



**FOOD SAFETY AND QUALITY DIVISION  
MINISTRY OF HEALTH MALAYSIA**

**GUIDELINE FOR  
MEDICAL EXAMINATION  
OF  
FOOD HANDLERS ALONG THE  
FOOD SUPPLY CHAIN  
IN MALAYSIA**

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<b>NO.</b>	<b>DATE OF AMENDMENT</b>	<b>REVISION NO.</b>	<b>AMENDMENT REFERENCE</b>
1.	15 November 2013	02	<i>The title of “Guideline for Medical Examination of Food Handlers in the Seafood Industry in Malaysia” is changed to “Guideline for Medical Examination of Food Handlers Along the Food Supply Chain in Malaysia”</i>

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## **1.0 INTRODUCTION**

Employers shall ensure that all employees who directly or indirectly handle food, are healthy and do not pose a risk to food safety and public health. The need to do Medical Examination of Food Handlers in food industries for export purposes depend on the requirement of an importing countries. Medical Examination of food handlers shall only be done by a registered medical practitioner.

The main aim of this guideline is to prevent the introduction of pathogens into the food supply chain by food handlers in the food industry.

## **2.0 OBJECTIVE**

The objectives of medical examination among food handlers in the food industry are:

- a. To ensure food handler is not suffering from foodborne illness or is a carrier of foodborne diseases.
- b. To ensure food handlers mentioned in (a) shall not be allowed to handle food or place in areas of processing where it is likely to contaminate the food.
- c. To ensure that products from the food supply chain in this country are safe and do not pose any risk of foodborne illness to consumers.

## **3.0 SCOPE**

An importing countries may require food handlers to undergo medical examination along the food supply chain facilities.

Annual medical examination of food handlers shall be conducted at a government or private clinic. Medical examination done in government health facilities subject to fee schedule.

## **4.0 PROCEDURE**

The flow of the medical examination process is shown in Appendix I.

- 4.1 Food handlers shall complete and certify the declaration form before being examined by a medical practitioner. The declaration form will disclose recent illness which poses a risk to food safety such as typhoid, cholera, hepatitis A, dysentery or other gastrointestinal infections, skin infection, etc.
- 4.2 Medical practitioner shall validate the completed declaration questionnaire (Appendix II).

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- 4.3 The following history, sign and symptoms would require more thorough examination i.e.:
- Fever
  - Jaundice
  - Skin infection on hands, arms, face
  - Boils, styes or abscess on finger
  - Discharge from eye, ear or gums/mouth
  - Diarrhoea /and Vomiting
  - Known history of typhoid carriers
- 4.4 Food handler shall present his/her certificate of anti typhoid vaccination to medical practitioner. The certificate shall be valid (3 years from last vaccination date) and have been certified by a registered medical practitioner. Medical practitioner shall vaccinate the food handlers with typhoid vaccine, if typhoid vaccination certificate is no longer valid or food handlers do not have any vaccination.
- 4.5 If clinically indicated, medical practitioner may request further laboratory tests to be conducted. If foodborne diseases are suspected, the following laboratory tests may be considered:

	Finding	Test	Differential Diagnosis
a.	Diarrhoea	Stool/Rectal swab culture and sensitivity Typhidot Viral study	Cholera Typhoid
b.	Dysentery	Viral study, stool culture and sensitivity	Shigellosis EHEC infection
c.	Fever with GIT symptom	Stool culture and sensitivity Urine culture and sensitivity Blood culture and sensitivity Typhidot	Typhoid
d.	Pyrexia of Unknown Origin (POU)	Typhidot Within 1 week of onset fever: Blood culture and sensitivity Within 1 week after onset of fever Stool culture and sensitivity Urine culture and sensitivity	Typhoid
e.	Fever with jaundice	Anti-HAV IgM	Hepatitis A
f.	History of typhoid fever	Stool culture and sensitivity for <i>S. typhi</i>	Typhoid carrier

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- 4.6 Food handler can be certified as fit if all findings are normal or there is no risk to food safety (refer to paragraph 5.0 and 6.0)
- 4.7 A certified food handler shall undergo re-examination if these conditions arises:
- a. Jaundice
  - b. Diarrhoea
  - c. Vomiting
  - d. Fever
  - e. Sore throat with fever
  - f. Visibly infected skin lesions (boils, cut, etc)
  - g. Discharges from the ear, eye or nose.
- 4.8 Any illness among the food handlers shall be reported to the management. The management shall ensure that those who suffer from any condition mentioned in 4.7 are excluded from handling food and re-examined by a registered medical practitioner.
- 4.9 The completed and certified medical examination form shall be kept by the food handler and a copy shall be retained by the management. Should the food handler resign or change employer, the validity of the medical examination will not be affected until it expires. Medical examination is valid for a year and typhoid vaccination for three years.
- 4.10 Medical practitioners shall record the medical examination in the patient note. Registration number should be recorded in the medical examination form as it will be used as a reference.

## **5.0 CONDITIONS WHICH POSE A RISK TO FOOD SAFETY**

### **5.1 Gastrointestinal Infection**

Typhoid cases/carriers should not resume their duties until they have fully recovered. They should have had three negative stool cultures at least one month apart.

Food handlers suffering from or carrier a of typhoid or paratyphoid illness shall be excluded from handling food.

Food handlers diagnosed with hepatitis A shall remain off work until fully recovered and will not pose any risk to others.

Food handlers with diarrhea and or vomiting with or without fever shall consult medical practitioner for treatment and shall not be allowed to handle food. If there is only one bout of diarrhoea and vomiting in a 24-hour period, and no fever, the person may resume food handling duties but they should always maintain good hygiene practices, particularly hand washing prior to handling

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food or after using toilet.

If symptoms persist, food handlers shall consult medical practitioner and can only return to work once the following conditions are met:

- a. No vomiting for last 48 hours after cessation of treatment
- b. The bowel habit has returned to normal for last 48 hours either spontaneously or following cessation of treatment with anti-diarrheal drugs.

## 5.2 Other Acute Infections

Food handlers with lesions on exposed skin (hands, face, neck or scalp) that are actively weeping or discharging must be excluded from work until the lesions have healed.

An infection of the finger nail-bed (whitlow) or a boil on the face or other exposed skin, even if covered with a suitable waterproof dressing, may be a risk to food safety.

In contrast, infective lesions on non-exposed skin, e.g. the back or legs, are not considered a risk.

Clean wounds must be totally covered with a distinctively coloured waterproof dressing but there is no need to discontinue food handling.

Any food handler whose eyes, ears, mouth or gums are weeping or discharging must be excluded from food handling until symptoms disappear.

## 6.0 CONDITIONS WHICH DO NOT POSE A RISK TO FOOD SAFETY

- a. Non-infected gastrointestinal disorders e.g. Gastritis, Crohn's disease
- b. Chest and other respiratory diseases e.g. URTI
- c. Blood borne infections e.g. hepatitis B, hepatitis C

Tuberculosis is not spread through food handling. However, the disease may affect an individual's general health so as to make them unfit for work or they may pose a risk of infection to others in the workplace.

Infective lesions on non-exposed skin, e.g. the back or legs, are not a bar to food handling duties.

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## **7.0 GENERAL ADVISE TO FOOD HANDLERS AND THE MANAGEMENT**

General advise to a food handlers include:

