



VICTORIA POLICE

# Iron Deficiency Anaemia (IDA)

## *Treating Specialist*

## Investigations and Reports for Consideration

- Relevant medical records including an outline of the condition, results of exercise testing
- Any treatment, including ongoing treatment such as documentation of dietary iron supplementation

## Medical Standard

May be fit for unrestricted duties if all are true:

- Anaemia is adequately treated
- There is dietary iron supplementation to normalise Hb levels ( $\geq 116$  g/L in females and  $\geq 132$  g/L in males)
- Ability to bleed safely
- Meets the NTC Fitness to Drive Commercial Drivers Standard.

## Impact on Job Performance

May impair ability to engage in physically demanding tasks.

May result in fatigue, weakness, and shortness of breath.

May increase risk of sudden incapacitation.



VICTORIA POLICE

# Thalassaemia

## *Treating Haematologist*

### Investigations and Reports for Consideration

- Relevant medical records including an outline of the condition documenting diagnosis of thalassaemia trait and ruling out other causes of anaemia
- Any treatment, including ongoing treatment

### Medical Standard

May be fit for unrestricted duties if all are true:

- Normal Hb levels ( $\geq 120$  g/L in females and  $\geq 130$  g/L in males in the presence of microcytic anaemia (MCV  $< 80$  fl))
- The condition is thalassaemia minor
- The individual is considered safe to perform the inherent requirements of an operational general police officer and protective services officer.
- Ability to bleed safely
- Meets the NTC Fitness to Drive Commercial Drivers Standard.

### Impact on Job Performance

May impair ability to engage in physically demanding tasks.

May result in fatigue, weakness, and shortness of breath.

May increase risk of sudden incapacitation.



VICTORIA POLICE

# Sickle Cell Anaemia

## *Treating Haematologist*

### Investigations and Reports for Consideration

- Relevant medical records including an outline of the condition documenting diagnosis of sickle cell anaemia
- Any treatment, including ongoing treatment
- Evaluation from an ophthalmologist documenting absence of retinopathy
- Hip x-ray documenting absence of aseptic necrosis
- Normal chest x-ray
- Urinalysis documenting absence of microalbuminuria
- Evaluation by a neurologist if there is a history of stroke
- Documentation of frequency of pain crises

### Medical Standard

May be fit for unrestricted duties if all are true:

- Normal FBC with RBC count  $>4.2 \times 10^{12}/L$  and Hb levels  $\geq 120$  g/L in females and RBC count  $>4.2 \times 10^{12}$  and Hb levels  $\geq 130$  g/L in males
- There is no end-organ damage, including:
  - Retinopathy
  - Aseptic necrosis
  - Splenomegaly
  - Skin ulceration, particularly of the lateral malleolus
- Has successfully completed exercise testing
- Fewer than three pain crises in the past year
- The individual is considered safe to perform the inherent requirements of an operational general police officer and protective services officer.
- Ability to bleed safely
- Meets the NTC Fitness to Drive Commercial Drivers Standard.

### Impact on Job Performance

May impair ability to engage in physically demanding tasks.

May result in fatigue, weakness, and shortness of breath.



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May increase risk of sudden incapacitation.



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# Von Willebrand Disease

## *Treating Haematologist*

## Investigations and Reports for Consideration

- Relevant medical records including an outline of the condition documenting diagnosis of type of von Willebrand disease based on laboratory testing
- Any treatment, including ongoing treatment
- Documentation of absence of spontaneous or severe bleeding history

## Medical Standard

May be fit for unrestricted duties if all are true:

- Type 1 or 2 von Willebrand disease
- No history of severe or spontaneous bleeding
- The individual is considered safe to perform the inherent requirements of an operational general police officer and protective services officer
- Ability to bleed safely
- Meets the NTC Fitness to Drive Commercial Drivers Standard.

## Impact on Job Performance

At increased risk for incurring sprains, deep cuts, fractures as well as severe and permanent injuries.



