

## NGCBIT MEDICAL DISEASE CRITERIA

### **Results:**

PFT - The FVC, FEV/FVC, TLC, DLCO values should be entered if the medical evidence consists of a PFT report providing these values for the Injured Party. The date the FEV/FVC test was performed should be provided, if applicable.

ILO – The ILO Grade, ILO Right and ILO Left values should be entered if the medical evidence consists of an ILO form and/or summary providing these values for the Injured Party. Indicate whether the ILO Right and ILO Left values are diffuse, if applicable.

### **Malignancy:**

**Non-Asbestos Related** - Select the appropriate malignancy from the Evidence of Malignancy drop down box if the Injured Party's cancer is not asbestos related.

Asbestos Related - Select the appropriate malignancy from the Evidence of an Asbestos Related Malignancy drop down box if the Injured Party's cancer is asbestos related.

### **Pathological evidence of Mesothelioma:**

This box should be checked if the medical evidence supports pathological evidence of Mesothelioma. This information must be taken from a pathology report indicating Mesothelioma. However, in the absence of a pathology report, an autopsy report that notes a special stain technique was used to identify the presence of Mesothelioma is acceptable.

### **Bilateral Pleural Condition:**

This box should be checked if it is determined that the medical evidence supports a bilateral pleural condition. A pleural condition is defined as pleural plaques, thickening, or calcification in the lungs or on the diaphragm. Bilateral pleural condition is defined as one of these pleural conditions on both sides of the lungs or on the diaphragm.

The pleural condition may be derived from the ILO form Sections 3B. Pleural Thickening Diaphragm (plaque); 3C. Pleural Thickening, Chest Wall, a. Circumscribed (plaque) or b. Diffuse; and 3D. Pleural Calcification, a. Diaphragm or b. Wall. In order to be considered as a bilateral condition, the plaques, thickening or calcifications must occur bilaterally within the confines of the area of classification with the exception of the diaphragm which is a single anatomic structure. Costophrenic Angle is not accepted for bilateral pleural condition.

Bilateral pleural condition may also be taken from a comprehensive medical report. It is required that the findings of bilateral pleural condition be from a Certified NIOSH B-Reader or a Board Certified Radiologist.

### **Asbestos-related Bilateral Interstitial Lung Disease (asbestosis):**

This box should be checked if it is determined that the medical evidence indicates a diagnosis of an asbestos-related bilateral interstitial lung disease or the diagnosis of asbestosis. This information must be taken from a medical report indicating that the Injured Party has asbestos-related bilateral interstitial lung disease or asbestosis. A diagnosis of pleural asbestosis is not acceptable for asbestosis.

### **Bilateral Basilar Crackles:**

This box should be checked if it is determined that the medical evidence supports bilateral basilar crackles. This information must be taken from a medical report indicating that the Injured Party has bilateral basilar crackles. Bilateral basilar rales or rales in both bases of the lungs is accepted for bilateral basilar crackles.

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### **Pathologist Statement - Lung Demonstrates Bilateral Interstitial Fibrosis**

This box should be checked if it is determined that the medical evidence supports a statement by a board-certified pathologist that more than one representative section of lung tissue otherwise uninvolved with any other process, such as emphysema, demonstrates bilateral interstitial fibrosis or a pattern of peribronchiolar or parenchymal scarring in the presence of characteristic asbestos bodies. This information must be taken from a report, in which a Pathologist indicates that the Injured Party's lung demonstrates bilateral interstitial fibrosis.

### **Pathological Evidence of Asbestos:**

This box should be checked if it is determined that the medical evidence supports pathological evidence of asbestos bodies. Asbestos bodies found in lung tissue are also known as ferruginous bodies. This information must be taken from a pathology report indicating evidence of asbestos.

### **Path/Pulm Statement - Asbestos-related Disease Caused by Death**

This box should be checked if it is confirmed that the Injured Party is deceased and the medical evidence supports a diagnosis by or referencing a finding of a pathologist or pulmonologist that an asbestos-related non-malignant disease was a substantial contributing cause of the Injured Party's death. This information may be taken from a pathology report containing a diagnosis by a pathologist that an asbestos-related non-malignant disease was a substantial contributing cause of the Injured Party's death. This information may also be taken from a medical report that contains the diagnosis by a pulmonologist or a medical report that references the findings of a pathologist or pulmonologist that an asbestos-related non-malignant disease was a substantial contributing cause of the Injured Party's death.

### **Diagnosing Report of Asbestos-related Disease Provided:**

This box should be checked if it is determined that the medical evidence supports a diagnosis of a NGCBIT recognized asbestos-related non-malignant disease. This information may be taken from a medical report indicating that the Injured Party has an asbestos-related non-malignant disease.

### **Asbestos-Caused Abnormality:**

This box should be checked if it is determined that the medical evidence supports an asbestos-caused abnormality recognized by the NGCBIT. This information may be taken from the medical report and an example may be a diagnosis of pleural abnormalities due to asbestos exposure.

### **Unilateral Pleural Disease of at Least ILO Grade B:**

This box should be checked if it is determined that the medical evidence supports unilateral pleural disease of at least ILO Grade B. Unilateral pleural disease of at least ILO Grade B is defined as pleural plaques or thickening on either side of the lung of at least ILO Grade B.

This may be taken from the 3C. Pleural Thickening...Chest Wall a. Circumscribed or b. Diffuse portions of the B-read or a medical report indicating the Injured Party has unilateral pleural disease of at least ILO Grade B. It is required that the findings of unilateral pleural disease of at least ILO grade B be from a Certified NIOSH B-Reader or a Board Certified Radiologist.