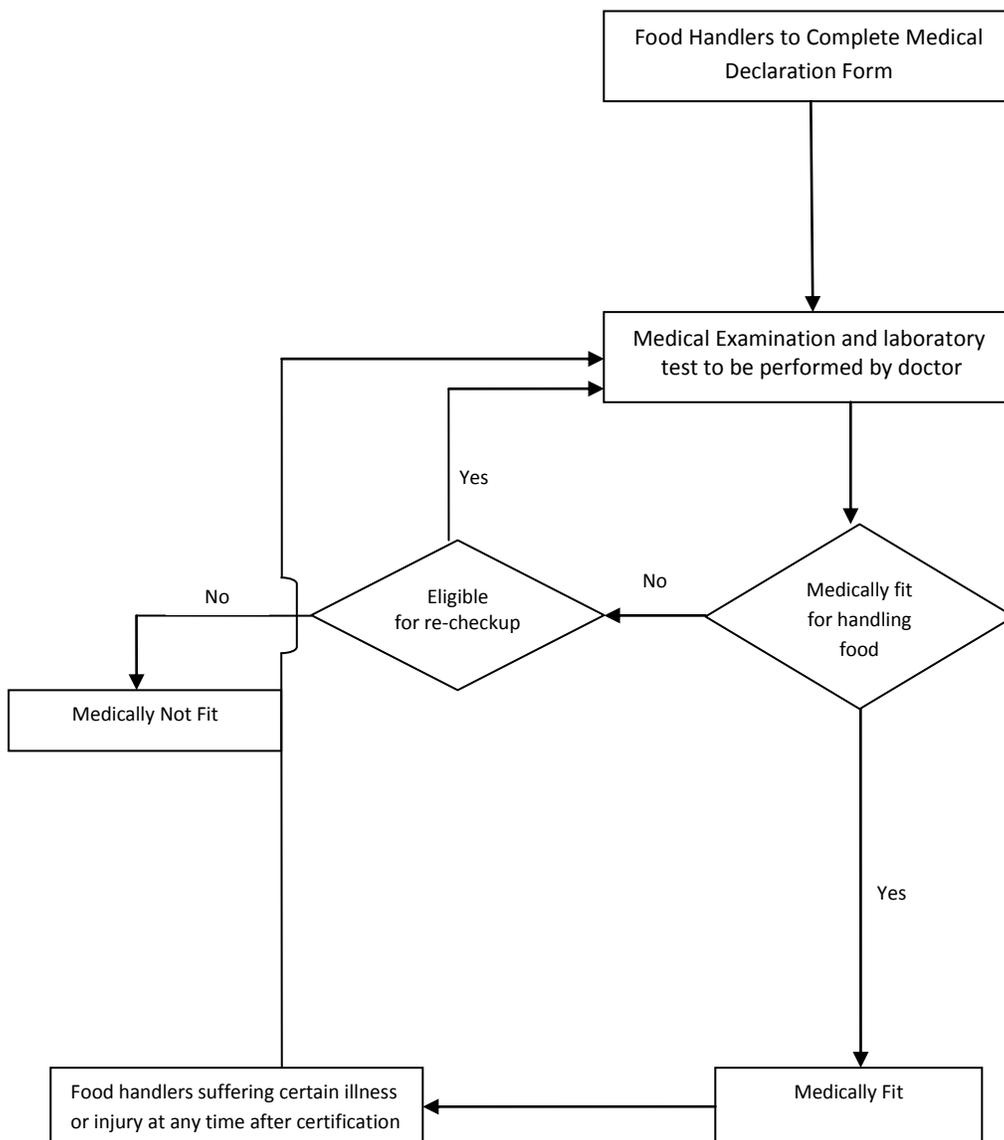
- a. Always practice proper hand washing:
  - i. Before and after handling food;
  - ii. After using the toilet and;
  - iii. After touching any part of the body
- b. Food Handlers must report any illness to the management of food premise
- c. Do not work if suffering from diarrhoea and/or vomiting.
- d. Do not handle food if have scaly, weeping or infected skin which cannot be totally covered during food handling.
- e. Ensure cuts and abrasions on exposed areas are totally covered with a distinctively coloured waterproof dressing.
- f. Do not spit in food handling areas.
- g. Do not smoke in food handling areas.
- h. Do not eat or chew gum in food handling areas.
- i. Wear clean protective clothing, including appropriate hair covering.
- j. Ensure work surfaces and utensils are clean.

Food handlers who just recovered from any gastrointestinal infection should be reminded of the importance of good hygiene practices, particularly hand washing before being allowed to resume food handling duties.

