

Recommended Medical Standards

| EAR, NOSE and THROAT (ENT) DISORDERS Concern is raised with some ENT conditions where disruption of attendance, ongoing discomfort, balance or hearing incapacity will have major detrimental effects on the operational role of a Police Constable | | |
|---|---|--|
| Illness/injury/ disease | Police applicant | Notes |
| External ear Chronic otitis externa <ul style="list-style-type: none"> - Mild, occasional otitis externa - More severe, recurrent otitis externa Atresia or stenosis of ear canal | Likely to be suitable Likely to require further information, investigation and assessment Likely to require further information, investigation and assessment – unless excluded on audiometric criteria | <ul style="list-style-type: none"> • Impedes function, balance and use of communications equipment. |
| Tympanic membrane and middle ear Perforation <ul style="list-style-type: none"> - Healed - Chronic Ventilation tubes (grommets) Successful myringoplasty/ tympanoplasty Chronic otitis media <ul style="list-style-type: none"> - Healed - Inactive - Active Chronic serous otitis media Post-mastoid surgery Otosclerosis Facial palsy with loss of function | Likely to be suitable Likely to require further information, investigation and assessment Likely to require further information, investigation and assessment Likely to be suitable Likely to be suitable Likely to require further information, investigation and assessment Likely to require further information, investigation and assessment Likely to require further information, investigation and assessment, unless audiometric standards are not met. If active chronic disease – unlikely to be suitable Likely to require further information, investigation and assessment Likely to require further information, investigation and assessment | |

EAR, NOSE and THROAT DISORDERS CONTINUED

Concern is raised with some ENT conditions where disruption of attendance, ongoing discomfort, balance or hearing incapacity will have major detrimental effects on the operational role of a Police Constable

| Illness/injury/ disease | Police applicant | Notes |
|---|--|---|
| <p>Inner ear</p> <p>Meniere's disease</p> <p>Benign positional paroxysmal vertigo</p> <p>Hearing</p> <p>Both ears above standard</p> <p>Both ears below standard</p> <p>Hearing in one ear above standard, and hearing in one ear below standard</p> <p>Applicants with hearing aids that bring their hearing above the minimum standard</p> | <p>Unlikely to be suitable</p> <p>Likely to require further information, investigation and assessment</p> <p>Likely to be suitable</p> <p>Unlikely to be suitable</p> <p>Likely to require further information, investigation and assessment – applicant must be assessed carefully</p> <p>Likely to require further information, investigation and assessment</p> | <p>Hearing standard - Hearing loss of more than a total of 84 dB over the 0.5 - 1.2 KHz range or more than a total of 123 dB over the 3,4 and 6 KHz range.</p> <p>For borderline cases or when hearing in one ear is above the standard and hearing in the other ear below standard, or when hearing aids are fitted, consideration should be given to a practical test of hearing to assess functional ability, for example speech and/or phoneme comprehension.</p> |
| <p>Nose</p> <p>Allergic vasomotor rhinitis</p> <p>Recurrent nasal polyps</p> <p>Persistent chronic sinusitis</p> | <p>Likely to be suitable</p> <p>Likely to be suitable but If there is a significant history then likely to require further information, investigation and assessment</p> <p>Likely to be suitable but If severe, likely to require further information, investigation and assessment</p> | |
| <p>Throat</p> <p>Tracheostomy</p> <p>Chronic laryngitis</p> <p>Other laryngeal disease</p> <p>Severe speech impediment</p> <p>Balance disorders and vertigo</p> | <p>Unlikely to be suitable</p> <p>Likely to require further information, investigation and assessment</p> <p>Likely to require further information, investigation and assessment</p> <p>Likely to require further information, investigation and assessment but unlikely to be suitable if the applicant cannot communicate effectively</p> <p>Likely to require further information, investigation and assessment</p> | <ul style="list-style-type: none"> • Not compatible with safety near or in water • Unable effectively to perform vital task of radio and voice communication • Usually a symptom of another condition that may make the applicant unsuitable. |

