

RECOMMENDED MEDICAL STANDARDS

The attached is a list of medical conditions that may affect your application to join Cambridgeshire Fire and Rescue Service in the role of Wholetime or On-call Firefighter.

The list is for guidance only and should you have any medical condition mentioned further information may be required by our Occupational Health Team before we can progress your application.

Should you have any queries about whether a medical condition that you have may affect your application please contact our Occupational Health Team on 01480 309882.

If your application is successful and you are invited to the medical appointment it would be beneficial to bring with you any reports / information you may have from your GP / consultant.





Recommended Medical Standards

| Illness/injury/di | 60360 | Firefighter Firefighter applicant | Notes |
|---|---|--|---|
| iiiiess/iiijuiy/ui | 56926 | | NOLES |
| External ear | | | |
| Chronic otitis externa - | Mild, occasional otitis externa | Likely to be suitable | |
| - | More severe, recurrent otitis externa | Likely to require further information, investigation and assessment | Impedes function, balance and use of communications |
| Atresia or stenosis of | | Likely to require further information, investigation and assessment – unless excluded on audiometric criteria | equipment. |
| Tympanic membrane Perforation | e and middle ear | | |
| - Healed | | Likely to be suitable | |
| - Chronic | | Likely to require further information, investigation and assessment | |
| Ventilation tubes (gro | mmets) | Likely to require further information, investigation and assessment | |
| Successful myringopla Chronic otitis media | asty/ tympanoplasty | Likely to be suitable | |
| - | Healed | Likely to be suitable | |
| - | Inactive | Likely to require further information, investigation and assessment | |
| - | Active | Likely to require further information, investigation and assessment | |
| Chronic serous otitis r | nedia | Likely to require further information, investigation and assessment | |
| Post-mastoid surgery | | Likely to require further information, investigation and assessment, unless audiometric standards are not met. If active chronic disease – unlikely to be suitable | |
| Otosclerosis | | Likely to require further information, investigation and assessment | |
| Facial palsy with loss | of function | Likely to require further information, investigation and assessment | |

| Illness/injury/disease | Firefighter applicant | Notes |
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| Inner ear | | |
| Meniere's disease | Unlikely to be suitable | |
| Benign positional paroxysmal vertigo | Likely to require further information, investigation and assessment | |
| Hearing Both ears above standard | Likely to be suitable | Hearing standard - Hearing loss of more than a total of 84 dB over the 0.5 |
| Both ears below standard | Unlikely to be suitable | - 1.2 KHz range or more than a total o |
| Hearing in one ear above standard, and hearing in one ear below standard | Likely to require further information, investigation and assessment – applicant must be assessed carefully | 123 dB over the 3, 4 and 6 KHz range For borderline cases or when hearing in one ear is above the standard and hearing in the other ear below standard, or when hearing aids are fitted, consideration should be given to a practical test of hearing to assess functional ability, for example speech and/or phoneme comprehension. |
| Applicants with hearing aids that bring their hearing above the minimum standard | Likely to require further information, investigation and assessment | |
| Nose | | |
| Allergic vasomotor rhinitis | Likely to be suitable | |
| Recurrent nasal polyps Persistent chronic sinusitis | Likely to be suitable but If there is a significant history then likely to require further information, investigation and assessment Likely to be suitable but If severe, likely to require further information, investigation and assessment | |
| Throat | | |
| Tracheostomy | Unlikely to be suitable | Not compatible with safety near or in water |
| Chronic laryngitis | Likely to require further information, investigation and assessment | |
| Other laryngeal disease | Likely to require further information, investigation and assessment | |
| Severe speech impediment | Likely to require further information, investigation and assessment but unlikely to be suitable if the applicant cannot communicate effectively | Unable effectively to perform vital task of radio and voice communication |
| Balance disorders and vertigo | Likely to require further information, investigation and assessment | Usually a symptom of another condition that may make the applicant unsuitable. |

EAR, NOSE and THROAT DISORDERS CONTINUED

CARDIOVASCULAR SYSTEM

Some cardiovascular disorders can impair fitness by limiting working capacity or by risk of sudden incapacity. Therefore applicants with marked cardiovascular disorders will not be able safely and efficiently to perform the operational Firefighter role. If there is any doubt about fitness an assessment by a Cardiologist should be sought.

| | nent by a Cardiologist should be s | Notes |
|---|--|---|
| Illness/injury/disease | Firefighter applicant | Notes |
| Coronary artery disease - Symptomatic | Unlikely to be suitable | High risk of the operational role |
| - Asymptomatic | Likely to require further information, investigation and assessment | precipitating symptoms (chest pain) or a coronary event. |
| Congenital heart disease - Corrected | Likely to require further information, investigation and assessment | |
| - Uncorrected | Unlikely to be suitable | Reassess after corrective surgery, unlikely to be suitable if loss of cardiovascular function |
| Cardiac murmurs | Benign – likely to be suitable, else likely to require further information, investigation and assessment | Requirement to meet normal cardiovascular function both at rest and exercise |
| Acquired valvular disease | Likely to require further information, investigation and assessment. Unless benign unlikely to be suitable. | May compromise exercise tolerance |
| Disturbance of rhythm | Likely to require further information, investigation and assessment | May compromise exercise tolerance. Operational role may dangerously exacerbate the arrhythmia |
| Cardiomyopathies | Unlikely to be suitable | Operational role may precipitate a cardiac event. There may be a decrease in exercise tolerance. |
| Uncontrolled hypertension | Likely to require further information, investigation and assessment | May be referred for monitoring and treatment to own GP and assessed again when condition investigated and controlled. |
| Hypertension with end organ damage or unacceptable side-effects of treatment | Unlikely to be suitable | Ŭ |
| Controlled hypertension with no side- effects of medication | Likely to be suitable | Subject to (annual) medical examination. |
| Established peripheral vascular disease affecting the lower limbs - Symptomatic | Unlikely to be suitable | Condition is not compatible with exercise requirements of operational Firefighter. |
| - Asymptomatic | Likely to require further information, investigation and assessment | operational riteligner. |
| Raynaud's phenomenon | Likely to require further information, investigation and assessment | Cold may trigger painful attacks. May affect dexterity of hands in operating equipment. |
| Varicose veins Severe varicose veins | Likely to require further information, investigation and assessment Likely to be unsuitable if symptomatic or sufficiently severe to restrict capacity to perform operational duties. | Condition will inevitably deteriorate substantially with prolonged standing and sitting. |

| RESPIRATORY SYSTEM Conditions adversely affecting respiratory fitness will limit working ability most commonly from the | | | |
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| sensation of breathlessness | | | |
| Illness/injury/disease | Firefighter applicant | Notes | |
| Any persistent respiratory disease impairing exercise capacity | Unlikely to be suitable | Assessment should be made on a case by case basis. | |
| Asthma | Likely to require further information, investigation and assessment | | |
| Treated hay fever without history of wheezing | Likely to be suitable | | |
| Solitary spontaneous pneumothorax | Likely to require further information, investigation and assessment | | |
| Recurrent pneumothoraces | Likely to require further information, investigation and assessment | Reassess after treatment aimed at preventing further recurrences | |
| Chronic Obstructive Pulmonary Disease (COPD) affecting exercise capacity | Unlikely to be suitable | The loss of normal respiratory function will limit exercise capacity even in the absence of superadded chest infections. | |
| Tuberculosis - Active | Unlikely to be suitable | Unacceptable risk of transmission | |
| - History of a previous episode of TB | Likely to require further information, investigation and assessment | during training period | |
| Successfully treated Tuberculosis | Likely to require further information, investigation and assessment | | |
| Sarcoid | Likely to require further information, investigation and assessment | | |

