RAILWAY MEDICAL RULES FOR
POSITIONS CRITICAL TO SAFE
RAILWAY OPERATIONS

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1. **Short Title**
For ease of reference, these rules may be referred to as the "*Railway Medical Rules*".

2. **Scope**

2.1 These rules, which have been developed pursuant to Section 20 (1) (a) of the *Railway Safety Act*, define the Medical Fitness for Duty requirements for Safety Critical Positions within railway companies subject to the jurisdiction of the Department.

2.2 In the case of international train movements, a railway company may allow persons to perform limited service in Safety Critical Positions while using medical requirements stipulated by U.S. Federal Railroad Administration regulations.

3. **Definitions**

3.1 "**Chief Medical Officer**" means a physician licensed to practice medicine in Canada and who is employed or contracted by a railway company for the purpose of, among other things, directing and managing the area of Medical Fitness for Duty requirements and guidelines.

3.2 "**Department**" means the Department of Transport, Rail Safety Group.

3.3 "**Medical Fitness for Duty**" means that a determination was made by the Chief Medical Officer, subject to any restrictions or requirements imposed under Section 6 hereof, that a person has taken the medical assessments required by these rules, and that the person meets all of the Medical Fitness for Duty requirements provided herein.

3.4 "**Safety Critical Position**" has the same meaning as provided in the Railway Rules Governing Safety Critical Positions.

3.5 "**person**" means a person in a Safety Critical Position.

4. **Frequency of Medical Assessments**

4.1 Subject to sub-section 4.2, a person shall undergo a company organized Medical Fitness for Duty assessment:

a) prior to commencement of employment in a Safety Critical Position;

b) upon promotion or transfer to a Safety Critical Position; and

c) every five years until the age of forty, and every three years thereafter until retirement, or until that person is no longer employed in a Safety Critical Position.
4.2 Without varying the requirement of sub-section 4.1(c), no assessment shall be required under sub-section 4.1(b) if the person had previously occupied a Safety Critical Position which, in the opinion of the Chief Medical Officer, had similar mental and physical demands as the Safety Critical Position into which the person is entering.

4.3 The Chief Medical Officer may require additional assessments to those set out in Section 4.1 if:

b) the person has or may have a medical condition that requires assessment or more frequent monitoring; or

c) the person is returning to work in a Safety Critical Position after a leave due to illness or injury.

5. **Assessment for Medical Fitness for Duty**

5.1 The Medical Fitness for Duty for a person shall be assessed on an individual basis, taking into consideration medical conditions, both past and current, that could result in:

a) sudden impairment;

b) impairment of cognitive function including alertness, judgment, insight, memory and concentration;

c) impairment of senses;

d) significant impairment of musculoskeletal function; or

e) other impairment that is likely to constitute a threat to safe railway operations.
5.2 The medical conditions referred to in Section 5.1 shall include:

a) diseases of the nervous system, including seizure disorders, narcolepsy, sleep apnea and other disturbances of consciousness, vestibular disorders, disorders of coordination and muscle control, head injury, post traumatic conditions and intracranial tumors;

b) cardiovascular diseases, including high blood pressure, coronary artery disease, myocardial infarction, cerebrovascular disease, aortic aneurysm, congestive heart failure, cardiac arrhythmia, valvular heart disease and cardiomyopathy;

c) metabolic diseases, including diabetes mellitus, thyroid disease, Cushing's Disease, Addison's Disease and pheochromocytoma;

d) musculoskeletal disabilities, including amputation of a limb, arthritis, significant joint dysfunction, disease of the spine, obesity or other significant musculoskeletal conditions;

e) respiratory diseases, including obstructive or restrictive conditions resulting in functional impairment;

f) mental disorders, including the following types of mental disorders:

i) cognitive, including dementias, delerium and amnesia;

ii) psychotic, including schizophrenia;

iii) mood, including depression, manic, bipolar;

iv) anxiety, including panic attacks and phobias; and

v) personality, resulting in anti-social, erratic or aggressive behaviour;

g) substance abuse, including abuse or dependence on alcohol, prescription medications, or illicit drugs;

h) hearing impairment, including hearing acuity;

i) visual impairment, including distant visual acuity, field of vision, colour vision; and

j) any other organic, functional or structural disease, defect or limitation that is likely to constitute a threat to safe railway operations.

5.3 In addition to the medical conditions referred to in Section 5.2, the individual assessment of a person’s Medical Fitness for Duty shall also take into consideration:

a) the occupational demands of the person's job and the person’s ability to meet those demands;

b) the person's performance record; and

c) any prescription or over-the-counter medications that the person is using, or has used, that may cause mental or physical impairment or affect judgment.
5.4 Notwithstanding sub-sections 5.1 and 5.2, the Chief Medical Officer may determine that any additional assessments required under sub-section 4.3 may be limited to assessments of particular medical conditions.

6. **Medical Restrictions**

6.1 If the Chief Medical Officer, in making an individual assessment of a person’s Medical Fitness for Duty, is of the opinion that there exists a threat to safe railway operations, the Chief Medical Officer may:

   a) restrict a person from occupying a Safety Critical Position;
   b) require the use of corrective devices or other medical aids; or
   c) otherwise restrict a person’s ability to work or perform certain tasks in a Safety Critical Position.

6.2 Upon completion of a Medical Fitness for Duty assessment, the Chief Medical Officer shall advise each person, and the person’s supervisor of that person’s Medical Fitness for Duty and of any restrictions or requirements imposed pursuant to sub-section 6.1.

7. **Records to be Kept by Chief Medical Officer**

7.1 The Chief Medical Officer of the railway company shall maintain records of all persons’ medical assessments required hereunder and any restrictions required pursuant to sub-section 6.1.

7.2 The Chief Medical Officer shall maintain copies of all medical policies and guidelines used by a railway company for the examination or assessment of persons employed in Safety Critical Positions.

7.3 The Chief Medical Officer shall make records, policies, and guidelines related to these rules available to the Department upon reasonable request.
8. Exceptions

8.1 These rules do not apply to passenger trains used exclusively in tourist excursion train service that travel no further than a round trip of 150 miles (240 km), at a speed not exceeding a maximum of 25 mph (40 km/h), if the railway company establishes and complies with appropriate alternative medical requirements suitable to that particular services.

8.2 In developing such alternative medical requirements, the railway company shall:

   a) use these rules as a guide to ensure the alternative medical requirements achieve an equivalent level of safety to these rules; and,

   b) consult with the Department on its proposed alternative medical requirements at least 90 days prior to the date on which it proposes to operate a service using those requirements.

8.3 The alternative medical requirements must include a list of the safety critical railway positions to which the alternative medical requirements shall apply.

8.4 The railway company shall not implement the alternative medical requirements established under 8.1 until the Department determines that such requirements conducive to safe railway operations.