

**TITLE 270: OKLAHOMA FIREFIGHTERS PENSION AND RETIREMENT SYSTEM
CHAPTER 10. FIREFIGHTERS PENSION AND RETIREMENT PLAN**

270:10-1-5. Medical conditions affecting ability to safely perform essential job functions

- (a) Medical conditions that can affect a candidate’s ability to safely perform essential job functions shall be designated either Category A or Category B.
- (b) Candidates with Category A medical conditions shall not be certified as meeting the medical requirements for entrance into the System.
- (c) Candidates with Category B medical conditions shall be certified as meeting the medical requirements for entrance into the System only if they can perform the essential job functions without posing a significant safety and health risk to themselves, members, or civilians.
 - (1) Head.
 - (A) Category A medical conditions shall include the following:
 - (i) Defect of skull preventing helmet use or leaving underlying brain unprotected from trauma.
 - (ii) Any skull or facial deformity that would not allow for a successful respiratory facepiece fit test.
 - (iii) Any head condition that results in a person not being able to safely perform essential job functions.
 - (B) Category B medical conditions shall include the following:
 - (i) Deformities of the skull such as depressions or exostoses.
 - (ii) Deformities of the skull associated with evidence of disease of the brain, spinal cord, or peripheral nerves.
 - (iii) Loss or congenital absence of the bony substance of the skull.
 - (iv) Any other head condition that may result in a person not being able to safely perform essential job functions.
 - (2) Neck.
 - (A) Category A medical conditions shall include the following:
 - (i) Any neck condition that results in a person not being able to safely perform essential job functions.
 - (ii) Reserved
 - (B) Category B medical conditions shall include the following:
 - (i) Thoracic outlet syndrome
 - (ii) Congenital cysts, chronic draining fistulas, or similar lesions.
 - (iii) Contraction of neck muscles.
 - (iv) Any other neck condition that may result in a person not being able to safely perform essential job functions.
 - (3) Eyes and Vision.
 - (A) Category A medical conditions shall include the following:
 - (i) Far visual acuity less than 20/40 binocular, corrected with contact lenses or spectacles or far visual acuity less than 20/100 binocular for wearers of hard contacts or spectacles, uncorrected.
 - (ii) Color perception. Monochromatic vision resulting in inability to use imaging devices.
 - (iii) Monocular vision.

- (iv) Any eye condition that results in a person not being able to safely perform essential job functions.
- (B) Category B medical conditions shall include the following:
 - (i) Diseases of the eye such as retinal detachment, progressive retinopathy, or optic neuritis.
 - (ii) Ophthalmological procedures such a radial keratotomy, Lasik procedure, or repair of retinal detachment.
 - (iii) Peripheral vision in the horizontal meridian of less than 110 degrees in the better eye or any condition that significantly affects peripheral vision in *both* eyes.
 - (iv) Any other eye condition that may result in a person not being able to safely perform essential job functions.
- (4) Ears and hearing.
 - (A) Category A medical conditions shall include the following:
 - (i) Chronic vertigo or impaired balance as demonstrated by the inability to tandem gait walk.
 - (ii) On audiometric testing, average hearing loss in the unaided better ear greater than 40 decibels (db) at 500 Hz, 1000Hz, 2000 Hz, and 3000 Hz when audiometric device is calibrated to ANSI Z24.5.
 - (iii) Any ear condition (or hearing impairment) that results in a person not being able to safely perform essential job functions.
 - (B) Category B medical conditions shall include the following:
 - (i) Unequal hearing loss.
 - (ii) Average uncorrected hearing deficit at the test frequencies 500Hz, 1000 Hz, 2000 Hz, and 3000 Hz greater than 40 decibels (db) in *either* ear.
 - (iii) Atresia, stenosis, or tumor of the auditory canal.
 - (iv) External otitis.
 - (v) Agenesis or traumatic deformity of the auricle.
 - (vi) Mastoiditis or surgical deformity of the mastoid.
 - (vii) Mènière's syndrome, labyrinthitis, or tinnitus.
 - (viii) Otitis media.
 - (ix) Any other ear condition (or hearing impairment) that may result in a person not being able to safely perform essential job functions.
- (5) Dental.
 - (A) Category A medical conditions shall include the following:
 - (i) Any dental condition that may result in a person not being able to safely perform essential job functions.
 - (ii) Reserved.
 - (B) Category B medical conditions shall include the following:
 - (i) Diseases of the jaw or associated tissues.
 - (ii) Orthodontic appliances.
 - (iii) Oral tissues, extensive loss.
 - (iv) Relationship between the mandible and maxilla that interferes with satisfactory postorthodontic replacement or ability to use protective equipment.

- (v) Any other dental condition that may result in a person not being able to safely perform essential job functions.
- (6) Nose, oropharynx, trachea, esophagus, and larynx.
 - (A) Category A medical conditions shall include the following:
 - (i) Tracheostomy.
 - (ii) Aphonia.
 - (iii) Any nasal, oropharyngeal, esophageal, or laryngeal condition that results in a person not being able to safely perform essential job functions.
 - (B) Category B medical conditions shall include the following:
 - (i) Congenital or acquired deformity.
 - (ii) Allergic rhinitis.
 - (iii) Epistaxis, recurrent.
 - (iv) Sinusitis, recurrent.
 - (v) Dysphonia.
 - (vi) Anosmia.
 - (vii) Tracheal stenosis.
 - (viii) Nasopharyngeal polyposis.
 - (ix) Any other nasal, oropharyngeal, esophageal, or laryngeal condition that may result in a person not being able to safely perform essential job functions.
- (7) Lungs and chest walls.
 - (A) Category A medical conditions shall include the following:
 - (i) Active hemoptysis.
 - (ii) Empyema.
 - (iii) Pulmonary hypertension.
 - (iv) Active tuberculosis.
 - (v) Obstructive lung diseases (e.g., emphysema, chronic bronchitis, asthma, etc.) with an FEV₁/FVC <0.75, with both FEV₁ FVC below normal (<0.80%) as defined by the American Thoracic Society.
 - (vi) Hypoxemia – Oxygen saturation <90% (exercise testing indicated when resting oxygen is <94% but >90%). Evaluate VO₂ max as described by the American College of Sports Medicine (ACSM).
 - (vii) Asthma – Reactive airways disease requiring bronchodilator or corticosteroid therapy in the previous 2 years. A candidate who has in the past required bronchodilator, corticosteroid, or anti-inflammatory therapy for asthma but who does not believe he/she has asthma shall be evaluated by a pulmonologist or other expert in asthmatic lung diseases such as an allergist to determine the following:
 - (I) Asthma has resolved without symptoms off medications for 2 years.
 - (II) If allergic, allergen avoidance or desensitization has been successful.
 - (III) Spirometry demonstrates adequate reserve (FVC and FEV₁ greater or equal to 90 percent) and no bronchodilator response measured off all bronchodilators on the day of testing.

- (IV) Normal or negative response (less than 20% decline in FEV₁) to provocative challenge using cold air, exercise (12 METS), or methacholine. (PC²⁰ greater than 8 is considered normal, as response at dose greater than 8mg might not be clinically significant.
 - (V) Challenge testing shall be performed off all anti-inflammatory medications for 4 weeks preceding the test and off all bronchodilators on the day of testing.
- (B) Category B medical conditions shall include the following:
- (i) Pulmonary resection surgery, chest wall surgery, and Pneumothorax.
 - (ii) Pleural effusion.
 - (iii) Fibrothorax, chest wall deformity, and diaphragm abnormalities.
 - (iv) Interstitial lung disease.
 - (v) Pulmonary vascular diseases or history of pulmonary embolism.
 - (vi) Bronchiectasis.
 - (vii) Infectious diseases of the lung or pleural space.
 - (viii) Cystic fibrosis.
 - (ix) Central or obstructive apnea.
 - (x) Any other pulmonary condition that may result in a person not being able to safely perform essential job functions.
- (8) Heart.
- (A) Category A medical conditions shall include:
- (i) Coronary artery disease, including a history of myocardial infarction, angina pectoris, coronary artery bypass surgery, coronary angioplasty, and similar procedures.
 - (ii) Cardiomyopathy or congestive heart failure, including signs or symptoms of comprised left or right ventricular function, including dyspnea, S3 dallop, peripheral edema, enlarged ventricle, abnormal ejections fraction, and/or inability to increase cardiac output with exercise.
 - (iii) Acute pericarditis, endocarditis, or myocarditis.
 - (iv) Syncope, recurrent.
 - (v) A medical condition requiring an automatic implantable cardiac defibrillator or history of ventricular fibrillation due to ischemic or valvular heart disease, or cardiomyopathy.
 - (vi) Third-degree atrioventricular block.
 - (vii) Cardiac pacemaker.
 - (viii) Idiopathic hypertrophic subaortic stenosis.
 - (ix) Any cardiac condition that results in a person not being able to safely perform essential job functions.
- (B) Category B medical conditions shall include the following:
- (i) Valvular lesions of the heart, including prosthetic valves.
 - (ii) Recurrent supraventricular or atrial tachycardia, flutter or fibrillation.
 - (iii) Left bundle branch block.

- (iv) Second-degree atrioventricular block in the absence of structural heart disease.
 - (v) Sinus pause >3 seconds.
 - (vi) Ventricular arrhythmia (history or presence of multi-focal PVC's or non-sustained ventricular tachycardia on resting EKG with or without symptoms; history or presence of sustained ventricular tachycardia with or without symptoms).
 - (vii) History of congenital abnormality.
 - (viii) History of congenital abnormality.
 - (ix) Chronic pericarditis, endocarditis, or myocarditis.
 - (x) Any other heart condition that may result in a person not being able to safely perform essential job functions.
- (9) Vascular System.
- (A) Category A medical conditions shall include the following:
 - (i) Hypertension with evidence of end organ damage or not controlled by approved medications.
 - (ii) Thoracic or abdominal aortic aneurysm.
 - (iii) Carotid artery stenosis or obstruction resulting in >50 percent reduction in blood flow.
 - (iv) Peripheral vascular disease resulting in symptomatic claudication.
 - (v) Any other vascular condition that results in a person not being able to safely perform essential job functions.
 - (B) Category B medical conditions shall include the following:
 - (i) Vasopastic phenomena such Raynaud's phenomenon.
 - (ii) Thrombophlebitis and varicosities.
 - (iii) Chronic lymphedema due to lymphadenopathy or venous valvular incompetency.
 - (iv) Congenital or acquired lesions of the aorta or major vessels.
 - (v) Circulatory instability as indicated by orthostatic hypotension, persistent tachycardia, and peripheral vasomotor disturbances.
 - (vi) History of surgical repair of aneurysm of heart or major vessel.
 - (vii) Any other vascular condition that may result in a person not being able to safely perform essential job functions.
- (10) Abdominal organs and gastrointestinal system.
- (A) Category A medical conditions shall include the following:
 - (i) Presence of uncorrected inguinal/femoral hernia regardless of symptoms.
 - (ii) Any gastrointestinal condition that results in a person not being able to safely perform essential job functions.
 - (B) Category B medical conditions shall include the following:
 - (i) Cholecystitis.
 - (ii) Gastritis.
 - (iii) GI bleeding.
 - (iv) Acute hepatitis
 - (v) Hernia including the following:

- (I) Uncorrected umbilical, ventral, or incisional hernia if significant risk exists for infection or strangulation.
 - (II) Significant symptomatic hiatal hernia if associated with asthma, recurrent pneumonia, chronic pain, or ulcers.
 - (III) Surgically corrected hernia >3 months after surgical correction.
 - (vi) Inflammatory bowel disease or irritable bowel syndrome.
 - (vii) Intestinal obstruction.
 - (viii) Pancreatitis.
 - (ix) Diverticulitis.
 - (x) History of gastrointestinal surgery.
 - (xi) Peptic or duodenal ulcer of Zollinger-Ellison syndrome.
 - (xii) Asplenia.
 - (xiii) Cirrhosis, hepatic or biliary.
 - (xiv) Chronic active hepatitis
 - (xv) Any other gastrointestinal condition that may result in a person not being able to safely perform essential job functions.
- (11) Reproductive System.
- (A) Category A medical conditions shall include the following:
 - (i) Any genital condition that results in a person not being able to safely perform essential job functions.
 - (ii) Reserved
 - (B) Category B medical conditions shall include the following:
 - (i) Pregnancy, for its duration.
 - (ii) Dysmenorrhea.
 - (iii) Endometriosis, ovarian cysts, or other gynecologic conditions.
 - (iv) Testicular or epididymal mass.
 - (v) Any other genital condition that may result in a person not being able to safely perform essential job functions.
- (12) Urinary system.
- (A) Category A medical conditions shall include the following.
 - (i) Renal failure or insufficiency requiring continuous ambulatory peritoneal dialysis (CAPD) or hemodialysis.
 - (ii) Any urinary condition that results in a person not being able to safely perform essential job functions.
 - (B) Category B medical conditions shall include the following:
 - (i) Diseases of the kidney.
 - (ii) Diseases of the ureter, bladder, or prostate.
 - (iii) Any other urinary condition that may result in a person not being able to safely perform essential job functions.
- (13) Spine and Axial Skeleton.
- (A) Category A medical conditions shall include the following:
 - (i) Scoliosis of thoracic or lumbar spine with angle >40 degrees.
 - (ii) History of spinal surgery fusion of two or more vertebrae or rods that are still in place.

- (iii) Any spinal or skeletal condition producing sensory or motor deficit(s) or pain due to radiculopathy or nerve root compression.
 - (iv) Any spinal or skeletal condition causing pain that frequently or recurrently requires narcotic analgesic medication.
 - (v) Cervical vertebral fractures with multiple vertebral body compression greater than 25 percent; evidence of posterior element involvement, nerve root damage, disc involvement, dislocation (partial, moderate, severe), abnormal exam, ligament instability, symptomatic, and/or less than 6 months post injury or 1 year since surgery.
 - (vi) Thoracic vertebral fractures with vertebral body compression greater than 50 percent; evidence of posterior element involvement, nerve root damage, disc involvement, dislocation (severe-with or without surgery), abnormal exam, ligament instability, symptomatic, and/or less than 6 months post injury or 1 year since surgery.
 - (vii) Lumbosacral vertebral fractures with vertebral body compression greater than 50 percent; evidence of posterior element involvement, nerve root damage, disc involvement, dislocation (severe-with or without surgery), abnormal exam, ligament instability, symptomatic, and/or less than 6 months post injury or 1 year since surgery.
 - (viii) Any spinal or skeletal condition that results in a person not being able to safely perform essential job functions.
- (B) Category B medical conditions shall include the following:
- (i) Congenital or developmental malformations of the back.
 - (ii) Scoliosis with angle >40 degrees.
 - (iii) Arthritis of the cervical, thoracic, or lumbosacral spine.
 - (iv) Facet atrophism, high lumbosacral angle, hyperlordosis, Schmorl's nodes, Scheuermann's disease, spina bifida occulta, spondylolisthesis, spondylolysis, or transitional vertebrae.
 - (v) History of infections or infarcts in the spinal cord, epidural space, vertebrae, or axial skeletal joints.
 - (vi) History of laminectomy or discectomy or vertebral fractures.
 - (vii) Any spinal or skeletal condition that may result in a person not being able to safely perform essential job functions.
- (14) Extremities.
- (A) Category A medical conditions shall include the following:
- (i) Bone hardware such as metal plates or rods supporting the bone during healing.
 - (ii) History of total joint replacement.
 - (iii) Amputation or congenital absence of upper extremity limb (hand or higher).
 - (iv) Amputation of either thumb proximal to the mid-proximal phalanx.
 - (v) Amputation or congenital absence of lower extremity limb (foot or above).
 - (vi) Chronic nonhealing or recent bone grafts.
 - (vii) History of more than one dislocation of the shoulder without surgical repair or with history of recurrent shoulder disorders within the

last 5 years with pain or loss of motion, and with or without radiographic deviations from normal.

(viii) Any extremity condition that results in a person not being able to safely perform essential job functions.

(B) Category B medical conditions shall include the following:

(i) History of shoulder dislocation with surgical repair.

(ii) Significant limitation of function of shoulder, elbow, wrist, hand, or finger, due to weakness, reduced range of motion, atrophy, unequal length, absence, or partial amputation.

(iii) Significant lack of full motion of hip, knee, ankle, foot, or toes due to weakness, reduced range of motion, atrophy, unequal length, absence, or partial amputation.

(iv) History of meniscectomy or ligamentous repair of knee.

(v) History of intra-articular, malunited, or nonunion of upper or lower extremity fracture.

(vi) History of osteomyelitis, septic, or rheumatoid arthritis.

(vii) Any other extremity condition that may result in a person not being able to perform essential job functions.

(15) Neurological disorders.

(A) Category A medical conditions shall include the following.

(i) Ataxias of heredo-degenerative type.

(ii) Cerebral arteriosclerosis as evidenced by a history of transient ischemic attack, reversible ischemic neurological deficit, or ischemic stroke.

(iii) Hemiparalysis or paralysis of a limb.

(iv) Multiple sclerosis with activity or evidence of progression within previous 3 years.

(v) Myasthenia gravis with activity or evidence of progression within previous 3 years.

(vi) Progressive muscular dystrophy or atrophy.

(vii) Uncorrected cerebral aneurysm.

(viii) A candidate with epileptic conditions shall have had complete control during the previous 5 years and to be medically qualified a candidate shall meet all of the following:

(I) No seizures for 1 year off all anti-epileptic medication or 5 years seizure free on a stable medical regimen.

(II) Neurologic examination is normal.

(III) Imaging (CAT or MRI scan) studies are normal.

(IV) Awake and asleep EEG studies with photic stimulation hyperventilation are normal.

(V) A definitive statement from a qualified neurological specialist that the candidate meets the specified above and that the candidate is neurologically cleared for firefighting training and the performance of essential job functions.

- (ix) Dementia (Alzheimer's and other neuro-degenerative diseases) with symptomatic loss of function or cognitive impairment (e.g., <28 on Mini-Mental Status Exam).
- (x) Any neurological condition that results in a person not being able to safely perform essential job functions.
- (B) Category B medical conditions shall include the following:
 - (i) Congenital malformations.
 - (ii) Migraine.
 - (iii) Clinical disorders with paresis, dyscoordination, deformity, abnormal motor activity, abnormality of sensation, or complaint of pain.
 - (iv) History of subarachnoid or intraparenchymal hemorrhage.
 - (v) Abnormalities from recent head injury such as severe cerebral contusion or concussion.
 - (vi) Any other neurological condition that may result in a person not being able to safely perform essential job functions.
- (16) Skin.
 - (A) Category A medical conditions shall include the following:
 - (i) Metastatic or locally extensive basal or squamous cell carcinoma or melanoma.
 - (ii) Any dermatologic condition that would not allow for a successful respiratory facepiece test.
 - (iii) Any dermatologic condition that results in a person not being able to safely perform essential job functions.
 - (B) Category B medical conditions shall include the following:
 - (i) Skin conditions of a chronic or recurrent nature (eczema, cystic acne, psoriasis) that cause skin openings or inflammation or irritation of the skin surface.
 - (ii) Surgery or skin grafting.
 - (iii) Mycosis fungoides.
 - (iv) Cutaneous lupus erythematosus.
 - (v) Raynaud's phenomenon.
 - (vi) Scleroderma (skin).
 - (vii) Vasculitic skin lesions.
 - (viii) Atopic dermatitis/eczema.
 - (ix) Contact or seborrheic dermatitis.
 - (xi) Albinism Darier's Disease, Ichthyosis Marfan's Syndrome, Neurofibromatosis, and other genetic conditions.
 - (xii) Folliculitis, Pseudo-folliculitis, Miliaria, Keloid folliculitis.
 - (xiii) Hidradenitis suppurativa, Furuncles, Carbuncles, or Grade IV acne (cystic).
 - (xiv) Mechano-Bullous Disorders (Epidermolysis Bullosa, Hailey Pempfigus, Porphyria, Pempfigoid).
 - (xv) Urticaria or Angioedema.
 - (xvi) Any other skin condition that may result in a person not being able to safely perform essential job functions.
- (17) Blood and blood-forming organs.

- (A) Category A medical conditions shall include the following:
 - (i) Hemorrhagic states requiring replacement therapy.
 - (ii) Sickle cell disease (homozygous).
 - (iii) Clotting disorders.
 - (iv) Any other hematological condition that results in a person not being able to safely perform essential job functions.
 - (B) Category B medical conditions shall include the following:
 - (i) Anemia.
 - (ii) Leukopenia.
 - (iii) Polycythemia vera.
 - (iv) Splenomegaly.
 - (v) Any other hematological condition that results in a person not being able to safely perform essential job functions.
 - (vi) History of thromboembolic disease.
- (18) Endocrine and metabolic disorders.
- (A) Category A medical conditions shall include the following:
 - (i) Type 1 diabetes unless a candidate meets all of the following criteria:
 - (I) Is maintained by a physician knowledgeable in current management of diabetes mellitus on a basal/bolus (can include subcutaneous insulin fusion pump) regimen using insulin analogs.
 - (II) Has demonstrated over a period of at least 1 year the motivation and understanding required to closely monitor and control capillary blood glucose levels through nutritional therapy and insulin administration. Assessment of this shall take into consideration the erratic meal schedules, sleep disruptions, and high aerobic and anaerobic workloads intrinsic to firefighting.
 - (III) Has dilated retinal exam by a qualified ophthalmologist or optometrist that shows no higher grade of diabetic retinopathy than microaneurysms, as indicated on the International Clinical Diabetic Retinopathy Disease Severity Scale.
 - (IV) Has normal renal function based on a calculated creatinine clearance greater than 60mL/min and absence of proteinuria. (Creatinine clearance can be calculated by use of the Cockcroft-Gault or similar formula. Proteinuria is defined as 24-hour urine excretion of greater than or equal to 300mg of protein or greater than or equal to 300mg of albumin per gram of creatinine in a random sample).
 - (V) Has no automatic or peripheral neuropathy. (Peripheral neuropathy is determined by diminished ability to feel the vibration of a 129 cps tuning fork or the light touch of 10-gram monofilament on the dorsum of the great toe proximal to the nail. autonomic neuropathy might be determined by evidence of gastroparesis, postural hypotension, or abnormal tests of heart rate variability.)

(VI) Has normal cardiac function without evidence of myocardial ischemia on cardiac stress testing (to at least 12 METS) by ECG and cardiac imaging.

(VII) Has a signed statement from an endocrinologist knowledgeable in management of diabetes mellitus as well as the essential job functions and hazards of firefighting as described in Section 270:10-1-7 of the administrative rules that the candidate is (1) being successfully maintained on a regimen consistent with (18) (i) (I) and (II), (2) has achieved stable control of blood glucose as evidenced by Hemoglobin A1C consistently less than 8 when monitored at least twice yearly and shall include evidence of a set schedule for blood glucose monitoring and a thorough review of the data from such monitoring (3) does not have an increased risk of hypoglycemia due to alcohol use of other predisposing factors (4) has had no episodes of severe hypoglycemia (defined as requiring assistance of another) in the preceding 1 year, with no more than one episode of severe hypoglycemia in the preceding 5 years and (5) is certified not have a medical contraindication to firefighting training and operations.

(ii) Insulin-requiring Type 2 diabetes mellitus, unless a candidate meets all of the following criteria:

(I) Is maintained by a physician knowledgeable in current Management of diabetes mellitus.

(II) Has demonstrated over a period of at least 3 months the motivation and understanding required to closely monitor and control capillary blood glucose levels through nutritional therapy and insulin administration. Assessment of this shall take into consideration the erratic meal schedules, sleep disruption, and high aerobic and anaerobic workloads intrinsic to firefighting.

(III) Has a dilated retinal exam by a qualified ophthalmologist or optometrist that show no higher grade of retinopathy than microaneurysms, as indicated on the International Clinical Diabetic Retinopathy Disease Severity Scale.

(IV) Has normal renal function based on a calculated creatinine clearance greater than 60 mL/min and absence of proteinuria. (Creatinine clearance can be calculated by use of the Codroft-Gault or similar formula. Proteinuria is defined as 24-hour urine excretion of greater than or equal to 300mg protein or greater than or equal to 300mg of albumin per gram creatinine in a random sample).

(V) Has no autonomic or peripheral neuropathy. (Peripheral neuropathy is determined by diminished ability to feel the vibration of 128 cps tuning fork or the light touch of a 10-gram monofilament on the dorsum of the great toe proximal to the nail. Autonomic neuropathy can be determined by evidence of

gastroparesis, postural hypotension, or abnormal tests of heart rate variability.

(VI) Has normal cardiac function without evidence of myocardial ischemia on cardiac stress testing (to at least 12 METS) by ECG and cardiac imaging.

(VII) Has signed statement from an endocrinologist knowledgeable in management of diabetes mellitus as well as the essential job functions and hazards of firefighting as described in Section 270:10-1-7 of the administrative rules that the candidate is (1) maintained on a stable insulin regimen and has demonstrated over a period of at least 3 months the motivation and understanding required to closely monitor and control capillary blood glucose levels despite varied activity schedules through nutritional therapy and insulin administration, (2) has achieved stable control of blood glucose as evidenced by Hemoglobin A1C less than 8 when monitored at least twice yearly, which must include evidence of a set schedule for blood glucose monitoring and a thorough review of the data from such monitoring, (3) Does not have an increased risk of hypoglycemia due to alcohol use or other predisposing factors, (4) has had no episodes of severe hypoglycemia (defined as requiring assistance of another) in the preceding 1 year with no more than one episode of severe hypoglycemia in the preceding 5 years and (5) is certified not to have a medical contraindication to firefighting training and operations.

(iii) Any endocrine or metabolic condition that results in a person not being able to safely perform job functions.

(B) Category B medical conditions shall include the following:

(i) Diseases of the adrenal gland, pituitary gland, parathyroid gland, or thyroid gland of clinical significance.

(ii) Nutritional deficiency diseases or other metabolic disorder.

(iii) Diabetes mellitus, not on insulin therapy, but controlled by diet, exercise, and/or hypoglycemic agents unless all of the following are met:

(I) Has achieved a stable blood glucose as evidenced by Hemoglobin A1C level less than 8 during the prior 3 month period.

(II) If on oral hypoglycemic agents, has had no episodes of severe hypoglycemia (defined as requiring assistance of another) in the preceding year.

(III) Has dilated retinal exam by a qualified ophthalmologist or optometrist that shows no higher grade of diabetic retinopathy than microaneurysms, as indicated on the International Clinical Diabetic Retinopathy Disease Severity Scale.

(IV) Has normal renal function based on a calculated creatinine clearance greater than 60mL/min and absence of proteinuria.

(Creatinine clearance can be calculated by use of the Cockcroft-Gault or similar formula. Proteinuria is defined as 24-hour urine

excretion of greater than or equal to 300mg protein or greater than or equal to 300mg of albumin per gram of creatinine is a random sample).

