



A Physician's Evaluation of the NFPA 1582 Standard Part 1

As occupational medicine physicians, we get a lot of questions from Fire Departments about the 1582 Standard. In this 3 part series, we will take a look some of the most common questions, including how to implement the 1582 Standard, what the tests actually mean, and how to get the most bang for your buck.

One of the most common questions we get from Fire Departments who have not yet started a yearly physical evaluation is where to start. When we first start working with new clients, we begin by stressing that the main goal of the 1582 Standard is to protect your Firefighters. Unlike some of the common misconceptions, this should, at least in our minds, in no way be viewed as a process that is punitive or meant to weed people out. In contrast, a good vendor should go out of their way to keep your firefighters on the job. So how do you go about choosing the right vendor? Here are some good questions to get you started.

Who is in charge of the program?

Chapter 4.1.2 states that *"The fire department shall have an officially designated physician who shall be responsible for guiding, directing, and advising the member with regard to their health, fitness, and suitability for duty as required by NFPA 1500, Standard on Fire Department Occupational Safety and Health Program."*

Ideally, any company that provides these services to your fire department should have a physician that is in charge of the entire process. And they should be intimately familiar with the NFPA 1582 Standard. And as your Fire Department Physician, they should be there for you year round, not just on the 1 or 2 days that you have the physicals done. And that same doctor should be in charge year after year so there is consistency from exam to exam. So if you have a question 6 months from now about a medication or have a firefighter with a new medical diagnosis, it's as easy as picking up the phone and calling your Fire Department physician.

How is this beneficial? Sometimes a potential medical problem can be taken care of as easily as placing a phone call to that firefighter's primary care physician. All too often, we see firefighters being disqualified and sent back to their own doctor to follow up and get medically cleared, a time consuming and expensive process. We were at a fire department in Georgia this past April when we detected a firefighter with an aortic bruit. Instead of disqualifying him, we were able to send him directly over for an ultrasound and have him cleared the same day. This saved the department not only the cost of referring him to see a specialist, but it kept him on the job and working.

I don't know if I can get my firefighters on board with this kind of program, can you help?

As mentioned earlier, any medical surveillance program should be thought of as something that is there to protect and help your firefighters. Remember, the evaluations are not meant to be punitive, but rather are designed to help the firefighter identify physical fitness deficiencies with the ultimate goal being personal fitness improvement.

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“The intent with incumbents with a medical condition is to rehabilitate them and only restrict them from performing those essential job tasks where their injury or illness would affect the safety of themselves or others on their crew.”
(NFPA 1582, 2007 1582-1)

We always get questions about medical conditions in current firefighters that may be detected during the course of the evaluation. In the course of our medical evaluations we often detect conditions that may pose a medical risk to the firefighter. Many times it is as simple as a firefighter being on a medication that is not acceptable per NFPA standards. An example of this is some of the blood pressure medicines, which can cause dehydration or not allow adequate heart rate response to exercise. The solution is as simple as a medication change to obtain clearance.

If a more serious condition is detected the goal should be to have this condition evaluated further in order to determine if a risk exists and if so how to treat and manage the risk and return the firefighter safely to their duties. In these cases, we work closely with the primary care doctors or specialists to obtain clearance and return them to work. Once your firefighters realize that we are there to help them, they usually get behind the program fairly quickly.

Without that support, it can be much more difficult. We spoke to a Georgia Chief earlier this year who shared this story of his NFPA Physical experience. He went through a drawn out process of securing budget money, selecting a vendor and scheduling the physicals, but never quite got around to discussing this with his firefighters. On the first day that the physicals were scheduled, the firefighters took the engines and parked them by the courthouse to protest the exams. In the ensuing administrative firestorm it came to light that the firefighters believed that the NFPA Standard and the medical exam were going to be used to weed out the less physically fit firefighters. The end result that year was a lot of wasted effort and wasted resources.

What is the best way to start a program?

The best program is one that incorporates all the recommendations of the 1582 Standard. We also realize that this type of exam may not be in everyone’s budget. One way to ease into a medical surveillance program is to start out with a wellness program for your firefighters. This could be as simple as starting with a health fair: performing vital exams, body fat, blood testing for cholesterol and fasting blood sugar and health counseling. There may or may not be a physical exam added on that first year. Once the firefighters realize the benefits of this type of exam, you can gradually add the rest of the program. There may also be incentives from your local insurance company to perform wellness exams. While this varies from department to department, and state to state, we can work with you to see if your program can qualify for a discount.

What do you do with all this personal information you collect?

We are often asked about what we are going to do with the information that we gather. The medical data that we collect is used only for review with the firefighter. As a medical practice we follow HIPAA privacy standards. We only reveal medical information when absolutely required if there is a significant safety issue. This protects the firefighter from privacy breaches and protects the department from having access to information that is privileged.

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Does the vendor really matter? These types of exams are all the same, right?

This is a very common question we get asked. The short answer is yes, the vendor matters. Any vendor performing these types of exams really need to know the NFPA Standard and be able to competently interpret and execute them.

There are several key questions to ask as you seek a vendor. The first is experience. How long has your vendor been performing NFPA physicals? Who is in charge of the program?

The second is equipment. I have seen firefighters lose confidence in certain vendors because of antiquated equipment. Firefighters notice equipment that is old or not well maintained. And coming from men and women who take such pride in their own equipment, that becomes a problem. The perception of poor equipment quickly becomes a reality of lack of confidence in results. If the NFPA Standard calls for certain equipment, such as with strength testing, make sure that your vendor has the correct equipment.

Staff is also critical. Your vendor should be able to demonstrate that their staff is trained to the highest level. Some of the key certifications include NIOSH training for pulmonary function testing and CAOHC certification for audio testing.

However, the most important piece of your vendors program is the doctor. The doctor who reviews the testing and makes decisions regarding clearances should have working knowledge of NFPA standards. You should ask your vendor if they use the same doctor year after year, or will it be someone new every year. Have they read and are they familiar with interpreting the 1582 Standard? The doctor should also be able to relate to the firefighters in a manner that earns their trust and respect. Make sure that you know and are comfortable with the doctor because you are depending on him to make informed and correct decisions that can influence careers and impact your departments' safety and health.

Starting with these few suggestions you will be well on your way to ensuring the institution of a successful NFPA physical program. Stay tuned for Part II when we discuss the testing equipment, test day, how to handle clearance issues, and making the most of your results.

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SiteMed, is a physician owned occupational medicine company specializing in on-site firefighter exams. Drs. Fernandez and Walker have over 19 years combined experience in the occupational medicine industry. They welcome comments or questions at 1-888-837-4819 and through e-mail: gfernandez@sitemed.net and drlancewalker@sitemed.net.

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