Medical Evaluation Program

PURPOSE:

To detail the procedures, controls and documentation necessary for administration of the Department’s Medical Evaluation Program. To insure compliance with all applicable State of Michigan MiOSHA, OSHA, and the Center For Disease Control rules and Regulations.

MEDICAL EVALUATION OF PERSONNEL:

Firefighting and other emergency response work have long been recognized as one of the most hazardous occupations in North America in terms of occupational death and injury statistics. In addition to direct line of duty deaths and injuries, there is growing concern about the number of firefighters who suffer debilitating injuries or develop occupational diseases and conditions that often have debilitating or fatal consequences.

Because of these risks, various agencies such as OSHA, MiOSHA, ANSI, EPA and NFPA have developed regulations, which help to reduce the risk to emergency responders. The Medical Evaluation program described within this procedure is designed to comply with requirements for medical evaluations contained within the following regulations:

- OSHA 1910.120, Hazardous Waste Operations and Emergency Response
- OSHA 1910.134, Respiratory Protection
- Center for Disease Control Federal Register 52010-52854, Tuberculosis Prevention Guidelines
- MiOSHA 1910.134, Practices for Respiratory Protection for the Fire Service
- MiOSHA, Respirator Use - Physical Qualifications for Personnel
- MiOSHA Directive No. 96-9, Enforcement Policy and Procedure for Occupational Exposure to Tuberculosis.

PROGRAM DESIGN:

Baseline and periodic medical evaluations are specifically designed to evaluate the member’s ability to perform the Essential Firefighting, Emergency Medical Service and Other Emergency Response Job Functions, as identified in the applicable Job Descriptions. Recommendations for specific medical assessment tools and diagnostic tests according to patient age, sex and risk status are based upon American Medical Association guidelines and NFPA 1582, Standard for Medical Requirements for Firefighters with exceptions as noted in this guideline.
REQUIREMENT:

All members will be required to fully participate in the Department’s Medical Evaluation Program as described in this procedure. The Department will require all members to be declared medically eligible to perform the essential job functions. Any member not complying with program requirements will be placed on Medical Leave until they are in full compliance with this program.

PROGRAM COMPONENTS:

POST OFFER MEDICAL EVALUATION

As part of the Department’s established hiring practice, a POST-OFFER Medical Evaluation is required of any candidate who has been made a conditional offer of employment. This medical evaluation also serves to establish a baseline of medical data. The offer of employment is extended once the Medical Officer certifies the candidate as able to perform the essential job functions.

INITIAL MEDICAL SCREENING

The Department will administer an Initial Medical Screening for established Firefighters for whom a Baseline has not been established or is considered to be outdated. This Initial Medical Screening meets the minimum requirements of the Michigan Department of Labor (MDOL) for an annual medical evaluation of firefighters who are required to wear Self Contained Breathing Apparatus (SCBA). Based on this initial screening, the Medical Officer will review the results and prioritize individuals for follow-up medical evaluations based on risk factors identified. Eventually, all established firefighters will have a medical evaluation in order to establish an acceptable baseline.

INTERIM OCCUPATIONAL & MEDICAL HISTORY QUESTIONNAIRE

Once a baseline has been established, the firefighter will fill out an Interim Occupational and Medical History Questionnaire on the anniversary (annual) of the medical evaluation. This process requires that each member record height and weight, resting pulse and blood pressure.

The Medical Officer will review the Interim Questionnaire and determine if the annual medical evaluation shall include a medical examination.

MEDICAL EXAMINATION

The annual medical evaluation shall include a medical examination according to the following schedule:
Ages 29 and under - Every 3 years

Ages 30 to 44 - Every 2 years

Ages 45 and above - Every year

This schedule may be accelerated for specific individuals at the discretion of the Medical Officer based on any risk factors identified during previous medical evaluations or exams or based on information obtained in the interim questionnaire.

The Baseline and Periodic Medical Examination will include the following components:

- **Personal Medical History including occupational history and history of exposure**
- **Health Risk Questionnaire and Analysis**
  - Physical Examination by a Board Certified Physician
- **Laboratory:** Complete Blood Count, Chem Screen Plus (Chem Screen (23) and Lipid Profile), Laboratory Urinalysis, Blood Collection
- **Vision Screen**
- **Audiometry**
- **Pulmonary Function Testing (Spirometry)**
- **Chest X-Ray (baseline only)**
- **Electrocardiogram, 12 Lead (per physician recommendation, required for individuals age 40 and over.)**
- **Cardiac Stress Treadmill (per physician recommendation, required for individuals age 40 and over.)**

**TB MANTOUX SKIN TESTING** *(Also see Policy and Procedure for Occupational Exposure to Tuberculosis.)*

To comply with Federal regulations, all members will have an initial Mantoux skin test to test for exposure to Tuberculosis (TB). This test requires the individual member to report any positive skin test results back to the medical provider for further evaluation. The member may be referred to the County Health Dept. for further tests and possible treatment. Each member will receive an annual Mantoux skin test to check for TB. These tests will be administered on site at the Fire Department whenever possible. If an individual has experienced a previous reaction to the Mantoux test, the Medical Officer shall determine if a Medical Examination follow up is required.
CLEARANCE/CERTIFICATION FOR DUTY

Based on the Interim Questionnaire, or a complete Medical evaluation, the Medical Officer will provide written documentation that indicates that the individual member is/or is not medically cleared to perform the essential job functions with/without physical restrictions. The written notification will be forwarded directly to the Assistant Chief who serves as administrator for this program.

This clearance for duty will be kept in the individual’s personnel file. In the event that the Medical Officer does not certify a member for duty, a phone call will be immediately placed to the Chief.

MEDICAL CONDITIONS AFFECTING ABILITY TO PERFORM

Category A and Category B medical conditions shall help the examiner understand the type of condition that could result in rejection or acceptance. The medical conditions listed are organized by organ system. In NFPA 1582 (available upon request) Appendix A explanatory material, a diagnostic example is often included with the list. In addition, the rationale for the rejection is presented in terms of the effect of the medical condition on the capability of the person to perform as a member.

- **Category A Medical Condition.** A medical condition that would preclude a person from performing as a member in a training or emergency operational environment by presenting a significant risk to the safety and health of the person or others.

- **Category B Medical Condition.** A medical condition that, based on its severity or degree, could preclude a person from performing as a member in a training or emergency operational environment by presenting a significant risk to the safety and health of the person or others.

**Eyes and Vision Revision**

**Category A medical conditions shall include the following:**

- Far visual acuity. Far visual acuity shall be at least 20/30 binocular, corrected with contact lenses or spectacles.

- Peripheral vision. Visual field performance without correction shall be 140 degrees in the horizontal meridian in each eye.

**Category B medical conditions shall include the following:**

- Diseases of the eye such as retinal detachment, progressive retinopathy, or optic neuritis.

- Ophthalmologic procedures such as radial keratotomy or repair of retinal detachment
Any other eye condition that results in a person not being able to perform as a member

MEDICAL EXAMINATION PROVIDER:

The provider for medical evaluations and examinations will be designated by the Coldsprings-Excelsior Fire & Rescue Board of Directors.

MEDICAL EXAMINATION PROCEDURE

- Based on the established interval and anniversary date, the member will be sent a letter advising of the need to schedule a Medical Evaluation. Included with this letter will be a packet of forms that need to be filled out prior to the initial visit.
- The member will call the designated Medical Provider to schedule appointments during established clinic hours.
- The Medical Provider will conduct the medical examination. A second appointment will be necessary if a Cardiac Treadmill is required.
- Any potential life threatening conditions discovered during an examination will be immediately reported to the member.
- During the examination process, if the physician believes further testing is warranted to determine fit for duty status, a representative from the Clinic will contact the Chief or Medical Officer for verification.
- Beyond the approved Medical Evaluation the member is responsible for the cost of additional testing or procedures. Members will not be allowed to work until cleared by the Medical Officer.

