii-Chapter-2-S), Service Connection for Disabilities resulting from Exposure to Asbestos. |

 |
|

|  |
| --- |
| Introduction |
| Time Required |
| OBJECTIVES/Teaching Points |
| *Review M21-1MR,* *Part IV, subpart ii, 2.C*Slide 8Handout 6 |
| **Specific Effects on** **Diseases Resulting** **from Asbestos** **Exposure** Slide 11Handout 6 |

 |

|  |
| --- |
| Topic 2: Asbestos Related Diseases |
| This topic will allow the trainee to Understand Asbestos primary and related diseases |
| 0.25 hours |
| Topic objectives:* Identify the asbestos related diseases
* Describe possible secondary diseases Review the manual references concerning asbestos related cases

The following topic teaching points support the topic objectives: * Definitions
* MOS Handout and Manual References
 |

We will be discussing those diseases related to asbestos exposure and some possible secondary diseases that can be service connected.Review (b), General Effects of Asbestos Exposure. What are some of the problems that inhalation of asbestos fibers can produce?a. fibrosis b. tumors c. pleural plaques d. cancers of the: lung; bronchus; gastrointestinal tract; larynx; pharynx; urogenital tract, except for the prostatee. pleural effusions and fibrosisf. mesotheliomas of pleura and peritoneumOccupational exposure is the most common cause of asbestosis, but the condition also strikes people who inhale asbestos fiber or who are exposed to waste products from plants near their homes. Family members can develop the disease as a result of inhaling particles of asbestos dust that cling to workers' clothes. It is rare for asbestosis to develop in anyone who hasn't been exposed to large amounts of asbestos on a regular basis for at least 10 years. Symptoms of the disease do not usually appear until 15-20 years after initial exposure to asbestos.As the disease progresses and lung damage increases, shortness of breath occurs even when the patient is at rest. Recurrent respiratory infections and coughing up blood are common. So is swelling of the feet, ankles, or hands. Other symptoms of advanced asbestosis include chest pain, hoarseness, and restless sleep. Patients who have asbestosis often have clubbed (widened and thickened) fingers. Other potential complications include heart failure, collapsed (deflated) lung, and pleurisy (inflammation of the membrane that protects the lung).Asbestosis can't be cured, but its symptoms can be controlled. Doctors don't know why the health of some patients deteriorates and the condition of others remains the same, but believes the difference may be due to varying exposures of asbestos.Asbestos exposure may lead to any of the following:• **High blood pressure in the lungs.** Asbestosis-related scar tissue may eventually compress or obliterate the lungs' small blood vessels, causing high blood pressure in the lungs' arteries (pulmonary hypertension). • **Heart problems.** Pulmonary hypertension can lead to enlargement and failure of the heart's right ventricle (cor pulmonale). The heart consists of four chambers — two upper chambers called atria and two lower chambers called ventricles. The right ventricle assists in pumping oxygen-poor blood from the organs and tissues to the lungs, where the blood receives a new boost of oxygen. As the pulmonary arteries narrow, the heart's right ventricle must work harder to pump blood through the lungs. Initially, the heart tries to compensate by thickening its walls and dilating the right ventricle to increase the amount of blood it can hold. But this measure only works temporarily, and eventually — after a period of a few years — the right ventricle weakens and fails from the extra strain. • **Lung cancer.** If a person smokes and has asbestosis, the chance of developing lung cancer increases greatly, especially if the person smokes more than a pack of cigarettes a day. Tobacco smoke and asbestos both contribute to each other's cancer-causing (carcinogenic) effects, so that the combination of both risk factors together is more dangerous than the effects of either risk factor alone. • **Other lung damage**. Exposure to asbestos can lead to other health complications, including changes in the thin membranes covering the lungs and lining the chest cavity (pleural membranes). Pleural changes may be the first signs of asbestos exposure and may include pleural thickening, the formation of calcium deposits in the pleura (plaques), and an abnormal accumulation of fluid between the membranes (pleural effusion). Pleural effusion itself is benign and doesn't increase the risk of asbestosis or malignant mesothelioma. • **Other cancer.** People exposed to asbestos at an early age, for a long period of time or at high levels are at increased risk of malignant mesothelioma. Diagnosis and treatment of this cancer is often difficult. Malignant mesothelioma takes many years to develop. Most people with this condition were first exposed to asbestos at least 20 years — and sometimes as long as 50 years - prior to their diagnosis. While asbestos exposure is the primary risk factor for malignant mesothelioma, asbestosis itself doesn't increase the risk of this cancer, nor does malignant mesothelioma increase the risk of asbestosis. NOTE: All persons with significant asbestosis develop cor pulmonale, heart disease secondary to disease of the lung or its blood vessels, and those who do not die from cancer often die from heart failure secondary to cor pulmonale. |