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| ALIMENTARY SYSTEM | | | |
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| Illness/injury/disease | Firefighter applicant | Notes | |
| Peptic ulceration or dyspepsia | Likely to require further information, investigation and assessment | Chronic pain may interfere with role. | |
| Irritable bowel syndrome - Mild | Likely to be suitable | | |
| | Likely to require further information, investigation and assessment | Applicant under investigation; require close proximity to the toilet; require codeine for control; or if the IBS has a significant association with stress | |
| Inflammatory bowel disease (Crohn's or ulcerative colitis) | Unlikely to be suitable, or if successfully treated UC, likely to require further information, investigation and assessment | Chronic conditions with unpredictable course and relatively high surgical intervention rates. | |
| Dietary conditions - Coeliac disease | Likely to require further information, investigation and assessment | Many sufferers will have minimal symptoms with good dietary control and will be suitable. | |
| - Lactose intolerance | Likely to be suitable | | |
| - Food allergy | Likely to be suitable | | |
| Hernia | Likely to be suitable assuming > 3 months after successful surgical treatment Untreated hernia refer to GP/defer till after surgery | Training and operational role will be compromised due to local weakness in abdominal musculature. Hernia is likely to increase in severity. | |
| Anal and perianal conditions | Likely to be suitable | increase in sevency. | |
| - Active chronic conditions | Likely to require further information, investigation and assessment | Persistent perianal sepsis will cause significant absence. | |
| Chronic liver disease | Unlikely to be suitable | | |
| Biliary disease - Gallstone disease | Likely to require further information, investigation and assessment | | |
| - Chronic biliary tree | Unlikely to be suitable | | |
| Pancreatitis - Single episode | Likely to require further information, investigation and assessment | | |
| - Chronic | Unlikely to be suitable | | |
| Stoma with good nutritional state and no complications | Likely to be suitable | Consider need for provision of special padding on uniform belts | |

| hypertension and renal failure are the major complications | | | |
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| Illness/injury/disease | Firefighter applicant | Notes | |
| Haematuria/ Proteinurea | Likely to require further information, investigation and assessment | GP to investigate in the first instance | |
| Nephritis | History of nephritis and ongoing impairment unlikely to be suitable. Otherwise likely to require further information, investigation and assessment | | |
| Recurrent urinary tract infections | Likely to require further information, investigation and assessment | | |
| Persistent major urethral abnormality | Unlikely to be suitable | Treatment is likely to be protracted | |
| Minor urethral abnormality | Likely to require further information, investigation and assessment | | |
| Urinary incontinence | Likely to require further information, investigation and assessment | | |
| Benign scrotal swellings | Likely to require further information, investigation and assessment | | |
| Testicular tumours | See miscellaneous conditions | | |
| Major congenital renal abnormality | Likely to require further information, investigation and assessment | | |
| - normal renal function | Likely to be suitable | Normal renal function necessary to allow regular attendance and performance. | |
| Polycystic kidney disease | Unlikely to be suitable | Progression to end stage renal failure. | |
| Unilateral kidney (with remaining kidney functioning well) | Likely to be suitable | | |
| Established renal stone disease | Likely to require further information, investigation and assessment | | |
| Irreversible renal failure | Unlikely to be suitable | Associated fatigue, anaemia and therapy effects not compatible with operational Firefighter role. | |
| Renal dialysis (Haemo/CAPD) | Unlikely to be suitable | Associated fatigue, anaemia and therapy effects not compatible with operational Firefighter role. | |

ENDOCRINE SYSTEM A defective endocrine system is unable to properly adjust and correlate the activities of the various body systems and is not able to make them appropriate for the changing demands of the external and internal environment.

