



Ultrasound technologists and work-related injuries: the long struggle for recognition

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ost HSA members, and certainly all our ultrasound technologists, are familiar with the long battle we have had to achieve recognition from the Workers Compensation Board (WCB ... also known as WorkSafe BC) of the risks inherent in the profession.

HSA undertakes a high volume of workers compensation appeals for injured ultrasound technologists. Typically she will have an activityrelated soft tissue disorder (ASTD) of some sort: tendonitis of the wrist or arm, rotator cuff tendonitis, thoracic outlet syndrome, epicondylitis, or, commonly, what the WCB calls a nonspecific multiple tissue disorder of the shoulder, upper back and neck.

These are all considered and recognized as occupational diseases. We have fought for many long years to have the WCB recognize that these conditions are endemic to the profession.

The *Workers Compensation Act* provides a schedule of occupational diseases. Schedule B is the easiest and most automatic way to get an occupational disease accepted. It lists a condition or disease, accompanied by a list of industries or series of activities. If you have the condition or disease, and your industry or activity is on the accompanying list, there is an automatic presumption that your condition or disease comes from your work.

HSA has lobbied for years to have ultrasound technologists added to this list. But the WCB is resistant to this process; more so in recent years than ever before, and we are no closer to success than we were 10 years ago. The trend under the current government is to move away from coverage and benefits for injured workers, and this is no exception.

However, one by one, HSA continues to win the majority of our compensation appeals for injured ultrasound technologists.

About 10 years ago HSA, the BC Ultrasonographers Society and the Healthcare Benefits Trust co-operated in a province-wide study of ultrasound technologists. The results were shocking: nearly 92 per cent of technologists had been injured at some point in their career. Many of them continued to work with their injuries.

This study was published broadly and highly regarded. However, in the current political climate we have been finding that increasingly the appeal tribunals are disregarding this evidence. This evidence, which used to win our appeals, is now being discounted as -anecdotal," -unhelpful," and -of no weight".

Clearly something more must be done.

Over the past year, HSA has hired one of the best-known ergonomists in the province to address this problem. Judy Village is an associate professor at the UBC School of Occupational Hygiene. She is one of only six

certified professional ergonomists in BC and has provided training to WCB staff.

She has been doing individual workplace assessments on our injured ultrasound technologists and writing a report in each case for their individual appeals. Her reports are based on her study of the technologist at the job for several hours. She watches the technologist doing the full job, and films it. She then plays back the tape step by step and assesses the ergonomics of *every single movement the technologist makes*. Her analyses of the demands of the job are incredibly detailed and are supported by reference to all of the most current scientific literature.

WCB, on the other hand, fired all of its ergonomists when the Liberals came into power. Their case managers are now forced to do their own ASTD reports with very little training in the area.

While a Village report is a thing of beauty to us in the legal department at HSA, we cannot have her assess each and every one of our injured members. Two years ago we engaged her to do a large "template" study of our medical laboratory technologists. We have had tremendous success with that report.

This year, she has been working on a similar study for our ultrasound technologists.

In the face of the trend against workers, we need hard, scientific data to support our members in their appeals.

We are optimistic this report will provide us with the ammunition we need to win these appeals, and perhaps to convince the employers to make the changes that have to be made to prevent these occupational injuries from happening in the first place. 

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