

Examination

HEENT:	Normal	Abnormal	_____
Cardiac Examination:	Normal	Abnormal	_____
Peripheral Circulation:	Normal	Abnormal	_____
Lungs:	Normal	Abnormal	_____
Abdomen:	Normal	Abnormal	_____
Musculoskeletal:	Normal	Abnormal	_____
Neurological:	Normal	Abnormal	_____
Skin:	Normal	Abnormal	_____

Screening

Urinalysis Normal Abnormal _____
Tuberculosis Questionnaire (F-2A) Administered: Yes No Additional Screening Required: Yes No
Specify Additional Screening: _____

Certification

Are there any conditions, physical, emotional, or mental, which, in your opinion, suggest further examination?

No Yes: _____

Do you have any reservations about this candidate's ability to physically perform required duties?

No Yes: _____

Meets Standards - Cleared

Does Not Meet Standards - Further Evaluation Required

Does Not Meet Standards - Disqualified

I have read and fully understand the Medical Screening Guidelines for the Certification of Criminal Justice Officers in the State of North Carolina Implementation Manual. This manual can be found attached.

Signature of Qualified Medical Professional

Medical License #

Date

Practice Information

Name: _____ Phone #: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____



**NORTH CAROLINA DEPARTMENT OF JUSTICE
CRIMINAL JUSTICE STANDARDS DIVISION**

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JEFFREY SMYTHE
DIRECTOR

M E M O R A N D U M

TO: All Police Chiefs and Agency Representatives
FROM: Jeffrey Smythe, CJ Standards Director
DATE: September 25, 2025
SUBJECT: Medical Screening Guide and Forms Update

In 2024, a subcommittee was formed to revise the medical screening forms and the Medical Screening Guide, also known as the Minimum Medical Qualifications for Law Enforcement Officers, Justice Officers, Corrections Officers, Juvenile Justice Officers, Court Counselors, Chief Court Counselors, Deputy Sheriffs, Detention Officers, and Telecommunicators. These updates were undertaken to improve clarity, streamline documentation, and enhance the ability to detect medical conditions that may pose a health risk while serving in specific roles or environments.

Key updates include:

- **Revised Minimum Medical Qualifications Guide:** Incorporates both required and optional testing, based on the discretion of the medical professional conducting the exam. Additional testing has been introduced to help identify **known medical risk factors** that may not be apparent through previous standard screening. These include conditions related, but not limited to:
 - **Cardiovascular** health (e.g., hypertension, arrhythmias),
 - **Respiratory** function (e.g., asthma, chronic bronchitis),
 - **Gastrointestinal** systems (e.g., liver function abnormalities, chronic digestive issues such as ulcers or inflammatory bowel disease), and
 - **Hematological** conditions (e.g., anemia, clotting disorders, or blood cell abnormalities that may affect physical performance or indicate underlying health issues).

These areas were emphasized due to their potential to impact an individual's ability to perform essential job functions safely and effectively. Early identification allows for timely follow-up, treatment, or accommodations when necessary.

- **Updated F-2 Form:** Redesigned to simplify completion and improve the organization of information, as well as new testing requirements.

- **New F-2A (Formerly the Tuberculosis Questionnaire):** Redesigned and includes additional screening questions.
- **New F-2B (Medical Examination Report Addendum)** For use during follow-up examination for identified medical issues.

On **August 15, 2025**, the Commission approved the updated **Medical Screening Guide, F-1, F-2, F-2A, and F-2B**. These documents are now available on our website.

Please note that as of September 25, 2025, we are also undertaking further improvements to the F-2 form based on user feedback and implementation review.

For continuity, the previous versions of the **F-1 and F-2**, dated **November 2022**, will remain available during the transition period and will be accepted by the Division through **June 30, 2026**. This lengthy sunset period for the older forms is based on the increased costs associated with additional testing. The grace period will allow agencies and medical practitioners to obtain testing equipment, identify lab protocols, and negotiate contracts that include the new cost factors

If you have any questions, please don't hesitate to contact me.