As development of economic, social, political, cultural and techno-scientific evolved amongst the countries and nations, awareness of the health and wellbeing of its populations has also improved, and therefore the implementation of Occupational Medicine was intertwined with such evolution.

Due to a lack of investment, in the early twentieth century Portugal had yet to become an industrialized country. Its development had begun in the second half of the nineteen century through the establishment of textile industries, tobacco and light metallurgy. Investments in railways as well as ports allowed also an improvement in communications.

By the late decade of the century due to social and political events, the first laws regarding conditions at work are published (minimum age, working time, restricted activities), but are mostly disregarded.

After the fall of the monarchy in 1910, the new republican regime enacted laws that defined the criteria for repairing work-related diseases and accidents.

Until the Second World War industrialization lagged, although some large industrial companies already existed. At the time, there was a rudimentary state system in charge of providing health care, and so, in order to provide an improved assistance, these enterprises created their own systems that, in some cases, also provided assistance for work related accidents by building their own hospitals.

These primitive health systems would, in some cases, later extend these benefits also to the families of their workers, and had the purpose of providing a rapid recovery and avoid a prolonged absence from work.

As awareness from doctors involved in these processes led to the recognition of the impact of the work environment and its methods upon the health of the workers, they began to implement preventive measures and that led to the development of Occupational Medicine.

As the country was ruled by a dictatorship, based upon the concept of Corporations, the effective recognition of Occupational Medicine would only surge after the Second World War and in its aftermath with the Universal Declaration of Human Rights.

Through the participation in the constitution of several international organizations and by the reinforced role of others, namely the International Labour Organization (which has its roots in the beginning of the century and effectively after the First World War), the government at the time decided to start implementing regulations in this field.

Of no less importance is the fact that during the Second World War, Portugal remained neutral and had a lucrative trade, which in turn allowed great investments in its development (mining, shipbuilding, steel mills, cement and chemicals) and later also benefited from its participation in EFTA. In 1950, a joint Commission of the International Labour Organization and of the World Health Organization establishes the definition of Occupational Health. At that time, it was recognized that several countries already had Occupational Health Services, as well as medical training and post-graduation in this field, but the effective implementation of the Conventions and Recommendations for the industry already published, and based upon such agreements, were on a standstill.

It is only in April of 1962 that a decree, based upon Recommendation 112 of the ILO, adopted in June 1959, establishes the obligation of Occupational Medical Services in the enterprises with the risk of silicosis. A year later, a post-graduation medical course in Occupational Medicine begins at the Instituto Superior de Higiene (nowadays Instituto Nacional de Saúde -National Institute of Health - INSA) Dr. Ricardo Jorge.

By January of 1967, further decrees are published that enlarge the scope of the Occupational Medical Services, which are to cover industries that presents risks of occupational and work-related diseases, but its effectiveness is still limited to those that employed over 200 workers. However, its basic concepts remain at the core of the present day regulations.

After the end of dictatorship, in 1974, the path for adhesion to the EEC was opened and, following it in 1986, the already published Directives are adopted, including the ones that regulate this field.

The extension to all fields of activity, apart from the Armed Forces, Polices and Civil Protection Services, is established in 1991 through the adoption of Directive 89/391/EEC. Henceforth Directives have been adopted with the corresponding changes in Portuguese Law, albeit the Public Civil Services are still considerably lagging behind the private sector.

An updated version has been briefly included in the Labour Code of 2003 and a new Law was later enacted, in 2009, which includes the adoption of several Directives.

In this Law, it is specified that the medical doctor must have a post-graduation in Occupational Medicine as well as to be registered in the respective College of the Portuguese Medical Association (Ordem dos Médicos). The College, which was established in 1978, has currently around 1000 members, out of over 50000 medical doctors registered in the country. Also to be noted that some of these medical doctors may also be registered in another specialty.

It is also recognized as legal practitioners in this field those medical doctors that fulfil some criteria specified in the law. These are related either to previous exercise in this field, and in these case they are about to cease its activities due to ageing, or its practice is limited to the period of the post-graduation process, when they fail to obtain the title of specialist.

The current Law also establishes the need for a nurse, with an adequate specialization, for enterprises with over 250 workers, as well as the requirements for activities of the safety technicians.

As far as training is concerned, it is to be noticed that after the creation of the National Health Service, in 1979, the medical post-graduation in the different specialties have generally been provided through internships of 4 or 5 years. After the delivery to the proper authorities, in early 2008, of a proposal for an internship in Occupational Health, intended to replace a transitional plan, which was the process adopted in 2002, in 2012 a new procedure was enacted by the government, Portaria nº 307/2012, which established the proposed program of training.

The internship requires practical and theoretical modules, distributed through 4 years, in a major Hospital with an OHS, as well as specialized organisms that deals with Occupational Health, in particular Labour Inspectorates (ACT) and the one in charge for the recognition of OD (DPRP-ISS). A final exam concludes the evaluation process.

As of April 2017, the first trainees have concluded their post-graduation training and became specialists according to the new internship program.