

Recommended Medical Standards

Home Office circular 59/2004

National Recruitment Standards-Medical Standards for Police Recruitment

During the recruitment process, a qualified occupational health physician will assess applicants' suitability for the role of police officer against the standards set by the Home Office.

EAR, NOSE and THROAT 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

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 <ul style="list-style-type: none"> - 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 - Mild	Likely to be suitable Likely to require further information, investigation and assessment	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 - Coeliac disease - Lactose intolerance - Food allergy	Likely to require further information, investigation and assessment Likely to be suitable Likely to be suitable	<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 - Active chronic conditions	Likely to be suitable Likely to require further information, investigation and assessment	<ul style="list-style-type: none"> Persistent perianal sepsis will cause significant absence.
Chronic liver disease	Unlikely to be suitable	
Biliary disease - Gallstone disease - Chronic biliary tree	Likely to require further information, investigation and assessment Unlikely to be suitable	
Pancreatitis - Single episode - Chronic	Likely to require further information, investigation and assessment Unlikely to be suitable	
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/ Proteinurea	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') Endoprosthesis 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 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 - Symptomatic - Asymptomatic	Unlikely to be suitable Likely to require further information, investigation and assessment	<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.