|  |
| --- |
| Topic 3: Diagnostic Tests and Codes for Asbestosis and Secondary Issues |
| Introduction | This topic will allow the trainee to Identify diagnostic codes for Asbestosis and secondary related conditions. |
| Time Required | 0.5 hours |
| OBJECTIVES/Teaching Points | Topic objectives:* Identify diagnostic codes used for asbestosis
* Identify possible secondary conditions’ diagnostic codes

The following topic teaching points support the topic objectives: * Tests for determining asbestosis
* Diagnostic codes
 |
| Diagnostic TestsSlide 12Handout 8 | To help a doctor make an accurate diagnosis, the Veteran must provide him or her with a detailed history of the Veteran’s work activities and any other sources of possible exposure to toxic dusts. If the doctor detects a dry, crackling sound when listening to the Veteran’s lungs with a stethoscope, he or she may also undergo these diagnostic tests: * **Pulmonary function tests (PFTs).** These tests determine how well the lungs are functioning and may help in the diagnosis. PFTs measure how much air the lungs can hold and the airflow in and out of the lungs. For example, the patient may be asked to blow as hard as he or she can into an air-measurement device called a spirometer. Some PFTs measure the amount of gas exchanged across the membrane between the alveoli and capillary blood vessels.
* **Chest X-ray.** A chest X-ray can often detect abnormalities in the lungs before the person experiences any symptoms. On an X-ray, areas of scar tissue that appear as small, scattered, opaque areas on the lining of the lungs are called pleural plaques. Although they indicate previous exposure to asbestos, they are not a predictor of asbestosis or malignant mesothelioma, a cancer that can occur in the tissue that surrounds the lungs. Asbestosis appears as excessive whiteness in the lung tissue. If the asbestosis is advanced, the entire lung may be affected, giving it a honeycomb appearance.
* **Computerized tomography (CT) scan.** In some cases, the doctor may request a computerized tomography (CT) scan of the person’s lungs. These scans generally provide greater detail than does a usual chest X-ray. This may help detect asbestosis in its early stages, even before it shows up on the chest X-ray.

If a person has ever had these tests in the past, he or she should try to get copies of those reports and of actual X-ray films, if possible — to share with his or her doctor. These will provide critical information to help diagnose the person’s condition. |
| Diagnostic codesSlide 14Handout 9 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Asbestosis is listed under: Interstitial Lung Disease

|  |  |
| --- | --- |
| **6825** | **Diffuse interstitial fibrosis (interstitial pneumonitis, fibrosing alveolitis).** |
| **6826** | **Desquamative interstitial pneumonitis.** |
| **6827** | **Pulmonary alveolar proteinosis.** |
| **6828** | **Eosinophilic granuloma of lung.** |
| **6829** | **Drug-induced pulmonary pneumonitis and fibrosis.** |
| **6830** | **Radiation-induced pulmonary pneumonitis and fibrosis.** |
| **6831** | **Hypersensitivity pneumonitis (extrinsic allergic alveolitis).** |
| **6832** | **Pneumoconiosis (silicosis, anthracosis, etc.).** |
| **6833** | **Asbestosis.** |