| Illness/injury/disease | Firefighter applicant | Notes |
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| Insulin-dependent diabetes mellitus (type 1 or type 2) | Likely to be suitable. However, further information, and assessment will be needed | Further information and assessment will be needed in order to assess each case on its merits |
| Non-insulin dependant diabetes mellitus | Likely to require further information, investigation and assessment | The complications of diabetes can degrade the functional capacity of an operational Firefighter. Recent hypoglycaemic episode warrants deferral. |
| Thyroid disease | Likely to be suitable – recruit must be undergoing treatment of have undergone successful treatment. If doubt exists, likely to require further information, investigation and assessment | |
| Pituitary disease | Likely to require further information, investigation and assessment | Can be secondary to other conditions. If these other factors do not exclude a recruit then hormonal therapy treatment can allow individuals to return to normal function. |

SKIN CONDITIONS

Skin disease can be as much if not more disabling than disease of other organ systems. Physical disability from skin disease derives from decreased mobility of the abnormal stratum corneum or an abnormally stiff dermis. Special concern is raised with extensive hand and foot involvement and the resultant effect on dexterity and mobility respectively.

| Testitant check on deatenry and mobility respectively. | | | |
|---|---|---|--|
| Illness/injury/disease | Firefighter applicant | Notes | |
| Extensive skin disease with chronic discomfort or disruption of dermal integrity. | Likely to require further information, investigation and assessment | Exposure to irritants or inhospitable environments will result in frequent exacerbations. | |
| Widespread eczema/ dermatitis | Likely to require further information, investigation and assessment | | |
| Mild eczema | Likely to be suitable | | |
| Severe psoriasis | Likely to require further information, investigation and assessment | | |
| Mild psoriasis | Likely to be suitable | | |
| Malignant Melanoma, following excision | Likely to require further information, investigation and assessment | | |

| ORTHOPAEDIC and SOFT TISSUE CONDITIONS | | | |
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| Dexterity, mobility and good spinal function are essential physical requirements for an individual to undertake the role of an operational Firefighter. | | | |
| Illness/injury/disease | Firefighter applicant | Notes | |
| General Any previous injury (fracture, soft tissue injury) or congenital deformity, causing long term reduction in function of a joint or limb | Likely to require further information, investigation and assessment | | |
| Implants Major joint replacement (total hip or knee) | Unlikely to be suitable | Unacceptable risk to the prosthesis from exercise requirements. Severe implications of prosthetic failure in an active adult. Assess on case by case basis | |
| Internally fixed fractures ('metal work') | Likely to require further information, investigation and assessment | Risk of re-fracture at site of metal work when returning to more energetic activities. | |
| Endoprosthetic replacements | Unlikely to be suitable | Used in osteosarcoma surgery. Unacceptable risk of prosthesis failure or fracture around prosthesis. Assess on case by case basis | |
| Knee disorders | | | |
| Medial meniscectomy | Likely to require further information, investigation and assessment | | |
| Lateral meniscectomy | Likely to require further information, investigation and assessment | Risk of early osteoarthritis with associated disability. | |
| Ligamentous injury requiring surgery or causing instability | Likely to require further information, investigation and assessment | Risk of re-injury in operational role. | |
| Osteochondritis dissecans | Unlikely to be suitable | • Risk of severe knee joint damage. | |
| Foot disorders | Likely to require further information, investigation and assessment | | |
| Amputations (total or partial) of upper or lower limb | Unlikely to require further information, investigation and assessment | | |
| Dislocation and instability of major joints | | | |
| Single episode of dislocation with no recurrence | Likely to be suitable | | |
| Recurrent dislocation or surgical treatment required | Unlikely to be suitable - rarely, if excellent surgical results from stabilisation further information, investigation and assessment could be sought. | Risk of recurrent dislocation whilst engaged in operational activities (e.g. restraining). | |
| Cervical spine | | | |
| Resolved whiplash | Likely to be suitable | May be exacerbated by physical activities and driving. | |
| Cervical discectomy (+/- fusion) | Unlikely to be suitable | Cervical discectomy will often not improve neck pain. Also there may be persisting neurological disability in the upper limbs. | |

| Dexterity, mobility and good spinal function are essential physical requirements for an individual to undertake the role of an operational Firefighter. | | | |
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| Illness/injury/disease | Firefighter applicant | Notes | |
| Lumbar spine | | | |
| Single level resolved lumbar disc disease +/- discectomy | Likely to require further information, investigation and assessment | Low back pain +/- lower limb symptoms can be disabling. Exacerbated by driving, standing for long periods, other physical tasks. | |
| Multiple level lumbar disease | Unlikely to be suitable | | |
| Recurrent low back pain/ persistent sciatica | Likely to require further information, investigation and assessment | | |
| Arthritis and related conditions | | | |
| Rheumatoid arthritis | Unlikely to be suitable | Progressive joint damage with degrading of operational capacity. | |
| Controlled gout without complications | Likely to be suitable | | |
| Ankylosing Spondylitis with chronic pain | Unlikely to be suitable | • Assessment should be made on a case by case basis. | |
| Mild Ankylosing Spondylitis with preserved function | Likely to require further information, investigation and | | |
| Reiter's Diseases / reactive arthropathy | assessment Likely to require further information, investigation and | | |
| Connective tissue diseases | assessment Likely to require further information, investigation and assessment | Can cause diagnostic difficulties and often unpredictable course. Potential for severe incapacitation. | |

ORTHOPAEDIC and SOFT TISSUE CONDITIONS CONTINUED

| HAEMATOLOGICAL DISORDERS | | | |
|--|---|---|--|
| Illness/injury/disease | Firefighter applicant | Notes | |
| Previously undetected iron deficiency anaemia | Likely to require further information, investigation and assessment | Refer to GP initially for investigations and treatment. | |
| Other anaemia's | Likely to require further information, investigation and assessment | Many of the underlying conditions causing anaemia will make the applicant unsuitable. | |
| G6PD deficiency | Likely to require further information, investigation and assessment | Highly variable, but an applicant may be suitable. | |
| Polycythaemia (Haematocrit>0.55) | Unlikely to be suitable | Unacceptable risk of disabling complications. | |
| Thalassaemia major with severe chronic anaemia | Unlikely to be suitable | Unable to safely perform required exertion. | |
| Sickle cell disease | Unlikely to be suitable | Anaemia & crises. | |
| Sickle cell disease trait | Likely to be suitable | Usually asymptomatic. | |
| Mild haemophilia | | | |
| - Symptomatic | Unlikely to be suitable | Physical tasks and risk of injury may precipitate haemorrhage. | |
| - Asymptomatic | Likely to require further information, investigation and assessment | | |
| Thrombocytopenia | Likely to require further information, investigation and assessment | • If platelets < 25 X 10 ⁹ /l then the recruit is unlikely to be suitable. | |
| Anticoagulation therapy | Unlikely to be suitable | The underlying condition may also make the applicant unsuitable. | |
| Leukaemia/ lymphoma with complete remission | Likely to require further information, investigation and assessment | Those in complete remission may be suitable following further investigation. | |

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| INFECTIOUS DISEASE | | | |
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| Illness/injury/disease | Firefighter applicant | Notes | |
| HIV infection - Symptomatic - Asymptomatic | Unlikely to be suitable Likely to require further information, investigation and assessment | Assessment should be made on a case by case basis. | |
| Resolved Hepatitis A infection | Likely to be suitable | | |
| Hepatitis B carriers | Unlikely to be suitable | | |
| Resolved Hepatitis B infection without carrier status | Likely to require further information, investigation and assessment | | |
| Hepatitis C and D | Unlikely to be suitable | | |
| Resolved Hepatitis E infection | Likely to be suitable | | |
| Glandular fever | Likely to require further information, investigation and assessment | | |

