

	UNIFIED FIRE AUTHORITY ORGANIZATIONAL MANUAL	
	Affiliation: Human Resources Policies	
	Title: Health Standards & Medical Examinations Number: 900 - 370	
	Approved: 8/24/2023	By: Fire Chief Dominic Burchett
	Last Reviewed: 8/24/2023	By: HR Director Kiley Day

REFERENCES:

[UFA Policy and Procedure – Records Management](#)

[UFA Policy and Procedure – New Hire Requirements](#)

[UFA Policy and Procedure – Employment Status](#)

[UFA Policy and Procedure – Overtime and Compensatory Time](#)

[UFA Policy and Procedure – Fitness for Duty Evaluations and Return to Work after Illness or Injury](#)

[UFA Policy and Procedure – Confidentiality of Personnel Records](#)

[UFA Policy and Procedure – Discipline](#)

[UFA Policy and Procedure – Grievances, and Appeals](#)

[Utah Code Annotated 34A-3-113 - Presumption of Workers' Compensation Benefits for Firefighters](#)

[29 CFR 1630.14](#)

PURPOSE:

To provide a medical evaluation that includes medical history, examination, laboratory tests, or other testing required to detect physical or medical condition(s) that could adversely affect an employee's ability to perform the essential job tasks.

Prospective Employee (hereto referred to as "Candidate") New Hire Examinations

As a condition of employment for Unified Fire Authority (UFA), certain public safety candidates will be required to take both a medical examination and a psychological evaluation to establish their fitness to perform the job for which they have applied.

Annual Examinations

The purpose of the annual medical examination of employees will include but is not limited to the following:

- (1) Identifying conditions that interfere with an employee's physical or mental ability to perform essential job tasks safely and effectively without undue risk of harm to self or others
- (2) Monitoring the effects of exposure to specific biological, physical, or chemical agents on individual members

- (3) Detecting changes in an employee's health that can be related to harmful working conditions
- (4) Detecting patterns of disease or injury occurrence in the workforce that could indicate underlying work-related problems
- (5) Providing employees with information about their current health, promoting wellness, and referring them for appropriate further evaluation and treatment
- (6) Providing employees with information and education about occupational hazards
- (7) Providing a cost-effective investment in work-related disease prevention, early detection, and health promotion for employees
- (8) Complying with federal, state, local, and/or other jurisdictional requirements

Other Medical Examinations

Employees may be required to undergo a medical examination on other occasions when it is job-related and consistent with business necessity. For example, a medical exam may be required when an employee is injured on the job, or if UFA has questions about the employee's ability to perform the job duties (see UFA Policy and Procedure – Fitness for Duty Evaluations/Light Duty Assignments and Return to Work after Illness or Injury).

POLICY:

1.0 Candidate and Employee Responsibilities.

- 1.1 Each candidate or employee will adhere to the following requirements:
 - 1.1.1 Cooperate, participate, and comply with the medical and psychological evaluation process.
 - 1.1.2 Provide complete and accurate information to the contracted provider and other authorized medical care provider(s).
 - 1.1.3 Report any occupational exposure such as exposure to hazardous materials or toxic substances and exposure to infectious or contagious diseases.
 - 1.1.4 Report to the contracted provider any medical condition that could interfere with the ability of the individual to safely perform essential job tasks, such as illness or injury, use of prescription or nonprescription drugs, and pregnancy.
- 1.2 Candidates and employees are required to adhere to the scheduled times and dates for their examinations and are expected to cooperate with the contracted medical services provider's physician and staff in the performance of the

examinations and in promptly returning any further required documentation or test results.

- 1.3 If an employee or candidate is unable to attend any of their scheduled appointments, they must call the Human Resources Division as soon as possible, but no less than prior to the day of the examination to cancel their scheduled appointment. If an employee fails to attend their scheduled examination, the employee is required to reschedule their appointment through the Human Resources Division within 60 days of the missed examination. If an employee fails to reschedule, they may be considered to be without an essential qualification for employment and may be placed on Administrative Leave Without Pay status (see UFA Policy and Procedure - Administrative Leave With or Without Pay) for up to 30 calendar days. The Human Resources Division does not track changes to employees work schedules; therefore, it is the responsibility of the employee to coordinate with the Human Resources Division any changes to the scheduled examination date and time. Failure to reschedule a missed examination may be subject to disciplinary action as per UFA Policy and Procedure - Discipline.
- 1.4 Employees will be granted three hours of time worked for annual physicals if physicals are conducted while off duty. The Human Resources Division will record the three hours as time worked, in the department approved timekeeping system, or timecards when applicable. It is the employee's responsibility to confirm the time has been recorded. Employees who fail to attend a scheduled examination, without just cause, may be required to pay any incurred "no show" fee assessed to the UFA by the contracted medical services provider and may be subject to disciplinary action.