(V) Has no autonomic or peripheral neuropathy. (Peripheral neuropathy is determined by diminished ability to feel the vibration of a 128 cps tuning fork or the light touch of a 10-gram monofilament on the dorsum of the great toe proximal to the nail. Autonomic neuropathy can be determined by evidence of gastroparesis, postural hypotension, or abnormal tests of heart rate variability.

(VI) Normal cardiac function without evidence of myocardial ischemia on cardiac stress testing (to at least 12 METS) by ECG and cardiac imaging.

(iv) Any other endocrine or metabolic condition that may result in a person not being able to safely perform essential job functions.

(19) Systemic diseases and miscellaneous conditions:

(A) Category A medical conditions shall include the following:

(i) Any systemic condition that results in a person not being able to safely perform essential job functions.

(ii) Reserved

(B) Category B medical conditions shall include the following:

(i) Connective tissue disease, such as dermatomyositis, systemic lupus erythematosus, scleroderma, and rheumatoid arthritis.

(ii) History of thermal, chemical, or electrical burn injury with residual functional deficit.

(iii) Documented evidence of a predisposition to heat stress with recurrent episodes or resulting injury.

(iv) Any other systemic condition that may result in a person not being able to safely perform essential job functions.

(20) Tumors and malignant diseases.

(A) Category A medical conditions shall include the following:

(i) Malignant disease that is newly diagnosed, untreated, or currently being treated.

(ii) Any tumor or similar condition that results in a person not being able to safely perform essential job functions.

(B) Category B medical conditions shall include the following:

(i) Benign tumors.

(ii) History of CNS tumor or malignancy.

(iii) History of head and neck malignancy.

(iv) History of lung cancer.

(v) History of GI or GU malignancy.

(vi) History of bone or soft tissue tumors or malignancies.

(vii) History of hematological malignancy.

(viii) Any tumor or similar condition that may result in a person not being able to safely perform essential job functions.

- (21) Psychiatric conditions.
 - (A) Category A medical conditions shall include the following:
 - (i) Any psychiatric condition that results in a person not being able to safely perform essential job functions.
 - (ii) Reserved
 - (B) Category B medical conditions shall include the following:
 - (i) A history of psychiatric condition or substance abuse problem.
 - (ii) Requirement for medications that increase an individual's risk of heat stress, or other interference with the ability to safely perform essential job functions.
 - (iii) Any other psychiatric conditions that may result in a person not being able to safely perform essential job functions.
- (22) Chemicals, drugs, and medications.
 - (A) Category A medical conditions shall include the following:
 - (i) Narcotics, including methadone.
 - (ii) Sedative-hypnotics.
 - (iii) Drugs that prolong Prothrombin Time, Partial Thromboplastin Time or INR.
 - (iv) Beta-adrenergic blocking agents, high dose diuretics, or central Acting antihypertensive agents (e.g., clonidine).
 - (v) Respiratory medications: Inhaled bronchodilators, inhaled leukotrienerceptor blockers/antagonists.
 - (vi) Any chemical drug, or medications that results in a person not being able to safely perform essential job functions.
 - (vii) Evidence of illegal drug use detected through testing, conducted in accordance with Substance Abuse and Mental Health Service Administration (SAMHSA), shall be a Category A medical condition.
 - (viii) Evidence of clinical intoxication or measured blood alcohol level that exceeds the legal definition of intoxication according to the AHJ at the time of medical evaluation shall be a Category A medical condition.
 - (ix) High dose corticosteroids for chronic disease.
 - (x) Anabolic steroids.
 - (B) Category B medical conditions shall include the following:
 - (i) Cardiovascular agents.
 - (ii) Simulants.
 - (iii) Psychiatric medications.
 - (iv) Other than high dose corticosteroids.
 - (v) Antihistamines.
 - (vi) Muscle relaxants.
 - (vii) Any other chemical drug, or medication that results in a person not being able to safely perform essential job functions.

