

Preemployment (and periodic) Fitness for Duty Examinations

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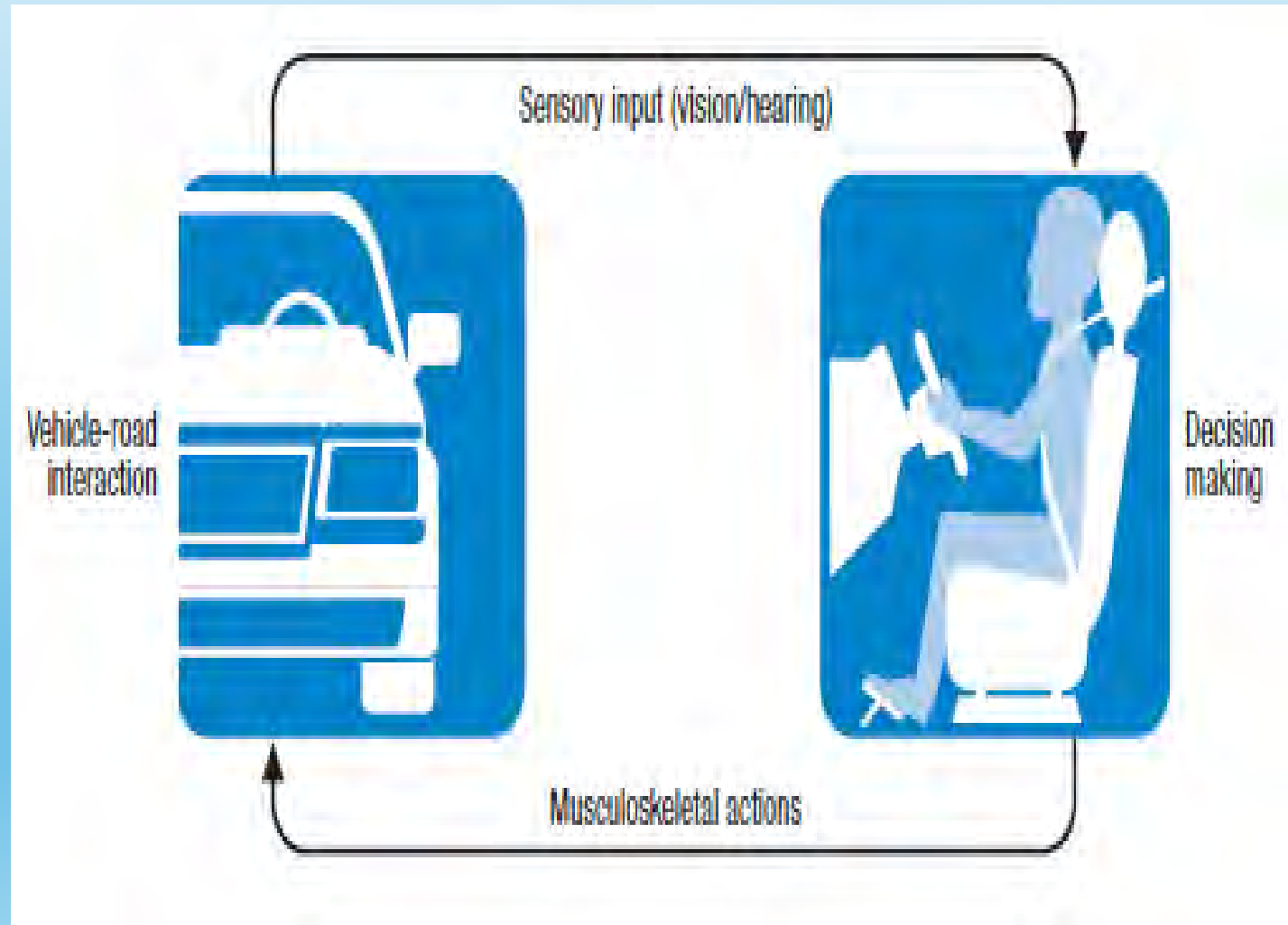
Outline of talk.

1. Third party medicine.
 2. Ergonomics of the job and duty statements
 3. Medical history
 4. Examination - physical, functional, special
 5. Special groups
 6. Classification of fitness for duty and Report
 7. Legal considerations
 8. Q&A
- Talk is NOT about patients referred “for cause” after serious illness, absence or injury.

1. Third party medicine.

- The clients:
 - the patient (worker) and
 - the referrer (employer/recruit agent). Is the person fit to perform the job efficiently and safely, and attend reliably?
 - AHPRA Code of conduct Para 10.8 – complaints
- Introduce yourself , the purpose of exam and how results will be handled
 - you advise but employer decides
 - conflict of interest re \$
 - confidentiality – can you control the medical data?
 - questions by patient
 - rapport – I always offer a glass of water

2. The ergonomics of the job (JTA) – the Inherent Requirements



2. The ergonomics of the job – the inherent requirements (cont'd)

- Duty statements are variable in information
- Site visit to better understand context of the job, if possible, for regular referrals
- Health assessments/biological monitoring for **hazardous exposures** as required by regulations, are an additional matter eg dusts, lead, noise. Hazards should be identified by employer.

3. Medical Hx

- Current health – Questionnaire for review of systems + medications and therapies.
- Past Hx including chronic diseases, psych, MVA, surgery and allergy? (Don't ask Qs if you don't know what to do with answers).
- Occupational Hx – exposures, W/C?

3. Medical Hx (cont'd)

- Immunisation status – inherent requirements (health care, vets, abattoir/Qfever, remote postings, etc)
- Questionnaires? eg DASC, ESS, problems to be considered
 - “game the system”,
 - Bayes *a priori*
- Privacy “ need to know” eg STD

4. Exam – physical/ functional / job specific tests

- Vital signs – BP, pulse, resp, temp, urine.
- Musculoskeletal – screen (gait, squat and rise, neck, shoulders and upper limb, low back)
- Vision acuity (inherent requirements - near, int'd, far? colour vision?)
- CVS – heart?
- Resp – chest?
- Hernias – inherent requirements

- BMI??

4. Exam – physical/ functional / job specific tests (cont'd)

- Functional tests
 - lift, carry, push/pull
 - what is their validity? Eg use population norms of grip strength for male and female paramedics?

4. Exam – physical/ functional / job specific tests (cont'd)

Specific tests may be required as determined by inherent requirements or by regulations

- Audiometry – inherent requirements (NIHL or need to hear speech)
- Spirometry and HRCT for dust exposure
- VO₂ (step test) for stamina eg Fire Fighter
- Drug and alcohol screen – or leave to HR?
- Toxicology eg lead - base line
- Psychological assessment eg cognitive reasoning, team work, neuropsychology testing, simulator – may be useful in patient with mental health Hx)

5. Special considerations

- Remote – offshore or international (with limited health care)
 - dental, chronic diseases, immunisation, HUET (helicopter escape), etc.
- Safety Critical Workers (rail, transport, emergency services, etc)
 - stringent criteria, refer AFTD etc

(But not use AFTD commercial drivers std as default std for all pre-employment exams eg forklift drivers?)

6. Classification of Fitness and Report

- Must categorise (ie **Discriminate**)
 - Fit for duty
 - Fit for duty with restrictions/conditional/subject to review (also glasses, hearing aids)
 - Temporarily Unfit – while further clinical info obtained (eg chest pains)
 - Not fit/permanently unfit (eg MCI/dementia)
- Report to employer
 - clear statement re fitness
 - no medical information (privacy)
 - recommendations re reasonable job modifications
- Checklists – you are not a trained monkey! Eg coeliac disease and remote work?

7. Legal considerations

- Discrimination
 - importance of inherent requirements in determining **justified and unjustified discrimination**
- Privacy
 - “the need to know” determines info provided to employer (fitness for duty) and control/security of “paperwork”.
 - Permission to contact GP or specialists.

7. Legal considerations (cont'd)

- **Duties** of care
 - Employer has OHS, public safety, environment, etc, obligations and partly depends on medical report re fitness.
 - The employer has the final say re employment (eg criminal record and child care).
- Coincidental findings eg melanoma, bruises, etc??
- AI
 - should use of AI in assessment be declared?
 - what is the place of AI in pre-employment exams?

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