

## **Guidelines on Maintaining and Improving Health of Emergency Workers at the TEPCO Fukushima Daiichi Nuclear Power Plant (Overview)**

### Section 1.Purpose

These guidelines were established to support appropriate and effective implementation of measures to maintain and improve the health of workers who have engaged or had engaged in the emergency work or radiation work (hereinafter referred to as “emergency workers.”) at the TEPCO Fukushima Daiichi Nuclear Power Plant

### Section 2.Actions for long-term health care

1. On site health care system should be established appropriate for the scale of each workplace to implement medical examination.
2. Following examinations shall be performed for those workers whose radiation exposure dose (effective dose) during emergency works fall in the following ranges:
  - Higher than 50mSv, a cataract examination once a year
  - Higher than 100mSv, a cancer screening once a year
3. Health guidance should be provided to all emergency workers

### Section 3.Development of a database for workers who have engaged in emergency works

1. Employers who assign their emergency workers to engage in the emergency work or radiation work should report to the Japanese government the results of their medical examinations and provide the status report on their radiation dose control.

The same rule for reporting requirement should apply for employees who had been emergency workers but were transferred to engage in radiation work.
2. A registration card for the database established by the Japanese government should be issued to emergency workers. The emergency workers should be able to obtain copies of their records for exposed dose and medical examination results by presenting the registration card at the national support service.
3. Emergency workers whose radiation exposure dose is higher than 50 mSv are eligible to receive a handbook describing the dose.

### Section 4.Support by the Japanese government

1. Recommendations for cancer screening and other examinations to emergency workers.
2. Health consultations and guidance to emergency workers at the support services.
3. Full or partial financial support for the expenses for emergency workers who fall into categories described in the Section 2-2 above.