2.0 Medical Examinations.

- 2.1 Candidates will be given both a medical examination and psychological evaluation after a conditional offer of employment has been made. This may include but is not limited to full-time firefighters, full-time wildland firefighters, and arson/bomb investigators.
 - 2.1.1 Part-time EMS employees may be offered specific medical services such as a baseline blood draw or vaccines, but do not receive a medical examination.
- 2.2 UFA will provide a medical examination annually to public safety employees through a contracted medical services provider.
 - 2.2.1. UFA employees required to have a State of Utah - Commercial Driver License (CDL), as part of their job description, will have their medical examinations performed by a Certified Medical Examiner, as per the Department of Transportation (DOT) medical card requirements (<https://www.ecfr.gov/current/title-49/subtitle-B/chapter-III/subchapter-B/part-391/subpart-E>). UFA will assume the expense of such

examinations provided the examination takes place at the UFA contracted medical services provider facility.

- 2.3 In accordance with UFA Policy and Procedure - Fitness for Duty Evaluations and Return to Work after Illness or Injury, the Fire Chief or designee may use information obtained from a medical examination as part of a recommendation for a fitness-for-duty evaluation.
- 2.4 Medical examinations will be conducted by the contracted medical services provider and will be based on the health standards discussed in this policy. At the time of the physical exam an employee has the option to receive vaccinations that have been approved by UFA.
- 2.5 Any follow-up testing conducted by the contracted medical services provider will be covered by UFA, primarily cardiac stress testing. Referrals to outside service providers, such as the employee's own doctor(s), are the responsibility of the employee and typically covered by the employee's health insurance.
 - 2.5.1 It is expected that follow-up appointments will be completed within 45 days of the initial medical examination. If an employee fails to complete the follow-up testing within 45 days of their initial examination, they may be considered to be without an essential qualification for employment and may be placed on Administrative Leave Without Pay status (see UFA Policy and Procedure - Administrative Leave With or Without Pay) for up to 30 calendar days. Failure to complete follow-up testing may be subject to disciplinary action as per UFA Policy and Procedure - Discipline.
- 2.6 In accordance with UFA Policy and Procedure – Confidentiality of Personnel Records, any records containing detailed medical, psychiatric, or psychological data will be classified as private or controlled in accordance with State statute and applicable Federal statute or regulation.
- 2.7 Specific information concerning medical diagnosis will be released by the contracted provider only with written permission from the candidate or employee, and/or as required by law.

3.0 Health Standards

- 3.1 The contracted medical services provider will use the [National Fire Protection Association \(NFPA\) 1582 Standard](#) as a guideline to help determine whether the candidate or employee has passed or failed the medical examination or if an employee is able to perform the essential functions of his or her position.
 - 3.1.1 Limited modification of the standards listed herein will be allowed if in the opinion of the contracted medical services provider, such modification will allow the candidate or employee to adequately fulfill the duties of their position.

- 3.2 The contracted pre-employment psychological evaluation provider will use ten (10) criterion standards that are routinely used for all public safety positions that will show the psychological suitability as a firefighter.
- 3.3 Employees who fail to pass the medical examination may be recommended for a fitness for duty evaluation in accordance with UFA Policy and Procedure - Fitness for Duty Evaluations and Return to Work after Illness or Injury.

Replaces policy dated May 27, 2022

Health Standards and Medical Examination Appendix A:

The purpose of this appendix is to outline the basic services provided by our contracted medical provider as it relates to Firefighter physicals. Our provider has been instructed to follow NFPA guidelines when presenting us with a recommendation if an individual is fit-for-duty. In certain situation follow up testing or a referral to an individual's primary care physician may be needed for clarification.

- Physical Exam and Medical History
- Weight and BMI
- Audiogram
- Visual Acuity & Peripheral Vision Testing
- PFT/Spirometry
- EKG w/ Interpretation
- TB Test (Only done if known exposure)
- Venipuncture
- Complete Blood Count (CBC) w/ Diff
- Comprehensive Metabolic Panel (CMP)
- Lipid Panel
- Direct Bilirubin
- Urinalysis
- Hemoglobin A1C
- Fecal Occult Blood (if clinically indicated)
- DOT Exam (Only if needed)
- Chest X-ray (2-view) every 5 years as indicated
- PSA (Typically over 40 male)
- Vaccinations (Offered if needed)
 - Hepatitis Series
 - MMR
 - TDAP, every 10 years
 - Tetanus/ Diphtheria Booster, every 10 years
 - Varicella
- Titers (conducted for pre-employment exams)
 - Mumps
 - Rubella
 - Rubeola
 - Varicella
- Additional blood testing if indicated for initial exam or for exposures
 - Hepatitis BsAB
 - Hep A titer
 - Hep B Core Antibodies, total
 - Hep B sAG
 - Serum Iron IB
 - Hep C virus antibody
 - Acute Hepatitis Panel
 - TB QuantiFERON Gold blood test

Health Standards and Medical Examination Appendix A:

- Blood Type
- Thyroid (TSH) test
- Heavy Metal Panel (Only done per UFA Request, when possible, exposures exist)
 - Arsenic Assay (Heavy metal panel)
 - Creatinine
 - Cadmium Assay
 - Beta-2 Macroglobulin
 - Lead
 - Zinc Protoporphyrin
 - Morphology review, blood smear
- Cardiac Stress EKG (if risk factors meet criteria, see the excerpt from NFPA 1582 below)
 - This test is scheduled though a different clinic and will be on another day other than your physical examination.

NFPA 1582, 2022 Edition

7.7.7 Risk Stratification

7.7.7.1

Asymptomatic firefighters 40 years of age or older with no known atherosclerotic cardiovascular disease (ASCVD) shall be assessed annually for their 2-year or 10-year risks of ASCVD, defined as coronary death, nonfatal myocardial infarction, or fatal or nonfatal stroke.

7.7.7.2

Asymptomatic firefighters younger than 40 years of age known to be at high risk for ASCVD shall be assessed for coronary artery disease.

7.7.7.3

The 2-year Framingham risk tables or the 10-year heart risk calculator created by the American College of Cardiology/American Heart Association (ACC/AHA) shall be used to generate a 2-year or 10-year risk of ASCVD, taking into consideration the individual's age, sex, race, total cholesterol, high-density lipoprotein (HDL) cholesterol, systolic blood pressure, blood-pressure-lowering medication use, diabetes status, and smoking status.

7.7.7.3.1

Those members assessed as being at an ASCVD risk of ≥ 2 percent over the next 2 years or ≥ 5 percent over the next 10 years shall be counseled on risk factor reduction and referred to their PCP for risk factor reduction options.

7.7.7.3.1.1

Those members assessed as being at 2–4 percent ASCVD over the next 2 years or 10 to <20 percent risk of ASCVD over the next 10 years shall be further evaluated using symptom-limiting exercise stress testing (EST) with imaging [e.g., echocardiography, technetium (^{99m}Tc) Sestamibi study to at least 12 METs.

Health Standards and Medical Examination Appendix A:

7.7.7.3.1.2

Negative ESTs shall be repeated at least every 2 to 5 years or as clinically indicated.

7.7.7.3.1.3

Positive ESTs shall be referred to a cardiologist for further evaluation and treatment.

7.7.7.3.2

Those members assessed as being at 4 percent risk of ASCVD over the next 2 years shall be referred to a cardiologist for further evaluation and treatment.

Health Standards and Medical Examination Appendix B:

- Psychological Evaluation Criterion Minnesota Multiphasic Personality Inventory -3 (MMPI-3)
 - Test is interpreted by using the Firefighter Candidate Interpretive Report (FCIR)
- California Psychological Inventory-434 (CPI-434)
 - Test is interpreted by using the JRA Police & Public Safety Selection Report
- Personal History Survey (PHS)
- UFA Background Investigative Reports
- If appropriate, gather limited records from candidates' health care provider to help rule out job relevant psychopathology and behavioral impairment. Not all medical records of all providers will be required.
- Video based HIPAA compliant clinical interview.

Appendix dated: