



Jackson Hole Fire/EMS (JHFEMS) sponsored Medical Exams

Jackson Hole Fire/EMS is committed to the health and safety of its members. Line of duty deaths and disabilities are devastating and it is the goal of this department to mitigate the risk factors that lead to these incidents as much as possible with an ongoing medical screening process.

Medical Requirements (paid by the department):

1. Jackson Hole Fire/EMS Health History Questionnaire reviewed by contracted St. John's Physician (SJP) at either locations: St. John's Internal Medicine or St. John's Family Health & Urgent Care physician.
 - a. Forms available at JHFEMS Administration
 - b. These forms include a HIPPA disclosure /Medical Record Release for contracted St. John's Physician (SJP) to share all results and medical decision making with Dr. Will Smith, Medical Director JHFEMS
2. Medical Exam by contracted St. John's Physician (SJP) as listed based on age grouping or other interval as deemed necessary by practitioner– see Appendix A for intervals
3. Vision and hearing tests – see Appendix A for minimum standards
4. Blood work and lab testing
 - a. Annually through the SJMC (ideally during Health Fair [spring] or by special physician's order) paid by JHFEMS
 - b. Complete blood count (CBC), comprehensive metabolic panel (CMP), thyroid function (TSH), and urinalysis not obtained through SJMC (billed to patient/insurance – not covered by JHFEMS) may be provided to SJP if already completed in past year by members own medical practitioner.
5. Chest x-ray
 - a. As deemed necessary by contracted St. John's Physician, paid by JHFEMS
6. Pulmonary Function Testing (PFTs) – formal PFT's performed at SJMC
 - a. New members/Baseline and then as deemed necessary by St. John's Physician. Paid by JHFEMS.
7. 12-lead EKG
 - a. New members/Baseline and every year after 50 years old with physical exam schedule
 - b. Optional at other intervals at the SJP discretion. EKGs Paid by JHFEMS.
8. Treadmill Stress Test with Pulse Ox (with/without imaging at discretion of SJP) – performed at SJMC
 - a. New members/Baseline and every year after 50 years old, paid by JHFEMS
 - b. Optional at other intervals at the SJP discretion, paid by JHFEMS
9. Additional testing may be requested by the SJP by contacting Will Smith, MD (Jackson Hole Fire/EMS Physician Medical Director) at (307)699-0230 or willmd911@mac.com
10. Vaccine Standards – See attached JHFEMS Memo (February 17, 2010)
 - a. Influenza (annual – Fall) – Public Health – 460 E. Pearl Ave, Jackson, WY (370)733-6401
 - b. PPD (based on exposure or concern) – Public Health
 - c. dTaP initially (then dT every 5 years) – Public Health
 - d. Hep B series and Titer – SJMC, Janet Olson, RN – (307)739-7518
 - e. MMR and Titer, if needed – SJMC, Janet Olson, RN – (307)739-7518

This physical is not meant to replace the relationship you have with your regular physician, but a contractual relationship between volunteer/employee and JHFEMS to assure medical standards are met to limit the risk of medical Line of Duty disability or death.

Final Medical Fitness determination (Fit or Not-Fit with reasons) should be forwarded to the Jackson Hole Fire/EMS Physician Medical Director, PO Box 901, 40 E. Pearl St., Jackson, WY 83001. All documents will be kept strictly confidential in accordance with federal HIPPA requirements.

Updated: January 3, 2013



Jackson Hole Fire/EMS (JHFEMS) Medical Exam Process

This section is intended to help guide the JHFEMS member and St. John's Physician through the medical exam process. For questions please contact:

JHFEMS Physician Medical Director – Dr. Will Smith (307)699-0230 / willmd911@mac.com

JHFEMS Health and Wellness Coordinator – Capt Jill Patterson (307)413-1587

jpatterson@tetonwyo.org

- 1) Determine schedule of medical exams, based on age:
 - New hire/baseline then based on age:
 - 18-39 years old every 3 years
 - 40-49 years old every 2 years
 - 50 years old & older every year.
- 2) Complete Health History Questionnaire and bring to contracted St. John's Physician for appointment. Exams should be done each year between January and May (except new members).
- 3) Schedule appointment with either:
 - a. Dr. Dennis Butcher at St. John's Internal Medicine SJIM by calling (307)733-7222. Address: 555 E. Broadway, Suite 201, PO Box 428, Jackson, WY 83001.
 - b. Drs. Jim Little, Jr or Physician at St. John's Family Health & Urgent Care by calling (307)739-8999. Address: 1415 S. Highway 89 (Smith's Plaza), PO Box 4010, Jackson, WY 83001 – Block times will be provided.
- 4) Complete SJMC wellness laboratory testing annually and at least 1 week before scheduling SJP appointment. Annual health fair labs may be forwarded to Drs. Butcher or Little Jr. or your regular physician for annual review (even if no physical required based on age for that year).
- 5) After your office appointment you will be scheduled for a cardiac stress test based on your age:
 - New hire/baseline then every 2 years after age 50 (or as deemed necessary by SJP).
- 6) Complete other specialized testing as deemed necessary by SJP.
- 7) St. John's Physician will provide JHFEMS Medical Director with written letter after medical exam process is completed regarding individual members determination of fit or not for active membership in JHFEMS. A copy of this letter will be forwarded onto each member for his or her individual records.
- 8) Immunization Program will be completed on following schedule:
 - Influenza (Annual – Fall)
 - PPD – Tuberculin Skin test (based on exposure or concern)
 - Hepatitis B series of 3 and Titer
 - MMR- Measles, Mumps and Rubella
 - dTaP- Tetanus/Pertussis (initially and then dT every 5 years)
- 9) After completion of the initial Medical Exam and deemed medically fit, process the member will complete an annual physical agility test administered by JHFEMS.
- 10) Completion of Medical Exam process will be necessary to have an active role in JHFEMS. Support roles will be defined on a case by case basis for those members with medical conditions that do not allow a 'fit' status.
- 11) Monitoring of Medical Exam Process will be maintained by JHFEMS Health and Wellness Coordinator.

Jackson Hole Fire/EMS Membership Immunization

Jackson Hole Fire/EMS is committed to the health and safety of its members. One part of this includes offering up-to-date immunizations to our members. Current vaccine standards include the following :

- Influenza (Annual – Fall)
- PPD – Tuberculin Skin test (based on exposure or concern)
- Hepatitis B series of 3 and Titer
- MMR- Measles, Mumps and Rubella
- dTaP- Tetanus/Pertussis (initially and then dT every 5 years)

Through coordination with TC Public Health and SJMC the vaccines are offered as listed below.

Teton County Public Health, 460 E Pearl Ave. Jackson

- Influenza
- PPD
- dTaP

St. John's Medical Center,

- Hepatitis B series and Titer
- MMR and Titer, if needed.

(Titers may be used to indicate need if you are unsure of your vaccination status)

Please contact Janet Olson, Infection Control Officer at (307)739-7518 to schedule an appointment.

Please also read the attached Hep B vaccination information flyer. If you do not wish to be immunized against Hep B, you must sign a Declination Statement that will need to go into your personnel file. The Declination form is also attached for your use. Please turn this form into Deb Meagher or Jill Smith in Admin office, only if you are refusing vaccination.

Please submit any immunization records that you currently have to be added to your personnel file.

For questions or concerns please contact Captain Jill Patterson at (307)413-1587 or jpatterson@tetonwyo.org

HEPATITIS B VACCINE

WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

1 What is hepatitis B?

Hepatitis B is a serious disease that affects the liver. It is caused by the hepatitis B virus (HBV). HBV can cause:

Acute (short-term) illness. This can lead to:

- loss of appetite
- diarrhea and vomiting
- tiredness
- jaundice (yellow skin or eyes)
- pain in muscles, joints, and stomach

Acute illness is more common among adults. Children who become infected usually do not have acute illness.

Chronic (long-term) infection. Some people go on to develop chronic HBV infection. This can be very serious, and often leads to:

- liver damage (cirrhosis)
- liver cancer
- death

Chronic infection is more common among infants and children than among adults. People who are infected can spread HBV to others, even if they don't appear sick.

- In 2005, about 51,000 people became infected with hepatitis B.
- About 1.25 million people in the United States have chronic HBV infection.
- Each year about 3,000 to 5,000 people die from cirrhosis or liver cancer caused by HBV.

Hepatitis B virus is spread through contact with the blood or other body fluids of an infected person. A person can become infected by:

- contact with a mother's blood and body fluids at the time of birth;
- contact with blood and body fluids through breaks in the skin such as bites, cuts, or sores;
- contact with objects that could have blood or body fluids on them such as toothbrushes or razors;
- having unprotected sex with an infected person;
- sharing needles when injecting drugs;
- being stuck with a used needle on the job.

2 Hepatitis B vaccine: Why get vaccinated?

Hepatitis B vaccine can prevent hepatitis B, and the serious consequences of HBV infection, including liver cancer and cirrhosis.

Routine hepatitis B vaccination of U.S. children began in 1991. Since then, the reported incidence of acute hepatitis B among children and adolescents has dropped by more than 95% – and by 75% in all age groups.

Hepatitis B vaccine is made from a part of the hepatitis B virus. It cannot cause HBV infection.

Hepatitis B vaccine is usually given as a **series of 3 or 4 shots**. This vaccine series gives long-term protection from HBV infection, possibly lifelong.

