Occupational diseases result from hazardous exposures at the workplace, and in theory are preventable. Some present acutely, while others have a long latent period thereby making the diagnosis of such chronic conditions challenging. In addition, there is lack of consensus and inconsistency in how an occupational disease is identified. The first-line health care professional to consider a possible occupational disease is often a nurse or primary care physician. The extent of training in occupational medicine in these groups of practitioners is often limited to a few hours in their undergraduate curriculum. Medical specialists trained and board-certified in occupational medicine are short in supply. To aid in the recognition of occupational disease, a European union project was initiated to produce a consensus document focusing on occupational agents, relevant exposures, clinical features, and diagnostic pointers for a list of recognized occupational diseases. This list is similar to that produced by the International Labor Office (Geneva). The process and experience in finalizing these diagnostic criteria will be discussed. The end product is an electronic document providing guidance on identifying occupational disorders. The challenges and limitations involved in notification of such diseases following recognition will also be presented. The aim is to enable diagnosis to lead to notification such that effective preventive measures can be implemented.