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CHAPTER 10. PHYSICAL REQUIREMENTS**1. SCOPE**

The provisions of this chapter apply to physicians, dentists, podiatrists, optometrists, nurses, physician assistants, expanded-function dental auxiliaries, and residents and interns appointed under the authority of 38 U.S.C. ch. 73 and 74. They also apply to Certified or Registered Respiratory Therapists, Licensed Physical Therapists, Licensed Practical or Vocational Nurses, Occupational Therapists and Pharmacists Appointed under 38 U.S.C. ch. 73 and 74. The above categories of individuals are included in the term “employee” as used in this chapter unless otherwise specified.

2. REFERENCES

38 U.S.C. ch. 73 and 74 (See par. 6, Introduction to this part.)

3. POLICY

a. Only those persons who are physically and mentally capable of satisfactorily performing the duties of their assignments are to be employed and retained in the Veterans Health Administration.

b. Determinations of physical and mental fitness will be made without discrimination based on race, color, sex, religion, national origin, lawful political affiliation, membership or nonmembership in a labor organization, marital status, nondisqualifying handicap, age, or other irrelevant factors.

Authority: 38 U.S.C. 501(a), 7421

4. PHYSICAL AND MENTAL FITNESS

a. Guidelines for physical and mental fitness for appointment and retention in the Veterans Health Administration shall be established by the Under Secretary for Health.

b. A preemployment physical examination shall be made to determine the physical and mental fitness for candidates for appointment in the Veterans Health Administration.

c. Physical examinations will be made at regular intervals to determine the fitness of employees to continue on active employment. Special examinations will also be conducted for this purpose as need arises.

d. If an employee becomes incapable of performing assigned duties due to work injuries, off-the-job accidents, or disease, a positive effort should be made to continue employment, wherever possible, by assignment to more suitable duties.

Authority: 38 U.S.C. 501(a), 7421

5. PHYSICAL STANDARDS BOARDS

a. The Under Secretary for Health or a designee shall establish Physical Standards Boards for the purpose of determining whether individuals subject to the provisions of this chapter are physically fit for appointment or retention in VA employment. These boards shall consist of a minimum of three physicians except that, when an unusual dental problem is under consideration, or when a dentist's ability to function is involved, one physician will be replaced by a dentist. A physician will be chairperson. The Human Resources Management Officer, or a designee, will be present to serve the board as a technical adviser.

b. Those cases of a questionable nature which have not been resolved, or have been resolved unfavorably by consultation, will be referred to the Physical Standards Boards for determination of physical fitness. The board will render its opinion as to whether or not the individual examined can perform the required service satisfactorily without hazard to VA beneficiaries, employees or self.

c. The findings of Physical Standards Boards shall be recorded and made a matter of record.

Authority: 38 U.S.C. 501(a), 7421

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CHAPTER 10. PHYSICAL REQUIREMENTS**10.01 SCOPE**

This chapter implements the physical examination program. It applies to all non-physician Facility Directors and full-time, part-time, and intermittent physicians, dentists, podiatrists, optometrists, nurses, nurse anesthetists, physician assistants, expanded-function dental auxiliaries, residents, interns and graduate nurse technicians, unless otherwise specified. It also applies to Certified or Registered Respiratory Therapists, Licensed Physical Therapists, Licensed Practical or Vocational Nurses, Occupational Therapists and Pharmacists. The term “employee” as used in this chapter will include all of the above categories of employees unless otherwise specified. The term “nurse” as used throughout this chapter will include nurse anesthetists and graduate nurse technicians unless otherwise stated. The guidelines for determining physical fitness for appointment and retention in Veterans Health Administration (VHA) are published as appendix 10A to this chapter.

10.02 REFERENCES

- a. VA Manual MP-5, part II, chapter 10
- b. VA Manual MP-5, part I, chapters 293, 306 and 792
- c. VA Manual MP-5, part II, chapter 9 and related VHA Supplement.

10.03 GENERAL PROVISIONS

a. Only those persons who are physically and mentally capable of satisfactorily performing the duties of their assignments are to be employed and retained in VHA. The procedures published in this chapter and the guidelines for determining physical fitness are designed to meet this policy objective.

b. Another objective of the physical examination program is to achieve safe, productive employment. These examinations determine whether applicants and employees are physically and mentally qualified to perform the duties of the position. In addition, it is possible to predict a reasonable expectancy of active continuous service. Such examinations also provide information as to whether employees are physically capable of providing the high quality care and treatment for our veteran-patients.

c. The examining physician plays a key role in properly carrying out the physical examination program. On this physician primarily rests the responsibility for determining whether the person concerned is physically and mentally capable of performing the required duties. The examining physician is responsible for assuring as nearly as possible that such individual does not represent a risk to the VA, to others, or to the individual. This physician has a most significant contribution to make in realizing these objectives. Designations of physicians to fill this assignment should be made accordingly.

d. No person will be determined physically or mentally incapable of performing duties satisfactorily without benefit of a Physical Standards Board deliberation.

e. Physical Standards Boards as indicated in VA Manual MP-5, part II, chapter 10, will consist of a minimum of three physicians. However, when an unusual dental problem is under consideration, or when a dentist's ability to function is involved, one physician will be replaced by a dentist. A physician will be chairperson. Persons in a position to prejudice the action of the board may not serve as members of the board conducting the review. The Human Resources Management Officer, or a designee, will be present to serve the board as a technical advisor. Wherever the term "Physical Standards Board" is used in this chapter, it will refer to a board with membership as described in this subparagraph.

Authority: 38 U.S.C. 7304

10.04 AUTHORITY AND RESPONSIBILITY

a. The Under Secretary for Health. The Under Secretary for Health, or designee acts on findings of Physical Standards Boards and physical examination findings involving personnel employed in Central Office.

b. The Chief Patient Care Services Officer. This individual acts on Physical Standards Board findings resulting from special examinations involving:

- (1) Health Care facility Directors;
- (2) Chiefs of Staff at facilities having a Director who is not a physician; and
- (3) Clinic Directors in regional offices and independent outpatient clinics.

c. Health Care Facility Directors. These individuals act on Physical Standards Board findings when required for:

- (1) Preemployment physical examinations.
- (2) Such annual and special physical examinations required of employees except those in subparagraph b above.

d. Examining Physician

(1) The examining physician is a doctor of medicine or osteopathy licensed to practice medicine or osteopathy in a State, Territory or Commonwealth of the United States or in the District of Columbia. This physician is responsible for conducting the VA's preemployment, annual, or special physician examinations. The examining physician also reviews preemployment, annual, and special physical examinations or screening tests performed by non-VA physicians or facilities, and interprets the findings of such examination in light of VA

guidelines and indicates whether the applicant or employee is capable of performing the duties of the assignment. (See also par. 10.07 on special physical examination.)

(2) Normally, the personnel physician will be designated as the examining physician. For Central Office employees, the examining physician will be designated by the Chief of Staff of the Department of Veterans Affairs (VA) Medical Center, Washington, D.C.

e. Physical Standards Boards. Physical Standards Boards act for the Under Secretary for Health. They are responsible for determining the physical fitness and for recommending action based on examination findings. A board's findings cannot be changed or modified except by the board itself. A board may recommend acceptance or rejection of a person for physical reasons. Action by a Physical Standards Board is required only in cases of questionable or nonroutine nature.

(1) Physical Standards boards are established in Central Office, medical centers, medical and regional office centers, domiciliary, independent outpatient clinics and at regional offices with outpatient clinics. The Under Secretary for Health or a designee will approve membership of Physical Standards Boards in Central Office. Health care facility Directors will approve membership of boards at these facilities.

(2) Consistent with the provisions of paragraph 10.03e, a Physical Standards Board may have the same membership as the local physician Professional Standards Board or members may be designated for this purpose by the health care facility Director. Boards may be conducted at other VA health care facilities in accordance with the provisions of paragraph 10.06d.

Authority: 38 U.S.C. 7304

10.05 PREEMPLOYMENT PHYSICAL EXAMINATION

a. General. A preemployment physical examination is required of all full-time, part-time and intermittent employees. It is not required of residents and interns who furnish evidence of satisfactory physical condition based on a physical examination within the past 12 months. An examination is required in any conversion action from a status not requiring a physical examination to one requiring such procedures.

b. Scope of Examination. The examination will be concerned solely with the mental and physical ability of the applicant to satisfactorily accomplish the duties of the proposed assignment. Applicants will also be required to furnish acceptable evidence that a blood serology test and urinalysis have been accomplished. A chest roentgenogram will be required only when determined necessary by the personnel physician under the Tuberculin Testing program as provided in MP-5, part I, chapter 792. Each individual must also submit a report of an electrocardiogram. All of the above reports must have been accomplished within 90 days of appointment except in the case of certain residents and interns. (See subpart. a above.) In addition, a prostatic examination will be given all male applicants who have passed their 45th birthday. In the process of examination, an applicant will not be subjected by the VA to a spinal puncture.

c. **Conduct of the Examination.** The examination may be conducted by a licensed private physician or by the VA examining physician where facilities are available. In all cases in which the examination is conducted by other than a VA physician, the report of such examination will be reviewed by the VA examining physician. No charge will be made for examinations and tests performed by the VA, irrespective of whether the applicant is selected or rejected. Forms required in the examination are specified in paragraph 10.09.