CARDIOVASCULAR SYSTEM

Some cardiovascular disorders can impair fitness by limiting working capacity or by risk of sudden incapacity. Therefore applicants with marked cardiovascular disorders will not be able safely and efficiently to perform the operational Police Constable role.

| Illness/injury/ disease | Police applicant | Notes |
|--|--|---|
| Coronary artery disease - Symptomatic - Asymptomatic | Unlikely to be suitable Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> High risk of the operational role precipitating symptoms (chest pain) or a coronary event. |
| Congenital heart disease - Corrected - Uncorrected | Likely to require further information, investigation and assessment Unlikely to be suitable | <ul style="list-style-type: none"> Reassess after corrective surgery, unlikely to be suitable if loss of cardiovascular function |
| Cardiac murmurs | Benign – likely to be suitable, else likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Requirement to meet normal cardiovascular function both at rest and exercise |
| Acquired valvular disease | Likely to require further information, investigation and assessment Unless benign unlikely to be suitable. | <ul style="list-style-type: none"> May compromise exercise tolerance |
| Disturbance of rhythm | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> May compromise exercise tolerance. Operational role may dangerously exacerbate the arrhythmia |
| Cardiomyopathies | Unlikely to be suitable | <ul style="list-style-type: none"> Operational role may precipitate a cardiac event. There may be a decrease in exercise tolerance. |
| Uncontrolled hypertension | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> May be referred for monitoring and treatment to own GP and assessed again when condition investigated and controlled. |
| Hypertension with end organ damage or unacceptable side-effects of treatment | Unlikely to be suitable | |
| Controlled hypertension with no side-effects of medication | Likely to be suitable | <ul style="list-style-type: none"> Subject to (annual) medical examination. |
| Established peripheral vascular disease affecting the lower limbs - Symptomatic - Asymptomatic | Unlikely to be suitable Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Condition is not compatible with exercise requirements of operational Police Constable. |
| Raynaud's phenomenon | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Cold may trigger painful attacks. May affect dexterity of hands in operating equipment. |
| Varicose veins Severe varicose veins | Likely to require further information, investigation and assessment Likely to be unsuitable if symptomatic or sufficiently severe to restrict capacity to perform operational duties. | <ul style="list-style-type: none"> Condition will inevitably deteriorate substantially with prolonged standing and sitting. |

| RESPIRATORY SYSTEM | | |
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| Conditions adversely affecting respiratory fitness will limit working ability most commonly from the sensation of breathlessness | | |
| Illness/injury/ disease | Police applicant | Notes |
| Any persistent respiratory disease impairing exercise capacity | Unlikely to be suitable | <ul style="list-style-type: none"> Assessment should be made on a case by case basis. |
| Asthma | Likely to require further information, investigation and assessment | |
| Treated hay fever without history of wheezing | Likely to be suitable | |
| Solitary spontaneous pneumothorax | Likely to be suitable | |
| Recurrent pneumothoraces | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Reassess after treatment aimed at preventing further recurrences |
| Chronic Obstructive Pulmonary Disease (COPD) affecting exercise capacity | Unlikely to be suitable | <ul style="list-style-type: none"> The loss of normal respiratory function will limit exercise capacity even in the absence of superadded chest infections. |
| Tuberculosis - Active - History of a previous episode of TB | Unlikely to be suitable Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Unacceptable risk of transmission during training period |
| Successfully treated Tuberculosis | Likely to require further information, investigation and assessment | |
| Sarcoid | Likely to require further information, investigation and assessment | |

