Whereas, Exposure to silica dust is a health hazard for workers who manufacture, finish, and install natural and engineered stone countertop products, causing silicosis, which is a progressive, debilitating, incurable, and sometimes fatal occupational disease\(^1\); and

Whereas, Close to 100,000 workers are employed in the manufacture, finishing, and installation of natural and engineered stone countertop products in the United States\(^2\); and

Whereas, Clusters of silicosis cases have been reported nationally and internationally among stone countertop fabrication workers, including cases in California\(^3\) and Texas; and

Whereas, Silicosis is a disease related to long-term exposure, usually appearing after many years of exposure, unlike workplace injuries; and

Whereas, Implementing effective exposure controls is integral to the business of operating an engineered stone fabrication shop\(^5\); and

Whereas, The State of California has developed silica safety resources for stone fabricators and physicians that can guide other states in developing local resources\(^6\); therefore be it

RESOLVED, That our American Medical Association should encourage physicians, including occupational health physicians, pulmonologists, radiologists, pathologists, and other health-care professionals, to report all diagnosed or suspected cases of silicosis in accordance with National Institute for Occupational Safety and Health (NIOSH) guidance (New HOD Policy); and be it further

RESOLVED, That our AMA should advocate for the establishment of preventive measures to reduce exposure of workers to silica levels above the OSHA permissible exposure level (PEL) for respirable crystalline silica, which is a time-weighted average (TWA) of 50 micrograms per cubic meter (µg/m\(^3\)) of air (Directive to Take Action); and be it further

RESOLVED, That our AMA should advocate for the establishment of a registry of cases of silicosis to be maintained for workers diagnosed with silicosis resulting from engineered stonework or from other causes, either by state Departments of Public Health or their Division of Occupational Safety and Health (Directive to Take Action); and be it further

RESOLVED, That our AMA should advocate for the establishment of state funds to compensate workers who have been diagnosed with silicosis resulting from their work with silica, to recognize the progression and the need for increasing levels of compensation over time (Directive to Take Action); and be it further
RESOLVED, That our AMA recommends that State Medical Associations should take action with respect to the prevention of silicosis and to the recognition and compensation of affected workers in their states. (New HOD Policy)

Fiscal Note: Moderate - between $5,000 - $10,000

Received: 9/18/2023

REFERENCES: