

## **What does OHS Mean**

OHS does NOT mean TB test. This is a minor and not very relevant part of OHS.

OHS means that you are participating in an OHS program and have received your annual review. There are several ways to achieve OHS but they are all related to your Risk Assessment.

When you participate in the VA OHS program, then you will answer the risk assessment and then the VA OHS questionnaire and sign it. OHS then reviews it and clears you via notification to our office. Below is information that should help you complete the OHS questionnaire.

When you participate in another, non-VA, OHS program, then you will answer the risk assessment, choose not to enroll in VA, choose another program. At that point you will have to send our office verification that you are enrolled in that institution's program. So, if enrolled at Emory, you will log into the Emory site, update your records, and provide us with the date cleared at Emory along with the ID.

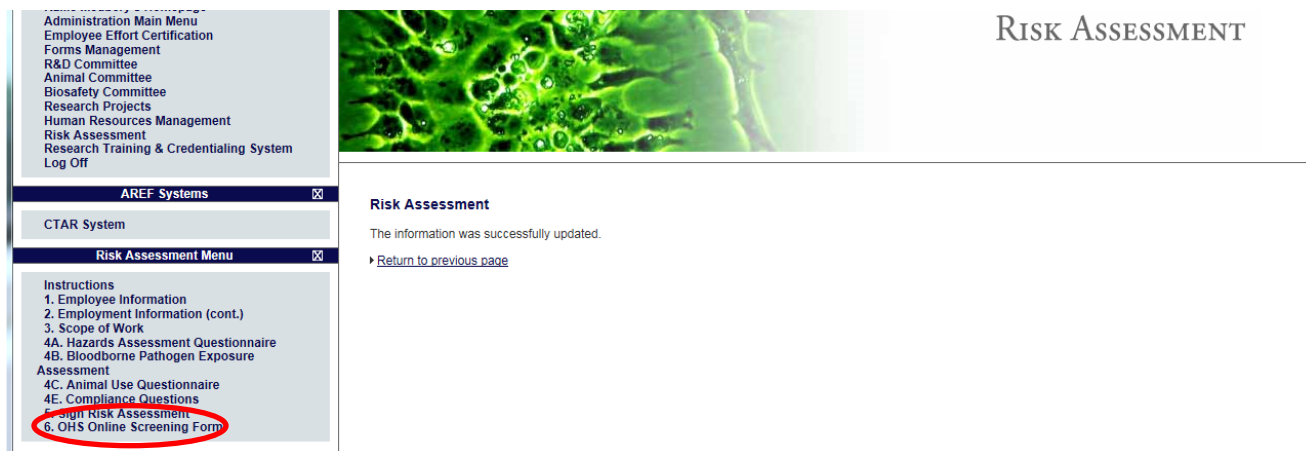
## **Notes**

- The website for the OHS Screening Form is not compatible with Google Chrome. Internet Explorer is the preferred Internet browser.
- It is helpful to have your Vaccination records on hand when filling out the form.
- You do not have to enter an answer for the Hepatitis A vaccination and may elect to “sign a declination” for all other vaccinations if you do not have your records on hand.
- Once the OHS nurses review your form they may send you notes that indicate you need to come in for a vaccination. The OHS office is located in room CLC-210.

