



NVFC POSITION ON FIREFIGHTER MEDICAL ASSESSMENTS

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The National Volunteer Fire Council (NVFC) supports annual medical assessments for all firefighters. Firefighter health and safety is essential to the protection of citizens and property in our communities. Firefighting is a physically demanding occupation. Health-related injuries including heart attack, stroke, and cancer are the leading causes of firefighter duty-related death.

It is important that firefighters have an annual medical assessment, but many do not. In some cases firefighters may not have health insurance or even a personal physician to conduct or consult with regarding the results of the assessment. Additionally, it can be cost-prohibitive or administratively challenging for many departments to implement an assessment program. The following are options for departments to consider in developing a firefighter medical assessment program.

PREVENTATIVE CARE CHECK

Preventive care/well check assessments are generally available at no charge through employer-provided health insurance, Medicare, or Medicaid. Individual coverage purchased through health insurance exchanges typically includes a free or low-cost annual preventive care/well visit. It is important to note that this type of assessment is not designed to assess the ability of a person to perform the job duties of a firefighter.

All Marketplace health plans and many other plans must cover the following list of **preventive services** without charging you a copayment or coinsurance. This is true even if you haven't met your yearly deductible.

***IMPORTANT:** These services are free only when delivered by a doctor or other provider in your plan's network.*

1. Abdominal aortic aneurysm one-time screening for men of specified ages who have never smoked
2. Alcohol misuse screening and counseling
3. Aspirin use to prevent cardiovascular disease for men and women of certain ages
4. Blood pressure screening
5. Cholesterol screening for adults of certain ages or at higher risk
6. Colorectal cancer screening for adults over 50
7. Depression screening
8. Diabetes (Type 2) screening for adults with high blood pressure
9. Diet counseling for adults at higher risk for chronic disease

10. Hepatitis B screening for people at high risk, including people from countries with 2% or more Hepatitis B prevalence, and U.S.-born people not vaccinated as infants and with at least one parent born in a region with 8% or more Hepatitis B prevalence.
11. Hepatitis C screening for adults at increased risk, and one time for everyone born 1945–1965
12. HIV screening for everyone ages 15 to 65, and other ages at increased risk
13. Immunization vaccines for adults—doses, recommended ages, and recommended populations vary:
 - Diphtheria
 - Hepatitis A
 - Hepatitis B
 - Herpes Zoster
 - Human Papillomavirus (HPV)
 - Influenza (flu shot)
 - Measles
 - Meningococcal
 - Mumps
 - Pertussis
 - Pneumococcal
 - Rubella
 - Tetanus
 - Varicella (chickenpox)
14. Lung cancer screening for adults 55–80 at high risk for lung cancer because they’re heavy smokers or have quit in the past 15 years
15. Obesity screening and counseling
16. Sexually transmitted infection prevention counseling for adults at higher risk
17. Syphilis screening for adults at higher risk
18. Tobacco use screening for all adults and cessation interventions for tobacco users

WELLNESS EXAM FREQUENTLY ASKED QUESTIONS

The following is from the *Primary Care Medical Center* web site (www.primarycareeverywhere.com):

What is a wellness exam? An annual exam is a comprehensive preventative exam with your primary care provider for the sole purpose of preventative care. An annual exam does not include discussion of new problems or detailed review of chronic conditions. Annual exams may also be called routine check-ups, yearly exams, an annual pap, or preventive visit.

Will my insurance pay for a wellness exam? Most health plans will pay for one wellness or preventative exam per year. Your insurance provider may consider this to be once per calendar year or one year and one day since the date of your last wellness exam. If you have had any other visit billed as preventative during this time period your plan is likely to deny your wellness exam. This would include a well-woman exam or annual pap smear. Your plan may not pay for all testing and/or labs ordered during your wellness exam. If your provider has a concern and orders diagnostic testing and/or labs during your exam you may be held financially responsible. It is the patient’s responsibility to check with their insurance provider to see what is covered under their wellness benefit and to ensure they are eligible prior to scheduling their annual wellness exam.

What is the difference between a wellness exam and a problem visit? Preventative visits and tests ordered by your provider can help you stay healthy and catch problems early. Diagnostic visits and testing are used to diagnose a current health problem. Diagnostic tests are ordered by your provider when you have symptoms and they want to find out why. For example, if your provider wants you to have a test because of your age or family history, that's preventive care, but if it's because you're having symptoms of a problem, that's diagnostic care.

Can I have a wellness exam and problem visit at the same time? No. Billing issues prevent your provider from doing a wellness exam and a diagnostic visit on the same day. This is for your protection as your insurance carrier may deny one of these visits, forwarding the financial responsibility to you. This does not prevent you from asking a simple question or requesting refills of any maintenance medications; however, we ask that you please schedule a separate appointment, on a different day, if you have any new concerns or other ongoing health problems that need more attention. Should your wellness exam turn into a diagnostic or problem-oriented visit, we will bill accordingly.

DOT PHYSICALS

A Department of Transportation (DOT) medical assessment is designed to confirm that someone is healthy enough to safely perform the job of commercial motor vehicle (CMV) driver. A DOT assessment must be conducted by a licensed medical examiner listed on the Federal Motor Carrier Safety Administration (FMCSA) National Registry. It is important to note that this type of assessment is not designed to assess the ability of a person to perform the job duties of a firefighter.

The term "medical examiner" includes, but is not limited to, doctors of medicine (MD), doctors of osteopathy (DO), physician assistants (PA), advanced practice nurses (APN), and doctors of chiropractic (DC). A DOT physical exam is valid for up to 24 months. The medical examiner may also issue a medical examiner's certificate for less than 24 months when it is desirable to monitor a condition, such as high blood pressure.

The FMCSA has very strict guidelines on what the DOT physical must include. To help simplify the process, here is a brief overview of what you should bring with you to the exam, and what to expect once you get there.

Bring the following items with you to the DOT visit:

- Your last medical exam card, if applicable.
- A list of your current medications with dosages.
- Glasses if you have a prescription.
- Yearly clearance letter from a cardiologist for heart conditions or from your personal physician for other chronic conditions may be required before clearance.

Having these items on hand will greatly speed up the approval process.

It's also recommended that you fill out the health history section of the medical examination report before coming to the office, even though the examiner may ask you more questions about it after you arrive.

The exam itself will cover the following.

1. Vision

Drivers are required to have at least 20/40 acuity in each eye with or without correction. They are also required to have at least 70" peripheral in the horizontal meridian, measured in each eye.

2. Hearing

Drivers must be able to perceive what is known as a “forced whisper” at a distance of five feet or less with or without a hearing aid. This standard equates to an average hearing loss in the better ear of less than 40 db.

3. Blood pressure/pulse rate

The medical examiner will check your blood pressure and pulse to look for high blood pressure and irregular heartbeats.

4. Urinalysis

A urinalysis is required. The test looks for indications of underlying medical conditions such as diabetes.

5. Physical examination

The physical exam will cover a dozen different categories.

- General appearance
- Eyes (cataracts, glaucoma, macular degeneration, etc.)
- Ears (scarring of tympanic membrane, perforated ear drums, etc.)
- Mouth and throat (to look for problems breathing or swallowing.)
- Heart (murmurs, extra sounds, pacemaker, etc.)
- Lungs and chest, not including breast examination (abnormal breathing, impaired respiratory functions, cyanosis, etc.)
- Abdomen and viscera (enlarged liver, viscera, muscle weakness)
- Vascular (abnormal pulse, carotid, varicose veins)
- Genito-urinary (hernias)
- Extremities—limb impaired
- Spine and other musculoskeletal (previous surgery, limitation of motion, tenderness, etc.)
- Neurological (impaired equilibrium, coordination, or speech pattern; ataxia; asymmetric deep tendon reflexes)

It is up to medical examiners to determine if a candidate will meet all the requirements and to mark the report to the best of their knowledge.

DEPARTMENT-SPECIFIC ASSESSMENT

Many fire departments develop a medical assessment for their candidates and members that is based on the specific job duties and expectations of the agency. Chief Jeff Cash with the Cherryville (NC) Fire Department explains the medical examinations that firefighters in his department receive:

“Our firefighters’ health and safety come first. To ensure that the men and women who serve our community are physically able to perform their duties, we have implemented a rigorous medical screening program. Our program is medically and academically verifiable to meet the OSHA regulations 1910.156, 1910.134, and 1910.120. It also takes into consideration our firefighters’ job descriptions, including each individual’s job responsibilities. The focus of the program is the electrocardiogram and any abnormalities that occur while the heart is under stress of exercise or physical work.

This type of program is attractive because it is affordable and provides me, as chief of the department, with the documentation that I need to ensure that the firefighters who undergo the screenings are duty

ready. We contract with a medical services provider who comes to the fire station annually at a time that we schedule to conduct medical examinations for all of our firefighters. Because of the convenience, we are able to have all of our firefighters examined in one day.

Another outstanding feature is that I can tailor or customize the type of screening that my firefighters receive. I typically add two areas to our screenings, which is of great benefit to our firefighters. I add the Prostate Specific Antigen (PSA) (blood work results) and the Hepatitis B Antibody Screening (Titer test). Both of these screenings are added at a very minimal cost to our organization.”

SAMPLE DEPARTMENT SPECIFIC EXAM

Medical exams for firefighters shall be scheduled bi-annually for those under age 40, and annually for those age 40 and over. Members assigned to the hazardous materials team shall be scheduled annually regardless of age. The department will appoint a physician or physicians to conduct fire department medical exams. The fire department (or fire department insurance company) shall process the billing directly. The individual firefighter (or firefighter insurance company) will not be billed.

The physical exam should include: height, weight, blood pressure, heart rate, percentage body fat, near and far vision, skin, HEENT, neck, lymph glands, thyroid, lungs, heart, genitalia, rectum, extremities, distal pulses, spine, neurological exam, and emotional status. Additional specific laboratory and diagnostic/screening tests will be conducted.

The exam should also focus on occupational risk factors: heart disease, cancers secondary to toxic exposures, muscular/skeletal injuries, infectious diseases, and current medical problems. Any recent exposure to smoke, toxic chemicals, infectious diseases, etc., should be documented and followed up with appropriate tests. Preventative health care should be stressed with emphasis on physical fitness, weight control, etc.

Review immunization status as part of the examination (this record should be part of the employee’s medical file). Baseline immunization and/or boosters will be arranged as necessary. Emphasize to the employee that it is their responsibility to update their vaccination record with the department physician should they receive vaccinations somewhere other than the department physician’s office.

NFPA 1582-COMPLIANT ASSESSMENT

The NFPA 1582 standard presents descriptive requirements for a comprehensive occupational medical program for fire departments. Provisions are applicable to fire department candidates and members whose job descriptions are outlined in NFPA 1001, NFPA 1002, NFPA 1003, NFPA 1006, NFPA 1021, and NFPA 1051.

For more information, visit www.nvfc.org or www.nfpa.org.