Crane Operator Medical Clearance

(This form is for physicians guidance and verification of Crane Operator physical qualification/examination requirements and does not replace any of the crane operator requirements in EM 385-1-1)

Date of Examination:

Crane Company/Employer Name: _____Phone: _____Phone: _____

This is to certify that ______ was administered a physical examination and meets the Crane Operator Physical Qualification/Examination Requirements set forth in the U.S. Army Corps of Engineers EM 385-1-1, Section 16.B.05

 MD
 DO

 Physician's Signature and Title (Must be a MD or DO)
 Name (Print) and Phone No.

Note: A DOT Medical Examiners Certificate in accordance with the Federal Motor Carrier Regulation (49 CFR 391.41-391.49) does not meet the EM 381-1-1 crane operator physical requirements.

EM 385-1-1 Crane Operator Physical Qualification/Examination Requirements:

a. Operators shall have a current physician's certification, dated within the past 2 years, that states the operator meets the following physical qualifications:

(1) Vision of at least 20/30 Snellen in one eye and 20/50 in the other, with or without corrective lenses;

(2) Normal depth perception and field of vision;

(3) Ability to distinguish colors, regardless of position;

(4) Adequate hearing, with or without hearing aid, for the specific operation;

(5) Sufficient strength, endurance, agility, coordination, manual dexterity, and speed of reaction to meet the demands of equipment operation;

(6) No evidence that the operator is subject to seizures or loss of physical control. If evidence of this nature is found, it may be sufficient cause for disqualification. In such cases, specialized medical tests may be required to evaluate these conditions and determine their impact;

(7) No evidence of physical, emotional or psychological limitations that could result in a hazard to the operator, or that in the opinion of the examiner could interfere with the operator's performance. If evidence of this nature is found, it may be sufficient cause for

Crane Operator Medical Clearance

(This form is for physicians guidance and verification of Crane Operator physical qualification/examination requirements and does not replace any of the crane operator requirements in EM 385-1-1)

disqualification. Specialized medical tests may be required to determine these conditions.

b. Deviations from Physical Qualification Requirements.

(1) Deviations from the physical requirements are not necessarily totally disqualifying.

(2) However, where such deviations exist, competent medical and management authorities shall give special consideration to each individual case and may recommend waivers.

(3) Waivers may be approved by the local Safety and Occupational Health office (SOHO) and must be re-issued every 2 years, based on results of operator's medical clearance examination. A copy shall be provided to HQ, SOHO.

(4) Normally, waivers shall not be granted for applicants who have never before established operator qualifications. However, an evaluation on an individual basis shall be made per the above requirements. Any limitations identified shall be noted on the operator's license and license record.

c. Contractor drug testing program. All contractor crane operators shall participate in a drug testing program and have a negative result for a substance abuse test. The level of testing will be in accordance with standard practices for industry or by the agency's random drug testing program. This test will be confirmed by a recognized laboratory service.

Comments: