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Ordinance on Occupational Health Care (Verordnung zur arbeitsmedizinischen Vorsorge, ArbMedVV)

Occupational Health Care Ordinance of 18 December 2008 (Federal Law Gazette I p. 2768),
as last amended by Article 1 of the Ordinance of 23 October 2013 (Federal Law Gazette I
p. 3882)

The Ordinance was adopted by the Federal Government with the consent of the Bundesrat
as Article 1 of the Ordinance of 18 December 2008 (Federal Law Gazette I p. 2768) after
hearing the Central Commission on Biological Safety. Pursuant to Article 10, first sentence,
of that Ordinance, it entered into force on 24 December 2008.

Section 1 Objective and scope

- (1) The objective of this Ordinance is the early diagnosis and prevention of work-related illnesses, including occupational diseases, by adopting preventive occupational health care measures. At the same time, preventive occupational health care shall contribute to maintaining employability and further developing occupational health protection.
- (2) This Ordinance applies to preventive occupational health care within the scope of the Safety and Health at Work Act (*Arbeitsschutzgesetz, ArbSchG*).
- (3) This Ordinance shall not affect other preventive occupational health care measures, in particular those taken in accordance with the Safety and Health at Work Act and the Act relating to Company Doctors, Safety Engineers and other Occupational Safety Experts (Occupational Safety Act) (*Arbeitssicherheitsgesetz, ASiG*).

Section 2 Definitions

- (1) For the purposes of this Ordinance, 'preventive occupational health care'
1. forms part of the preventive occupational health care measures adopted in an establishment;
 2. serves the assessment of individual interactions between work and physical and mental health and the early diagnosis of work-related health problems as well as the determination of whether there is an increased health risk when performing certain activities;
 3. includes a medical consultation meeting, including medical history and a description of activities performed and burdens associated with the work place, as well as physical or clinical examinations, insofar as these are necessary to investigate individual matters or for an individual consultation, and the worker does not refuse to undergo these examinations;
 4. comprises the use of the findings from preventive health care for the risk assessment and for other measures of occupational safety and health;
 5. does not comprise proof of physical suitability for meeting professional demands on the basis of other legal provisions or individually or collectively negotiated agreements.
- (2) 'Mandatory health care' is preventive occupational health care which must be occasioned when certain particularly dangerous activities are performed.
- (3) 'Optional health care' is preventive occupational health care which must be offered when certain dangerous activities are performed.

(4) 'Elective health care' is preventive occupational health care which must be made possible at the request of workers performing activities which may cause damage to health.

Section 3

General obligations on the employer

(1) The employer shall guarantee appropriate preventive occupational health care on the basis of a risk assessment. In doing so, he shall comply with the provisions of this Ordinance, including the Annex, and take into consideration the regulations and findings published in accordance with section 9 (4). When complying with the regulations and findings referred to in the second sentence, it must be assumed that the requirements set have been fulfilled. Preventive occupational health care may also comprise additional preventive health measures.

(2) The employer shall commission a doctor in accordance with section 7 with the provision of preventive occupational health care. Where a company doctor has been appointed in accordance with section 2 of the Safety and Health at Work Act, the employer shall give priority to him or her when commissioning the provision of preventive occupational health care. The doctor must be given all the necessary information regarding work place conditions, in particular the occasion for the preventive occupational health care and the outcome of the risk assessment, and he or she must be allowed access to inspect the work place. He or she must, upon request, be allowed access to the documents referred to in subsection (4), first sentence.

(3) Preventive occupational health care shall be provided during working hours. It shall not be provided in conjunction with examinations which serve to prove physical suitability to meet professional demands, unless there are operational reasons for doing so; in such cases, the employer must obligate the doctor to reveal to the worker the various purposes of preventive occupational health care and the suitability examination.