| ALIMENTARY SYSTEM | | |
|---|--|---|
| Illness/injury/disease | Police applicant | Notes |
| Peptic ulceration or dyspepsia | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Chronic pain may interfere with role. |
| Irritable bowel syndrome <ul style="list-style-type: none"> Mild | <p>Likely to be suitable</p> <p>Likely to require further information, investigation and assessment</p> | Applicant under investigation; require close proximity to the toilet; require codeine for control; or if the IBS has a significant association with stress |
| Inflammatory bowel disease (Crohn's or ulcerative colitis) | Unlikely to be suitable, or if successfully treated UC, likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Chronic conditions with unpredictable course and relatively high surgical intervention rates. |
| Dietary conditions <ul style="list-style-type: none"> Coeliac disease Lactose intolerance Food allergy | <p>Likely to require further information, investigation and assessment</p> <p>Likely to be suitable</p> <p>Likely to be suitable</p> | <ul style="list-style-type: none"> Many sufferers will have minimal symptoms with good dietary control and will be suitable. |
| Hernia | Likely to be suitable assuming > 3 months after successful surgical treatment Untreated hernia refer to GP/defer till after surgery | <ul style="list-style-type: none"> Training and operational role will be compromised due to local weakness in abdominal musculature. Hernia is likely to increase in severity. |
| Anal and perianal conditions <ul style="list-style-type: none"> Active chronic conditions | <p>Likely to be suitable</p> <p>Likely to require further information, investigation and assessment</p> | <ul style="list-style-type: none"> Persistent perianal sepsis will cause significant absence. |
| Chronic liver disease | Unlikely to be suitable | |
| Biliary disease <ul style="list-style-type: none"> Gallstone disease Chronic biliary tree | <p>Likely to require further information, investigation and assessment</p> <p>Unlikely to be suitable</p> | |
| Pancreatitis <ul style="list-style-type: none"> Single episode Chronic | <p>Likely to require further information, investigation and assessment</p> <p>Unlikely to be suitable</p> | |
| Stoma with good nutritional state and no complications | Likely to be suitable | <ul style="list-style-type: none"> Consider need for provision of special padding on uniform belts |

NEPHRO-UROGENITAL SYSTEM

Renal disease and its sequelae can have profound effects on the ability of an operational Police Constable to attend let alone be safe and functional in his/ her occupation. Sudden incapacity from pain, hypertension and renal failure are the major complications

| Illness/injury/ disease | Police applicant | Notes |
|--|--|--|
| Haematuria/ Proteinuria | Likely to require further information, investigation and assessment | GP to investigate in the first instance |
| Nephritis | History of nephritis and ongoing impairment unlikely to be suitable. Otherwise likely to require further information, investigation and assessment | |
| Recurrent urinary tract infections | Likely to require further information, investigation and assessment | |
| Persistent major urethral abnormality | Unlikely to be suitable | <ul style="list-style-type: none"> Treatment is likely to be protracted |
| Minor urethral abnormality | Likely to require further information, investigation and assessment | |
| Urinary incontinence | Likely to require further information, investigation and assessment | |
| Benign scrotal swellings | Likely to require further information, investigation and assessment | |
| Testicular tumours | See miscellaneous conditions | |
| Major congenital renal abnormality | Likely to require further information, investigation and assessment | |
| - normal renal function | Likely to be suitable | <ul style="list-style-type: none"> Normal renal function necessary to allow regular attendance and performance. |
| Polycystic kidney disease | Unlikely to be suitable | <ul style="list-style-type: none"> Progression to end stage renal failure. |
| Unilateral kidney (with remaining kidney functioning well) | Likely to be suitable | |
| Established renal stone disease | Likely to require further information, investigation and assessment | |
| Irreversible renal failure | Unlikely to be suitable | <ul style="list-style-type: none"> Associated fatigue, anaemia and therapy effects not compatible with operational Police Constable role. |
| Renal dialysis (Haemo/CAPD) | Unlikely to be suitable | <ul style="list-style-type: none"> Associated fatigue, anaemia and therapy effects not compatible with operational Police Constable role. |

