

§ 37.201

Secretary will pay pathologists to obtain results of autopsies performed by them on miners.

§ 37.201 Definitions.

As used in this subpart:

(a) *Secretary* means the Secretary of Health and Human Services.

(b) *Miner* means any individual who during his life was employed in any underground coal mine.

(c) *Pathologist* means

(1) A physician certified in anatomic pathology or pathology by the American Board of Pathology or the American Osteopathic Board of Pathology,

(2) A physician who possesses qualifications which are considered "Board of eligible" by the American Board of Pathology or American Osteopathic Board of Pathology, or

(3) An intern, resident, or other physician in a training program in pathology who performs the autopsy under the supervision of a pathologist as defined in paragraph (c) (1) or (2) of this section.

(d) *ALFORD* means the Appalachian Laboratory for Occupational Respiratory Diseases, Public Health Service, Department of Health and Human Services, Post Office Box 4257, Morgantown, WV 26505.

§ 37.202 Payment for autopsy.

(a) The Secretary will pay up to \$200 to any pathologist who, after the effective date of the regulations in this part and with legal consent:

(1) Performs an autopsy on a miner in accordance with this subpart; and

(2) Submits the findings and other materials to ALFORD in accordance with this subpart within 180 calendar days after having performed the autopsy; and

(3) Receives no other specific payment, fee, or reimbursement in connection with the autopsy from the miner's widow, his family, his estate, or any other Federal agency.

(b) The Secretary will pay to any pathologist entitled to payment under paragraph (a) of this section and additional \$10 if the pathologist can obtain and submits a good quality copy or original of a chest roentgenogram (posteroanterior view) made of the subject of the autopsy within 5 years prior

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to his death together with a copy of any interpretation made.

[35 FR 13206, Aug. 19, 1970, as amended at 38 FR 16353, June 22, 1973]

§ 37.203 Autopsy specifications.

(a) Every autopsy for which a claim for payment is submitted pursuant to this part:

(1) Shall be performed consistent with standard autopsy procedures such as those, for example, set forth in the "Autopsy Manual" prepared by the Armed Forces Institute of Pathology, July 1, 1960. (Technical Manual No. 8-300. NAVMED P-5065, Air Force Manual No. 160-19.) Copies of this document may be borrowed from ALFORD.

(2) Shall include:

(i) Gross and microscopic examination of the lungs, pulmonary pleura, and tracheobronchial lymph nodes;

(ii) Weights of the heart and each lung (these and all other measurements required under this subparagraph shall be in the metric system);

(iii) Circumference of each cardiac valve when opened;

(iv) Thickness of right and left ventricles; these measurements shall be made perpendicular to the ventricular surface and shall not include trabeculations or pericardial fat. The right ventricle shall be measured at a point midway between the tricuspid valve and the apex, and the left ventricle shall be measured directly above the insertion of the anterior papillary muscle;

(v) Size, number, consistency, location, description and other relevant details of all lesions of the lungs;

(vi) Level of the diaphragm;

(vii) From each type of suspected pneumoconiotic lesion, representative microscopic slides stained with hematoxylin eosin or other appropriate stain, and one formalin fixed, paraffin-impregnated block of tissue; a minimum of three stained slides and three blocks of tissue shall be submitted. When no such lesion is recognized, similar material shall be submitted from three separate areas of the lungs selected at random; a minimum of three stained slides and three formalin fixed, paraffin-impregnated blocks of tissue shall be submitted.

(b) Needle biopsy techniques shall not be used.

§37.204 Procedure for obtaining payment.

Every claim for payment under this subpart shall be submitted to ALFORD and shall include:

(a) An invoice (in duplicate) on the pathologist's letterhead or billhead indicating the date of autopsy, the amount of the claim and a signed statement that the pathologist is not receiving any other specific compensation for the autopsy from the miner's widow, his surviving next-of-kin, the estate of the miner, or any other source.

(b) Completed PHS Consent, Release and History Form (See Fig. 1). This form may be completed with the assistance of the pathologist, attending physician, family physician, or any other responsible person who can provide reliable information.

(c) Report of autopsy:

(1) The information, slides, and blocks of tissue required by this subpart.

(2) Clinical abstract of terminal illness and other data that the pathologist determines is relevant.

(3) Final summary, including final anatomical diagnoses, indicating presence or absence of simple and complicated pneumoconiosis, and correlation with clinical history if indicated.

FIGURE 1

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

PUBLIC HEALTH SERVICE—NATIONAL COAL WORKERS' AUTOPSY STUDY

Consent, Release, and History Form Federal Coal Mine Health and Safety Act of 1969

I, _____, (Name) _____ (Relationship) of _____, (Name of deceased miner) do hereby authorize the performance of an autopsy (_____) (Limitation, if any, on autopsy) on said deceased. I understand that the report and certain tissues as necessary will be released to the United States Public Health Service and to _____ (Name of Physician securing autopsy)

I understand that any claims in regard to the deceased for which I may sign a general release of medical information will result in the release of the information from the Pub-

lic Health Service. I further understand that I shall not make any payment for the autopsy.

Occupational and Medical History

1. Date of Birth of Deceased _____ (Month, Day, Year)

2. Social Security Number of Deceased _____

3. Date and Place of Death _____ (Month, Day, Year) _____ (City, County, State).

4. Place of Last Mining Employment: Name of Mine _____ Name of Mining Company _____ Mine Address _____

5. Last Job Title at Mine of Last Employment _____ (e.g., Continuous Miner Operator, motorman, foreman, etc.)

6. Job Title of Principal Mining Occupation (that job to which miner devoted the most number of years) _____ (e.g., Same as above)

7. Smoking History of Miner: (a) Did he ever smoke cigarettes? Yes _____ No _____

(b) If yes, for how many years? _____ Years.

(c) If yes, how many cigarettes per day did he smoke on the average? _____ (Number of) Cigarettes per day.

(d) Did he smoke cigarettes up until the time of his death? Yes _____ No _____

(e) If no to (d), for how long before he died had he not been smoking cigarettes? _____

8. Total Years in Surface and Underground Employment in Coal Mining, by State (If known) _____, (Years) _____ (State).

9. Total Years in Underground Coal Mining Employment, by State (If known) _____, (Years) _____ (State).

(Signature)

(Address)

(Date)

Interviewer: _____

PART 38—DISASTER ASSISTANCE FOR CRISIS COUNSELING AND TRAINING

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