



During the medical evaluation, the physician shall evaluate each individual to ascertain the presence of any medical conditions listed in documents similar to or from the National Fire Protection Association's 1582, Standard on Comprehensive Occupational Medical Program for Fire Departments. The medical evaluation should also include any medical conditions not listed which would prevent the individual from performing the "Essential Job Tasks" of a firefighter without posing significant risk. It is our intent to encourage the use of professional judgment regarding medical conditions which are not specifically listed in the medical evaluation reference material specific to the firefighting occupation.

A cadet shall NOT be certified as meeting the medical requirements of these standards if the physician determines that the candidate has any Category "A" medical condition specified in the NFPA 1582 standard. Furthermore, a cadet shall not be certified as meeting the medical requirements of these standards if the physician determines that the candidate has a Category "B" medical condition that is of sufficient severity to prevent the recruit from performing the essential functions of a firefighter without posing a significant risk to the safety and health of self or others.

**Category "A" and "B" medical conditions are available for review in Long Document
MCC Basic Firefighter Training Program - NFPA Medical Examination Guidance for Physicians.**

For the purpose of these guidelines at minimum the OSHA 1910.134, Respiratory Protection Program Guidelines Medical Evaluation Questionnaire should be considered as one important and critical element of the overall medical evaluation process.

Essential Firefighter Job Tasks potentially to be performed

Condensed from NFPA 1582, Standard on Comprehensive Occupational Medical Program for Fire Dept.

1. Performing firefighting tasks – hose handling, lifting, crawling, carrying heavy objects, etc., all performed under stressful conditions while in Firefighter Personal Protective Equipment (PPE).
2. Wearing a Self-Contained Breathing Apparatus (SCBA) in all potential circumstances.
3. Exposure to all forms of potentially toxic environments despite the use of PPE and SCBA.
4. Climbing up to and beyond six flights of stairs in full PPE.
5. Wearing encapsulating/insulated gear causing raised internal temperatures and dehydration.
6. Performing search and rescue of victims, possibly weighing over 200 lbs.
7. Advancing water filled hose lines up to 2 1/2" in diameter, upstairs and around corners.
8. Climbing ladders, working from heights, working in poor visibility and operating around electrical and other hazards.
9. Operating in unpredictable emergencies for prolonged periods in extreme conditions without warm-up, rest, nutrition/hydration, or access to medications.
10. Operating fire apparatus in "emergency mode" (vehicles and equipment).
11. Performing complex problem solving in extreme conditions.
12. Communicating under very poor conditions in full PPE.
13. Functioning as a part of a firefighting team where there are great risks of injury and/or death to emergency responders and civilians.

The medical evaluation shall minimally include the following:

- Comprehensive medical history
- Baseline (pre-placement) occupational history, including significant past exposures and training and experience with personal protection equipment
- Height and Weight
- Vital signs: pulse, respiration, blood pressure, and, if indicated, temperature
- Dermatological system
- Ears, Eyes, Nose, Mouth, Throat
- Cardiovascular system
- Respiratory system
- Gastrointestinal system
- Genitourinary system
- Endocrine and metabolic systems
- Musculoskeletal system
- Neurological system
- Mental status evaluation.

OSHA 1910.134 – Recommend completion of Medical Evaluation Questionnaire to include:

- Pulmonary Function Testing - A baseline test should be administered by an experienced individual. Only a spirogram that is technically acceptable and demonstrates the best efforts by an individual should be used to calculate the Forced Vital Capacity (FVC) and Forced Expiratory Volume in one second (FEV1.0)

All medical information collected as part of a medical evaluation shall be considered confidential medical information, and shall be released by the physician only with the specific written consent of the Fire Academy Cadet. The physician shall report the results of the medical evaluation to the Cadet, including any medical condition(s) disclosed during the medical evaluation, and the recommendation whether the recruit is medically certified to perform as a firefighter. The physician shall inform the Director of Public Safety only whether or not the Cadet is medically certified to perform as a firefighter. The specific written consent of the Cadet shall be required to release confidential medical information to the Fire Academy Coordinator, following guidelines set forth under the Americans with Disabilities Act (ADA) and other relevant policies.

You may contact the Director of Public Safety – David Bullins @ 704.978.5446 or at dbullins@mitchellcc.edu for questions and additional guidance on NFPA 1582 or OSHA 1910.134.