Authority: 38 U.S.C. 7304.

10.06 ANNUAL PHYSICAL EXAMINATION

a. **General.** Full-time employees, except for residents, are encouraged to have an annual physical examination. The annual physical examination will be voluntary at the request of the individual employee. Each full-time employee who elects not to have a physical examination and each part-time and intermittent employee, except residents, may choose to undergo certain screening tests as are available at the medical facility. The examination or screening tests will take place annually as nearly as practicable during the anniversary month of initial appointment in VHA. At this time, the full-time employee will be given a statement of facility origin on which to indicate that the employee does or does not choose to take a physical examination or screening tests. This statement will be filed with the employee's medical records.

b. **Physical Examinations.** The examining physician will use discretion in determining how comprehensive the examination will be. Special tests and diagnostic procedures will be ordered when appropriate. Employees will be informed of any discrepancies or abnormalities shown in the examination and they will be encouraged to follow-up with treatment or corrective action as soon as possible.

c. **Screening Tests.** Each full-time employee who elects not to have an annual physical examination and each part-time and intermittent employee, except residents, may choose to undergo screening tests as are available at the medical facility. The screening tests may consist of blood tests, urinalysis, and an EKG. Other special tests and diagnostic procedures as available and believed indicated by the local professional staff may be performed. Employees will be informed of any discrepancies or abnormalities shown in the screening tests and they will be encouraged to follow-up with treatment or corrective action as soon as possible.

NOTE: Chest X-rays are required only under circumstances described in MP-5, part I, chapter 792, paragraph 15, "Tuberculin Testing Program."

d. **Place of Examination.** Employees who request the VA to conduct the physical examination or screening tests will normally be examined or tested at their post of duty. However, at the discretion of local management, or at the request of the employee and approval of local management, or on direction of the Network Director or Chief Patient Care Service Officer, the examination and tests may be conducted at another VA health care facility. For Central Office employees, approval of the Under Secretary for Health is required.

Authority: 38 U.S.C. 7304

10.07 SPECIAL PHYSICAL EXAMINATION

a. **General.** Special physical examinations may be authorized by the Secretary, the Under Secretary for Health, or designee, or health care facility director. A special examination may be required to solve questions of physical or mental ability to properly perform the duties of a position. An examination may also be necessary to determine physical and mental fitness to resume duty after illness.

b. **Place of the Examination.** The same instructions will apply as those set forth in paragraph 10.06d. At their own expense, employees may have tests and diagnostic procedures performed by other than a VA physician and/or facility. The results will be accepted for review by the VA examining physician. Authorized absence for this purpose may be granted as provided in VHA Supplement, MP-5, part II, paragraph 7.08.

c. **Notice to Employee.** Except under unusual circumstances, e.g., when an immediate determination must be made as to an employee's mental or physical fitness to remain on duty, an employee will be given advance written notice of a special physical examination. The notice will include:

(1) Reason for examination.

(2) Date, time and location of examination (include travel information, if appropriate).

(3) Right to submit physical examination results or other medical evidence obtained at the individual's own expense for consideration by the VA examining physician and/or, if appropriate, by the Physical Standards Board. (See par. 10.08.)

Note: When a special physical examination is required in connection with a possible agency-initiated disability retirement, representation will be allowed as provided in OPM Operating Manual 831-1, subchapter S-10.

Authority: 38 U.S.C. 7304

10.08 ACTION ON PHYSICAL EXAMINATION FINDINGS

a. **Routine Findings.** Physical examinations performed or reviewed by the examining physician in which the findings are within acceptable limits will require no further action.

b. **Finding Questionable Physical Fitness**

(1) All cases of a questionable nature which have not been resolved or have been resolved unfavorably by consultation will be referred by the examining physician to the Physical Standards Board for determination of physical fitness. Such referral will be made through the office of the Chief of Staff to permit opportunity for comment or recommendation in light of staff needs.

(2) The Physical Standards Board will prepare an appropriate evaluation on VA Form 10-2543, Board Action. In some instances an individual who would not ordinarily be considered for employment may be able to render valuable service to the VA within that individual's physical limitations. The board must be satisfied that the examinee can satisfactorily do the job in terms of the individual's physical condition without hazard to self or to others.

(3) The Physical Standards Board will submit its report to the appropriate officials named in paragraph 10.04, through channels, for necessary action. If the board determines a person to be physically and/or mentally incapable of performing the duties of the assignment the following courses of action may be taken:

(a) Applicants may be accepted or rejected for appointment and such decisions are not subject to review.

(b) In the case of employees, if the nature of the physical condition is one that may be corrected by remedial treatment, sick leave and annual leave or leave without pay may be granted.

(c) If retention of an employee is not considered to be in the best interest of the service, action will be taken to separate the employee for disability or disability retirement as appropriate. See MP-5, part II, chapter 9, and related VHA supplement.

Authority: 38 U.S.C. 7304

10.09 PROCESSING FORMS

a. Preemployment Examinations

(1) SF 88, Report of Medical Examination, and related forms will be prepared in an original only by the examining physician.

(2) Terminal physical examinations of applicants separated from the U.S. Armed Forces within 90 days of appointment are also acceptable. Certified copies or photostats of such examinations may be substituted for SF 88.

(3) A copy of the above reports with supporting application forms and board action will accompany any appointment action which requires the prior approval of Central Office.

b. Annual Physical Examinations

(1) VA Form 5-4688, Report of Medical Examination, for annual physical examinations will be prepared by the examining physician in the original only. After final action, it will be filed in accordance with the provisions of MP-5, Part I, Ch 293, paragraph 6f.

(2) The procedures for scheduling these examinations is covered in MP-5, part I, chapter 792, and MP-6, part V, supplement No. 1.5.

c. **Special Physical Examinations.** SF 88, Report of Medical Examination, will be prepared by the examining physician. The same distribution of forms will be made for this examination as is made for the annual physical examination.

GUIDE FOR DETERMINING PHYSICAL FITNESS OF EMPLOYEES IN THE VETERANS HEALTH ADMINISTRATION

1. SCOPE

This appendix contains the guides for use in conducting and evaluating the physical examinations prescribed in MP-5, part II, chapter 10.

2. GENERAL

a. Physical and mental status of individuals should enable them to perform all their duties under normal and emergent conditions. No applicant will be accepted with disabilities which could be expected to lead to a disability separation prior to a reasonable period of VA service.

b. The term “incapacitated” as used in this appendix means “unable to satisfactorily perform the required duties because of physical or psychiatric reasons.” These reasons may be caused by disease or congenital abnormality. They may result also from recurring episodes of a disease or abnormality which are of sufficient frequency or severity to prevent the person concerned from performing the required duties with expected regularity.

c. Forms and/or reports which must be used in the physical examination program are found in paragraph 10.09. In addition, a nurse applicant classified as food handler will be given the examinations, tests and vaccinations as specified in MP-5, part I, chapter 792, paragraph 16.

d. Preemployment, annual and special physical examinations should be thorough and comprehensive. They should be conducted and evaluated in keeping with the practice of preventive medicine, and with a view to meeting the objectives of subparagraph a above. Special tests and diagnostic steps will be used when indicated.

e. The evaluation of an individual’s ability to perform efficiently and without hazard to self or others will encompass a composite consideration of physical, mental, and emotional ability as related to realistic requirements for the duties and responsibilities to be assumed. When contemplating career probational appointments, professional standards boards and selecting officials should recognize that this type of appointment should be used only to provide a career service of highly qualified personnel who are able to meet the physical, mental, and emotional demands of the position. (See par. 2.07a, this supplement.)

3. HEIGHT AND WEIGHT

A marked variation from normally accepted height and weight requirements should be considered carefully.

4. HEAD

Deformities of the skull, neurologic signs, extensive nevi, scars or skin lesions will be noted.

5. EYES

Poor vision and chronic eye conditions may be incapacitating. Examples of incapacitating conditions are extreme exophthalmos, chronic keratitis, chronic ulceration of the cornea, glaucoma, trachoma, chronic uveitis, retinis pigmentosa, myopia, progressive, and malignancies.

6. EARS

Examination should be made for auditory acuity and for presence of diseases. In some cases hearing loss may be incapacitating. Examples of incapacitating conditions are severe uncorrectable hearing loss, chronic suppurative otitis media, perforated eardrum and chronic suppuration and chronic Meniere's syndrome.

7. NOSE, THROAT, MOUTH AND ACCESSORY SINUSES

Chronic abnormalities of the nose, throat, mouth and accessory sinuses should be noted. The following may be incapacitating: Chronic infections of the nasal accessory sinuses, severe hay fever, destructive syphilitic processes, laryngeal paralysis and neoplastic diseases.

8. DENTAL REQUIREMENTS

Dental and maxillofacial conditions of a markedly disabling degree may be incapacitating.

9. CHEST AND LUNGS (and Tuberculosis of Other Organs)

a. An applicant or employee will not be placed on duty or continued in a duty status if the individual has infectious tuberculosis.

b. An employee who has satisfactorily completed or is undergoing a carefully supervised period of treatment for tuberculosis may be considered for return to duty when the disease is no longer infectious.

c. Other conditions which may be considered disqualifying will include pulmonary emphysema, pulmonary fibrosis, and absence of lungs or lobes if severe impairment of ventilatory or respiratory gas exchange is demonstrable through examination and pulmonary function studies.

d. Pulmonary neoplasms are considered incapacitating unless there is reasonable evidence of cure.

10. CARDIOVASCULAR SYSTEM

Examples of incapacitating conditions are symptomatic angina pectoris; persistent congestive heart failure; symptomatic vascular disease of the brain, kidneys, or other viscera; recent

myocardial infarction; valvular heart disease; congenital heart diseases; aneurysm of a major blood vessel and occlusive arterial disease; persistent hypertension (i.e., b.p. consistently over 140/90).

11. DIGESTIVE SYSTEM

Disease of the digestive organs (i.e., esophagus, stomach, liver, gall bladder, small intestine, pancreas, colon and rectum) which are or may become incapacitating should be investigated. These include: Chronic peptic ulcer of stomach or duodenum, chronic pancreatitis, hepatic cirrhosis, chronic inflammation of the liver, Crohn's Disease, ulcerative colitis, mesenteric or celiac insufficiency, and malignancy of a digestive organ.

12. GENITOURINARY SYSTEM

- a. A routine and microscopic urinalysis should be completed for each examinee.
- b. Incapacitating conditions of the genitourinary tract include: Prostatic, renal or bladder malignancies, and chronic renal disease of a vascular, infectious, or hypertensive origin.

13. VENEREAL DISEASES

- a. An applicant who has doubtful or positive serologic findings without a history of previous syphilitic disease should present proof of a negative FTA-ABS test.
- b. An applicant with a history of latent syphilis may be accepted if evidence of all of the following is submitted:
 - (1) An adequate course of treatment.
 - (2) A normal spinal fluid taken immediately prior to or subsequent to the start of treatment and repeated not less than 6 months after the completion of treatment.
 - (3) No clinical evidence of syphilis.
 - (4) A negative FTA-ABS test.

14. THE SKIN

Severe chronic skin disorders may be incapacitating. Sensitivity to contact with commonly used medical or cleansing preparations may be cause for rejection.

15. ORTHOPEDIC REQUIREMENTS

- a. Incapacitating orthopedic injuries, diseases, or anomalies should be explored.

b. The loss of one arm, one arm and one leg, one or both legs, by applicants who have serviceable prostheses, is not considered incapacitating if such a person can comply with the physical demands of the position being sought.

16. ENDOCRINE AND METABOLIC DISEASES

a. An applicant with a permanent endocrine or metabolic disorder which cannot be regulated with adequate replacement therapy should not be accepted.

b. Examples of incapacitating conditions in the category are uncorrectable or inadequately regulated toxic goiter, Addison's disease, neoplasms of endocrine glands, severe diabetes mellitus, etc.

17. HEMATOPOIETIC SYSTEM

Blood dyscrasias of a progressive or incapacitating nature may be leukemias, lymphomas, Hodgkin's disease, undiagnosed anemias.

18. OBSTETRIC AND GYNECOLOGICAL CONDITIONS

a. Pelvic examinations should be done when indicated.

b. As a general rule, pregnancy should not disqualify an applicant unless it is the opinion of the examining physician that the applicant's condition will prevent the performance of all the duties of the position.

c. When an employee desires to return to active service after the termination of a pregnancy, a medical certificate will be submitted from the private physician stating that the employee is physically able to resume the duties of the assignment. At the discretion of the VA examining physician, further examinations or tests may be made.

d. Disabling menopausal syndromes may be cause for rejection.

19. PSYCHIATRIC CONDITIONS

Objective evidence of (a) active drug abuse, including alcohol, or (b) marked personality disorder is disqualifying. The presence of symptoms or a history of treatment for psychosis or psychoneurosis indicates the necessity for a most careful evaluation of mental health but is not in itself necessarily a cause for rejection or separation. Despite the presence of a psychosis or psychoneurosis, an applicant may be acceptable when the examiner is reasonably certain the applicant can be a productive and cooperative member of a medical group. Demonstrated ability to get along with other people is especially important.

Authority: 38 U.S.C. 7304