

JOB DESCRIPTION

FOR DER USE ONLY

Vacancy No.

City Service Commission: Fire & Police Commission:	Finance Committee: Common Council:
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Instructions: Complete all sections. Refer to the *Guidelines for Preparing Job Descriptions* for instructions on completing specific items.

1. Date Prepared/ Revised: 4/16/20		2. Present Incumbent: Robert T. Adlam		Is incumbent underfilling position?	
3. Date Filled: 1/9/12		4. Previous Incumbent: N/A		YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
5. Department: Fire Department		Bureau: Division:		Unit: Section:	
6. Work Location: 711 W. Wells St.		Telephone: 286-8968 Email:		Work Schedule: Hours: 21.2 hrs/wk. Days: Generally every Tuesday & on an as-needed basis	
7. Represented by a Union? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		8. Bargaining Unit: Non-Mgmt/Non-Rep If in District Council 48, which local?		9. FLSA Status (check one): <input checked="" type="checkbox"/> Exempt <input type="checkbox"/> Non-Exempt	
10.	Official Title: Fire Medical Officer			Pay Range	Job Code
				9RX	2111
	Underfill Title (if applicable):				
Requested Title (if applicable):					EEO Code 206
Recommended Title (DER Use Only):			Approved by:		
			Date:		

11. BASIC FUNCTION OF POSITION:

The primary function of the Fire Medical Officer is to guide, direct, and advise employees with regard to their health, fitness, and suitability for firefighting duties as outlined in NFPA 1500. Secondary duties include being an advisor/liaison to various committees and organizations in relation to firefighter health and safety.

12. DESCRIPTION OF JOB (Check if description applies to **Official Title** or **Underfill Title**):

A. ESSENTIAL FUNCTIONS/Duties and Responsibilities: (Refer to the "Guidelines for Preparing Job Descriptions" for instructions on determining Essential Functions.)

% of Time	ESSENTIAL FUNCTION
55	<ul style="list-style-type: none"> Provides mandatory medical consultation and observations at Tuesday morning "sick call" for department employees, identifying members who may be eligible for the MFD's Return to Work program, or are medically certified to safely perform essential job tasks. Advises employees regarding concerns on subjects of care and/or possible disability.
10	<ul style="list-style-type: none"> Reviews individual medical evaluations and aggregate data, working in tandem with the department's Health and Safety Manager to identify possible occupational exposures or clusters of occupational disease or injury. Aids in developing programs and educational presentations to address areas of concern.
10	<ul style="list-style-type: none"> Consults with employees' physicians regarding duty-related illnesses/injuries.
5	<ul style="list-style-type: none"> Consults with medical groups conducting special team physical examinations and SCBA fit test medical questionnaires as outlined in NFPA 1404; identifying conditions that need to be brought to the attention of employees.
5	<ul style="list-style-type: none"> Acts as an advisor and or provides support to the following MFD committees/programs: Occupational Safety and Health Committee, Peer Support Team, and Infectious Control. Attends critical incident debriefings.
5	<ul style="list-style-type: none"> Provides on-scene medical support for third or greater alarms.
5	<ul style="list-style-type: none"> Participates in planning, activation, response, and resources for mutual aid for natural and made-made disasters, hazardous materials, and weapons of mass destruction. Attends CME and other government-sponsored courses on disaster/terrorism medicine.
5	<ul style="list-style-type: none"> Acts as a liaison between the Fire Chief and the clinical department of the Medical College of Wisconsin and community hospitals, developing a teaching experience for medical, physician assistant, and nursing students in the medical aspects of the firefighting profession.
	<ul style="list-style-type: none">

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B. PERIPHERAL DUTIES:

% of Time	PERIPHERAL DUTY
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C. NAME AND TITLE OF IMMEDIATE SUPERVISOR:

Mark A. Rohlfing, Fire Chief

D. SUPERVISION RECEIVED: (Describe the extent to which work assignments and methods are outlined, reviewed, and approved by this position’s supervisor.)

Works primarily independently with minimal supervision.

E. SUPERVISION EXERCISED:

Total number of employees for whom responsible, either directly or indirectly = **0**.

Direct Supervision: List the number and titles of personnel directly supervised. Specify the kind and extent of supervision exercised by indicating one or more of the following:

a. Assign duties	e. Sign or approve work	
b. Outline methods	f. Make hiring recommendations	
c. Direct work in progress	g. Prepare performance appraisals	
d. Check or inspect completed work	h. Take disciplinary action or effectively recommend such	
Number Supervised	Job Title	Extent of Supervision Exercised (Select those that apply from list above, a - h)

F. MINIMUM QUALIFICATIONS REQUIRED: (Indicate the MINIMUM qualifications required to enter the job.)

i. Education and Experience:

Must be a Doctor of Medicine (MD).

ii. Knowledge, Skills and Abilities:

Knowledge and experience in the firefighting duties as outlined in NFPA 1500 are required.

iii. Certifications, Licenses, Registrations:

Must possess a Doctor of Medicine License for the State of Wisconsin, and a Wisconsin Driver's License.

iv. Other Requirements:

13. PHYSICAL AND ENVIRONMENTAL DEMANDS: TOOLS AND EQUIPMENT USED

The Americans with Disabilities Act of 1993 requires job descriptions to provide detailed information regarding the physical demands required to perform the essential functions of a job; the conditions under which the job is performed; and the tools and equipment the employee will be required to use on the job. Reasonable accommodations may be made to enable qualified individuals to perform the essential duties and responsibilities of the job for each of the categories listed below.

G. PHYSICAL ACTIVITY OF THE POSITION: (List the physical activities that are representative of those that must be met to successfully perform the essential functions of the job).

CHECK ALL THAT APPLY:

<input type="checkbox"/>	Climbing: Ascending or descending ladders, stairs, scaffolding, ramps, poles, and the like; using feet and legs and/or hands and arms. Body agility is emphasized. Check only if the amount and kind of climbing required exceeds that required for ordinary locomotion.
<input type="checkbox"/>	Balancing: Maintaining body equilibrium to prevent falling when walking, standing or crouching on narrow, slippery or erratically moving surfaces. Check only if the amount and kind of balancing exceeds that

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	needed for ordinary locomotion and maintenance of body equilibrium.
<input type="checkbox"/>	Stooping: Bending body downward and forward by bending spine at the waist. Check only if it occurs to a considerable degree and requires full use of the lower extremities and back muscles.
<input type="checkbox"/>	Kneeling: Bending legs at knee to come to a rest on knee or knees.
<input type="checkbox"/>	Crouching: Bending the body downward and forward by bending leg and spine.
<input type="checkbox"/>	Crawling: Moving about on hands and knees or hands and feet.
<input type="checkbox"/>	Reaching: Extending Hand(s) and arm(s) in any direction.
<input checked="" type="checkbox"/>	Standing: Particularly for sustained periods of time.
<input checked="" type="checkbox"/>	Walking: Moving about on foot to accomplish tasks, particularly for long distances.
<input type="checkbox"/>	Pushing: Using upper extremities to exert force in order to draw, press against something with steady force in order to thrust forward, downward or outward.
<input type="checkbox"/>	Pulling: Using upper extremities to exert force in order to draw, drag, haul or tug objects in a sustained motion.
<input type="checkbox"/>	Lifting: Raising objects from a lower to a higher position or moving objects horizontally from position-to-position. Check only if it occurs to a considerable degree and requires substantial use of the upper extremities and back muscles.
<input checked="" type="checkbox"/>	Fingering: Picking, pinching, typing or otherwise working primarily with fingers rather than with the whole hand or arm, as in handling.
<input type="checkbox"/>	Grasping: Applying pressure to an object with fingers and palm.
<input type="checkbox"/>	Feeling: Perceiving attributes of objects such as size, shape, temperature or texture by touching with the skin, particularly that of the fingertips.
<input checked="" type="checkbox"/>	Talking: Expressing or exchanging ideas by means of the spoken word. Those activities which demand detailed or important instructions spoken to other workers accurately, loudly or quickly.
<input checked="" type="checkbox"/>	Hearing: Perceiving the nature of sounds with no less than a 40 db loss. Ability to receive oral communication and make fine discriminations in sound.
<input type="checkbox"/>	Repetitive Motions: Substantial movements (motions) of the wrist, hands, and/or fingers.
<input checked="" type="checkbox"/>	Driving: Minimum standards required by State Law (including license).

H. PHYSICAL REQUIREMENTS OF THE POSITION: (List the physical requirements that are essential functions of the job.)

CHECK ONE:

<input checked="" type="checkbox"/>	Sedentary Work: Exerting up to 10 pounds of force occasionally and/or negligible amount of force frequently or constantly to lift, carry, push, pull or otherwise move objects. Sedentary work involves sitting most of the time. Jobs are sedentary if walking and standing are required only occasionally and all other sedentary criteria are met.
<input type="checkbox"/>	Light Work: Exerting up to 10 pounds of force occasionally and/or negligible amount of force constantly to move objects. If the use of arm and/or leg controls requires exertion of forces greater than that for sedentary work and the worker sits most of the time, the job is rated for Light Work.
<input type="checkbox"/>	Medium Work: Exerting up to 50 pounds of force occasionally and/or up to 20 pounds of force frequently, and/or up to 10 pounds of force constantly to move objects.
<input type="checkbox"/>	Heavy Work: Exerting up to 100 pounds of force occasionally, and/or up to 50 pounds of force frequently, and/or up to 20 pounds of force constantly to move objects.
<input type="checkbox"/>	Very Heavy Work: Exerting in excess of 100 pounds of force occasionally, and/or in excess of 50 pounds of force frequently, and/or in excess of 20 pounds of force constantly to move objects.

I. VISUAL ACUITY REQUIREMENTS: (List the visual acuity requirements that are essential functions of the job.)

CHECK ONE:

<input checked="" type="checkbox"/>	Operators (Electronic Equipment), Inspection, Close Assembly, Clerical, Administrative: This is a minimum standard for use with those whose job requires work done at close visual range (i.e. preparing and analyzing data and figures, accounting, transcription, computer terminal, extensive reading, visual inspection involving small parts, operation of machines, using measurement devices, assembly or fabrication of parts).
<input type="checkbox"/>	Machine Operators, Mechanics, Skilled Tradespeople: This is a minimum standard for use with those whose work deals with machines where the seeing job is at or within arm's reach. This also includes mechanics and skilled tradespeople and those who do work of a non-repetitive nature such as carpenters, technicians, service people, plumbers, painters, mechanics, etc. (If the machine operator also inspects, check the "Operators" box.)
<input type="checkbox"/>	Mobile Equipment Operators: This is a minimum standard for use with those who operate cars, trucks, forklifts, cranes, and high lift equipment.
<input type="checkbox"/>	Other: This is a minimum standard based on the criteria of accuracy and neatness of work for janitors, sweepers, etc.

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J. THE CONDITIONS THE WORKER WILL BE SUBJECT TO IN THIS POSITION:

List the environmental/working conditions to which the employee may be exposed while performing the essential functions of the job. Include scheduling considerations such as on-call for emergencies, rotating shift, etc. **Approximate Percentage of time performing field work: 5%**

CHECK ALL THAT APPLY:

<input type="checkbox"/>	None: The worker is not substantially exposed to adverse environmental conditions (such as typical office or administrative work).
<input type="checkbox"/>	The worker is subject to inside environmental conditions: Protection from weather conditions but not necessarily from temperature changes (i.e. warehouses, covered loading docks, garages, etc.)
<input checked="" type="checkbox"/>	The worker is subject to outside environmental conditions: No effective protection from weather.
<input checked="" type="checkbox"/>	The worker is subject to extreme cold: Temperatures below 32 degrees for period of more than one hour.
<input checked="" type="checkbox"/>	The worker is subject to extreme heat: Temperatures above 100 degrees for periods of more than one hour.
<input checked="" type="checkbox"/>	The worker is subject to noise: There is sufficient noise to cause the worker to shout in order to be heard above the surrounding noise level.
<input type="checkbox"/>	The worker is subject to vibration: Exposure to oscillating movements of the extremities or whole body.
<input type="checkbox"/>	The worker is subject to hazards: Includes a variety of physical conditions, such as proximity to moving mechanical parts, electrical current, working on scaffolding and high places or exposure to chemicals.
<input type="checkbox"/>	The worker is subject to atmospheric conditions: One or more of the following conditions that affect the respiratory system or the skin: Fumes, odors, dust, mists, gases or poor ventilation.
<input type="checkbox"/>	The worker is subject to oil: There is air and/or skin exposure to oils and other cutting fluids.
<input type="checkbox"/>	The worker is required to wear a respirator.

K. MACHINE, TOOLS, EQUIPMENT, ELECTRONIC DEVICES, SOFTWARE, ETC. USED BY POSITION:

List equipment needed to successfully perform the essential functions of the job. Reasonable accommodations may be made to enable qualified individuals with disabilities to perform the essential functions.)

CHECK ALL THAT APPLY:

<input type="checkbox"/>	Camera and photographic equipment	<input checked="" type="checkbox"/>	Office Equipment (desk, chair, telephone, etc.)						
<input type="checkbox"/>	Cleaning supplies	<input checked="" type="checkbox"/>	Office supplies (pens, staplers, pencils, etc.)						
<input type="checkbox"/>	Commercial vehicle	<input type="checkbox"/>	Packing materials (boxes, shrink wrap, etc.)						
<input type="checkbox"/>	Data processing equipment	<input checked="" type="checkbox"/>	PC equipment (monitor, keyboard, printer, etc.)						
<input type="checkbox"/>	Handcart	<input checked="" type="checkbox"/>	PC software						
<input type="checkbox"/>	Hand tools (please list):								
<input checked="" type="checkbox"/>	Office Machines (check all that apply):	<input type="checkbox"/>	Copier	<input checked="" type="checkbox"/>	Facsimile	<input type="checkbox"/>	Calculator	<input type="checkbox"/>	Cash register
<input checked="" type="checkbox"/>	Other (please list):	medical diagnostic equipment, medical treatment equipment for advanced life support							

L. SUPPLEMENTARY INFORMATION: (Indicate any other information which further explains the importance, difficulty, or uniqueness of the position, such as its scope of responsibility related to finances, equipment, people, information, etc. Also indicate success factors such a personal characteristics that contribute to an individual's ability to perform well in the job, and any other special considerations.)

Must be available 24 hours a day, 7 days a week, unless the Chief is made aware of unavailability in advance.

M. I believe that the statements made above in describing this job are complete and accurate:



 Signature of Department Head or Designated Representative

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