

**US Department of Commerce
NOAA - Office of Law Enforcement**

**Medical Standards for Special Agents
and Enforcement Officers**

The medical standards in this document are listed so as to approximate the sequence in which an examination might be carried out, and the resulting pieces of medical information assembled and reviewed by the Reviewing Medical Officer. However, that order is not obligatory. The pertinent issues are the content of the standards and the context in which they are applied.

VISION STANDARDS

The applicant/incumbent must be able to see well enough to safely and efficiently carry out the requirements of the job. This requires binocular vision, far visual acuity, depth perception, peripheral vision, and color vision, which may be demonstrated by:

- Uncorrected distant vision equal to or better than 20/200 in each eye; clients who are successful [no problems identified] users of soft contact lenses for a period of at least one year, will have their vision acuities while using the lenses considered as their uncorrected distant vision acuities. Such clients will be asked to provide documentation from their treating specialist that attests to the “successful” status. Additionally, they will be advised of the following conditions of employment:
 - a) They must wear their contacts at all times while on duty.
 - b) They must wear their contacts while carrying a service weapon off duty.
 - c) They must keep a spare pair of contacts or glasses with them at all times while on duty, or while carrying a service weapon.
 - d) Any inability to wear soft contact lenses will be considered a change in their medical condition and must be reported to their supervisor[s] as soon as possible.
- Distant vision that is correctable to 20/20 in each eye; and
- Near vision that is correctable to 20/40 with both eyes; and
- Normal depth perception [recorded in seconds of arc, with a clinical assessment to confirm normal functional depth perception if stereopsis is less than 80 sec.]; and
- Peripheral vision that is “normal” [generally considered to be 70-85 degrees in the temporal field of each eye]; and
- Color vision that is sufficient to pass the Ishihara 14 plate series color vision test [at least ten plates correctly identified], or the Farnsworth D-15 color vision test [X-Chrome lenses are not acceptable as a means for correcting color deficiencies], and able to identify red, green, and amber [yellow]; and
- Having no ophthalmologic condition that would increase ophthalmic sensitivity to bright light, fumes, or airborne particulates, or susceptibility to sudden incapacitation.

Note: Contact lenses and spectacles are acceptable for correction of visual acuity, but the user must be able to demonstrate that the corrective device[s] can be worn safely and for extended

periods of time without significant maintenance, as well as being worn with any necessary personal protective equipment. Orthokeratology is acceptable for meeting the corrected vision standard as long as individuals wear their lenses while on duty at all times and meet the above visual acuity requirements for corrected vision.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. Any OPTHALMOLOGIC CONDITIONS which causes and individual to be particularly susceptible to environmental exposures, such as sunlight, dusts, fumes, and various volatile compounds.
2. COMPLICATIONS of REFRACTIVE SURGICAL PROCEDURES [e.g., LASIK, Radial Keratotomy, Photorefractive surgery, Keratoplasty, etc.]. These operative procedures may be considered acceptable as long as the individual's vision meets the above standards post-operatively and the operation was performed AT LEAST 6 months [for radial keratotomy or photorefractive surgery] or 3 months [for LASIK] before application for an LEO position. The individual must be free of post-operative complications. The results of an eye examination by a board-certified Ophthalmologist will be required to insure that vision is not impeded due to post-operative complications such as infection, glare, or contrast-sensitivity.
3. CHRONIC CONJUNCTIVITIS - due to the possible visual impairment and/or increased susceptibility to environmental exposures which could interfere with the job performance, this condition may result in a medical disqualification.
4. CORNEAL ULCERS - this condition generally is disqualifying since essential duties of the position could further exacerbate the condition, in addition to the condition causing impairments of visual acuity. This condition must be treated and cleared by an Ophthalmologist before any further consideration is given to the applicant.
5. KERATITIS - any visual impairment associated with keratitis that is likely to interfere with job performance generally is disqualifying.
6. RETINAL DETACHMENT - this condition generally is disqualifying due to the serious visual obstruction and the risk of sudden incapacitation.
7. RETINITIS PIGMENTOSA
8. GLAUCOMA - this condition, if confirmed by an ophthalmologist, generally is disqualifying if there is any impairment of peripheral vision.
9. NIGHT BLINDNESS
10. OCULAR LENS IMPLANTATION may be acceptable following an adequate post-surgical recovery period and if visual acuity meets the Vision Standards.
11. ANY OTHER VISION CONDITION which significantly interferes with normal function and bears the potential to render the person suddenly incapacitated generally is disqualifying.