3 Who should get hepatitis B vaccine and when?

Children and Adolescents

- All children should get their first dose of hepatitis B vaccine **at birth** and should have completed the vaccine series by 6-18 months of age.
- Children and adolescents through 18 years of age who did not get the vaccine when they were younger should also be vaccinated.

Adults

- All unvaccinated adults **at risk for HBV infection** should be vaccinated. This includes:
 - sex partners of people infected with HBV,
 - men who have sex with men,
 - people who inject street drugs,
 - people with more than one sex partner,
 - people with chronic liver or kidney disease,
 - people with jobs that expose them to human blood,
 - household contacts of people infected with HBV,
 - residents and staff in institutions for the developmentally disabled,
 - kidney dialysis patients,

JACKSON HOLE FIRE/EMS

HEPATITIS B (Hep B-Adult)

EMPLOYEE DECLINATION STATEMENT

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring Hepatitis B (HBV) infection.

I have been given the opportunity to be vaccinated with Hepatitis B vaccine at no charge to myself. However, I decline Hepatitis B vaccine at this time.

I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease.

If in the future I continue to have occupational exposure to blood or other potentially infectious materials, and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me as long as I'm still an employee/volunteer with the Jackson Hole Fire/EMS Department.

Having been informed of the possible consequences of contracting Hepatitis B, and realizing I am in the high risk group, I choose not to have Hepatitis B vaccine; and herewith release the Town of Jackson and Teton County from all responsibility should I become ill with the above stated disease or suffer any complications resulting from refusal of vaccine.

Name: _____ Date _____
(Print)

Signature _____ Date _____

Witness _____ Date _____

St. John's Medical Center
Date _____

www.tetonhospital.org

JH FIRE/EMS WELLNESS LABORATORY TESTING REGISTRATION

Venipuncture (drawing blood from the vein) has its own risk and may cause bruising and pain. SJMC Lab will call any "critical results" to the *phone number that I will provide* and it is my responsibility to follow-up and contact the physician of my choice. If I will provide my Jackson area physician's name, he/she will be called instead of me. I release SJMC Health Institute and Laboratory for any liability as it relates to the collection, testing and reporting of results.

Client Signature

Dr. Dennis Butcher or Dr. Jim Little Jr.
Please release results to the above **Jackson area physician.**

NAME: _____, _____ **DOB:** ____ / ____ / ____ **Sex:** Male or
Female
Last First MI

ADDRESS: _____ Mailing Address

E-MAIL: _____

I have fasted for at least 10 hours

If you are having your blood drawn at the hospital OP Draw Room you must call to schedule an appointment, 739-7531

If you are collecting the blood outside of the hospital, please follow the instructions below.

1. The tubes to be drawn are listed below, please label all tubes clearly with your name and DOB, also the date and time of the draw and the first initial, last name of the person collecting the blood.
2. Package the completed registration form, and LABELED specimens in a transport bag and deliver to the Clinical Laboratory (upstairs) ASAP. **The specimens must be processed within 30 minutes of the collection** to produce accurate results.
3. The tubes to be collected are: **one sodium heparin (green top) tube and one EDTA (lavender top) tube** for the tests listed below.
4. This completed paper registration must be included with specimens and delivered to the Laboratory within 20-30 minutes for processing.

HFB – Wellness Chemistry Profile + Hemogram

Total Charges = \$60.00 (includes collection and processing fee)

This testing will be billed to account # 30011398, JH Fire/EMS

Updated: January 3, 2013

Appendix A – Physical Exam Standards for 2013

Item	Fairfax (1984)	Montgomery (1992)	NFPA (1992)	DOT (1995)	Jackson Hole Fire/EMS (2013)
1. Vision Screening					New hire/baseline and then with physical exam schedule
<u>Corrected</u> each eye binocular	(retention) 20/40 N/A	N/A 20/30	N/A 20/30	N/A 20/40	N/A 20/40
<u>Uncorrected</u> each eye binocular	(new hire) 20/60, 20/70 N/A	N/A 20/100	N/A 20/100	20/40 N/A	N/A N/A
<u>Peripheral</u>	N/A	70°	140°	70°	N/A
<u>Color</u>	Red, Green, Blue	Red, Green, Yellow	N/A	Red, Green, Yellow	N/A
					Failure of screen requires formal eye visit with any vision specialist (paid by member). Prescription lenses not covered by JHFEMS, except for PPE. If member unable to reach 20/40 corrected vision than they are disqualified.
2. Hearing Screening	25 dB @ 500, 1,000, or 2,000 Hz <u>and</u> avg. 45 dB @ all four frequencies including 3,000, 4,000, & 6,000 Hz	25 dB @ 500, 1,000, or 2,000 Hz 35dB @ 3,000 Hz <u>or</u> 30 dB @ 500, 1,000, or 2,000 Hz <u>and</u> avg. 30 dB for all four frequencies	25 dB @ 500, 1,000, 2,000, or 3,000 Hz <u>or</u> 30 dB @ 500, 1,000, or 2,000 Hz <u>and</u> avg. 30 dB for all four frequencies	Avg. 40 dB @ 500, 1,000, & 2,000 Hz	New hire/baseline then with physical exam schedule 25 dB @ 500, 1,000, & 2,000 Hz in at least one ear Failure of Screen not disqualifying but suggest formal Audiogram (NOT covered by JHFEMS) and follow up with personal physician and/or audiologist. Hearings aids not covered by JHFEMS unless hearing loss found to be from LOD event.