(4) The employer shall keep file records containing information regarding the fact that, when and on what occasions preventive occupational health care was provided; the file records may be kept in automated form. The information must be retained until the employment relationship ends and must then be deleted, unless legal provisions or the regulations published in accordance with section 9 (4) provide otherwise. The employer shall transmit a copy of the file records to the competent authority by order. When the employment relationship ends the employer shall hand the person concerned a copy of the information concerning him or her; section 34 of the Federal Data Protection Act (*Bundesdatenschutzgesetz*, BDSG) shall remain unaffected.

Section 4

Mandatory health care

(1) The employer shall occasion mandatory health care for workers in accordance with the provisions of the Annex. Mandatory health care must be occasioned before an activity is taken up and thereafter at regular intervals.

(2) The employer may only have an activity performed if the worker has taken part in the mandatory health care.

(3) (repealed)

Section 5

Optional health care

(1) The employer must offer workers optional health care in accordance with the provisions of the Annex. Optional health care must be offered as an option before an activity is taken up and thereafter at regular intervals. Where a worker rejects the offer, this does not release the employer from the obligation to offer further regular optional health care.

(2) If the employer learns of an illness which may have been caused by the worker's activity, he must immediately offer him or her optional health care. This also applies to workers performing comparable activities if there are indications that they may also be at risk.

(3) The employer must offer workers and former workers follow-up preventive health care in accordance with the provisions of the Annex after they stop performing certain activities which may lead to health problems after extended latency periods. At the end of the employment relationship the employer's obligation transfers to the competent statutory

occupational accident insurance provider, and he shall hand over a copy of all the necessary documents insofar as the worker has agreed thereto.

Section 5a Elective health care

Over and above the provisions set out in the Annex, the employer shall enable workers to undergo regular preventive medical check-ups at their request in accordance with section 11 of the Safety and Health at Work Act, unless no health damage is to be expected on the basis of the evaluation of the conditions of work and the protective measures taken.

Section 6 Obligations on the doctor

(1) The doctor shall comply with the provisions of this Ordinance, including the Annex, when providing preventive occupational health care and shall give consideration to the regulations and findings corresponding to the state of occupational medicine. Before providing preventive occupational health care he or she must obtain the necessary knowledge regarding the conditions of work. Before carrying out physical or clinical examinations the doctor must examine their necessity at his or her dutiful medical discretion and must inform the worker about the content, purpose and risks of the examination. Examinations in accordance with the third sentence may not be carried out against the worker's will. The doctor must observe medical confidentiality.

(2) Biomonitoring is a part of preventive occupational health care insofar as analytical methods recognised by occupational medicine and suitable evaluation values are available. Biomonitoring may not be carried out against the worker's will. Vaccinations are a part of preventive occupational health care and must be offered to workers insofar as the risk of infection is activity-related and greater than in the general population. The third sentence shall not apply if the worker already has sufficient immunity.

(3) The doctor shall

1. record the results and the findings of the preventive occupational health care appointment in writing and to advise the worker about these results and findings,
2. make the results available to the worker at his or her request, and
3. issue the worker and the employer with an attestation regarding the fact that, when and on what occasion a preventive occupational health appointment was held; the attestation shall also include information on when another preventive occupational health care appointment is necessary from a medical point of view.

(4) The doctor shall analyse the findings of preventive occupational health care. Where these provide indications that the measures of occupational safety and health taken in regard to the worker or workers are not sufficient, the doctor must inform the employer thereof and make recommendations regarding measures of occupational safety and health. Where the doctor feels it is necessary for the worker to change jobs for medical reasons which purely relate to the worker's person, such notification to the employer requires the consent of the worker.

Section 7 Requirements for the doctor

(1) Notwithstanding other provisions in the Annex regarding individual occasions for the provision of preventive occupational health care, the doctor must be authorised to use the designation "Occupational Health Care" (*Arbeitsmedizin*) or the additional designation "Occupational Medicine" (*Betriebsmedizin*). He or she may not exercise the function of employer vis-à-vis the worker. Where the doctor does not have the requisite specialist knowledge or the special authorisations or equipment for certain methods of examination in accordance with the first sentence, he or she must bring in doctors who meet these requirements.

(2) The competent authority may, in justified individual cases, grant exceptions to subsection (1), first sentence, for doctors.

Section 8

Measures following preventive occupational health care

- (1) In the case of section 6 (1), second sentence, the employer shall examine the risk assessment and immediately take the required measures of occupational safety and health. If a change of job is recommended, the employer must assign the worker another activity in accordance with public service law or labour law regulations.
- (2) The works or staff council and the competent authority shall be informed of the measures taken.
- (3) If the worker or the employer feels that the result of the assessment conducted in accordance with section 6 (4) is incorrect, the competent authority shall issue a decision upon application.

Section 9

Occupational Health Committee

- (1) An Occupational Health Committee shall be established at the Federal Ministry of Labour and Social Affairs comprising expert representatives of the employers, the trade unions, *Land* authorities, the statutory occupational accident insurance providers and other experts, especially those from the scientific community. The total number of members shall not exceed twelve. A deputy shall be appointed for each member. Membership of the Occupational Health Committee shall be on an honorary basis.
- (2) The Federal Ministry of Labour and Social Affairs shall appoint the members of the Committee and their deputies. The Committee shall draw up its own rules of procedure and elect the chair from amongst its members. The rules of procedure and the election of the chair shall require the consent of the Federal Ministry of Labour and Social Affairs.
- (3) The tasks of the Committee include
 1. determining regulations corresponding to the state of occupational medicine and other established findings of occupational medicine,
 2. determining regulations and findings in regard to how the requirements set out in this Ordinance, in particular regarding the content and extent of mandatory, optional or elective health care provision, can be met,
 3. making recommendations regarding preventive occupational health care provision,
 4. issuing other recommendations on health care provision, in particular as part of in-company health programmes,
 5. determining regulations and findings regarding other measures of preventive occupational health care in accordance with section 1 (3), in particular regarding giving general occupational health care advice to workers,
 6. advising the Federal Ministry of Labour and Social Affairs in regard to all issues concerning preventive occupational health care and other issues concerning occupational safety and health from a medical perspective.

The work programme of the Occupational Health Committee shall be coordinated with the Federal Ministry of Labour and Social Affairs. The Committee shall cooperate closely with the other committees in the Federal Ministry of Labour and Social Affairs.

- (4) The Federal Ministry of Labour and Social Affairs may publish the regulations and findings as well as recommendations of the Occupational Health Committee in the Joint Ministerial Gazette.
- (5) The federal ministries and the highest *Land* authorities may send representatives to the meetings of the Committee. Upon request, they may be allowed to speak in those meetings.
- (6) The business of the Committee shall be managed by the Federal Institute for Occupational Safety and Health.

Section 10
Regulatory offences and criminal offences

(1) Whoever intentionally or negligently,

1. contrary to section 4 (1) does not occasion mandatory health care or does not do so in good time,
2. contrary to section 4 (2) permits the performance of an activity,
3. contrary to section 3 (4), first sentence, first half-sentence, does not, does not correctly or does not completely keep a file record on health care provision,
4. contrary to section 5 (1), first sentence, does not offer optional health care or does not do so in good time,

shall be deemed to have committed a regulatory offence within the meaning of section 25 (1) no. 1 of the Safety and Health at Work Act.

(2) Whoever endangers the life or health of a worker on account of an act described in subsection (1) shall be liable to punishment in accordance with section 26 (2) of the Safety and Health at Work Act.

