### Physical Requirements and Maximum Entry Age:

- 1. The duties of probation officers require the investigation and management of convicted criminal offenders who present physical danger to officers and to the public. In the supervision, treatment, and control of these offenders, these duties require moderate to arduous physical exercise, including prolonged periods of walking and standing, physical dexterity and coordination necessary to operate a firearm, and use of self-defense tactics. On a daily basis, these officers face unusual mental and physical stress because they are subject to danger and possible harm during frequent, direct contact with individuals who are convicted of committing Federal offenses.
- 2. Because officers must effectively deal with physical attacks and are subject to moderate to arduous physical exertion, applicants must be physically capable. Officers must possess, with or without corrective lenses, good distance vision in at least one eye and the ability to read normal size print. Normal hearing ability, with or without a hearing aid, is also required. First time appointees to positions covered under law enforcement officer retirement provisions must not have reached their 37 birthday at the time of appointment. Applicants 37 or over th who have previous law enforcement experience under the Civil Service Retirement System or the Federal Employees' Retirement System and who have either a subsequent break in service or intervening service in a non-law enforcement officer position may have their previous law enforcement officer experience subtracted from their age to determine whether they meet the maximum age requirement.

## Background Investigation, Drug Screening, and Medical Standards:

Prior to appointment, the selectee considered for this position will undergo an extensive Office of Personnel Management (OPM) background investigation, medical examination, and drug screening. Upon successful completion of the background investigation, medical examination, and drug screening, the selectee may then be appointed provisionally, pending a favorable suitability determination by the court. In addition, as a condition of employment, incumbent will be subject to ongoing random drug screening, updated background investigations every five years and, as deemed necessary by management for reasonable cause, may be subject to subsequent fitness-for-duty evaluations and drug screening. If a provisional hire is authorized, continued employment will be contingent on successful completion of the OPM investigation.

### Officer and Officer Assistant Medical Guidelines

#### I. CARDIOVASCULAR SYSTEM

Probation and pretrial services officers and officer assistants should have a cardiovascular system that is sufficient for the individual to safely and efficiently carry out the requirements of the position. Confirmation of hypertension should require at least three (3) serial readings of blood pressure. Serial readings should include at least three (3) blood pressure readings taken on different days and in both arms in a standing, sitting, and recumbent position. All medications taken for cardiovascular conditions should be carefully reviewed to ensure that they do not compromise safe and efficient job performance. Any history of a cardiovascular condition or newly diagnosed conditions should be evaluated on a case-by-case basis and may require further evaluation.

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

- A. ANGINA PECTORIS
- B. AORTIC ANEURYSM
- C. CEREBROVASCULAR CONDITIONS such as Cerebrovascular Accident or Transient Ischemic Attacks or Carotid Artery Disease
- D. CARDIOMYOPATHY
- E. CONGENITAL ANOMALIES such as Atrial and Ventricular Septal Defect that compromise cardiovascular function
- F. CONGESTIVE HEART FAILURE
- G. CORONARY ARTERY DISEASE OR HISTORY OF MYOCARDIAL INFARCTION
- H. DYSRHYTHMIAS such as Ventricular Tachycardia or Fibrillation, Wolff-Parkinson-White syndrome, Paroxysmal Atrial Tachycardia with or without block, Atrial Flutter or Fibrillation
- I. ELECTROCARDIOGRAM FINDINGS such as Left Bundle Branch Block, newly acquired Right Bundle Branch Block, ST Segment Alterations, Atrioventricular Dissociation, First Degree A-V Block with PR interval >= 0.3 seconds, Second and Third Degree A-V Block, Atrial fibrillation or Flutter, Bradycardia with heart rate of less than 40 or sinus pauses of 3.0 seconds or longer, or Long QT Syndrome
- J. HYPERTENSION that exceeds a systolic blood pressure of 149 and/or diastolic blood pressure of 89 mm Hg with or without medication

- K. MARFAN'S SYNDROME
- L. MYOCARDITIS, ENDOCARDITIS, AND PERICARDITIS
- M. OCCLUSIVE PERIPHERAL ARTERIAL DISEASE such as Raynaud's Disease
- N. PULMONARY EMBOLISM with compromise of cardio-pulmonary function.
- O. SYNCOPE, HISTORY OF (Cardiogenic or vasovagal). This history will require cardiology evaluation and/or tilt table testing for final determination.
- P. VALVULAR HEART DISEASE such as mitral valve stenosis or regurgitation, aortic stenosis or regurgitation.
- Q. DEEP VEIN THROMBOSIS which requires anticoagulation.
- R. PACEMAKERS OR PROSTHETIC VALVES are generally disqualifying. Any other condition or post-surgical management that requires the use of Coumadin or other anticoagulants is generally disqualifying.

#### II. DERMATOLOGY

Probation and pretrial services officers and officer assistants should be free of dermatological conditions that may result in restricted function or movement, thereby impairing the safe and efficient performance of essential job functions. Dermatological conditions may cause the individual to be unduly susceptible to injury or disease as a consequence of environmental exposures (including the sun) as well as other functions. All dermatological conditions should be reviewed on a case-by-case basis.

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

A. PHOTOSENSITIVE SKIN CONDITIONS that significantly limit job performance by limiting the work environment

#### III. ENDOCRINE AND METABOLIC SYSTEM

Probation and pretrial services officers and officer assistants should have an endocrine and metabolic system free of conditions that may affect normal hormonal or metabolic functioning and response that is likely to adversely affect safe and efficient job performance. Any excess or deficiency in hormonal 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. All endocrine and metabolic conditions should be reviewed on a case-by-case basis.

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

A. DIABETES MELLITUS OR HYPERGLYCEMIA will require additional medical tests and documentation of treatment to evaluate whether an individual is capable of safe performance of essential job functions.

- B. PARATHYROID DISORDERS
- C. PITUITARY DYSFUNCTIONS
- D. THYROID DISEASE (Hypothyroidism or Hyperthyroidism)

### IV. GASTROINTESTINAL SYSTEM

Probation and pretrial services officers and officer assistants should have a gastrointestinal tract that is sufficient for the individual to safely and efficiently carry out the requirements of the job. There should be 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 job functions. All new and existing gastrointestinal conditions should be reviewed on a case-by-case basis. In addition all medications taken for gastrointestinal conditions should be carefully reviewed to insure that they do not compromise job performance and therefore interfere with safe and efficient job performance. Any condition that is recurrent with significant diarrhea and/or pain, that limits activity, that requires pain medication, or that causes anemia, weakness or significant weight loss may be disqualifying.

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

- A. ANAL FISSURES
- B. CHOLECYSTITIS, CHOLELITHIASIS, AND GALLBLADDER DISEASE
- C. CIRRHOSIS OF THE LIVER
- D. CROHN'S DISEASE, ULCERATIVE COLITIS, REGIONAL ENTERITIS, ILEITIS, AND IRRITABLE BOWEL SYNDROME
- E. DIVERTICULITIS causing severe or uncontrollable pain or bowel movement
- F. DYSPHAGIA causing severe or uncontrollable symptoms
- G. HEPATITIS, acute or chronic
- H. INTESTINAL OBSTRUCTION

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- I. PANCREATITIS
- J. COLOSTOMIES
- K. HERNIA (untreated inguinal, incisional, and ventral)

#### V. GENITOURINARY SYSTEM

Probation and pretrial services officers and officer assistants should have a genitourinary system that is sufficient for the individual to safely and efficiently carry out the requirements of the job. All medications taken for genitourinary conditions should be carefully reviewed to insure that they do not compromise job performance and therefore interfere with safe and efficient job performance. All genitourinary conditions should be reviewed on a case-by-case basis.

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

A. DYSMENORRHEA OR ENDOMETRIOSIS that causes chronic and severe pain requiring the frequent use of narcotic medications

- B. GLOMERULONEPHRITIS OR PYELONEPHRITIS
- C. KIDNEY STONES (urinary calculi) that are symptomatic, recurrent, or that cause kidney dysfunction
- D. NEPHROTIC SYNDROME
- E. NEUROGENIC BLADDER
- F. POLYCYSTIC KIDNEY DISEASE
- G. RENAL FAILURE, acute or chronic
- H. RENAL TOXICITY
- I. RENAL VEIN THROMBOSIS
- J. UROPATHIES, uncorrected obstructive

### VI. HEAD, NOSE, MOUTH, THROAT AND NECK

Probation and pretrial services officers and officer assistants should have structures and functions of the head, nose, mouth, throat and neck that are sufficient for the individual

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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 normal flexion, extension and rotation of the neck, open nasal and oral airways,

unobstructed Eustachian tubes.

no structural abnormalities that would prevent the normal use of protective eye wear, normal conversational speech, and

no evidence of a pre-existing or newly diagnosed medical condition of the head, nose, mouth, throat, or neck that could significantly interfere with the individual's ability to successfully perform essential law enforcement functions, such as speech or breathing, or that has the potential to render the person suddenly incapacitated.

All head, nose, mouth, throat, and neck conditions should be reviewed on a case-by-case basis.

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

- A. ARTIFICIAL LARYNX OR ESOPHAGEAL SPEECH
- B. FACIAL DEFORMITIES that impair breathing or speech
- C. MUTISM OR APHONIA (inability to speak)
- D. NASAL POLYPS that impair breathing or speech
- E. NECK MASSES, LYMPHADENOPATHY, AND TRACHEOSTOMY that impair breathing or speech
- F. RESTRICTED RANGE OF MOTION IN THE NECK
- G. TEMPOROMANDIBULAR JOINT SYNDROME

#### VII. HEMATOLOGY SYSTEM

Probation and pretrial services officers and officer assistants should have a hematopoietic (blood and blood-producing) system that is sufficient for the individual to safely and efficiently perform the functions of the job. All hematological conditions should be reviewed on a case-by-case basis.

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

A. ANEMIA

- B. BLEEDING DISORDERS such as genetic bleeding disorders (Hemophilia, von Willebrand's disease), acquired bleeding disorders (caused by liver disease or infection) and medications (Coumadin, Heparin) which are likely to cause bleeding with physical confrontation or defensive tactics training
- C. HEMOGLOBINOPATHIES such as Sickle Cell Disease or Thalassemia which are likely to cause infarction at high altitude, reduce exercise capacity, and prevent working in certain environments.
- D. MULTIPLE MYELOMA
- E. SYSTEMIC LUPUS ERYTHEMATOSUS
- F. THROMBOCYTOPENIA

#### VIII. MEDICATION

All medication requirements, including psychotropic medication, should be evaluated to ensure that safe and efficient job performance will not be adversely affected. Medical conditions that require medications will be reviewed on a case-by-case basis. Medications such as narcotics, sedative hypnotics, barbiturates, amphetamines, or any drug with the potential for addiction, that is taken for extended periods of time (usually beyond 10 days) or is prescribed for a persistent or recurring underlying condition should generally be considered disqualifying. The following items should be considered in order to make a medical determination:

- A. DRUG-FOOD INTERACTIONS
- B. DRUG-ENVIRONMENTAL INTERACTIONS
- C. DRUG TOXICITY
- D. HISTORY OF PATIENT COMPLIANCE
- E. MEDICAL COMPLICATIONS ASSOCIATED WITH LONG-TERM DRUG USE
- F. MEDICATION TYPE AND DOSAGE REQUIREMENTS
- G. POTENTIAL DRUG SIDE EFFECTS AND ADVERSE REACTIONS
- H. POTENTIAL DRUG-DRUG INTERACTIONS
- IX. MUSCULOSKELETAL SYSTEM

Probation and pretrial services officers and officer assistants should have a musculoskeletal system that allows the individual sufficient movement, agility, flexibility, strength, dexterity, coordination, acceleration, deceleration and the ability to change directions in order to safely and efficiently carry out the requirements of the job. This may be demonstrated by:

physical exam of the upper and lower extremities, neck, and back that is within the range of normal variation for strength, flexibility, range of motion, and joint stability and no evidence of physical examination and medical history of musculoskeletal conditions likely to present a safely risk or to worsen as a result of carrying out the essential functions of the job.

All musculoskeletal conditions should be reviewed on a case-by-case basis.

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

ARTHRITIS OR SKELETAL CONDITION of any type if there is limited joint motion, pain, and/or muscle atrophy that affects the ability to perform essential job functions. AMPUTATIONS of an EXTREMITY. Any loss of an upper or lower extremity, hand, foot. AMPUTATIONS of THUMB or INDEX FINGER that affect the ability to perform essential functions.

CERVICAL, THORACIC, LUMBAR, LUMOSACRAL DISK DISEASE, FRACTURES, OR DISLOCATIONS of any type if there is limited joint or gait motion, pain, motor or sensory manifestations, and/or muscle atrophy that affects the ability to perform essential functions.

CHRONIC LOW BACK PAIN with recurrence of pain and/or restricted range of motion or gait that affects the ability to perform essential functions. Each case will be reviewed in context to the original history of the injury (or whatever the etiology), the response to therapeutic regimes, frequency of recurrence, exacerbating factors, and lengths of disability associated with the recurrences combined with the current clinical presentation.

CHRONIC SPRAIN OR STRAIN OF THE NECK limiting mobility or causing recurring cephalgia (headaches) may be disqualifying.

FRACTURES may require orthopedic evaluation to determine whether functional limitations currently exist. A recent fracture with current immobilization (such as casting, bracing, etc.) of a limb that prevents the performance of the full range of essential law enforcement functions will require documentation from the treating physician that immobilization is no longer required and that no physical limitations are present. Fractures that continue to cause pain, swelling, muscle atrophy, limitation of motion, abnormal gait may be disqualifying.

KNEE CONDITIONS with current symptoms such as swelling; pain; reduced range of motion, gait, or strength; or instability that prevents the full range of essential law enforcement functions.

Any PROSTHETIC DEVICE will be reviewed on a case-by-case basis.

SCOLIOSIS with curve greater than or equal to 45 degrees, pain, significant curve progression, or with limitations for physical activity that affects the ability to perform

essential job functions.

SCIATICA, CERVICAL NEUROPATHY, AND OTHER NEUROPATHIES with evidence of numbness, tingling, loss of motor strength, or limited gait.

SHOULDER CONDITIONS such as history of multiple dislocations (three or more) without surgical repair or any history of dislocation with current pain, or reduced strength or range of motion, acromioclavicular (AC) separations with current pain, or reduced strength or range of motion.

SPINAL DISORDERS such as Spina Bifida, Spondylolysis, Spondylolisthesis, or Ankylosing Spondylitis which limit mobility, gait, or skeletal strength, or cause pain.

Medical requirements do not include any specific requirement to satisfy weight and/or body composition standards. Many research studies and court decisions direct us to examine the ability to perform the functional or essential job functions rather than satisfy a weight and/or body composition requirement. A comprehensive study regarding body composition and physical performance within the U.S. military provided the following findings.

There is no consistent relationship between body fat and physical performance. If job-related performance standards were in place, a body composition standard would be unnecessary in relation to physical performance.

Appearance of different individuals at the same body weight and fat content can vary considerably depending on other factors. A stronger rationale for appearance criterion and standards that define acceptable and unacceptable appearance must be developed.

(Marriot and Grumstrup-Scott, eds., Body Composition and Physical Performance: Applications for the Military Service, 1992.)

### X. NEUROLOGICAL SYSTEM

A probation and pretrial services officer or officer assistant should have a nervous system that is free of central or peripheral nervous system interference that will allow 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 intact cranial nerves I-XII, normal vibratory sense in the hands and feet,

normal proprioception (sense of movement and position of the body) of the major joints, normal sensation of hot and cold in the hands and feet,

normal reflexes of the upper and lower extremities,

normal balance (e.g., heel-toe walk, Romberg, balance on one foot),

normal basic mental status evaluation (e.g., person, place, time, current events), and 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.

Any condition with loss of motor skills, muscle strength, cognitive function, coordination, or gait; sensory loss (limb, hearing, or vision); tremor; pain, or effect on speech may result in further evaluation or disqualification. All neurological conditions will be reviewed

on a case-by-case basis.

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

- A. ALZHEIMER'S or other degenerative dementia disorders
- B. AMYOTROPHIC LATERAL SCLEROSIS
- C. CEREBRAL PALSY
- D. CRANIAL NEUROPATHIES such as Tic Douloureux, Trigeminal Neuralgia
- E. DEGENERATIVE SPINAL CORD DISORDERS
- F. EPILEPSY with a history of past or current seizures requires additional medical documentation that this condition is unlikely to adversely affect the safe and efficient performance of essential job functions.
- G. HAND TREMOR
- H. HEAD TRAUMA
- I. HUNTINGTON'S CHOREA
- J. HYDROCEPHALUS
- K. MENINGITIS which is current or a history of meningitis with residual neurological damage or changes
- L. MIGRAINE OR OTHER HEADACHES that interfere with performance of essential job functions (such as sensory changes) or that require medication that is either frequent, sedating, or that is likely to interfere with essential job functions.
- M. MULTIPLE SCLEROSIS
- N. MYASTHENIA GRAVIS
- O. NARCOLEPSY
- P. PARKINSON'S DISEASE
- Q. PERIPHERAL NEUROPATHIES such as Carpal Tunnel Syndrome (Median nerve), Foot Drop (Peroneal nerve), Diabetic and Alcoholic Neuropathy.
- R. SYNCOPE
- S. TRANSIENT ISCHEMIC ATTACKS OR CEREBROVASCULAR ACCIDENT

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(STROKE)

### XI. ORGAN TRANSPLANTATION AND PROSTHETIC DEVICES

Organ transplantation and prosthetic devices may affect the individual's qualification in the other medical areas, e.g., vision, cardiovascular system. Probation and pretrial services officers and officer assistants with transplantations or prosthetic devices will be considered on a case-by-case basis.

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

- A. COCHLEAR IMPLANTATION is acceptable provided that the individual meets the hearing standards.
- B. OCULAR LENS IMPLANTATION may be acceptable considering an adequate post surgical recovery period and if the visual acuity meets the medical standards. (See XV. Vision)
- C. PACEMAKERS or PROSTHETIC VALVES are generally disqualifying. Any other condition or post-surgical management that requires the use of Coumadin or other anti-coagulants may be disqualifying. (See I. Cardiovascular System)
- D. RENAL TRANSPLANTATION may be considered disqualifying unless the individual is not taking immunosuppressive drugs and is medically cleared by the surgeon who performed the operation to participate in strenuous activities. The individual should be considered by the surgeon to be capable of withstanding blunt trauma to his or her flanks without a significant probability of untoward personal damage.

### XII. PSYCHIATRIC DISORDERS

Probation and pretrial services officers and officer assistants should have judgment, cognitive functioning, and social interaction and behavior that will provide for the safe and efficient conduct of job requirements. Medical conditions may require a medical review by a psychologist, neuropsychologist, neurologist, and/or a psychiatrist for final medical determination of qualification. There should exist no evidence by physical examination and medical history of psychiatric conditions (including alcohol and substance abuse) likely to present a safety risk or to worsen as a result of carrying out the functions of the job. All psychotropic medications should be evaluated to determine their impact on job performance. Any psychiatric diagnoses should be consistent with the diagnostic criteria as established by the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition (DSM-IV) published by the American Psychiatric Association, and should include the results of a multi-axial assessment. All psychiatric conditions should be reviewed on a case-by-case basis.

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

- A. DELIRIUM, DEMENTIA, AMNESTIC AND OTHER COGNITIVE DISORDERS
- **B. MAJOR DEPRESSION**
- C. MANIC-DEPRESSIVE DISORDER OR BI-POLAR DISORDER
- D. PANIC DISORDER AND OTHER ANXIETY DISORDERS
- E. SCHIZOPHRENIA AND OTHER PSYCHOTIC DISORDERS

### XIII. RESPIRATORY SYSTEM

Probation and pretrial services officers and officer assistants should 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,
- normal pulmonary function test (if required),
- •normal chest x-ray (if required), and
- •normal symptom-limited exercise stress EKG (if required).

All medications taken for respiratory conditions should be carefully reviewed to insure that they do not compromise job performance and therefore interfere with safe and efficient job performance. All respiratory conditions should be reviewed on a case-by-case basis.

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

A. TUBERCULOSIS (TB). A recent positive (conversion) TB test that has been treated for at least three weeks is acceptable providing the patient remains under continuing treatment and supervision. A chest x-ray will be required to document the stability of this condition. Evidence of active TB with or without symptoms, chest x-ray findings, or presence of sputum production, or presence of significant lung destruction on chest x-ray in fully treated cases will be evaluated on a case-by-case basis.

B. ASTHMA currently controlled on any medication will be evaluated on a case-by-case basis. Exercise-induced asthma requiring medication either before or after exercise is generally disqualifying.

#### XIV. HEARING

Probation and pretrial services officers and officer assistants should 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 the standards of the American National Standards Institute (see 29 CFR 1910.95)

and

a functional hearing test, including speech recognition and the HINT, to determine the medical qualification of individuals who fail the pure tone audiometric screening. All audiological conditions will be reviewed on a case-by-case basis.

Documentation of hearing thresholds should be as specified below:

In the frequency range from 500 - 2000 hertz (Hz), the pure tone audiometric deficit should not exceed 35 decibels in either ear, with or without the use of hearing aids. At 3000 Hz, the pure tone audiometric deficit should not exceed 45 decibels in either ear, with or without the use of hearing aids.

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

- A. ACOUSTIC NEUROMA
- **B. MENIERE'S DISEASE**
- C. OTOSCLEROSIS
- D. VESTIBULAR NEURONITIS
- E. VERTIGO OR PAROXYSMAL POSITIONAL VERTIGO

XV. VISION

Probation and pretrial services officers and officer assistants should be able to see well enough to safely and efficiently carry out the requirements of the job. The individual should be questioned regarding a history of eye injury, retinal detachment, serious eye disease (specific questions for glaucoma, diabetic or hypertensive retinopathy and retinitis pigmentosa), or visual field defect. Copies of previous assessments for the above abnormalities should be obtained whenever possible. The individual also should be questioned regarding the use of orthokeratology lenses. Orthokeratology lenses should not be worn for two weeks prior to the examination.

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

- A. OPHTHALMOLIC CONDITIONS which are particularly susceptible to environmental exposures such as sunlight, dusts, fumes, or various volatile compounds
- B. DISTANT VISUAL ACUITY, with or without correction, must be 20/30 or better, as measured with both eyes viewing (binocular).
- C. DISTANT VISUAL ACUITY, with or without correction, must be 20/125 or better in the worst eye.
- D. NEAR VISUAL ACUITY, with or without correction, must be 20/40 or better, as

measured with both eyes viewing (binocular).

- E. COMPLETE LOSS OF VISION IN ONE EYE is disqualifying.
- F. VISUAL FIELDS should be normal with full peripheral vision. In full, normal binocular vision (full, normal peripheral vision) the horizontal field is about 180 degrees and the vertical field is 120-130 degrees. Any permanent and significant deviation from full visual fields, either to the central or peripheral visual field, is generally disqualifying. Any history of eye disease or any medical condition likely to cause eye disease, such as retinopathy, glaucoma, retinitis pigmentosa, or retinal detachment will require visual field evaluation by optometrist or ophthalmologist.
- G. CONJUNCTIVITIS, chronic
- H. CORNEAL ABRASIONS
- I. CORNEAL DYSTROPHY
- J. CORNEAL SCARS
- K. CORNEAL ULCERS
- L. GLAUCOMA
- M. KERATITIS
- N. KERATOCONUS
- O. LENS OPACITIES
- P. ORTHOKERATOLOGY
- Q. PHOTOPHOBIA
- R. PTERYGIUM
- S. REFRACTIVE SURGICAL PROCEDURES -- Radial Keratotomy, Photorefractive laser surgery (PRK or LASIK), and ALK Keratoplasty will require an assessment of visual function prior to qualification.
- T. RETINAL DETACHMENT
- U. RETINITIS PIGMENTOSA
- V. DIPLOPIA (or double vision)
- W. NIGHT BLINDNESS

### PROBATION AND PRETRIAL SERVICES OFFICER AND

#### OFFICER ASSISTANT POSITIONS ESSENTIAL JOB FUNCTIONS

Based on data collected and analyzed by the Department of Health and Human Services, Public Health Services, Division of Federal Occupational Health, Law Enforcement Medical Programs, the following essential job functions have been established to reflect the work of probation and pretrial services officer and officer assistants. An essential job function is a specific job duty that is critical to the safe and effective performance of the job. The ability to perform essential job functions is measured by a physician during an examination of the following specific medical areas.

Cardiovascular; Dermatology; Endocrine; and Metabolic; Musculoskeletal; Neurological; and Respiratory

Respond with unplanned vigorous physical activity

Climb stairs in pursuit or in emergency

Attempt to physically subdue attacker

Gastrointestinal and Genitourinary

Work extended hours

Travel that requires significant time

Ability to miss meals

Hematology; Musculoskeletal; Neurological; and Respiratory

Drive vehicles on duty

Drive vehicles in the dark

Work in adverse weather

Work under stress

Walk on uneven surfaces

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Stop, question, or detain individuals (unplanned interviews)

Encounter individuals who display a violent or irrational temperament

Confiscate weapons from persons

Head, Nose, Mouth, Throat, and Neck; and Hearing

Comprehend speech during face-to-face conversations

Comprehend speech during telephone conversations

Comprehend speech when you can't see another officer

Hear sounds that require investigation

Ability to localize sounds

Vision

Use distant vision for driving

Use distant vision to monitor activities and/or defendants during interviews

Use distant vision to monitor exterior/interior home environment

Use distant vision to assess threats

Use near vision for reading

Visually detect peripheral movement and identify a threat

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