MEDICAL RECORDS:

All medical records will be maintained by the Medical Provider at the Clinic. Summary reports are available to the member in lieu of medical results. Copies of all reports will be made available to the individual member upon request at no charge.

The Medical Provider will provide a written notice of Fit for Duty to the Chief or Medical Officer. If a member does not meet the Fit for Duty Status, a written notice specifically identifying the reason why they do not meet Fit for Duty Status will be provided to the Chief or Medical Officer.

OUTSIDE DEPARTMENT MEDICAL RECORDS:

A member may submit current medical records to the Medical Officer for review. Based on this review, the Medical Officer may certify the member for duty without performing an actual medical examination. This clearance will be entirely at the
discretion of the Medical Officer. The individual member needs to initiate this process.

**MEDICAL OFFICER:**

Specific duties of the Medical Officer include:

- Reviewing any Medical Records of individuals not recommended as being fit for Duty as outlined in this policy and make recommendations for action.
- Certifying whether or not Participants meet the medical requirements prior to entering into a training program to become a firefighter or EMT or performing in an emergency operational environment as a firefighter or EMT.
- Reviewing any failure of the annual respiratory protection screening results as provided for each Participant.
- Providing professional medical expertise in areas of firefighter occupational health and safety.
- Availability to deliver presentations and/or review Fire Department training activities.
- Review Return to Work Status Reports resulting from Occupational or Off Duty injuries.

**CONFIDENTIALITY:**

The Medical Evaluation Program is considered to be a confidential process with any discussions of medical issues to be limited to the individual member, the Medical Physician, the Medical Officer and the Fire Chief or his designee.

**MEDICAL LEAVE OF ABSENCE:**

Medical Leave of Absence is an employment status that is usually initiated by a recommendation from the Medical Officer to the Fire Chief. An individual may also request to be put on Medical Leave of Absence.

In the event that the Medical Officer does not clear a member for duty, the member will be placed on Medical Leave until such medical clearance is obtained. This change in status will be documented and submitted to the Board of Directors. The Medical Officer’s **Results of Medical Evaluation Form** will be attached.

Medical Leave is considered to be a temporary status during which additional tests or prescribed treatment(s) may be taking place. While on Medical Leave, a member shall not participate in duty shifts or respond to calls; however, may participate in **classroom only** department drills or other similar meetings. Medical
leave shall remain in effect until the member is medically/physically able to return
to full duty and perform all the essential functions of the position or a period of
one year whichever comes first.
After the one-year period, if the member is unable to return to full duty, the
firefighter or EMT shall not continue to be paid to attend any training session nor
will the department be obligated to reinstate him/her to their current rank or
position.

Once the Medical Officer provides a full clearance for duty, documentation with
the Results of Medical Evaluation Form should be submitted to the Board of
Directors. Medical Leave of Absence is terminated when the Medical Officer
provides a clearance for work.

If the member has more than one job function with the Department (e.g.
firefighter and EMT) the member will be medically evaluated as to their ability to
perform separate job functions. The member may be on medical leave from one
job function while performing another job function.

If for any reason an individual requests a Medical Leave of Absence, a letter
should be written to the Fire Chief requesting such action. Documentation would
be submitted to initiate and conclude the Medical Leave of Absence.

A member who fails to participate fully in the Department’s Medical Evaluation
program is subject to disciplinary action, leading up to and including termination.

RESTRICTED DUTY: In the event that the Medical Officers clears a member for
duty with one or more physical restrictions, the member
will meet with the Fire Chief to discuss any alternatives
that may be available.

LIGHT DUTY: Light Duty Status will be determined by the Medical
Officer and allow the individual to participate in training
drills only.