|  |
| --- |
| **General Rating Formula for Interstitial Lung Disease****(diagnostic codes 6825 through 6833):** |
| Forced Vital Capacity (FVC) less than 50-percent predicted, or; Diffusion Capacity of the Lung for Carbon Monoxide by the Single Breath Method(DLCO (SB)) less than 40-percent predicted,or; maximum exercise capacity less than 15 ml/kg/min oxygen consumption with cardiorespiratory limitation, or; cor pulmonale or pulmonary hypertension, or; requires outpatient oxygen therapy (100)  | *100* |
| FVC of 50- to 64-percent predicted, or; DLCO (SB) of 40- to 55-percent predicted, or; maximum exercise capacity of 15 to 20 ml/kg/min oxygen consumption with cardiorespiratory limitation. (60) | *60* |
| FVC of 65- to 74-percent predicted, or; DLCO (SB) of 56- to 65-percent predicted (30)  | *30* |
| FVC of 75- to 80-percent predicted, or; DLCO (SB) of 66- to 80-percent Predicted (10) | *10* |

**Other conditions:**Pleural effusions – rated analogous to asbestosis under DC 6833 Fibrosis - rated analogous to asbestosis under DC 6833Pleural plaques - rated analogous to asbestosis under DC 6833Cancer – under the appropriate DC for the body system involved.Mesothelioma of pleura - rated analogous to DC 6819

|  |  |  |
| --- | --- | --- |
| **6819** | **Neoplasms, malignant, any specified part of respiratory system exclusive of skin growths** | 100 |
| *Note: A rating of 100 percent shall continue beyond the cessation of any surgical, X-ray, antineoplastic chemotherapy or other therapeutic procedure. Six months after discontinuance of such treatment, the appropriate disability rating shall be determined by mandatory VA examination. Any change in evaluation based upon that or any subsequent examination shall be subject to the provisions of* [*§3.105(e)*](http://vbaw.vba.va.gov/bl/21/Publicat/Regs/Part3/3_105.htm#e) *of this chapter. If there has been no local recurrence or metastasis, rate on residuals.* |

Mesothelioma of peritoneum – analogous to DC 7343**7343 Malignant neoplasms of the digestive System,**  **Exclusive of skin growths** 100 |  |

 |
| Excersise: Rating Asbestos Related Cases |
|  |  |
| Time Required | 0.25 hours |
| OBJECTIVES/Teaching Points | Asbestos exposure related disabilities: |
| ScenariosSlide 15Handout 11Attachment B

|  |
| --- |
|  |
|  |

 | Please complete the Asbestos exposure related disabilities scenarios. You will be allowed 30 minutes to complete the exercises/scenarios. Carefully read the scenarios. For each scenario, answer the following questions:1. Does the Veteran have a possible asbestos-related disease?
2. What evidence needs to be gathered to have a fully developed compensation claim? Please list the evidence needed and indicate how you would request it.
3. What alternative actions, if any, might you consider?

Ask if there are any questions about the information presented in the exercise, and then proceed to the Review. |

|  |
| --- |
| Practical Exercise |
| Time Required | 5 hours |
| EXERCISEScenarioSlide 16Handout 17-21 | * Prepare a rating decision for claimed asbestosis in accordance

with **38 CFR 4.97 Schedule of Ratings-Respiratory System**A Korean War Veteran places a claim for asbestosis, claiming it was due to his exposure while serving on board the USS New Jersey off the coast of Inchon. Review the Veteran’s medical evidence, located in Handout.Provide a Rating Decision based on the evidence provided for the claimed service-connection for asbestosis |
|  |  |

|  |
| --- |
| Lesson Review, Assessment, and Wrap-up |
| IntroductionDiscuss the following: | The Asbestos Exposure Related Claims lesson is complete. Review each lesson objective and ask the trainees for any questions or comments. |
| Time Required | 0.25 hours  |
| Lesson Objectives | You have completed the asbestos exposure related claims lesson. The trainee should be able to: * Define the term asbestos and asbestosis
* Identify military occupations impacted by asbestos exposure
* Review the manual references concerning asbestos related cases
* Identify the asbestos related diseases
* Describe possible secondary diseases
* Identify diagnostic codes used for asbestosis
* Identify possible secondary conditions’ diagnostic codes
* Prepare a rating decision for claimed asbestosis
 |
| Assessment  | Remind the trainees to complete the on-line assessment in TMS to receive credit for completion of the course.The assessment will allow the participants to demonstrate their understanding of the information presented in this lesson. |