ENDOCRINE SYSTEM

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

| Illness/injury/ disease | Police applicant | Notes |
|--|---|---|
| Insulin-dependent diabetes mellitus (type 1 or type 2) | Unlikely to be suitable. However, further information, and assessment will be needed | Further information and assessment will be needed in order to assess each case on its merits |
| Non-insulin dependant diabetes mellitus | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> • The complications of diabetes can degrade the functional capacity of an operational Police Constable. • Recent hypoglycaemic episode warrants deferral. |
| Thyroid disease | Likely to be suitable – recruit must be undergoing treatment or have undergone successful treatment. If doubt exists, likely to require further information, investigation and assessment | |
| Pituitary disease | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> • Can be secondary to other conditions. If these other factors do not exclude a recruit then hormonal therapy treatment can allow individuals to return to normal function. |

SKIN CONDITIONS

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

| Illness/injury/ disease | Police applicant | Notes |
|---|---|---|
| Extensive skin disease with chronic discomfort or disruption of dermal integrity. | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> • Exposure to irritants or inhospitable environments will result in frequent exacerbations. |
| Widespread eczema/ dermatitis | Likely to require further information, investigation and assessment | |
| Mild eczema | Likely to be suitable | |
| Severe psoriasis | Likely to require further information, investigation and assessment | |
| Mild psoriasis | Likely to be suitable | |
| Malignant Melanoma, following excision | Likely to require further information, investigation and assessment | |

ORTHOPAEDIC and SOFT TISSUE CONDITIONS

Dexterity, mobility and good spinal function are essential physical requirements for an individual to undertake the role of an operational Police Constable.

| Illness/injury/ disease | Police applicant | Notes |
|--|--|---|
| General Any previous injury (fracture, soft tissue injury) or congenital deformity, causing long term reduction in function of a joint or limb | Likely to require further information, investigation and assessment | |
| Implants Major joint replacement (total hip or knee) Internally fixed fractures ('metal work') Endoprosthetic replacements | Unlikely to be suitable Likely to require further information, investigation and assessment Unlikely to be suitable | <ul style="list-style-type: none"> • Unacceptable risk to the prosthesis from exercise requirements. Severe implications of prosthetic failure in an active adult. • Assess on case by case basis • Risk of re-fracture at site of metal work when returning to more energetic activities. • Used in osteosarcoma surgery. Unacceptable risk of prosthesis failure or fracture around prosthesis. • Assess on case by case basis |
| Knee disorders Medial meniscectomy Lateral meniscectomy Ligamentous injury requiring surgery or causing instability Osteochondritis dissecans | Likely to require further information, investigation and assessment Likely to require further information, investigation and assessment Likely to require further information, investigation and assessment Unlikely to be suitable | <ul style="list-style-type: none"> • Risk of early osteoarthritis with associated disability. • Risk of re-injury in operational role. • Risk of severe knee joint damage. |
| Foot disorders | Likely to require further information, investigation and assessment | |
| Amputations (total or partial) of upper or lower limb | Likely to require further information, investigation and assessment | |
| Dislocation and instability of major joints Single episode of dislocation with no recurrence Recurrent dislocation or surgical treatment required | Likely to be suitable Unlikely to be suitable - rarely, if excellent surgical results from stabilisation further information, investigation and assessment could be sought. | <ul style="list-style-type: none"> • Risk of recurrent dislocation whilst engaged in operational activities (e.g. restraining). |
| Cervical spine Resolved whiplash Cervical discectomy (+/- fusion) | Likely to be suitable Unlikely to be suitable | <ul style="list-style-type: none"> • May be exacerbated by physical activities and driving. • Cervical discectomy will often not improve neck pain. Also there may be persisting neurological disability in the upper limbs. |

ORTHOPAEDIC and SOFT TISSUE CONDITIONS CONTINUED

Dexterity, mobility and good spinal function are essential physical requirements for an individual to undertake the role of an operational Police Constable.

| Illness/injury/ disease | Police applicant | Notes |
|--|---|--|
| <p>Lumbar spine</p> <p>Single level resolved lumbar disc disease +/- discectomy</p> <p>Multiple level lumbar disease Recurrent low back pain/ persistent sciatica</p> | <p>Likely to require further information, investigation and assessment</p> <p>Unlikely to be suitable Likely to require further information, investigation and assessment</p> | <ul style="list-style-type: none"> • Low back pain +/- lower limb symptoms can be disabling. Exacerbated by driving, standing for long periods, other physical tasks. |
| <p>Arthritis and related conditions</p> <p>Rheumatoid arthritis</p> <p>Controlled gout without complications</p> <p>Ankylosing Spondylitis with chronic pain</p> <p>Mild Ankylosing Spondylitis with preserved function</p> <p>Reiter's Diseases / reactive arthropathy</p> <p>Connective tissue diseases</p> | <p>Unlikely to be suitable</p> <p>Likely to be suitable</p> <p>Unlikely to be suitable</p> <p>Likely to require further information, investigation and assessment</p> <p>Likely to require further information, investigation and assessment</p> <p>Likely to require further information, investigation and assessment</p> | <ul style="list-style-type: none"> • Progressive joint damage with degrading of operational capacity. • Assessment should be made on a case by case basis. • Can cause diagnostic difficulties and often unpredictable course. Potential for severe incapacitation. |

HAEMATOLOGICAL DISORDERS

| Illness/injury/disease | Police applicant | Notes |
|--|--|---|
| Previously undetected iron deficiency anaemia | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Refer to GP initially for investigations and treatment. |
| Other anaemias | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Many of the underlying conditions causing anaemia will make the applicant unsuitable. |
| G6PD deficiency | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Highly variable, but an applicant may be suitable. |
| Polycythaemia (Haematocrit>0.55) | Unlikely to be suitable | <ul style="list-style-type: none"> Unacceptable risk of disabling complications. |
| Thalassaemia major with severe chronic anaemia | Unlikely to be suitable | <ul style="list-style-type: none"> Unable to safely perform required exertion. |
| Sickle cell disease | Unlikely to be suitable | <ul style="list-style-type: none"> Anaemia & crises. |
| Sickle cell disease trait | Likely to be suitable | <ul style="list-style-type: none"> Usually asymptomatic. |
| Mild haemophilia <ul style="list-style-type: none"> - Symptomatic - Asymptomatic | Unlikely to be suitable Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Physical tasks and risk of injury may precipitate haemorrhage. |
| Thrombocytopenia | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> If platelets < 25 X 10⁹/l then the recruit is unlikely to be suitable. |
| Anticoagulation therapy | Unlikely to be suitable | <ul style="list-style-type: none"> The underlying condition may also make the applicant unsuitable. |
| Leukaemia/ lymphoma with complete remission | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Those in complete remission may be suitable following further investigation. |

| INFECTIOUS DISEASE | | |
|---|---|--|
| Illness/injury/ disease | Police applicant | Notes |
| HIV infection <ul style="list-style-type: none"> - Symptomatic - Asymptomatic | <p>Unlikely to be suitable</p> <p>Likely to require further information, investigation and assessment</p> | <ul style="list-style-type: none"> • Assessment should be made on a case by case basis. |
| Resolved Hepatitis A infection | Likely to be suitable | |
| Hepatitis B carriers | Unlikely to be suitable | |
| Resolved Hepatitis B infection without carrier status | Likely to require further information, investigation and assessment | |
| Hepatitis C and D | Unlikely to be suitable | |
| Resolved Hepatitis E infection | Likely to be suitable | |
| Glandular fever | Likely to require further information, investigation and assessment | |

MISCELLANEOUS CONDITIONS

| Illness/injury/ disease | Police applicant | Notes |
|--|--|--|
| Childhood or early adult malignancy | Likely to require further information, investigation and assessment | |
| Narcolepsy | Unlikely to be suitable | |
| Body Mass Index outside normal range - 18 to 30 | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> BMI should only be used to screen individuals. |
| Malignant disease | Likely to require further information, investigation and assessment | |
| Genetic disease | Likely to require further information, investigation and assessment | |
| Chronic pelvic inflammatory disease (PID) with chronic pelvic pain | Likely to require further information, investigation and assessment | |
| Incapacitating menorrhagia | Likely to require further information, investigation and assessment | |
| Incapacitating dysmenorrhoea | Likely to require further information, investigation and assessment | |
| Endometriosis | Likely to require further information, investigation and assessment | |
| Fibroids and ovarian cysts | Likely to require further information, investigation and assessment | |
| Cervical dysplasia CIN 1/2 | Likely to be suitable | |
| Cervical dysplasia CIN 3 | Likely to require further information, investigation and assessment | |
| Invasive carcinoma | Unlikely to be suitable | |
| Polycystic ovary disease | Likely to require further information, investigation and assessment | |
| Pregnancy | Likely to be suitable after 3 months following delivery | |
| Termination of pregnancy | Likely to be suitable after 4 weeks following termination providing there are no complications | |

NEUROLOGICAL DISORDERS

| Illness/injury/disease | Police applicant | Notes |
|--|--|---|
| Epilepsy – single seizure | Likely to require further information, investigation and assessment | <ul style="list-style-type: none"> Those in whom no abnormality is found should have their acceptance for entry deferred for a period of 18 months¹. |
| Epilepsy – recurrent seizures | Unlikely to be suitable | <ul style="list-style-type: none"> Assessment should be made on a case by case basis. |
| Migraine | Likely to require further information, investigation and assessment | |
| Headaches / Severe headaches | Likely to be suitable | |
| Head Injuries Subarachnoid haemorrhage Transient Ischaemic Attacks Hydrocephalus/insertion of shunts Multiple sclerosis Motor neurone disease, cerebella ataxias, progressive peripheral neuropathy and Parkinson's disease | Likely to require further information, investigation and assessment Likely to require further information, investigation and assessment Likely to require further information, investigation and assessment Unlikely to be suitable Likely to require further information, investigation and assessment Unlikely to be suitable | <ul style="list-style-type: none"> Consideration should be given to applicants deferring entry for 12 months. It is recommended that applicants suffering from MS be deferred for 12 months after the date of appearance of their last set of symptoms. |

¹ There is a high risk of recurrence during this time. If the seizure has occurred within the past 18 months it is recommended that entry to the Police service be deferred for that period. If it is clear that the condition is likely to be permanent, then the applicant is unlikely to be suitable.

Recommended Mental and Psychiatric Health Standards

| CONDITIONS AFFECTING MENTAL AND PSYCHIATRIC HEALTH | | |
|--|---|--|
| Illness/injury/disease | Police applicant | Notes |
| Disorders first diagnosed in childhood or adolescence | May not be suitable but further information, investigation, assessment required | <ul style="list-style-type: none"> Assessment should be made on a case by case basis. |
| Cognitive and Amnesic Disorders | Unlikely to be suitable | <ul style="list-style-type: none"> Assessment should be made on a case by case basis. |
| Substance related disorders | Unlikely to be compatible but further information and assessment will be needed | <ul style="list-style-type: none"> Assessment should be made on a case by case basis. |
| Schizophrenia / Schizophreniform Disorder / Schizoaffective Disorder / Delusional Disorder | May not be suitable but further information, investigation, assessment required | <ul style="list-style-type: none"> Assessment should be made on a case by case basis. |

CONDITIONS AFFECTING MENTAL AND PSYCHIATRIC HEALTH

| Illness/injury/disease | Police applicant | Notes |
|--|---|--|
| Mood Disorders / Depression / Bipolar Disorders | Likely to require further information, investigation and assessment | |
| Generalised Anxiety Disorder / Panic Disorder / Phobic Anxiety / Obsessive Compulsive Disorder / Adjustment Disorder / Posttraumatic Stress Disorder | Likely to require further information, investigation and assessment | |
| Somatoform Disorders / Factitious Disorders / Dissociative Disorders / Chronic Fatigue Syndrome | Likely to require further information, investigation and assessment | |
| Eating disorders | Likely to require further information, investigation and assessment | |
| Personality Disorders | Unlikely to be suitable | <ul style="list-style-type: none"> • Assessment should be made on a case by case basis. |