



Voluntary Minimum Entry Level
Medical Standards for
Firefighters

2015

Recommendations for State-Wide Fitness Evaluations for New Hire/Candidates

National Fire Protection Association (NFPA) 1582 Medical Standards as described in the Comprehensive Occupational Medical Program for Fire Departments (latest edition 2013) recommend application to these standards for all newly hired firefighters and should be administered by a physician familiar with firefighter essential tasks and required occupational health standards for the position.

Attached are sections and sample documents of 'A Fire Department Guide to Implementing NFPA 1582' (2103). An overview of Chapter 6 intended for new hire firefighter candidates is included. These documents are intended to be used by physicians and fire department administrators to properly screen candidates prior to employment and participation in interior firefighting operations.

WAC 296-305-01509 (effective 1-1-2014) states in Section 7:

- a) "The employer shall assure that employees who are expected to do interior structural firefighting are physically capable of performing duties that may be assigned to them during emergencies.
- b) The employer shall not permit employees with known physical limitations reasonably identifiable to the employer, for example, heart disease or seizure disorder, to participate in (structural firefighting emergency) physically demanding activities unless the employee has been released to participate in such activities by a physician to participate in such activities or other licensed health care professional (LHCP) who is qualified by training or experience as determined by the fire department to evaluate firefighters."
- c) It is imperative that organizations protect themselves from undue liabilities and ensure all new members be cleared for participation in firefighting activities.

In addition, it is recommended that ongoing fitness assessments occur by fire department physicians. A Department Fitness Coordinator should administer a pre-assessment questionnaire that seeks to identify contraindications for participation. The annual assessment components as found in NFPA 1582, Annex C):

- Aerobic Capacity
- Body Composition
- Muscular Strength
- Muscular Endurance
- Flexibility

Fitness evaluations should occur under the auspices of a fire department physician. However, the actual evaluations are permitted to be conducted by the fire department's fitness personnel. All data is to be held confidential and maintained in the member's confidential medical file. The evaluator can provide exercise programs to encourage the members to maintain or improve their level of fitness. Outside of the annual fitness assessment, individual members are responsible for reporting immediately to their supervisor any medical condition that could potentially compromise their ability to perform the essential functions of their job.

IAFC Safety, Health & Survival Section, Everyone Goes Home

It is a significant fact that annually nearly half of all firefighter fatalities occur as a result of medical emergencies. The severe physical nature of firefighting and the harsh environmental conditions under which firefighters must perform their duties dramatically increase our susceptibility to stress and overexertion. Many of these deaths could potentially be avoided through early detection of underlying medical conditions by participation in an annual routine medical examination, which includes commonplace non-invasive medical testing.

The economic costs associated with a firefighter's death far outstrip the costs of ensuring that firefighters receive an annual medical examination. Put simply, firefighters' lives are worth far more than the cost of implementing a wellness-fitness program that starts with an annual physical. Knowing this, it is the position of the IAFC, that every firefighter receive an annual medical examination for the purposes stated above, and that this examination should follow as closely as possible the guidance of NFPA 1582. Fire Chiefs have an obligation to find funding sources and develop creative strategies to ensure the safety of their personnel. This document is designed to support that responsibility.

The IAFC Safety, Health, and Survival Section compiled this information and sample documents to assist with the development and implementation of an annual medical evaluation program. Thousands of hours of work have been committed to the development of this implementation guide and special thanks goes to Kim Favorite, Occupational Health and Fitness Coordinator for the Seattle, WA Fire Department and Fire Chief Jake Rhoades of the Edmond, OK Fire Department who were tasked with spearheading this effort. Their commitment to firefighter safety is alive in these pages.

Too often, Fire Chiefs find themselves at the crossroads of understanding their responsibility to ensure the safety of their members and finding a way to actually make it happen. This document represents a roadmap for success. It can be used in part or in whole but most importantly it is designed to be used. Safety is no accident. It is the conscious mindset of humans created by the establishment of regulations and policies based upon generally accepted industry practices. These policies take into consideration such practices and are designed to provide the highest practical degrees of personal safety. The prevention and reduction of accidents, injuries and occupational illnesses is not simply an objective, but a way of life.

The International Association of Fire Chiefs, and the Safety, Health, and Survival Section stand with you in our combined effort to reduce, and eventually eliminate, every preventable Line of Duty Death among firefighters. May it serve as the unity of purpose that guides our actions.

NFPA 1582 Overview of Chapter 6 New Hire/Candidates Only

*This is intended as a "quick-sheet" overview and shall not be used without a complete understanding of NFPA 1582 Standard on Comprehensive Occupational Medical Program for Fire Departments
To obtain a copy of NFPA1582, visit the NFPA website at www.nfpa.org
See NFPA1582 Chapter7 for volunteer, paid on call, part time, or career firefighters*

Minimal medical requirements are clearly delineated in NFPA 1582 - Chapter 6. Nothing is intended to restrict any jurisdiction from exceeding these minimum requirements.

For the Candidates/New Hire the determination is whether the individual is medical sound to perform as a member in a training or emergency operational environment without presenting a significant risk to the safety and health of the person or others is broken into two (2) categories.

Category A

- Medical Condition - Anything in this category would preclude hire. Each category also includes —“Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks.”

Category B

- Medical Condition - A condition that, based on its severity or degree, could preclude hire but only if despite the condition the candidate “can perform the essential job tasks without posing a significant safety and health risk to themselves, members, or civilians”.

List of Conditions

NOTICES:

- *An asterisk (*) indicates that explanatory material is in Annex A of NFPA 1582.*
- *Requirements are different for volunteer, paid on call, part time, or career firefighters. See NFPA 1582 Chapter 7*

6.3 Head and Neck - Candidates/New Hire

6.3.1 Head

Category A

- Defect of skull preventing helmet use or leaving underlying brain unprotected from trauma
- Any skull or facial deformity that would not allow for a successful fit test for respirators used by that department
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- *Deformities of the skull such as depressions or exostoses
- *Deformities of the skull associated with evidence of disease of the brain, spinal cord, or peripheral nerves
- *Loss or congenital absence of the bony substance of the skull

8.3.2 Neck

Category A

- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- *Thoracic outlet syndrome
- *Congenital cysts, chronic draining fistulas, or similar lesions
- *Contraction of neck muscles

6.4 Eyes and Vision - Candidates/New Hire

Category A

- Far visual acuity less than 20/40 binocular, corrected with contact lenses or spectacles, or far visual acuity less than 20/100 binocular for wearers of hard contacts or spectacles, uncorrected
- *Color perception—monochromatic vision resulting in inability to use imaging devices such as thermal imaging cameras
- *Monocular vision
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- *Diseases of the eye such as retinal detachment, progressive retinopathy, or optic neuritis
- *Ophthalmological procedures such as radial keratotomy, Lasik procedure, or repair of retinal detachment
- Peripheral vision in the horizontal meridian of less than 110 degrees in the better eye or any condition that significantly affects peripheral vision in both eyes

6.5 Ears and Hearing - Candidates/New Hire

Category A

- Chronic vertigo or impaired balance as demonstrated by the inability to tandem gait walk
- On audiometric testing, average hearing loss in the unaided better ear greater than 40 decibels (dB) at 500 Hz, 1000 Hz, 2000 Hz, and 3000 Hz when the audiometric device is calibrated to ANSI Z24-.5, Audiometric Device Testing
- Any condition (or hearing impairment) that results in the candidate not being able to safely perform one or more of the essential job tasks
- *Hearing aid or cochlear imp/ant

Category B

- *Unequal hearing loss
- Average uncorrected hearing deficit at the test frequencies 500 Hz, 7 000 Hz, 2000 Hz, and 3000 Hz greater than 40 dB in either ear
- Atresia, stenosis, or tumor of the auditory canal
- *External otitis, recurrent
- *Agenesis or traumatic deformity of the auricle
- *Mastoiditis or surgical deformity of the mastoid
- *Meniere's syndrome, labyrinthitis, or tinnitus
- *Otitis media
- Surgical procedures to correct or improve hearing or other conditions of the ear

6.6 Dental - Candidates/New Hire

Category A

- Any condition that results in inability to safely perform one or more of the essential job tasks.

Category B

- *Diseases of the jaws or associated tissues
- *Orthodontic appliances
- *Oral tissues, extensive loss
- *Relationship between the mandible and maxilla that interferes with satisfactory postorthodontic replacement or ability to use protective equipment replacement or ability to use protective equipment.

6.7 Nose, Oropharynx, Trachea, Esophagus, and Larynx - Candidates/New Hire

Category A

- *Tracheostomy
- *Aphonia
- Any nasal, oropharyngeal, tracheal, esophageal, or laryngeal condition that results in inability to safely perform one or more of the essential job tasks including fit testing for respirators such as N-95 for medical response, P-100 for particulates and certain vapors, and SCBA for fire and hazmat operations
- Any condition that results in inability to safely perform one or more of the essential job tasks.

Category B

- *Congenital or acquired deformity
- *Allergic rhinitis
- Epistaxis, recurrent
- *Sinusitis, recurrent
- *Dysphonia
- Anosmia
- Tracheal stenosis
- Nasopharyngeal polyposis
- *Obstructive apneas (e.g., sleep apnea) if unresponsive to treatment

6.8 Lungs and Chest Wall - Candidates/New Hire

Category A

- Active hemoptysis
- Current empyema
- Pulmonary hypertension
- Active tuberculosis
- *A forced vital capacity (FVC) or forced expiratory volume in 1 second (FEV1) less than 70 percent predicted even independent of disease
- *Obstructive lung diseases (e.g., emphysema, chronic bronchitis, asthma) with an absolute FEV1/FVC less than 0.70 and with either the FEV1 below normal or both the FEV1 and the FVC below normal (less than 0.80) (see references in E2)
- *Hypoxemia — oxygen saturation less than 90 percent at rest or exercise desaturation by 4 percent or to less than 90 percent (exercise testing indicated when resting oxygen is less than 94 percent but greater than 90 percent)
- *Asthma—reactive airways disease requiring bronchodilator or corticosteroid therapy for 2 or more consecutive months in the previous 2 years, unless the candidate can meet the requirement in 6.8.1.1
- Lung Transplant
- *A candidate who has in the past required bronchodilator, corticosteroid, or anti-inflammatory therapy (e.g., leukotriene receptor antagonists, such as Montelukast) for asthma but who does not believe he/she has asthma shall be evaluated by a pulmonologist or other expert in asthmatic lung diseases, such as an allergist, to determine if the candidate meets all four requirements in 6.8.1.1
- Challenge testing shall be performed of all anti-inflammatory medications (e.g., inhaled or oral steroids, leukotriene receptor antagonists) for 4 weeks preceding the test, off all antihistamines (e.g., oral allergy medications) for 1 week, and off all bronchodilators on the day of testing
- Any condition that results in inability to safely perform one or more of the essential job tasks.

Category B

- *Pulmonary resectional surgery, chest wall surgery, and pneumothorax
- Pleural effusion
- *Fibrothorax, chest wall deformity, and diaphragm abnormalities
- *Interstitial lung diseases
- *Pulmonary vascular diseases or history of pulmonary embolism
- *Bronchiectasis, if abnormal pulmonary function or recurrent infections
- Infections diseases of the lung or pleural space
- Cystic fibrosis
- Central or obstructive apnea (e.g., sleep apnea) if unresponsive to treatment

6.9 Aerobic Capacity— Candidates/New Hire

Category A

- Aerobic capacity less than 12 metabolic equivalents (METs) (12 METs= 42 mL O₂/kg/min).

6.10 Heart and Vascular System - Candidates/New Hire

6.10.1 Heart Category A

- Coronary artery disease, including history of myocardial infarction, angina pectoris, coronary artery bypass surgery, coronary angioplasty, and similar procedures
- *Cardiomyopathy or congestive heart failure, including signs or symptoms of compromised left or right ventricular function or rhythm, including dyspnea, S3 gallop, peripheral edema, enlarged ventricle, abnormal ejection fraction, and/or inability to increase cardiac output with exercise
- *Acute pericarditis, endocarditis, or myocarditis
- *Syncope, recurrent
- *A medical condition requiring an automatic implantable cardiac defibrillator or history of ventricular tachycardia or ventricular fibrillation due to ischemic or valvular heart disease, or cardiomyopathy
- Third-degree atrioventricular block
- *Cardiac pacemaker
- Hypertrophic cardiomyopathy, including idiopathic hypertrophic subaortic stenosis
- Heart Transplant
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- *Valvular lesions of the heart, including prosthetic valves
- *Recurrent supraventricular or atrial tachycardia, flutter, or fibrillation
- *Left bundle branch block
- Second-degree atrioventricular block in the absence of structural heart disease
- Sinus pause more than 3 seconds
- *Ventricular arrhythmia (history or presence of multifocal PVCs or nonsustained ventricular tachycardia on resting EKG with or without symptoms; history or presence of sustained ventricular tachycardia with or without symptoms)
- *Cardiac hypertrophy or hypertrophic cardiomyopathy
- *History of a congenital abnormality
- *Chronic pericarditis, endocarditis, or myocarditis

6.10.2 Vascular System

Category A

- Hypertension - (a)*Uncontrolled or poorly controlled hypertension (b) *Hypertension with evidence of end - organ damage
- *Thoracic or abdominal aortic aneurysm
- Carotid artery stenosis or obstruction resulting in greater than or equal to 50 percent reduction in blood flow
- *Peripheral vascular disease resulting in symptomatic claudication
- Any other condition that results in inability to safely perform one or more of the essential job tasks

Category B

- Vasospastic phenomena such as Raynaud's phenomenon
- *Thrombophlebitis; thrombosis, or varicosities
- *Chronic lymphedema due to lymphadenopathy or venous valvular incompetency
- *Congenital or acquired lesions of the aorta or major vessels
- *Circulatory instability as indicated by orthostatic hypotension, persistent tachycardia, and peripheral vasomotor disturbances
- History of surgical repair of aneurysm of the heart or major vessel

6.11 Abdominal Organs and Gastrointestinal System - Candidates/New Hire

Category A

- Presence of uncorrected inguinal/femoral hernia regardless of symptoms
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- *Cholecystitis
- *Gastritis
- *GI bleeding
- *Acute hepatitis
- Hernia including the following:
 - Uncorrected umbilical, ventral, or incisional hernia if significant risk exists for infection or strangulation
 - Significant symptomatic hiatal hernia if associated with asthma, recurrent pneumonia, chronic pain, or chronic ulcers
 - *Surgically corrected hernia more than 3 months after surgical correction
- Inflammatory bowel disease or irritable bowel syndrome
- *Intestinal obstruction
- *Pancreatitis
- Diverticulitis
- *History of gastrointestinal surgery
- *Peptic or duodenal ulcer or Zollinger-Ellison syndrome
- *Asplenia
- *Cirrhosis, hepatic or biliary
- *Chronic active hepatitis

6.12 Metabolic Syndrome - Candidates/New Hire

Category A

- *Medical conditions shall include metabolic syndrome with aerobic capacity less than 12 METs.

Category B

- Medical conditions shall include metabolic syndrome with aerobic capacity 12 METs or greater

6.13 Reproductive System (See B1.2.1.) - Candidates/New Hire

Category A

- Any genital condition that results in inability to safely perform one or more of the essential job tasks.

Category B

- Pregnancy, for its duration
- Dysmenorrhea
- Endometriosis, ovarian cysts, or other gynecologic conditions
- Testicular or epididymal mass

6.14 Urinary System - Candidates/New Hire

Category A

- Renal failure or insufficiency requiring continuous ambulatory peritoneal dialysis (CAPD) or hemodialysis
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- Diseases of the kidney
- Diseases of the ureter, bladder, or prostate

6.15 Spine and Axial Skeleton — Candidates/New Hire

Category A

- Scoliosis of thoracic or lumbar spine with angle greater than or equal to 40 degrees
- History of spinal surgery with rods that are still in place
- Any spinal or skeletal condition producing sensory or motor deficit(s) or pain due to radiculopathy or nerve root compression
- Any spinal or skeletal condition causing pain that frequently or recurrently requires narcotic analgesic medication
- Cervical vertebral fractures with multiple vertebral body compression greater than 25 percent; evidence of posterior element involvement, nerve root damage, disc involvement, dislocation (partial, moderate, severe), abnormal exam, ligament instability, symptomatic, and/or less than 6 months post injury or less than 1 year since surgery
- Thoracic vertebral fractures with vertebral body compression greater than 50 percent; evidence of posterior element involvement, nerve root damage, disc involvement, dislocation (severe— with or without surgery), abnormal exam, ligament instability, symptomatic, and/or less than 6 months post injury or less than 1 year since surgery
- Lumbosacral vertebral fractures with vertebral body compression greater than 50 percent; evidence of posterior element involvement, nerve root damage, disc involvement, dislocation (partial, moderate, severe), fragmentation, abnormal exam, ligament instability, symptomatic, and/or less than 6 months post injury or less than 1 year since surgery
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- Congenital or developmental malformations of the back, particularly those that can cause instability, neurological deficits, pain, or limit flexibility
- Scoliosis with angle less than 40 degrees
- Arthritis of the cervical, thoracic, or lumbosacral spine
- Facet atrophism, high lumbosacral angle, hyperlordosis, Schmorl's nodes, Scheuermann's disease, spinal loifida occulta, spondylolisthesis, spondylolysis, or transitional vertebrae
- History of infections or infarcts in the spinal cord, epidural space, vertebrae, or axial skeletal joints History of diskectomy, laminectomy, or vertebral fractures
- History of spine fusion that results in instability; reduced mobility, strength, or range of motion; or persistent pain.