| MISCELLANEOUS CONDITIONS | | | |
|--|---|--|--|
| Illness/injury/disease | Firefighter applicant | Notes | |
| Childhood or early adult malignancy | Likely to require further information, investigation and assessment | | |
| Narcolepsy | Unlikely to be suitable | | |
| Body Mass Index outside normal range - 18 to 30 | Likely to require further information, investigation and assessment | BMI should only be used to screen individuals. | |
| Malignant disease | Unlikely to be suitable | | |
| Genetic disease | Likely to require further information, investigation and assessment | | |
| Chronic pelvic inflammatory disease (PID) with chronic pelvic pain | Likely to require further information, investigation and assessment | | |
| Incapacitating menorrhagia | Likely to require further information, investigation and assessment | | |
| Incapacitating dysmenorrhoea | Likely to require further information, investigation and assessment | | |
| Endometriosis | Likely to require further information, investigation and assessment | | |
| Fibroids and ovarian cysts | Likely to require further information, investigation and assessment | | |
| Cervical dysplasia CIN 1/2 | Likely to be suitable | | |
| Cervical dysplasia CIN 3 | Likely to require further information, investigation and assessment | | |
| Invasive carcinoma | Unlikely to be suitable | | |
| Polycystic ovary disease | Likely to require further information, investigation and assessment | | |
| Pregnancy | Likely to be suitable after 3 months following delivery | | |
| Termination of pregnancy | Likely to be suitable after 4 weeks following termination providing there are no complications | | |

| NEUROLOGICAL DISORDERS | | | |
|---|---|---|--|
| Illness/injury/disease | Firefighter applicant | Notes | |
| Epilepsy – single seizure | Likely to require further information, investigation and assessment | Those in whom no abnormality is found should have their acceptance for entry deferred for a period of 18 months. | |
| Epilepsy – recurrent seizures | Unlikely to be suitable | Assessment should be made on a case by case basis. | |
| Migraine | Likely to require further information, investigation and assessment | | |
| Headaches / Severe headaches | Likely to be suitable | | |
| Head Injuries | Likely to require further information, investigation and assessment | | |
| Subarachnoid haemorrhage | Likely to require further information, investigation and assessment | | |
| Transient Ischaemic Attacks | Likely to require further information, investigation and assessment | • Consideration should be given to applicants deferring entry for 12 months. | |
| Hydrocephalus/insertion of shunts | Unlikely to be suitable | | |
| Multiple sclerosis | Unlikely to be suitable | | |
| Motor neurone disease, cerebella ataxias, progressive peripheral neuropathy and Parkinson's disease | Unlikely to be suitable | | |

Recommended Mental and Psychiatric Health Standards

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| CONDITIONS AFFECTING MENTAL AND PSYCHIATRIC HEALTH | | | |
|---|--|--|--|
| Illness/injury/disease | Firefighter applicant | Notes | |
| Disorders first diagnosed in childhood or adolescence | May not be suitable but further information, investigation, assessment required | Assessment should be made on a case by case basis. | |
| Cognitive and Amnestic Disorders | Unlikely to be suitable | Assessment should be made on a case by case basis. | |
| Substance related disorders | Unlikely to be compatible but further information and assessment will be needed | Assessment should be made on a case by case basis. | |
| Schizophrenia / Schizophreniform Disorder / Schizoaffective Disorder / Delusional Disorder | Unlikely to be suitable | | |
| Mood Disorders / Depression / Bipolar Disorders | Likely to require further information, investigation and assessment | | |
| Generalised Anxiety Disorder / Panic Disorder / Phobic Anxiety / Adjustment Disorder / Posttraumatic Stress Disorder Obsessive Compulsive Disorder | Likely to require further information, investigation and assessment Unlikely to be suitable | | |
| Somatoform Disorders / Factitious Disorders / Dissociative Disorders / Chronic Fatigue | Likely to require further information, investigation and | | |
| Syndrome Eating disorders | assessment Unlikely to require further information, investigation and assessment | | |
| Personality Disorders | Unlikely to be suitable | Assessment should be made on a case by case basis. | |