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**Appendix 1**

**Medical Examination Process for Food Handlers Along The Food Supply Chain**



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**Appendix II**

**MEDICAL EXAMINATION FOR FOOD HANDLERS ALONG THE FOOD SUPPLY CHAIN**

Name:			
Nationality:		NRIC/Passport no:	
Address:	Home	Work Place	
Contact no:			
<b>A. Declaration Form (to be completed by food handler)</b>			Yes No
1	Are you now, or have you over the last seven days, suffered from diarrhoea/vomiting.	<input type="checkbox"/>	<input type="checkbox"/>
2	Have you suffered from fever since more than one week ago?	<input type="checkbox"/>	<input type="checkbox"/>
3	At present, are you suffering from:		
	i. Skin trouble affecting hands, arms or face	<input type="checkbox"/>	<input type="checkbox"/>
	ii. Boils, styes or sepsis on your fingers or hands	<input type="checkbox"/>	<input type="checkbox"/>
	iii. Discharge from eye, ear or gums/mouth	<input type="checkbox"/>	<input type="checkbox"/>
4	Do you suffer from:		
	i. Recurring skin or ear infection	<input type="checkbox"/>	<input type="checkbox"/>
	ii. A recurring bowel disorder	<input type="checkbox"/>	<input type="checkbox"/>
5	In the last 5 days, have you been in contact with anyone who may have been suffering from cholera?	<input type="checkbox"/>	<input type="checkbox"/>
6	In the last 7 days, have you been in contact with anyone with diarrhoea or vomiting?	<input type="checkbox"/>	<input type="checkbox"/>
7	In the last 21 days have you been in contact with anyone who may have been suffering from typhoid or paratyphoid or jaundice person?	<input type="checkbox"/>	<input type="checkbox"/>
8	Have you ever had, or are you now known to be a carrier of typhoid or paratyphoid?	<input type="checkbox"/>	<input type="checkbox"/>
9	Have you ever had, or are you now known to have typhoid fever?	<input type="checkbox"/>	<input type="checkbox"/>

I declare that all the above statements are true and complete to the best of my knowledge.

Signature: ..... Date: .....

Witnessed by: ..... NRIC/ Passport No.: .....

Signature: ..... Date: .....

**B. Physical Examination (To be completed by doctor)**

Yes No

- 1 Fever
- 2 Jaundice
- 3 Skin infection on hands, arms, face
- 4 Boils, styes or sepsis on finger
- 5 Discharge from eye, ear or gums/mouth
- 6 Typhoid vaccination status:


Place/clinic given: \_\_\_\_\_

Vaccine name: \_\_\_\_\_ Dose: \_\_\_\_\_

Batch no: \_\_\_\_\_ Date completed: \_\_\_\_\_

**C. Laboratory Test**

1. Stool culture (if required)

Result

Positive Negative

- a. Typhoid
- b. Cholera


2. Other tests (if required)



**Case Summary**

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I hereby confirm that Mr/Ms/Mrs ..... NRIC /  
 Passport no. .... registration/referral no..... had undergone  
 medical examination and found to be:

i. Healthy and fit to work as food handlers  
 ii. Not fit to work as food handler  
 iii. Can return to work on .....

Signature : \_\_\_\_\_  
 Name : \_\_\_\_\_  
 Registration number : \_\_\_\_\_  
 Place of practice : \_\_\_\_\_  
 Date : \_\_\_\_\_

Official stamp

**Note:**  
*Medical examination should be conducted annually by a registered medical practitioner. However, at any time a certified food handler should undergo re-examination if these conditions arise:*

- a. Jaundice
- b. Diarrhoea
- c. Vomiting
- d. Fever
- e. Sore throat with fever
- f. Visibly infected skin lesions (boils, cut, etc)
- g. Discharges from the ear, eye or nose.

*The management should ensure that those who suffer from any of the above conditions are excluded from handling food and be re-examined by a registered medical practitioner.*

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