6.16 Extremities - Candidates/New Hire

Category A

- Joint replacement- unless all four requirements in 6.16.1 (1) are met
- Amputation or congenital absence of upper-extremity limb (hand or higher)
- Amputation of either thumb proximal to the midproximal phalanx
- Amputation or congenital absence of lower-extremity limb (foot or above) unless the candidate meets all seven requirements listed in 6.16.1 (4)
- Chronic non-healing or recent bone grafts
- History of more than one dislocation of shoulder without surgical repair or with history of recurrent shoulder disorders within the last 5 years with pain or loss of motion, and with or without radiographic deviations from normal
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- *History of shoulder dislocation with surgical repair
- Significant limitation of function of shoulder, elbow, wrist, hand, or finger due to weakness, reduced range of motion, atrophy, unequal length, absence, or partial amputation
- Significant lack of full function of hip, knee, ankle, foot, or toes due to weakness, reduced range of motion, atrophy, unequal length, absence, or partial amputation
- *History of meniscectomy or ligamentous repair of knee
- *History of intra-articular, malunited, or nonunion of upper or lower extremity fracture
- *History of osteomyelitis, septic, or rheumatoid arthritis
- Bone hardware such as metal plates or rods supporting bone during healing

6.17 Neurological Disorders - Candidates/New Hire

Category A

- Ataxias of heredo-degenerative type
- Cerebral arteriosclerosis as evidenced by a history of transient ischemic attack, reversible ischemic neurological deficit, or ischemic stroke
- Hemiparalysis or paralysis of a limb
- *Multiple sclerosis with activity or evidence of progression within previous 3 years
- *Myasthenia gravis with activity or evidence of progression within previous 3 years
- Progressive muscular dystrophy or atrophy
- Uncorrected cerebral aneurysm
- All single unprovoked seizures and epileptic conditions, including simple partial, complex partial, generalized, and psychomotor seizure disorders other than as allowed in 6.17.1.1
- Dementia (Alzheimer's and other neurodegenerative diseases) with symptomatic loss of function or cognitive impairment (e.g., less than or equal to 28 on Mini-Mental Status Exam)

- Parkinson's disease and other movement disorders resulting in uncontrolled movements, bradykinesia, or cognitive impairment (e.g., less than or equal to 28 on Mini-Mental Status Exam)
- Any neurological condition that results in the candidate not being able to safely perform one or more of the essential job tasks
- A candidate with epileptic conditions shall have had complete control during the previous 5 years.

To be medically qualified at candidate shall meet all of the following:

- No seizures for 1 year off all anti-epileptic medication or >5 years seizure free on a stable medical regimen
- Neurologic examination is normal
- Imaging (CAT or MR1 scan) studies are normal
- Awake and asleep EEG studies with photic stimulation and hyperventilation are normal
- A definitive statement from a qualified neurological specialist that the candidate meets the criteria specified in 6.17.1.1(1) through 6.17.1.1(4) and that the candidate is neurologically cleared for firefighting training and the performance of a fire fighters essential job tasks
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- Congenital malformations
- *Migraine
- Clinical disorders with paresis, dyscoordination, deformity, abnormal motor activity, abnormality of sensation, or complaint of pain
- History of subarachnoid or intraparenchymal hemorrhage
- Abnormalities from recent head injury such as severe cerebral contusion or concussion

6.18 Skin - Candidates/New Hire

Category A

- Metastatic or locally extensive basal or squamous cell carcinoma or melanoma
- Any dermatologic condition that would not allow for a successful fit test for any respirator required by the fire department
- Any condition that results in the candidate not being able to safely perform one or more of the essential job task

Category B

- *Skin conditions of a chronic or recurrent nature (eczema, cystic acne, psoriasis) that cause skin openings or inflammation or irritation of the skin surface
- *Surgery or skin grafting
- *Mycosis fungoides
- *Cutaneous lupus erythematosus
- *Raynaud's phenomenon
- *Scleroderma (skin)
- *Vasculitic skin lesions
- *Atopic dermatitis/eczema
- *Contact or seborrheic dermatitis
- *Stasis dermatitis
- *Albinism, Darier's disease, ichthyosis, Marfan syndrome, neurofibromatosis, and other genetic conditions
- *Folliculitis, pseudo-folliculitis, miliaria, keloid folliculitis
- *Hidradenitis suppurativa, furuncles, carbuncles, or Grade IV acne (cystic)
- *Mechano-bullous disorders (epidermolysis bullosa, Hailey pemphigus, porphyria, pemphigoid)

- *Urticaria or angioedema

6.19 Blood and Blood-Forming Organs — Candidates/New Hire

Category A

- Hemorrhagic states requiring replacement therapy
- Sickle cell disease (homozygous)
- Clotting disorders
- Any condition that results in inability to safely perform one or more of the essential job tasks

Category B

- Anemia
- Leukopenia
- Polycythemia vera
- Splenomegaly
- History of thromboembolic disease
- Any other hematological condition that results in inability to safely perform essential job tasks

6.20 Endocrine and Metabolic Disorders - Candidates/New Hire

Category A

- *Type 1 diabetes mellitus, unless a candidate meets all seven criteria in 6.20.1- (1) a-g
- Insulin—requiring Type 2 diabetes mellitus, unless a candidate meets all seven criteria in 6.20.1- (2) a-g
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- *Diseases of the adrenal gland, pituitary gland, parathyroid gland, or thyroid gland of clinical significance
- Nutritional deficiency diseases or other metabolic disorder
- Diabetes mellitus, not on insulin therapy, but controlled by diet, exercise, and/or oral hypoglycemic agents unless all of the six criteria in 6.20.2(3) are met.

6.21 Systemic Diseases and Miscellaneous Conditions - Candidates/New Hire

Category A

- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks.

Category B

- Connective tissue disease, such as dermatomyositis, systemic lupus erythematosus, scleroderma, and rheumatoid arthritis
- *History of thermal, chemical, or electrical burn injury with residual functional deficit
- Documented evidence of a predisposition to recurrent heat stress rhabdomyolysis, metabolic acidosis, or exertion-related incapacitation

6.22 Tumors and Malignant Diseases — Candidates/New Hire

Category A

- Malignant disease that is newly diagnosed, untreated, or currently being treated, or under active surveillance due to the increased risk for recurrence
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- *Benign tumors
- *History of CNS tumor or malignancy
- *History of head and neck malignancy
- *History of lung cancer
- *History of GI or GU malignancy
- *History of bone or soft tissue tumors or malignancies
- *History of hematological malignancy

6.23 Psychiatric Conditions - Candidates/New Hire**Category A**

- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- A history of psychiatric condition or substance abuse problem
- Requirement for medications that increase an individual's risk of heat stress, or other interference with the ability to safely perform essential job tasks

6.24 Chemicals, Drugs, and Medications - Candidates/New Hire**Category A**

- Those that require chronic or frequent treatment with any of the medications or classes of medications listed in 6.24. 1(1-8)
- Tobacco use (where state law allows)
- Evidence of illegal drug use detected through testing conducted in accordance with Substance Abuse and Mental Health Service Administration (SAMHSA)
- Evidence of clinical intoxication or a measured blood alcohol level that exceeds the legal definition of intoxication according to the AHJ at the time of medical evaluation
- Any condition that results in the candidate not being able to safely perform one or more of the essential job tasks

Category B

- Cardiovascular agents
- Stimulants
- Psychiatric medications
- Other than high-dose systemic corticosteroids
- Antihistamines
- Muscle relaxants

Leukotriene receptor antagonists (e.g., Montelukast) used for allergies that do not affect the lower respiratory system

MEDICAL PHYSICAL

NAME	DATE OF BIRTH
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DATE OF EXAM	SSN#
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APPLICANT COMPLETE THIS SECTION:

	yes	no		yes	no
Frequent/severe headaches	<input type="checkbox"/>	<input type="checkbox"/>	Mental disorders of any sort; depression/anxiety	<input type="checkbox"/>	<input type="checkbox"/>
Dizziness/fainting spells	<input type="checkbox"/>	<input type="checkbox"/>	Substance dependence or failed a drug test; or substance	<input type="checkbox"/>	<input type="checkbox"/>
Unconsciousness for any reason	<input type="checkbox"/>	<input type="checkbox"/>	abuse/use of an illegal substance in the last 5 years	<input type="checkbox"/>	<input type="checkbox"/>
Eye/vision trouble	<input type="checkbox"/>	<input type="checkbox"/>	Alcohol dependence/abuse	<input type="checkbox"/>	<input type="checkbox"/>
Hay fever/allergy	<input type="checkbox"/>	<input type="checkbox"/>	Suicide attempt	<input type="checkbox"/>	<input type="checkbox"/>
Asthma/lung disease	<input type="checkbox"/>	<input type="checkbox"/>	Motion sickness requiring medication	<input type="checkbox"/>	<input type="checkbox"/>
Heart or vascular trouble	<input type="checkbox"/>	<input type="checkbox"/>	Military medical discharge	<input type="checkbox"/>	<input type="checkbox"/>
High/low blood pressure	<input type="checkbox"/>	<input type="checkbox"/>	Medical rejection by military service	<input type="checkbox"/>	<input type="checkbox"/>
Stomach/liver/intestinal prob	<input type="checkbox"/>	<input type="checkbox"/>	Rejection for life or health insurance	<input type="checkbox"/>	<input type="checkbox"/>
Kidney stone/blood in the urine	<input type="checkbox"/>	<input type="checkbox"/>	Admission to hospital	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	Other illness, disability, or surgery	<input type="checkbox"/>	<input type="checkbox"/>
Neurological disorders:	<input type="checkbox"/>	<input type="checkbox"/>	History of non-traffic conviction	<input type="checkbox"/>	<input type="checkbox"/>
epilepsy, seizures, stroke	<input type="checkbox"/>	<input type="checkbox"/>	Tobacco use _____ pks/day _____ chew		
paralysis, etc	<input type="checkbox"/>	<input type="checkbox"/>			

EXPLANATION for above yes answers:

Ht. (without shoes):	Wt:	Temp:
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VISUAL ACUITY:

Distance:	Near:
a. Without glasses R20/____ L20/____ Both 20/____	R20/____ L20/____ Both 20/____
b. With glasses R20/____ L20/____ Both 20/____	R20/____ L20/____ Both 20/____
c. Depth perception _____ Tracking _____ Convergence _____	
d. Color vision-Ishihara plates _____	
e. Pupils: Equal _____ Reaction _____	
f. Field of vision Rt. Eye _____ Lt. Eye _____	

NOTE ANY ABNORMALITY:

EARS :

Drum perforation or drainage

no yes

NOTE ANY ABNORMALITY:

HEAD (Note any defect, disease, or injury involving eyes, ears, nose ,mouth, throat)

Dentistry recommended

NO YES

LUNGS

Spirometry: date & results

Rate:

done at CMC :

CARDIOVASCULAR SYSTEM

Pulse _____ BP _____ sounds _____ rhythm _____

PULSES

RESTING EKG: (Every 5years annual after 45)

Femoral _____

Popliteal _____

Dorsal Pedis _____

Posterior Tibial _____

NOTE ANY ABNORMALITY:

NERVOUS SYSTEM: (Describe any pathology or abnormal reflexes)

ABDOMEN: (Note any masses, tenderness, hernias)

RECTAL EXAM: (Note any fistula, hemorrhoids, prostate problems)--

HEMOCCULT RESULTS annually after age 50:

GENITOURINARY SYSTEM: (Note any abnormalities)--MALE:testicular exam/female PAP

BREAST EXAM:

URINALYSIS RESULTS dip only:

MUSCULO-SKELETAL

Spine toe touch symmetry posture

upper ext tremities limited function missing parts

lower extremities limited function missing parts

SKIN: (scars, varicosities, disease, abnormalities)

LAB TESTS:

Examiner's name and address:

Cascade Medical Clinic

211 N.W. Larch

Redmond, OR 97756

LIPID PROFILE _____

GLUCOSE _____

CARBON DIOXIDE _____

PSA after age 50 _____

LEAD _____

Examiner's signature & date

HEP C ANTIBODY baseline _____

URINE-heavy metal screen baseline _____

NOTES:

Medical Evaluation Samples and Templates

Physician's Report of Findings (Candidate)

Candidate's Name: _____

The results from your medical examination performed on _____ 20_____

By _____ are as follows:

The **physical exam** was Normal Abnormal Not applicable

Blood pressure was ____ / ____ which is Normal Abnormal

Comments:

The **hearing test** was Normal Abnormal Not applicable

Comments:

The **pulmonary function test** was Normal Abnormal Not applicable

Comments:

The **vision test** was Normal Abnormal Not applicable

Comments:

The **lab results** were Normal Abnormal Not applicable

See enclosed results. Any lab value marked with an H or L is outside the normal limits and should be discussed with your primary doctor to determine the importance of the finding.

Comments:

The **chest x-ray** was Normal Abnormal Not applicable

Comments:

The **treadmill stress test** was Normal Abnormal Not applicable

The test was terminated due to: Reached 12 METs Stopped by candidate

Abnormal findings on EKG

Comments:

Please discuss all abnormal findings with your primary doctor. Abnormal findings might be signs of significant medical conditions that should be addressed by your primary doctor.

Today's Date(mm/dd/yy): _____ Patient ID # _____

HEALTH ASSESSMENT QUESTIONNAIRE

Name: Last: _____, First: _____ MI: _____

Phone # _____ E-mail address: _____

DEMOGRAPHICS

1. Date of birth(mm/dd/yy): _____ INJ/ILL# _____

2. Ethnicity: *Mark all that apply*

- | | | |
|---|---|---|
| <input type="checkbox"/> White | <input type="checkbox"/> Black/African American | <input type="checkbox"/> Asian/Pacific Islander |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> Native American | <input type="checkbox"/> Mid-East/Asian Indian |
| <input type="checkbox"/> Alaskan Native | <input type="checkbox"/> South East Asian | <input type="checkbox"/> Other |

3. Gender: Female Male

4. Marital Status:

- Married, spouse in household
- Married, spouse not in household
- Living as married/domestic partner
- Widowed
- Divorced
- Separated
- Never married

5. Educational Level:

- High School
- Some College, no degree
- Associates Degree
- Bachelor's Degree
- Some Post Bachelor's classes
- Master's Degree
- Doctorate Degree
- Post Doctorate Degree

CURRENT EMPLOYMENT

6. Are you currently employed as a firefighter? Yes No - Year Retired: _____

7. Year of Hire: _____ Have you ever left for more than 6 months Yes _____ Months

8. Do you currently work at another job? Yes Number of hours per week: _____

9. Current primary assignment: Admin Since: _____ Operations Since: _____

How many stations have you been assigned to for more than one year? _____

ILLNESS/INJURY EXPERIENCE IN THE PAST YEAR

10. Please estimate how many days of non-work-related sick leave (including dependent care) you have taken in the past year. _____ Days

11. Please estimate how many Industrial Injury hours you have had in the past year: _____ Hrs

12. In the past year have you been on Light Duty prior to returning to full duty?

- Yes ___ Days No

13. In the past year have you been placed on Long Term or Permanent alternative duty?

- No Yes Permanent: Since ___ Long Term: Date: ___ for ___ months

Patient ID # _____

Physicians Initials _____

TABACCO AND ALCOHOL

Smoking:

14. Have you smoked at least 100 cigarettes (5 packs) in your entire life?

- Yes No go to Question 18.

15. About how many cigarettes do you (or did you) usually smoke per day? _____

If less than 1 per day, enter 01, ' If 95 or more per day, enter 95 (1 pack = 20 cigarettes)

16. For about how many years have you smoked (or did you smoke) this amount? _____

If less than 1 year, enter 01

17. How often do you smoke now?

- Every day Some days Not at all

18. If you currently use any tobacco products, what kind do you regularly use? Mark all that apply.

- | | | | |
|---|------------------------------------|------------------------------------|--|
| <input type="checkbox"/> Cigarettes | <input type="checkbox"/> Every day | <input type="checkbox"/> Some days | <input type="checkbox"/> Special Occasions |
| <input type="checkbox"/> Cigars | <input type="checkbox"/> Every day | <input type="checkbox"/> Some days | <input type="checkbox"/> Special Occasions |
| <input type="checkbox"/> Pipe | <input type="checkbox"/> Every day | <input type="checkbox"/> Some days | <input type="checkbox"/> Special Occasions |
| <input type="checkbox"/> Chew | <input type="checkbox"/> Every day | <input type="checkbox"/> Some days | <input type="checkbox"/> Special Occasions |
| <input type="checkbox"/> Do not currently use tobacco (Go to Question 21) | | | |

19. During the past 12 months, have you stopped using tobacco for one day or longer because you were trying to quit? No Yes # of days you quit _____

20. Were you enrolled in a tobacco cessation program this year? Yes No

Alcohol:

21. During the past 30 days, have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage, or liquor? Yes *If No, go to Question 24.*

22. During the past 30 days, how many days per week I or month did you have at least one drink of any alcoholic beverage? _____ days per week / or _____ days in past 30 days.

