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NATIONAL OCCUPATIONAL HEALTH STANDARD OF THE PEOPLE'S REPUBLIC OF CHINA

GBZ 32-2015

Replacing GBZ 32-2002

Diagnosis of occupational chloroprene poisoning

职业性氯丁二烯中毒的诊断

(English Translation)

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Foreword

According to the "People's Republic of China Occupational Disease Prevention Law" to develop this standard.

Chapter 6 of this standard is recommended and the remainder is mandatory.

This standard is drafted in accordance with the rules given in GB/T 1.1-2009.

This standard replaces GBZ 32-2002 "diagnostic criteria for occupational chloroprene poisoning".

Compared with GBZ 32-2002, the main modifications are as follows.

- "diagnostic principle" is divided into "acute poisoning" and "chronic poisoning" in two parts;

The principle of chronic poisoning diagnoses the minimum time limit for long-term close contact with chlorobutadiene;

--- increase the "contact response" and its related content;

--- delete the "observation object" and its related content;

--- will be diagnosed by mild, severe poisoning secondary to mild, moderate, severe

poisoning three;

- other processing, an increase of "labor ability identification" of the treatment;
- Appendix A adds a description of the relevant information on the diagnosis of chloramphenicolated toxic liver disease.

This standard is responsible for drafting units. Shanghai Chemical Industry Occupational Disease Prevention and Control Institute.

The standard to participate in the drafting unit. China Center for Disease Control and Prevention Occupational Health and Poison Control, Tongji University, Shanghai pulmonary medicine Hospital, Chongqing Municipal Occupational Disease Prevention and Control Hospital, Fujian Province Occupational Disease Prevention and Control Hospital, Wuxi City People's Hospital.

1 Scope

This standard specifies the principles of diagnosis and treatment of occupational chloroprene poisoning.

This standard applies to the diagnosis and treatment of occupational chloroprene poisoning.

2 Normative reference documents

The following documents are indispensable for the application of this document. For dated references, only the dated edition applies to this article Pieces. For undated references, the latest edition (including all modifications) applies to this document.

GB/T 16180 Labor capacity - Identification of workers' injury and occupational disease
Diagnostic criteria for occupational toxic liver disease GBZ 73 Occupational acute
chemicals - Criteria for the diagnosis of toxic respiratory diseases GBZ 76 Occupational
acute chemical poisoning Nervous system disease diagnostic criteria

3.1 Acute poisoning

According to the short-term exposure to higher concentrations of chlorobutadiene occupational history, to the central nervous system and/or respiratory damage mainly in the Pro Bed performance, combined with laboratory findings and workplace occupational health survey data, a comprehensive analysis, excluding other reasons similar to After the disease, can be diagnosed.

3.2 Chronic poisoning

With more than 1 year (including 1 year) close contact with chlorobutadiene occupational history, liver, nervous system damage-based clinical manifestations, combined with laboratory inspection results and workplace occupational health information, a comprehensive analysis, excluding other causes of similar diseases, can be diagnosed.

4 Contact reaction

Short-term exposure to higher concentrations of chloroprene, the emergence of dizziness, headache, or tears, throat pain, cough, chest tightness, shortness of breath, nausea and other symptoms, no positive signs, no abnormal chest X-ray, and 72 hours from the contact with the symptoms were significantly reduced or disappeared.

5.1.1 Mild poisoning

Short-term exposure to higher concentrations of chloroprene, the emergence of dizziness, headache, fatigue, nausea, vomiting, chest tightness, shortness of breath and other symptoms, and conjunctival filling Blood, pharyngeal congestion and other signs, and have one of the following manifestations.

- a) acute mild toxic encephalopathy, such as mild disturbance of consciousness, gait staggering (see GBZ 76);
- b) Acute tracheal-bronchitis (see GBZ 73).

5.1.2 Moderate poisoning

One of the following manifestations.

- a) acute moderate toxic encephalopathy, such as moderate disturbance of consciousness, ataxia and other performance (see GBZ 76);
- b) acute bronchial pneumonia or interstitial pulmonary edema (see GBZ 73).

5.1.3 Severe poisoning

One of the following manifestations.

- a) acute severe encephalopathy, such as severe disturbance of consciousness (see GBZ 76);
- b) alveolar pulmonary edema (see GBZ 73).

5.2.1 Mild poisoning

With more than 1 year (including 1 year) chloroprene occupational exposure history, there dizziness, headache, fatigue,, insomnia, irritability, memory loss Retreat and other clinical symptoms, and have one of the following manifestations.

- a) moderate to severe alopecia and neurasthenia syndrome;
- b) chronic mild toxic liver disease (see GBZ 59), may be associated with serum protein electrophoresis beta globulin ratio before and after comparison to reduce their 20% the above.

5.2.2 Moderate poisoning

Chronic moderate toxic liver disease (see GBZ 59).

5.2.3 Severe poisoning

Chronic severe toxic liver disease (see GBZ 59).

6.1 Principles of treatment

6.1.1

acute poisoning immediately from the poisoning scene, clean contaminated eyes and skin, replace contaminated clothing, keep quiet, warm, oxygen.

Acute attention to bed rest, symptomatic and supportive treatment, if necessary, given glucocorticoid treatment.

6.1.2

chronic poisoning during the treatment of chloroprene from the operation, appropriate rest, strengthen nutrition, symptomatic treatment.

6.2.1 Acute poisoning

Light and moderate poisoning can be cured after treatment, severe poisoning as the disease from the original job or engaged in light work.

6.2.2 Chronic poisoning

Light and moderate poisoning can be restored after the original work. Severe poisoning is no longer engaged in chloroprene operation, depending on the condition of rest or engaged in light industry for. For labor identification, according to GB/T 16180 treatment.