HEARING STANDARDS

The applicant/incumbent must be able to hear well enough to safely and efficiently carry out the requirements of the job. This requires binaural hearing [to localize sounds] and auditory acuity, which may be demonstrated by:

- A current pure tone, air conduction audiogram, using equipment and a test setting which meet American National Standards Institute standards [see 29 CFR 1910.95]; and
- Documentation of hearing thresholds of no greater than 30 dB at 500, 1000, 2000 Hz in each ear; and
- Documentation of hearing thresholds of no greater than 40 dB at 3000 Hz in each ear; and
- No evidence by physical examination and medical history of ear conditions [external, middle, or internal] likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

The use of a hearing aid [or aids] to meet this standard is permitted. If unable to meet the above testing standards with a hearing aid, a Functional Hearing Test will be administered, and the use of a hearing aid [or aids] to meet this standard is permitted. If a hearing aid [or aids] is required to meet hearing standards, the hearing aid [or aids] must be worn while on duty.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. MENIERE'S DISEASE
2. VESTIBULAR NEURONITIS
3. VERTIGO & PAROXYSMAL POSITIONAL VERTIGO
4. ACOUSTIC NEUROMA
5. WEGENER S GRANULOMATOSIS
6. OTOSCLEROSIS
7. COCHLEAR IMPLANTATION is acceptable provided that the applicant meets the hearing standards and can localize sound satisfactorily [see Hearing Standards].
8. Any OTHER DISEASE OR DEFECT of the ear which adversely affects hearing or equilibrium and which may interfere with the safe and efficient job performance generally is disqualifying.

HEAD, NOSE, MOUTH, THROAT AND NECK STANDARD

The applicant/incumbent must have structures and functions of the head, nose, mouth, throat, and neck that are sufficient for the individual to safely and efficiently carry out the requirements of the job. This may be demonstrated by:

- A physical exam of the head, nose, mouth, throat, and neck that is within the range of normal variation, including:
 - a) normal flexion, extension, and rotation of the neck; and
 - b) open nasal and oral airways; and
 - c) unobstructed Eustachian tubes; and
 - d) no structural abnormalities that would prevent the normal use of personal protective equipment, including eyewear; and
- Normal conversational speech; and
- No evidence by physical examination and medical history of head, nose, mouth, throat, or neck conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. ANOSMIA
2. ARTIFICIAL LARYNX OR ESOPHAGEAL SPEECH
3. NECK MASSES, LYMPHADENOPATHY, OR TRACHEOSTOMY
4. Any OTHER CHRONIC DISEASE OR CONDITION which significantly interferes with speech or breathing and bears the potential to render the person suddenly incapacitated is generally disqualifying.

THE DERMATOLOGIC STANDARD

The applicant/incumbent must have adequately healthy skin that is sufficient for the individual to safely and efficiently carry out the requirements of the function. This may be demonstrated by:

- A physical exam of the skin that is within the range of normal variation; and
- No evidence by physical examination and medical history of dermatologic conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. ALBINISM
2. SKIN CANCER [including melanoma and severe or poorly controlled basal cell or squamous cell carcinoma]
3. KAPOSI'S SARCOMA
4. SEVERE CHRONIC DERMATITIS
5. ANY OTHER DERMATOLOGIC CONDITION which significantly interferes with normal function and bears the potential to render the person suddenly incapacitated is generally disqualifying.

CENTRAL AND PERIPHERAL NERVOUS SYSTEMS STANDARD

The applicant/incumbent must have a nervous system that is sufficient for the individual to safely and efficiently carry out the requirements of the job. This may be demonstrated by:

- A physical exam of the cranial and peripheral nerves and the vestibular and cerebellar system that is within the range of normal variation, including:
 - a) intact cranial nerves, I-XII; and
 - b) normal vibratory sense in the hands and feet; and
 - c) normal proprioception of the major joints; and
 - d) normal sensation of hot and cold in the hands and feet; and
 - e) normal sense of touch in the hands and feet; and
 - f) normal reflexes of the upper and lower extremities; and
 - g) normal balance [e.g., heel-toe walk; Romberg; balance on one foot].

- Normal basic mental status evaluation [e.g., person, place, time, current events].
- No evidence by physical examination and medical history of nervous, cerebellar, or vestibular system conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. ATAXIA
2. CHOREOATHETOSIS
3. HUNTINGTON'S CHOREA
4. MULTIPLE SCLEROSIS
5. MUSCULAR DYSTROPHY
6. NARCOLEPSY
7. NEUROFIBROMATOSIS
8. PARKINSON S DISEASE
9. CEREBROVASCULAR ACCIDENT [STROKE]
10. TRANSIENT ISCHEMIC ATTACKS
11. SENSORY DYSFUNCTION [smell, touch, taste].
12. MIGRAINE CEPHALGIA
13. Any OTHER NERVOUS SYSTEM CONDITION which significantly interferes with normal function and bears the potential to render the person suddenly incapacitated is generally disqualifying.
14. SEIZURES OR EPILEPSY - in order to be considered for a medical clearance for work as a NOAA LEO, an individual with a history of one or more seizures must provide the following written information from a physician who is board certified in neurology. This information is to be provided on the physician's own letterhead, and must include:
 - a) the physician's printed or typed name [i.e., legible], signature, and date;
 - b) confirmation that the physician has reviewed and is familiar with the requirements of the job;
 - c) a summary of all current medications, along with any known side effects experienced or expected to be experienced by the officer;
 - d) the known or suspected triggers or factors that may lead to seizure activity for the officer;
 - e) the results of the most recent diagnostic testing, such as an EEG;
 - f) the officer's overall medical prognosis, related to his/her seizure disorder; and
 - g) the estimated risk or likelihood of future seizure activity the officer might experience, of any degree of severity.

CARDIOVASCULAR SYSTEM STANDARD

The applicant/incumbent must have a cardiovascular system that is sufficient for the individual to safely and efficiently carry out the requirements of the job. This may be demonstrated by:

- A physical exam of the cardiovascular system that is within the range of normal variation, including:

- a) blood pressure of less than or equal to 150 mmHg systolic and 90 mmHg diastolic; and
 - b) a normal baseline electrocardiogram [minor, asymptomatic arrhythmias may be acceptable]; and
 - c) no pitting edema in the lower extremities, and
 - d) normal cardiac exam; and
- No evidence by physical examination and medical history of cardiovascular conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. PACEMAKERS or PROSTHETIC VALVES generally are disqualifying. Any other condition or post-surgical management that requires the use of Coumadin or other anti-coagulants generally is disqualifying.
2. CORONARY ARTERY DISEASE.
3. HYPERTENSION that requires the use of any medication to stabilize the blood pressure may be disqualifying, depending on the factors presented in the Medications Standard. Systolic blood pressure exceeding 150 and/or diastolic blood pressure exceeding 90 mm Hg may be disqualifying.
4. LEFT BUNDLE BRANCH BLOCK.
5. MYOCARDITIS/ ENDOCARDITIS/ PERICARDITIS [Active or recently resolved cases]. A past history of these diseases may require additional testing to determine the current capabilities.
6. History of MYOCARDIAL INFARCTION.
7. History of CARDIAC SURGERY [depending on the procedure and when it was performed].
8. VALVULAR HEART DISEASE such as mitral valve stenosis, mitral valve regurgitation, aortic stenosis, mitral valve prolapse, etc.
9. DYSRHYTHMIAS such as ventricular tachycardia or fibrillation, Wolff-Parkinson-White syndrome, Paroxysmal Atrial Tachycardia with or without block.
10. ANGINA PECTORIS or chest pain of unknown etiology.
11. CARDIOMYOPATHY from any cause.
12. CONGESTIVE HEART FAILURE
13. MARFAN'S SYNDROME
14. CONGENITAL ANOMALIES
15. IMPLANTED CARDIAC DEFIBRILLATORS, devices that may, as a result either of their normal operation or a malfunction, render the individual suddenly or subtly incapacitated, generally are disqualifying.
16. Any OTHER CARDIAC DISEASE OR CONDITION which significantly interferes with normal cardiac function and bears the potential to render the person suddenly incapacitated is generally disqualifying.

PERIPHERAL VASCULAR SYSTEM STANDARD

The peripheral vascular system involves the veins and arteries of the extremities. The applicant/incumbent must have a vascular system that is sufficient for the individual to safely and efficiently carry out the requirements of the job. This may be demonstrated by:

- A physical exam of the vasculature of the upper and lower extremities that is within the range of normal variation, including:
 - a) no evidence of phlebitis or thrombosis; and
 - b) no evidence of venous stasis or edema; and
 - c) no evidence of arterial insufficiency; and
- No evidence by physical examination and medical history of peripheral vasculature conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. CHRONIC VENOUS INSUFFICIENCY
2. DEEP VEIN THROMBOSIS
3. CHRONIC THROMBOPHLEBITIS
4. Any OTHER CHRONIC DISEASE OR CONDITION which significantly compromises the vascular system and bears the potential to render the person suddenly incapacitated generally is disqualifying.

CHEST AND RESPIRATORY SYSTEM STANDARD

The applicant/incumbent must have a respiratory system that is sufficient for the individual to safely and efficiently carry out the requirements of the job. This may be demonstrated by:

- A physical exam of the respiratory system that is within the range of normal variation; and
- A pulmonary function test [PFT] showing:
 - a) forced vital capacity [FVC] of at least 70% of the predicted value; and
 - b) forced expiratory volume at 1 second [FEV₁] of at least 70% of the predicted value; and
 - c) the ratio FEV₁/FVC of at least 70%; and
- No evidence by physical examination and medical history of respiratory conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Note: The requirement to use an inhaler [such as for asthma] requires agency review, and further information may be required related to the individual's history, the causes of bronchospastic episodes or exacerbations, and the response to medications.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. SIGNIFICANT OBSTRUCTIVE OR RESTRICTIVE DISORDER.
2. ASTHMA after the age of 12 years must be considered on a case-by-case basis. A person may be requested to submit documentation of a diagnostic assessment prior to making final recommendations.
3. ACTIVE PULMONARY TUBERCULOSIS [TB]: A history of confirmed TB that has been treated for longer than 6 months is acceptable provided that documentation supports the treatment history, confirms that the person has been rendered non-communicable, and the other provisions of the Chest and Respiratory System Standard have been met.
4. HISTORY OF CHRONIC BRONCHITIS ASSOCIATED WITH DECREASED PFT RESULTS.
5. LUNG ABSCESS
6. PULMONARY EMBOLISM [within the previous twelve months or if there is a recurrent history or use of anticoagulants.
7. SPONTANEOUS PNEUMOTHORAX [if recurrent, or recent]
8. EMPHYSEMA
9. SARCOIDOSIS [if associated with an impaired pulmonary function]
10. PULMONARY INFARCTION
11. TUMORS OF THE LUNG
12. PNEUMONECTOMY [if FEV₁ less than 70%]
13. Any OTHER RESPIRATORY DISEASE OR CONDITION which significantly interferes with normal function and bears the potential to render the person suddenly incapacitated is generally disqualifying.

GASTROINTESTINAL SYSTEM STANDARD

The applicant/incumbent must have a gastrointestinal tract that is sufficient for the individual to safely and efficiently carry out the requirements of the job. The gastrointestinal [GI] tract should be considered normal from the mouth to the anus by the examining physician. The standard may be demonstrated by:

- A physical exam and evaluation of the mouth, abdomen, anus, and rectum that is within the range of normal variation; and
- Normal liver function and blood chemistry laboratory tests; and
- No evidence by physical examination [including laboratory testing] and medical history of gastrointestinal conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. ACUTE AND CHRONIC ACTIVE HEPATITIS
2. CROHN'S DISEASE / ULCERATIVE COLITIS / REGIONAL ENTERITIS or IRRITABLE BOWEL SYNDROME [Satisfactory control or management of these conditions with surgical and/or medical treatments will be considered on a case-by-case basis.]

3. COLOSTOMIES
4. ILEITIS [recurrent or chronic]
5. CHOLECYSTITIS or CHOLELITHIASIS [symptomatic or asymptomatic]
6. DIVERTICULITIS [symptomatic]
7. DYSPHAGIA from any cause. Severity, treatment, and current status of these conditions will be reviewed on a case-by-case basis.
8. CIRRHOSIS OF THE LIVER [depending upon the degree of severity, the etiology, and the prognosis]
9. INTESTINAL OBSTRUCTION from any cause, until the condition has fully resolved
10. PANCREATITIS
11. ACTIVE GASTRIC OR DUODENAL ULCER
12. GASTRIC OR BOWEL RESECTION, if there is any evidence [historical or physical] of pain, hemorrhages, fainting episodes or dietary restrictions that could interfere with the performance of the job.
13. An UNTREATED [and clinically-significant] INGUINAL, INCISIONAL, or VENTRAL HERNIA.
14. Any OTHER GASTROINTESTINAL DISEASE OR CONDITION which significantly interferes with normal function and bears the potential to render the person suddenly incapacitated is generally disqualifying.

GENITOURINARY SYSTEM STANDARD

In general, any dysfunction of the genitourinary or reproductive system that has the capability of interfering with the required tasks or rendering the person suddenly incapacitated may be considered disqualifying. The applicant/incumbent must have a genitourinary system that is sufficient for the individual to safely and efficiently carry out the requirements of the job. Compliance with the standard may be demonstrated by:

- A normal clean catch urinalysis; and
- No evidence by physical examination and medical history of genitourinary conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. POLYCYSTIC KIDNEY DISEASE
2. ACUTE or CHRONIC RENAL FAILURE
3. NEPHROTIC SYNDROME
4. SYMPTOMATIC URINARY CALCULI
5. NEUROGENIC BLADDER
6. BERGER'S DISEASE [IgA nephropathy]
7. HISTORY OF RENAL VEIN THROMBOSIS
8. UNCORRECTED OBSTRUCTIVE UROPATHIES
9. RENAL TOXICITY

10. RENAL TRANSPLANTATION may be considered disqualifying unless the applicant is not taking immunosuppressive drugs and is cleared medically by the surgeon who performed the operation [or the successor surgical consultant for the individual] to participate in strenuous activities, and to withstand blunt trauma to his/her flanks without a greater than normal risk of harm.
11. Any OTHER GENITOURINARY DISEASE OR CONDITION which significantly interferes with normal function and bears the potential to render the person suddenly incapacitated is generally disqualifying.

MUSCULOSKELETAL SYSTEM STANDARD

The applicant/incumbent must have a musculoskeletal system that is sufficient for the individual to safely and efficiently carry out the functional requirements of the job. Any condition that adversely impacts an individual's movement, range of motion, agility, flexibility, strength, dexterity, coordination or the ability to accelerate, decelerate and change directions quickly and easily may be considered disqualifying. A healthy musculoskeletal system may be demonstrated by:

- A physical exam of the upper and lower extremities [including all digits], neck, and back that is within the range of normal variation, including strength, flexibility, range of motion, and joint stability; and
- No evidence by physical examination and medical history of musculoskeletal conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. ARTHRITIS [any etiology] if there is limited joint motion and/or pain.
2. AMPUTATIONS of one or more digits if it directly affects the ability to grip and handle weapons or other required equipment and tools efficiently.
3. AMPUTATIONS OF ANY EXTREMITY.
4. ANKYLOSING SPONDYLITIS.
5. SCOLIOSIS: if the lateral curve is 20 degrees or more, or if there is any demonstrable loss of normal and pain-free function.
6. MUSCULAR DYSTROPHY
7. LUMBOSACRAL INSTABILITY, including pain or limitations of flexibility and strength that limits the individual's ability to stand, bend, stoop, carry heavy objects or sit for long periods of time.
8. DEGENERATIVE DISC DISEASE that is symptomatic.
9. FIXED LORDOSIS OR KYPHOSIS which limits mobility and skeletal strength.
10. FRACTURES: these may require orthopedic evaluation to determine whether functional limitations currently exist. A recent fracture that requires immobilization [or for which limb immobilization is indicated, such as casting, bracing, etc.], and that prevents the safe and efficient performance of the full range of law enforcement duties, will require deferment of the clearance until the injury has healed sufficiently for the treating

physician to be able to document that immobilization is no longer required, that no physical limitations are present, and no restrictions are required.

11. SCIATICA OR OTHER NEUROPATHIES
12. CHRONIC LOW BACK PAIN [by medical history], with or without demonstrable pathology, may be considered disqualifying. Each case will be reviewed in the context of the etiology, the response to therapeutic regimens, frequency of recurrence, exacerbating factors, and lengths of disability associated with the recurrences, combined with the current clinical presentation.
13. A history of a CHRONIC SPRAIN OR STRAIN OF THE NECK that limits mobility or causes recurring cephalgia [headaches] may be disqualifying.
14. Evidence of a CERVICAL RIB, SUBLUXATION, TORTICOLLIS, SYMPTOMATIC THORACIC OUTLET SYNDROME or a BRACHIAL CLEFT CYST
15. Any evidence of a CERVICAL NEUROPATHY, including numbness, tingling or loss of motor strength in the upper extremities, may be disqualifying.
16. Any medical condition, congenital or acquired, which interferes with agility, dexterity, the lifting of heavy objects or the ability to perform the full range of law enforcement duties may be disqualifying.
17. A condition may be disqualifying if there is evidence that the general body symmetry may directly interfere with the safe utilization of issued standard and specialty equipment, including but not limited to handguns, shotguns, handcuffs, motor vehicles, personal protective equipment, etc.

PROSTHETICS, TRANSPLANTS, AND IMPLANTS STANDARD

The presence or history of organ transplantation or use of prosthetics or implants is not of itself disqualifying. However, the applicant/incumbent must be able to safely and efficiently carry out the requirements of the job despite these factors. This may be demonstrated by:

- No evidence by physical examination and medical history that the transplant, the prosthesis, the implant, or the conditions that led to the need for these treatments are likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Note: For individuals with transplants, prosthetics, or implanted pumps or electrical devices, the examinee will be required to provide for agency review satisfactory documentation from his/her surgeon or physician that the individual [and, if applicable, his/her prosthetic or implanted device] is considered to be fully cleared and compatible with the specified functional requirements of the job.

ENDOCRINE AND METABOLIC SYSTEMS STANDARD

Any excess or deficiency in hormone production can produce metabolic disturbances affecting weight, stress adaptation, energy production, and a variety of symptoms or pathology such as elevated blood pressure, weakness, fatigue and collapse. The applicant/incumbent must have endocrine and metabolic functions that are sufficient for the individual to safely and efficiently carry out the requirements of the job. This may be demonstrated by:

- A physical exam of the skin, thyroid, and eyes that is within the range of normal variation; and
- Normal fasting blood sugar level; and
- Normal blood chemistry results; and
- No evidence by physical examination [including laboratory testing] and history of endocrine/metabolic conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. ADRENAL DYSFUNCTION [such as Addison’s Disease or Cushing’s Syndrome].
2. THYROID DISEASE that is uncontrolled or associated with complications. Hypothyroidism adequately controlled by hormone replacement may be considered acceptable.
3. PITUITARY DYSFUNCTION
4. DIABETES MELLITUS
5. HYPERGLYCEMIA
6. DIABETES INSIPIDUS
7. Any OTHER ENDOCRINE CONDITION which significantly interferes with normal function and bears the potential to render the person suddenly incapacitated generally is disqualifying.

INFECTIOUS DISEASE / IMMUNE SYSTEM / ALLERGIC DISORDERS STANDARDS

The applicant/incumbent must be free of communicable diseases, have a relatively healthy immune system, and be free of significant allergic conditions in order to safely and efficiently carry out the requirements of the job. This may be demonstrated by:

- A general physical exam of all major body systems that is within the range of normal variation, including:
 - a) no evidence of current communicable disease that would be expected to interfere with the safe and effective performance of the requirements of the job; and
 - b) no evidence of current communicable disease that would be expected to pose a threat [under expected working conditions] to the health of any co-workers or the public; and
- Normal complete blood count, including white blood count and differential.
- No evidence by physical examination and medical history of infectious disease, immune system, or allergy conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. HEREDITARY ANGIOEDEMA
2. GOODPASTURE’S SYNDROME

3. AUTOIMMUNE HEMOLYTIC ANEMIA
4. VASCULITIS
5. HASHIMOTO'S THYROIDITIS
6. MYASTHENIA GRAVIS
7. SYSTEMIC LUPUS ERYTHEMATOSUS
8. STINGING INSECT ALLERGY
9. Any OTHER INFECTIOUS DISEASE, IMMUNE SYSTEM, OR ALLERGIC CONDITION which significantly interferes with normal function and bears the potential to render the person **suddenly** incapacitated is generally disqualifying.

HEMATOPOETIC SYSTEM STANDARD

The applicant/incumbent must have a hematopoietic [blood and blood-producing] system that is sufficient for the individual to safely and efficiently carry out the requirements of the job. This may be demonstrated by:

- A physical exam of the skin that is within the range of normal variation; and
- A complete blood count [including at least hemoglobin, hematocrit, platelets, and white blood count, with differential] that is within the normal range; and
- No evidence by physical examination [including laboratory testing] and medical history of hematopoietic conditions likely to present a safety risk or to worsen as a result of carrying out the essential functions of the job.

Conditions which may result in disqualification include, but are not limited to, the following examples:

1. ANEMIA
2. INHERITED CLOTTING DISORDERS [ex. HEMOPHILIA] generally are disqualifying
3. CHRONIC LYMPHANGITIS
4. THROMBOCYTOPENIA OR CLOTTING DISORDER
5. SICKLE CELL ANEMIA
6. SPLENOMEGALY
7. Any OTHER HEMATOPOETIC CONDITION which significantly interferes with normal function and bears the potential to render the person suddenly incapacitated is generally disqualifying.

MEDICATION STANDARD

The need for and use of prescribed or over-the-counter medications are not of themselves disqualifying. However, there must be no evidence by physical examination, laboratory tests, or medical history of any impairment of body function or mental function and attention due to medications that are likely to present a safety risk or to worsen as a result of carrying out the specified functional requirements. Each of the following points should be considered:

1. Medication[s] [type and dosage requirements]
2. Potential drug side effects
3. Drug-drug interactions

4. Adverse drug reactions
5. Drug toxicity or medical complications from-
6. Drug-environmental interactions related to:
 - a) long term use
 - b) Drug-food interactions
7. History of patient compliance with medications regimen prescribed

All medication requirements will be evaluated to ensure that safe and efficient job performance will not be affected adversely by their use. Medications such as narcotics, sedative hypnotics, barbiturates, amphetamines, or any drug with the potential for addiction or a reduction in attentiveness that are taken for extended periods of time [usually beyond 10 days] or are prescribed for a persistent or recurring underlying condition generally would be considered disqualifying. Cases will be reviewed on a case-by-case basis.

PSYCHIATRIC / PSYCHOLOGIC STANDARD

The applicant/incumbent must have judgment, mental functioning, and social interaction/behavior that will provide for the safe and efficient conduct of the requirements of the job. This may be demonstrated by:

- No evidence by physical examination and medical history of psychiatric or psychological conditions [including alcohol or substance dependence] considered likely to interfere with efficient job performance, present a safety risk to the individual or others, or to worsen as a result of carrying out the essential functions of the job.

Only those disorders which affect safe and efficient job performance may be disqualifying, and consideration must be given to the individual's history of treatment and control of the condition[s]. All diagnoses must be consistent with the diagnostic criteria as established by the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition [DSM-IV], or subsequent revisions. Any condition not listed here shall be considered on a case-by-case basis.

Conditions which may result in disqualification include, but are not limited to:

1. **AXIS I DISORDERS** [clinical disorders, including major mental disorders, as well as developmental and learning disorders]
2. **AXIS II DISORDERS** [underlying pervasive or personality conditions, as well as mental retardation]
3. Any **OTHER PSYCHIATRIC OR PSYCHOLOGICAL CONDITION** which significantly interferes with normal function and bears the potential to render the person suddenly incapacitated.