## How to Create a New VA OHS Screening Form:

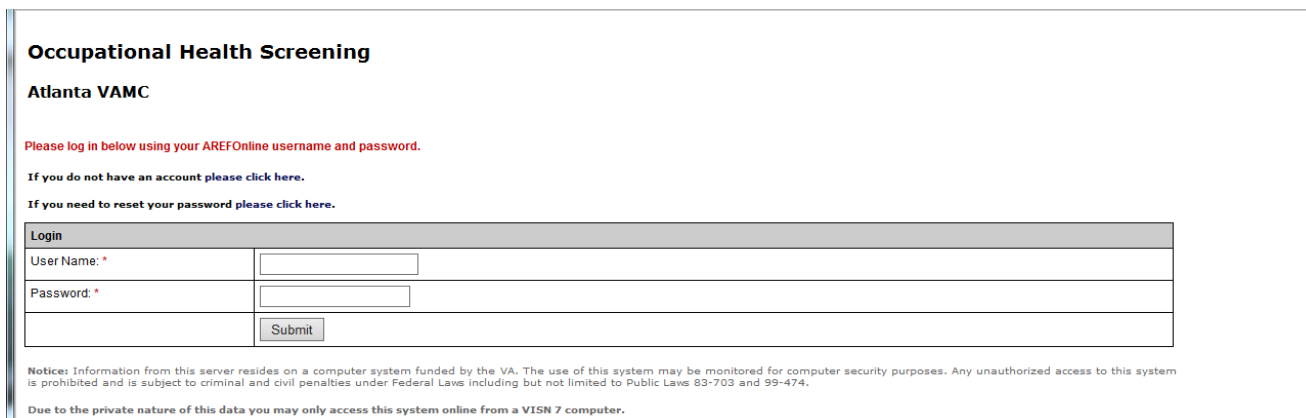
**Step 1:** From the VA network, visit [errrp | Login \(va.gov\)](#)

**Note:** You must be on a VA computer connected to the VA Network to continue.




The screenshot shows the 'Risk Assessment' menu on the left and the 'Risk Assessment' page on the right. The menu includes options like 'Administration Main Menu', 'Employee Effort Certification', 'Forms Management', 'R&D Committee', 'Animal Committee', 'Biosafety Committee', 'Research Projects', 'Human Resources Management', 'Risk Assessment', 'Research Training & Credentialing System', and 'Log Off'. The 'Risk Assessment Menu' is expanded, showing 'Instructions', '1. Employee Information', '2. Employment Information (cont.)', '3. Scope of Work', '4A. Hazards Assessment Questionnaire', '4B. Bloodborne Pathogen Exposure Assessment', '4C. Animal Use Questionnaire', '4E. Compliance Questions', '5. Sign Risk Assessment', and '6. OHS Online Screening Form' (highlighted with a red circle). The 'Risk Assessment' page displays a green microscopic image and the text 'Risk Assessment' and 'The information was successfully updated.' with a link to 'Return to previous page'.

**Step 2:** Log on using the same username and password you used for [www.atlaref.org](http://www.atlaref.org).



The screenshot shows the 'Occupational Health Screening' login page for 'Atlanta VAMC'. It includes a login form with fields for 'User Name: \*' and 'Password: \*', and a 'Submit' button. Below the form, there is a notice: 'Notice: Information from this server resides on a computer system funded by the VA. The use of this system may be monitored for computer security purposes. Any unauthorized access to this system is prohibited and is subject to criminal and civil penalties under Federal Laws including but not limited to Public Laws 83-703 and 99-474. Due to the private nature of this data you may only access this system online from a V15N 7 computer.'

**Step 3:** Select "Create New OHS Form", it is recommended that you have access to your immunization records before proceeding with this step.



The screenshot shows the 'Occupational Health Screening' page for 'Atlanta VAMC'. It includes a 'Current Options' section with two links: 'Update Employee Details' and 'Create New OHS Form' (highlighted with a red circle). The page also displays a 'Notice' about immunization records and a 'Security Reminder'.

**Step 4:** Fill out all 7 sections and press the “Complete & Sign” button at the end.

**Occupational Health Screening**

Atlanta VAMC

MAIN MENU | HELP | PASSWORD | LOGOUT  
Logged in: mary.medbery@va.gov

Please complete the information below.

\* Required

**Section 1: Occupational Health Screening**

CONFIDENTIAL INFORMATION TO BE RETAINED BY OCCUPATIONAL HEALTH SERVICES

This is a voluntary inquiry into the health status of the employee. This portion of the risk is to be completed by the employee. All information contained hereafter will be kept in compliance with the Privacy Rule of the Health Insurance Portability and Accountability Act (HIPAA).

1.1

Are you a new employee? \*

☐ Yes

☐ No

**Section 7: Personal Protective Equipment (PPE)**

	YES	NO
7.1 Will/Does the employee use the following: *		
7.2 Face Shield *	<input type="radio"/>	<input type="radio"/>
7.3 Hearing Protection *	<input type="radio"/>	<input type="radio"/>
7.4 Fume Hood *	<input type="radio"/>	<input type="radio"/>
7.5 Biological Safety Cabinet *	<input type="radio"/>	<input type="radio"/>
7.6 Respirator *	<input type="radio"/>	<input type="radio"/>
7.7 Has the employee been instructed on proper usage of the PPE used in the laboratory? *	<input type="radio"/>	<input type="radio"/>
7.8 Has the employee been instructed on proper storage of the PPE? *	<input type="radio"/>	<input type="radio"/>
7.9 Does your work involve loud noise exposure? *	<input type="radio"/>	<input type="radio"/>

Save for later

Complete & Sign

**Step 5:** Sign the Form by typing your name and the date and pressing the “Sign” button.

**Occupational Health Screening**

Atlanta VAMC

MAIN MENU | HELP | PASSWORD | LOGOUT  
Logged in: mary.medbery@va.gov

Please complete the information below.

**OHS Signature**

**Electronic Signature**

A typed version of a signee's name is accepted as an original and legal signature pursuant unto the Georgia Electronic Records and Signature Act (Georgia Official Code § 10-12-1 et seq.) and the United States Electronic Signatures in Global and International Commerce Act (dated October 1, 2000).

Signature

Date

Sign

# How to Update Your VA OHS Screening Form:

**Step 1:** From the VA network, visit [errrp](#) | [Login \(va.gov\)](#)

**Note:** You must be logged on to a VA computer connected to the VA Network to continue.

**Step 2:** Log on using the same username and password you used for [www.atlaref.org](#).

**Occupational Health Screening**  
**Atlanta VAMC**

Please log in below using your AREFOnline username and password.

If you do not have an account please click here.

If you need to reset your password please click here.

Login

User Name: \*

Password: \*

**Step 3:** Choose “Copy last submission to a New OHS Form”. If you do not see this option, go back to page 3 of this document.

**Occupational Health Screening**  
**Atlanta VAMC**

MAIN MENU | HELP | PASSWORD | LOGOUT  
Logged in: Michael.Hart3@va.gov

**Instructions**

**Getting started:**  
It is highly recommended that you read the help file first.

**Security Reminder:**  
Do not leave your computer unattended with this system open. If at any time you must leave your computer please LOG OUT AND CLOSE YOUR BROWSER.

**Notice:**  
It is recommended that you have access to your immunization records before beginning a "New OHS Form"



**Current Options**

[Update Employee Details](#)

[Copy last submission to a New OHS Form](#)

[Create New OHS Form](#)

**Previously Completed (Opens new window)**

Employee Signed	OHS Signed	Actions
12/16/2010	11/08/2011	 

**Step 4:** Check all information in application for current accuracy and update any information or dates that have changed. Press the “Complete & Sign” button at the end when it is up to date.

Section 7: Personal Protective Equipment (PPE)																				
7.1	Will/Does the employee use the following: *	<table border="1"><thead><tr><th>YES</th><th>NO</th></tr></thead><tbody><tr><td><input type="radio"/></td><td><input type="radio"/></td></tr><tr><td><input type="radio"/></td><td><input type="radio"/></td></tr><tr><td><input type="radio"/></td><td><input type="radio"/></td></tr><tr><td><input type="radio"/></td><td><input type="radio"/></td></tr><tr><td><input type="radio"/></td><td><input type="radio"/></td></tr><tr><td><input type="radio"/></td><td><input type="radio"/></td></tr><tr><td><input type="radio"/></td><td><input type="radio"/></td></tr><tr><td><input type="radio"/></td><td><input type="radio"/></td></tr></tbody></table>	YES	NO	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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**Step 5:** Sign the Form by typing your name and the date and pressing the “Sign” button.

**Occupational Health Screening**  
**Atlanta VAMC**

MAIN MENU | HELP | PASSWORD | LOGOUT  
Logged in: mary.medbery@va.gov

Please complete the information below.

OHS Signature	
<b>Electronic Signature</b> <small>A typed version of a signee's name is accepted as an original and legal signature pursuant unto the Georgia Electronic Records and Signature Act (Georgia Official Code § 10-12-1 et seq.) and the United States Electronic Signatures in Global and International Commerce Act (dated October 1, 2000).</small>	
Signature	<input type="text"/>
Date	<input type="text"/> <input type="button" value="mm"/> <input type="button" value="dd"/>