23. During the past 30 days, on the days when you drank, about how many drinks did you drink on average? _____ Number of drinks

FAMILY HEALTH HISTORY

24. Do you have a male parent, sibling, or offspring who was diagnosed with a heart attack, angina, or coronary heart disease at an age younger than 55 years old? Yes No

25. Do you have a female parent, sibling, or offspring who was diagnosed with a heart attack, angina, or coronary heart disease at an age younger than 55 years old? Yes No

26. Do you have a male parent, sibling, or offspring who was diagnosed with cancer? No Yes diagnosed with: _____

27. Do you have a female parent, sibling, or offspring who was diagnosed with cancer? No Yes diagnosed with: _____

28. Do you have a grandparent, parent, sibling, or offspring who was diagnosed with diabetes? Yes No

Patient ID # _____

YOUR HEALTH HISTORY

29. Below is a list of health problems. Please indicate if and how recently you were diagnosed, and whether you are currently experiencing the problem.

Health Problem <i>Diagnosed by a health professional</i>	Diagnosed	Currently Experiencing This	Currently Taking	Medications & Dosages
Diabetes: Type _____	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Hypertension <i>High blood pressure</i>	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Hyperlipidemia <i>High cholesterol, high triglycerides</i>	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Cancer:	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Heart Disease:	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Respiratory Disease <i>Asthma, emphysema, COPD, etc.</i>	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Gastrointestinal Disease <i>ulcer, acid reflux, colitis, etc.</i>	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Reproductive Health <i>dysfunction, fetal abnormality, etc.</i>	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Neurologic Disease <i>seizure disorder, stroke, etc.</i>	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Hepatitis: Type: _____	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Allergies:	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Psychiatric Disorder <i>depression, anxiety, bipolar, PTSD, etc.</i>	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Shoulder Injury: _____	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Knee Injury: _____	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Back Injury/Disease: Upper _____	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Arthritis: _____	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)
Other: _____	<input type="checkbox"/> Yes Yr _____	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	1. _____ (_____) 2. _____ (_____)

Additional Information or Medications:

Patient ID # _____

30. Which, if any, of the following surgeries have you had (please check one box per line).

Surgery	Never	Within the last 12 Months	Previous to the past 12 Months	Brief Description
Chest: Bypass _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Back: Upper _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Neck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Shoulder: Both _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Knee: Both _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Hip: R Leg: R Ankle: R Foot: R	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

31. We would like to ask about screening tests you have had in the past year, and whether results were normal or required follow-up.

Screening Test	Within the past year	Normal	Abnormal	Brief Description
PSA: Prostate Specific Antigen	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Testicular	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
DRE: Digital Rectal Exam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
FOB: Fecal Occult Blood (blood in stool)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Colonoscopy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Pap Smear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Breast	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Mammogram	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Skin: biopsy or exam by physician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

Patient ID # _____

CURRENT ACTIVITY

32. On the average, over the last month, how many days each week did you get at least 30 minutes of exercise?

Exercise is physical activity that causes you to increase your heart rate, breathe harder, or sweat.

Average days per week _____

33. How many days per week did you exercise or take part in cardiovascular or aerobic activities that made you sweat and breathe hard for at least 30 minutes?

Examples: basketball, tennis, jogging, fast bicycling etc.

Average days per week _____

34. How many days per week did you exercise to strengthen or tone your muscles?

Examples: weightlifting, kettlebell training, core training, functional training, etc.

Average days per week _____

35. In a typical week, how many days do you take part in any physical activity long enough to work up at sweat.

Average days per week _____

36. I exercise for 30 minutes almost every day.

Strongly Disagree *Don't disagree or Agree* *Strongly Agree*
 1 2 3 4 5 6 7

37. Do you take any vitamins or supplements? No

Yes _____

38. Addition information you would like to convey or discuss during this visit?

**WHEN YOU HAVE COMPLETED THIS DOCUMENT
PLEASE SAVE, TO A SAFE PLACE,
WITH YOUR NAME AS PART OF THE FILE NAME**

Example: HEALTH HISTORY_ John Smith

Then send or print, and bring to your appointment along with your Patient Info Packet.

JOB DESCRIPTIONS I ANALYSIS

Firefighter Physical Ability Job Function Overview

Static Strength

Carry and raise ladders
Equipment Drag 3-1/2" hose uphill
Wear complete turnout gear and carry a ladder & hose
Carry injured people up stairs
Lift heavy objects off trapped people
Push a disabled auto out of traffic
Lift hose and pump can
Carry 5-gallon water bags, shovels, and backpack

Dynamic Strength

Pull hoses
Pull self and equipment over fences
Carry equipment in and out of buildings
Climb hillsides in "bunker clothes" in grass fires
Dive to rescue a drowning victim
Climb ladders with equipment, hoses and personal protective clothing and equipment

Stamina

Pull ceiling
Repeat fires, successive fires in 24-hour shifts
Salvage and cleanup, taking down walls
Climb stairs with equipment
Shift hose lines
Shovel in a grass fire
Pull a drowning victim to shore
Hold and operate the "rescue equipment e.g. jaws of life," especially in awkward positions

Extent Flexibility

Fire cleanup operations
Carry out an injured person
Lay hose lines
Cleanup
Crawl through attics
Extricate victim from a car or overturned tractor
Roof work
Remove victims from cars
Carry victims down winding stairs
Chop a hole in the roof
Climb hillside covered with brush

Gross Body Coordination

Climb a ladder through opening in a roof
Stand on pitched roof using a chain saw
Get out of a burning structure
Operate a charged hose line

Get through building's small places

Explosive Strength

Run up stairs with
Jump to avoid falling object
Kick door in
Run and carry ladders over objects
Remove person from burning building
Cut a hole in the roof
Advance charged hose line
Breach a wall

Trunk Strength

Lift hose
Perform cardiopulmonary resuscitation
Lift people on an EMS run
Pick up bodies
Overhaul and cleanup

Effort

Repeat fires over 24-hour work shift
Multiple tasks at a fire
Remove a person trapped in a vehicle
Make a rescue

Dynamic Flexibility

Pull ceiling
Chop through a wall
Extend ladders
Saw, kick down door
Cardiopulmonary-resuscitation
Shoveling in a brush fire
Sandbagging (in
Cutting up trees

Gross Body Equilibrium

Balance on pitched roof
Balance with backpack on an inclined
Make rescue from bridge or superstructure
Walk on a concrete beam
Balance on a ladder on roof
Carry a body down the ladder

Mobility

Move within a dark building
Climb stairs, ground ladders, aerial ladders
Climb over piles of fire debris
Flee falling objects
Walk fast for alarm
Forging streams or rivers
Crawl and search through smoke
Remove boxes and other debris
Moving among animals leaving fire

Arm-Hand Steadiness

Apply traction
Hold hose lines
Hold the hose line
Steady Ladder movements
Apply first aid methods e.g. administer IV, splinting

Manual Dexterity

Disassemble machinery
Repair chain saw
Operate hand tools
Assemble and connect equipment
Aerial extension
Aid car work
Tie knots on hose
Use a spanner wrench

Near Vision

Read instructions
Read chemical labels on containers
Read prescription bottles

Color Vision

Use color-coded safety equipment
Identify objects in a fire
Conduct search and rescue in dark building

Smell

Detect leaking chemicals
Smell material burning

Hearing Conversation-Noisy Environment

Localize sound in rescues
Avoid unseen hazards
instructions (verbal)
Radio instructions

Under adverse conditions -high ambient noise levels

Hearing Direction

Localize cries for help - Localize warning cries
Firefighter Physical Ability Job Function Overview

Speed of Limbs

Drive an emergency vehicle
Brake continuously during response
Pull rope to rescue person in the water
Block a punch
Swing an ax
Chopping and clearing brush

Finger Dexterity

Typing
Mechanical repairs
Find a pulse
Operate a throttle on a pump
Couple and uncouple hose

Depth Perception

Climb while balancing on a roof
Go up and down ladders, jumping onto roofs
Dive into a lake — victim rescue
Estimate hose distances
Estimate driving hazards

Far Vision

See end of the aerial ladder
Avoid electrical wires
See hazards in smoky buildings through mask

Night Vision

Drive at night, travel across irregular surfaces
Read addresses at night
Hear Conversation - Quiet Environment
General needs

Sound Discrimination

Instructions in a noisy environment
Radio instructions in a noisy environment
Instructions above the noise of the pump

JOB DESCRIPTIONS / ANALYSIS

Firefighter Environmental Conditions Overview

- Fifty to ninety percent of work time is spent outside a building and exposed to the sun, wind, rain, or snow.
- Firefighters must tolerate frequent extreme fluctuations of temperature. Environment outside building may be 5° to 400°F, but inside firefighters are doing heavy work in hot buildings (up to 1000°F) while wearing equipment which significantly impairs body cooling systems. Firefighters must work in environments that vary greatly from low to high humidity.
- Turnout equipment significantly impairs body-cooling mechanisms.
- There is the frequent possibility that firefighters may be working under wet and muddy conditions.
- Firefighters must frequently perform sustained work on slippery surfaces including rooftops.
- Firefighters frequently face the possibility of sustaining a severe injury (cuts, bruises, burns, strains, fractures, or amputations) on the job.
- Firefighters are frequently required to perform work from aerial ladders, scaffolding, roofs, or other elevations over 12 feet from the ground.
- Firefighters are frequently required to perform work in confined spaces or cramped body positions (e.g., attics, cars, under houses, closets).
- Firefighters are often required to work on or about moving machinery or equipment or in the vicinity of vehicles in motion (e.g., chain saws, fire trucks, cutting torches).
- Firefighters are often exposed to vibration when riding in fire trucks or operating chain saws.
- Firefighters are intermittently exposed to noise levels over 90-dba when riding fire trucks under emergency conditions and when fighting fires.
- Firefighters are frequently exposed to the possibility of burn injuries caused by heat, fire, chemicals or electricity.
- Firefighters may have occasional exposure to non-ionizing radiation (ships or rooftops).
- Firefighters have intermittent exposure to dust that may contain carcinogens (such as asbestos or benzopyrene) during clean-up operations.
- Firefighters have frequent potential exposure to respiratory irritants and sensitizers, especially during clean-up operations (irritant chemicals, smoke, isocyanates, etc.).
- Firefighters have frequent potential exposure to toxic substances (such as hydrogen cyanide and hydrochloric acid from plastic's fires, carbon monoxide, nitrogen dioxide, or organic solvents).
- Firefighters may occasionally have skin contact with oil and grease, especially during maintenance and repair of firefighting equipment.
- Firefighters may encounter noxious odors (burning flesh, chemical spills).
- Firefighters may work with or near substances that may explode.
- Firefighters occasionally have contact with un-insulated or unshielded electrical equipment.
- Firefighters may encounter radiation hazards (isotopes in hospitals, laboratories).
- Firefighters riding Aid cars may frequently have exposure to infectious agents (such as hepatitis B virus). There is the possibility of exposure to persons infected with the AIDS virus.
- Firefighters are often exposed to the following stressors:
 - Tight time frames and critical deadlines in life-threatening emergency situations
 - Acutely injured people and their families and friends
 - Crucial decisions in emergency situations that involve public safety and safety of fellow firefighters and self
 - Tasks requiring long periods of intense concentration
 - Unpleasant situations (e.g. "burned people or animals)
 - 24-hour shifts, during which sleep is sporadic or non-existent
 - The job of firefighter is complex and extremely variable from shift to shift.
- Firefighters are required to use positive pressure breathing apparatus with 1.5 inches of water column resistance to exhalation at 40 liters per minute.