Annex
Mandatory and optional occupational health care

Part 1
Activities involving hazardous substances

(1) Mandatory health care shall be provided in the case of

1. activities involving the following hazardous substances:
 - acrylonitrile,
 - alkyl mercury compounds,
 - alveolus dust,
 - aromatic nitro and amino compounds,
 - arsenic and arsenic compounds,
 - asbestos,
 - benzene,
 - beryllium,
 - cadmium and cadmium compounds,
 - carbon disulphide,
 - carbon monoxide,
 - chrome VI compounds,
 - dimethylformamide,
 - fluoride and inorganic fluoride compounds,
 - glycerin nitrate and glycol dinitrate (nitro glycerin and nitro glycol),
 - hardwood dust,
 - hydrogen sulphide,
 - inhalable dust,
 - mercury and inorganic mercury compounds,
 - methanol,
 - nickel and nickel compounds,
 - platinum compounds,
 - polycyclic aromatic hydrocarbons (pyrolyse products made of organic matter),
 - silicogenic dust,
 - styrene,
 - tetraethyl lead and tetramethyl lead,
 - toluene,
 - tetrachloroethene,
 - trichloroethene,
 - vinyl chloride,
 - white phosphorus (tetraphosphorus),

- xylene (all isomers),
- if
 - a) the occupational exposure limit value in respect of the hazardous substance in accordance with the Hazardous Substances Ordinance (*Gefahrstoffverordnung*, GefStoffV) is not complied with,
 - b) repeat exposure cannot be ruled out and the hazardous substance is a carcinogenic or mutagenic substance or a Category 1 or 2 preparation within the meaning of the Hazardous Substances Ordinance or the activities involving the hazardous substance are described as Category 1 or 2 carcinogenic activities or processes within the meaning of the Hazardous Substances Ordinance, or
 - c) the hazardous substance is absorbed through the skin and a health risk on account of skin contact with the hazardous substance cannot be ruled out;
- 2. other activities involving hazardous substances, namely
 - a) working in wet conditions for four hours or more every day on a regular basis,
 - b) welding and separating metals in conditions exceeding air concentrations of 3 milligrams per cubic metre of welding smoke,
 - c) activities involving exposure to cereal and fodder dusts exceeding air concentrations of 4 milligrams per cubic metre of inhalable dust,
 - d) activities involving exposure to isocyanates for which it cannot be ruled out that regular contact with the skin or an air concentration exceeding 0.05 milligrams per cubic metre is exceeded,
 - e) activities involving exposure to health risks on account of laboratory animal dust in animal rooms and facilities,
 - f) activities performed using natural rubber gloves with more than 30 micrograms of protein per gram of glove material,
 - g) activities posing a risk to the dermal layer of skin or inhalative exposure with a health risk caused by components of unhardened epoxide resins, in particular by spraying of epoxide resins,
 - h) activities involving exposure to lead and inorganic lead compounds exceeding an air concentration of 0.075 milligrams per cubic metre,
 - i) activities involving exposure to high temperature wool, insofar as fibre dust classed as Category 1 or 2 carcinogenic within the meaning of the Hazardous Substances Ordinance may be released,
 - j) activities involving exposure to flour dust exceeding a flour dust concentration of 4 milligrams per cubic metre of air.

(2) Optional health care shall be provided in the case of

- 1. activities involving those hazardous substances referred to in subsection (1) no. 1 if exposure cannot be ruled out and the employer is not obliged to occasion mandatory health care;
- 2. other activities involving hazardous substances, namely
 - a) pest control in accordance with the Hazardous Substances Ordinance,
 - b) gassing in accordance with the Hazardous Substances Ordinance,
 - c) activities involving the following substances or their mixtures: n-hexane, n-heptane, 2-butanon, 2-hexanon, methanol, ethanol, 2-methoxyethanol, benzene, toluene, xylene, styrene, dichloromethane, 1,1,1-trichlorethane, trichlorethene, tetrachlorethene,
 - d) activities involving a hazardous substance insofar as the hazardous substance is not referred to in subsection (1) no. 1, repeated exposure cannot be ruled out and
 - aa) the hazardous substance is a carcinogenic or mutagenic substance or a Category 1 or 2 preparation within the meaning of the Hazardous Substances Ordinance, or
 - bb) the activities involving the hazardous substance are described as carcinogenic activities or Category 1 or 2 processes in accordance with the Hazardous Substances Ordinance,
 - e) working in wet conditions for more than two hours per day on a regular basis,
 - f) welding and separating metals in conditions exceeding air concentrations of 3 milligrams per cubic metre of welding smoke,

- g) activities involving exposure to cereal and fodder dusts exceeding air concentrations of 1 milligram per cubic metre of inhalable dust,
- h) activities involving exposure to isocyanates during which contact with the skin cannot be ruled out or the air concentration does not exceed 0.05 milligrams per cubic metre,
- i) activities involving exposure to lead and inorganic lead compounds and an air concentration of 0.075 milligrams per cubic metre,
- j) activities involving exposure to flour dust and a flour dust concentration of 4 milligrams per cubic metre of air,
- k) activities involving exposure to other substances with a sensitising effect on the airways or skin for which no preventive occupational health care is provided for under subsection (1) no. 1 or letters (a) to (j).

3. (repealed)

(3) Occasions for follow-up health care:

1. Activities involving exposure to a hazardous substance, insofar as
 - a) the hazardous substance is a carcinogenic or mutagenic substance or a Category 1 or 2 preparation within the meaning of the Hazardous Substances Ordinance, or
 - b) the activities involving the hazardous substance are described as Category 1 or 2 carcinogenic activities or processes within the meaning of the Hazardous Substances Ordinance;
2. Activities exposing workers to lead or inorganic lead compounds;
3. Activities exposing workers to high temperature wool in accordance with subsection (1), no. 2, letter (i).

(4) Deviations

Health care provision in accordance with subsections (1) to (3) does not need to be occasioned or offered if and insofar as the rules determined on the basis of section 9 (3), first sentence, no. 1 and published in accordance with section 9 (4) determine otherwise.

Part 2

Activities involving biological agents, including genetic engineering work involving human pathogen organisms

(1) Mandatory health care shall be provided in the case of

1. tasks specifically involving contact with a biological agent classed as Risk Group 4, or with
 - Bacillus anthracis,
 - Bartonella bacilliformis,
 - Bartonella henselae,
 - Bartonella quintana,
 - Bordetella pertussis,
 - Borrelia burgdorferi,
 - Borrelia burgdorferi sensu lato,
 - Brucella melitensis,
 - Burkholderia pseudomallei (Pseudomonas psedomallei),
 - Chlamydophilia pneumoniae,
 - Chlamydophilia psittaci (avian strains),
 - Coxiella burnetii,
 - Francisella tularensis,
 - Helicobacter pylori,
 - hepatitis A virus (HAV),
 - hepatitis B virus (HBV),
 - hepatitis C virus (HCV),
 - influenza virus A or B,
 - Japan encephalitis virus,
 - Leptospira spp.,
 - measles virus,
 - mumps virus,
 - Mycobacterium bovis,

- Mycobacterium tuberculosis,
- Neisseria meningitidis,
- Poliomyelitis virus,
- rubella virus,
- Salmonella typhi,
- Schistosoma mansoni,
- Streptococcus pneumoniae,
- rabies virus,
- tick-borne encephalitis virus (TBEV),
- Treponema pallidum (syphilis),
- Tropheryma whipplei,
- Trypanosoma cruzi,
- yellow fever virus,
- Yersinia pestis,
- varicella zoster virus (VZV), or
- Vibrio cholerae;

2. tasks involving incidental contact with biological agents classed as Risk Group 4 where there is a possibility of coming into contact with infected or suspected samples or sick or suspected persons or animals, including their transportation, as well as

3. the following tasks involving incidental contact:

- a) In research facilities or laboratories: regular activities which involve the possibility of coming into contact with infected or suspected samples, with infected or suspected animals, or objects or materials containing or contaminated with pathogens in respect of a biological agent referred to in no. 1;
- b) In tuberculosis departments or other pulmonologic facilities: activities involving regular contact with sick or suspect persons in respect of Mycobacterium bovis or Mycobacterium tuberculosis;
- c) In facilities for the medical examination, treatment or care of persons:
 - aa) activities involving regular, direct contact with sick or suspect persons in respect of
 - Bordetella pertussis,
 - hepatitis A virus (HAV),
 - measles virus,
 - mumps virus, or
 - rubella virus,
 - bb) activities which can regularly involve extensive contact with body fluids, excretions or tissue, in particular activities with an increased risk of injury or of spraying or aerosol formation, in respect of the
 - hepatitis B virus (HBV), or
 - hepatitis C virus (HCV);
 the same applies to areas which serve to supply or maintain these facilities;
- d) In facilities conducting medical examinations, treating and caring for children, excluding facilities exclusively looking after children: activities involving regular, direct contact with sick or suspect persons in respect of the varicella zoster virus (VZV); letter (c) shall remain unaffected;
- e) In facilities exclusively looking after people: activities which can regularly involve extensive contact with body fluids, excretions or tissue, in particular activities with an increased risk of injury or of spraying or aerosol formation in respect of the
 - hepatitis A virus (HAV),
 - hepatitis B virus (HBV), or
 - hepatitis C virus (HCV);
- f) In facilities looking after pre-school children: activities with regular, direct contact with children in respect of
 - Bordetella pertussis,
 - measles virus,
 - mumps virus,
 - rubella virus, or
 - varicella zoster virus (VZV); letter (e) shall remain unaffected;

- g) In the emergency and rescue services: activities which can regularly involve extensive contact with body fluids, excretions or tissue, in particular activities with an increased risk of injury or of spraying or aerosol formation, in respect of the hepatitis B virus (HBV) or hepatitis C virus (HCV);
- h) In pathology: activities which can regularly involve extensive contact with body fluids, excretions or tissue, in particular activities with an increased risk of injury or of spraying or aerosol formation, in respect of the hepatitis B virus (HBV) or hepatitis C virus (HCV);
- i) In sewage treatment plants or in sewerage systems: activities involving regular contact with faeces-containing sewage or faeces-contaminated objects in respect of the hepatitis A virus (HAV);
- j) In facilities rearing and keeping birds or poultry slaughterhouses: regular activities involving the possibility of contact with infected or suspected samples, with infected or suspected animals, or objects or materials containing or contaminated with pathogens, if there is a transmission path, in respect of *Chlamydophila psittaci* (avian strains);
- k) In a district at risk of rabies: activities involving regular contact with wildlife in respect of the rabies virus;
- l) In or in the vicinity of bat shelters: activities involving close contact with bats in respect of the European Bat lyssavirus (EBLV 1 and 2);
- m) Outdoors, in forests, parks, gardens and zoos: regular activities in low vegetation or direct contact with wildlife
 - aa) in respect of *Borrelia burgdorferi*, or
 - bb) in areas in which the tick-borne encephalitis virus (TBEV) is endemic.

(2) Optional health care

1. Where the employer is not obliged to occasion mandatory health care in accordance with subsection (1), he must offer workers optional health care if they perform
 - a) tasks specifically involving contact with biological agents which are classed as Risk Group 3 under the Biological Agents Ordinance (*Biostoffverordnung*, BioStoffV) and tasks involving incidental contact which are classed as Protection Level 3 under the Biological Agents Ordinance or which involve a comparable risk,
 - b) tasks specifically involving contact with biological agents classed as Risk Group 2 under the Biological Agents Ordinance and tasks involving incidental contact which are classed as Protection Level 2 under the Biological Agents Ordinance or which involve a comparable risk, unless on account of the risk assessment and on account of the protective measures taken it can be assumed that there is no risk of infection;
 - c) activities involving exposure to sensitising or toxic biological agents in regard to which no preventive health care is provided for under subsection (1), letter (a) or (b);
2. Section 5 (2) shall apply *mutatis mutandis* if as a result of the exposure to biological agents
 - a) a serious infectious illness is to be expected and post-exposure prophylactic measures are possible, or
 - b) an infection has resulted;
3. When finishing an activity for which mandatory health care had to be occasioned in accordance with subsection (1), the employer must offer optional health care.

(3) Genetic engineering work involving human pathogen organisms

Subsections (1) and (2) regarding mandatory health care and optional health care shall apply *mutatis mutandis* to genetic engineering work involving human pathogen organisms.

Part 3

Activities involving physical agents

(1) Mandatory health care shall be provided in the case of

1. activities involving extreme heat stress which can present a particular risk;
2. activities involving extreme cold stress (-25°C and below);
3. activities involving exposure to noise if the upper action values of $L_{\text{ex},8\text{h}} = 85 \text{ dB(A)}$, or rather $L_{\text{pC,peak}} = 137 \text{ dB(C)}$ are reached or exceeded.
Where the action values referred to in the first sentence are applied, no account is taken of the dampening effect of a worker's personal ear protection;
4. activities involving exposure to vibrations if the exposure limit values of
 - a) $A(8) = 5 \text{ m/s}^2$ for activities with hand-arm vibrations, or
 - b) $A(8) = 1.15 \text{ m/s}^2$ in the X or Y direction or $A(8) = 0.8 \text{ m/s}^2$ in the Z direction for activities with whole-body vibrations are reached or exceeded;
5. activities under water in the performance of which the worker is supplied with respiratory gas by means of diving equipment (diving work);
6. activities involving exposure to incoherent artificial optical radiation if the occupational exposure limit values in accordance with section 6 of the Ordinance on Occupational Safety and Health Protection of Workers Exposed to Artificial Optical Radiation (*Arbeitsschutzverordnung zu künstlicher optischer Strahlung*, OStrV) of 19 July 2010 (Federal Law Gazette I p. 960), as amended, are exceeded.

(2) Optional health care shall be provided in the case of

1. activities involving exposure to noise if the lower action values of $L_{\text{ex},8\text{h}} = 80 \text{ dB(A)}$, or rather $L_{\text{pC,peak}} = 135 \text{ dB(C)}$ are exceeded.
Where the action values referred to in the first sentence are applied, no account is taken of the dampening effect of a worker's personal ear protection;
2. activities involving exposure to vibrations if the action values of
 - a) $A(8) = 2.5 \text{ m/s}^2$ for activities with hand-arm vibrations, or
 - b) $A(8) = 0.5 \text{ m/s}^2$ for activities with whole-body vibrations are exceeded;
3. activities involving exposure to incoherent artificial optical radiation if the occupational exposure limit values in accordance with section 6 of the Ordinance on Occupational Safety and Health Protection of Workers Exposed to Artificial Optical Radiation of 19 July 2010 (Federal Law Gazette I p. 960), as amended, may possibly be exceeded;
4. activities involving significantly increased physical stress which is linked to health risks to the musculoskeletal system on account of
 - a) the manual handling of loads when lifting, holding, carrying, pulling or pushing loads,
 - b) repetitive manual activities, or
 - c) work involving being forced to adopt a kneeling position, extended trunk bending or twisting or in work involving being forced to adopt comparable postures.

Part 4

Other activities

(1) Mandatory health care shall be provided in the case of

1. activities which necessitate the wearing of Group 2 or 3 breathing apparatus;
2. activities performed in the tropics and sub-tropics and during other stays abroad with special climatic stress and risks of infection. In derogation of section 3 (2), first sentence, in conjunction with section 7, doctors authorised to use the additional designation "Tropical Medicine" (*Tropenmedizin*) may also be commissioned.

(2) Optional health care shall be provided in the case of

1. activities involving work at a computer screen

Optional health care shall include the offer of a suitable examination of the eyes and visual faculty. If, on the basis of an optional health care appointment, an ophthalmological examination is deemed to be necessary, this shall be made possible. Section 5 (2) shall apply mutatis mutandis to visual strain. Workers shall be provided with special visual aids in the required extent for their work at a computer screen if the outcome of the preventive occupational health care shows that special visual aids are necessary and normal visual aids are unsuitable;

2. activities which necessitate the wearing of Group 1 breathing apparatus;

3. at the end of the activity for which mandatory health care had to be occasioned in accordance with subsection (1), no. 2, the employer shall offer optional health care.