

## **FIREFIGHTER ANNUAL / BI-ANNUAL MEDICAL EXAMS**

Medical exams for firefighters shall be scheduled bi-annually for those under age 40, and annually for those over age 40. 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, emotional status. Specific laboratory and diagnostic/screening tests are listed below.

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. Refer to addendum for information on recommended immunizations. Emphasize to the employee it is their responsibility to update their vaccination record with the Department physician should they receive vaccinations somewhere other than the Department's physician office.

## **LABORATORY TESTS:**

Glucose	T4
BUN	TSH
Creatine	Hepatitis B surface anti-body every four years if immunized.
Calcium	Hepatitis C anti-body one time to establish baseline; then every other year
Phosphorus	Urinalysis
Uric acid	Stool for blood x 3
SGOT/AST	Pap smear
SGPT/ALT	TB test (IPPD)
GGT	Chest X-ray if a person is symptomatic or if there is a new positive PPD.
Total protein albumin	
Alkaline phosphatase	
Bilirubin	
LDH	
HDL/LDL cholesterols and calculated ratios	
CBC with differential	

## **GENERAL TESTS:**

Audio screening: At each physical or after noise exposure. Full audiogram (soundproof booth) if symptomatic.

Spirometry: At each physical or after inhalation exposure. Full pulmonary function test if new or unexplained abnormality.

CXR: Baseline, symptomatic or positive PPD. Otherwise every two to four years.

Endometrial BX: Symptomatic.

## **AFTER AGE 35 ADDITIONAL TESTS ARE REQUIRED:**

Bone density: Baseline for menopausal women fire fighters.

Mammogram - females: (At age 35, annually at age 39.)

ETT (Exercise Treadmill Testing) (at age 40): (repeat every 5 years) Repeated annually if symptomatic or unsatisfactory performance per Bruce Protocol.

Rectal exam (at age 40) - male and female: (repeat annually)

PSA: (at age 50 and then annually.) Total/free PSA if the total PSA is between four and 10.

Flex Sig: (at age 50, sooner if family history is present) Colonoscopy may be substituted for the Flex Sig.

## **MINIMUM FOR PHYSICIAN MEDICAL REPORT SUMMARY:**

Name

Age

Date of examination

Name of Health Care Professional doing the exam

Physical examination

Past history

Family history

Current condition

Current medications

High-risk behaviors -- cigarettes/alcohol/weight/caffeine/OTC drugs/recreational drugs/etc.

Interval history -- smoke inhalation/work related injuries/exposures

Review of systems

Problems identified and plan of action for each problem.

Allergies

Immunization status

Health maintenance summary (dates of last treadmill, EKG, CXR, Hepatitis B, etc.)

Results of tests (laboratory, x-ray, etc.)