4. Blood Pressure	160/110 consistently (absolute)	N/A	N/A	160/90 consistently (relative)	New hire/baseline with physical exam schedule 160/90 (consistently - 3 separate readings). Disqualifying until BP controlled. Additional physician care/meds to control BP NOT covered by JHFEMS.
5. Exercise Treadmill Stress Test	Case by Case	Yes (new hires)	N/A	N/A	New hire/baseline then every 2 years \geq 50. Imaging (Nuclear or Echo for high risk candidates or concerns before/after exercise treadmill). Pulse Oximetry will be monitored during stress testing. Member will achieve 9.1 METS (complete at least Stage 3 per Bruce Protocol). Positive/Equivocal stress disqualifying until cleared by Contract Physician and/or Cardiologist. Further testing/treatment after stress test NOT covered by JHFEMS.
6. Chest x-ray (CXR) Frequency	20-40 yrs q. 3 yrs 40 yrs & up q. 2 yrs	q. 5 yrs	N/A	N/A	As deemed necessary by Contract Physician. CT scans of chest to follow up abnormal chest x-ray covered by JHFEMS. If still abnormal findings, further testing and evaluation not covered by JHFEMS. Abnormal CXR and Chest CT findings disqualifying until cleared by Contract Physician.
7. Pulmonary Function Test	N/A	N/A	N/A	N/A	New hire/baseline then as deemed necessary by Contract Physician. To be performed at SJMC. Abnormal findings on PFT test will require further evaluation and treatment NOT covered by JHFEMS. Member disqualified until cleared by Contract Physician and/or Pulmonologist.
8. Lab Analysis Frequency	N/A	N/A	N/A	N/A	New hire/baseline then yearly (even if not complete physical scheduled for that year based on age). SJMC lab covered + UA dip in office (if abnormal – formal UA with micro covered by JHFEMS). SJMC should be used as primary source of labs. If labs not obtained at SJMC, then labs NOT covered by JHFEMS. Special labs ordered outside health fair at Contract Physician discretion and covered by JHFEMS. Significantly abnormal results require further evaluation NOT covered by JHFEMS. Disqualified until evaluated and cleared by Contract Physician.
9. EKG Frequency	N/A	N/A	N/A	N/A	New hire/baseline then yearly after 50. Covered by JHFEMS. Abnormal results considered with stress testing and qualification status on case by case by Contract Physician.

10. Vaccination	Yes	N/A	N/A	N/A	<p>1) Hepatitis B series (3 shots) followed by titer (SJMC)</p> <p>2) PPD (TB) based on exposure or concern (Public Health)</p> <p>3) Tdap/dT every 5 years (Public Health)</p> <p>4) MMR (SJMC)</p> <p>5) Influenza – Annual in fall (Public Health)</p> <p>6) Pneumococcal (Public Health)</p> <p>Vaccines can be refused with written/signed refusal by member – not disqualifying. All covered by JHFEMS.</p>
11. Physical Frequency	20-30 yrs q 3 yrs 30-40 yrs q 2 yrs 40 yrs & up q 1 yr	20-29 yrs q 3 yrs 30-39 yrs q 2 yrs 40 yrs & up q 1 yr	20-30 yrs q 3 yrs 30-40 yrs q 2 yrs 40 yrs & up q 1 yr	Annual	<p>New hire/baseline then:</p> <p>18-39 yrs q 3 yrs</p> <p>40-49 yrs q 2 yrs</p> <p>50 yrs & up q 1 yr.</p>
12. Additional Testing	N/A	N/A	N/A	N/A	As determined by Contract Physician and approved by JH Fire/EMS Chief and Medical Director.
13. Final Qualification	N/A	N/A	N/A	N/A	As determined by Contract Physician and approved by JH Fire/EMS Chief and Medical Director. Members not felt to be qualified for full Fire/EMS duty shall be evaluated if they can fill support roles on a case by case basis.
Physical Agility	Yes	Yes (new hires)	N/A	N/A	<p>New hire/baseline then yearly after member has passed physical and is considered physically ‘fit’.</p> <p>See JHFEMS testing guidelines. Must pass unless waiver by physician with other testing made on case by case basis.</p>