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# Factor V Leiden

## *Treating Haematologist*

### Investigations and Reports for Consideration

- Relevant medical records including an outline of the condition documenting diagnosis of Factor V Leiden
- Any treatment, including ongoing treatment
- If there is a history of dvt, clearance by physician including date of thrombosis and record of anticoagulant therapy
- Report of INR values (if applicable)

### Medical Standard

May be fit for unrestricted duties if all are true:

- Adequate anticoagulation based on INR checks (if applicable) was achieved
- Is no longer on anticoagulation
- If there is a history of dvt, is asymptomatic
- The individual is considered safe to perform the inherent requirements of an operational general police officer and protective services officer
- Meets the NTC Fitness to Drive Commercial Drivers Standard.

### Impact on Job Performance

May result in fatigue, weakness, and shortness of breath.

May increase risk of sudden incapacitation.

At increased risk of incurring sprains, deep cuts, fractures as well as severe permanent injuries.



VICTORIA POLICE

# Thrombocytopenia

## *Treating Haematologist*

### Investigations and Reports for Consideration

- Relevant medical records including an outline of the condition
- Any treatment, including ongoing treatment
- Documentation of platelet count
- Documentation of absence of intracranial bleeding within the past year
- Documentation of bleeding requiring transfusion within the past year

### Medical Standard

May be fit for unrestricted duties if all are true:

- Platelet count above  $150 \times 10^9 /L$
- No history of intracranial bleeding in the past year
- No history of spontaneous bleeding requiring transfusion in the past year
- The underlying condition would not affect their capacity to safely perform the inherent requirements of an operational general police officer and protective services officer
- The individual is considered safe to perform the inherent requirements of an operational general police officer and protective services officer
- Ability to bleed safely
- Meets the NTC Fitness to Drive Commercial Drivers Standard.

### Impact on Job Performance

May result in fatigue, weakness, and shortness of breath.

May increase risk of sudden incapacitation.

At increased risk of incurring sprains, deep cuts, fractures as well as severe permanent injuries.



# Use of Anticoagulants

Individuals treated with usual doses of warfarin have a 2-4% risk per year of bleeding episodes requiring transfusion, and a 0.2% risk per year of fatal haemorrhage. Current guidelines recommendations favour direct oral anticoagulants (DOAC), such as Apixaban, Dabigatran and Rivaroxaban, over warfarin in eligible patients with AF and VTE. The use of DOACs does carry a risk of bleeding though the risk is lower than with warfarin use. DOACs have advantages but monitoring and reversal of anticoagulation are still unresolved issues. Patients on prophylactic or low-dose aspirin are at a lower or minimal risk. Patients on combination antiplatelet agents, such as aspirin combined with clopidogrel (Plavix), can experience significant bleeding with trauma.

## *Treating Haematologist*

### Investigations and Reports for Consideration

- Relevant medical records including an outline of the condition
- Any treatment, including ongoing treatment and name and risk factors of medication
- Report of INR values (if applicable)

### Medical Standard

May be fit for unrestricted duties if all are true:

- The underlying condition would not affect their capacity to safely perform the inherent requirements of an operational general police officer and protective services officer
- Ongoing anticoagulation is required
- Ability to bleed safely
- Meets the NTC Fitness to Drive Commercial Drivers Standard.

### Impact on Job Performance

May impair ability to engage in physically demanding tasks.

May result in fatigue, weakness, and shortness of breath.

May increase risk of sudden incapacitation.

At increased risk of incurring sprains, deep cuts, fractures as well as severe permanent injuries.





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# Haemachromatosis

## *Treating Specialist*

## Investigations and Reports for Consideration

- Relevant medical records including an outline of the condition
- Any treatment, including ongoing treatment

## Medical Standard

May be fit for unrestricted duties if all are true:

- Appropriately treated
- No evidence of end-organ damage
- Ability to bleed safely
- Meets the NTC Fitness to Drive Commercial Drivers Standard.

## Impact on Job Performance

May impair ability to engage in physically demanding tasks.

May result in fatigue, weakness, and shortness of breath.

May increase risk of sudden incapacitation.