

# What my doctor needs to know about my occupational health risks



Firefighting can expose you to unique hazards that can affect your long-term health. This form is a tool to help you have an open and informed conversation with your doctor about job-related health risks. Complete this form in preparation for your doctor's visit to help them better understand the risks as a firefighter for diseases like cancer. Please note this is not an official medical form for your doctor to fill out but rather a guidance document to help you have a meaningful discussion in support of your health and well-being. As this form contains personal information, keep it confidential and store it securely.

The International Agency for Research on Cancer (IARC) has classified occupational exposures associated with firefighting as carcinogens. IARC has found sufficient evidence for mesothelioma and bladder cancer, and limited evidence for non-Hodgkin lymphoma (blood cancer), melanoma, and cancers of the colon, prostate, and testicles.

Use this form to summarize key information about your work environment, exposure history, and lifestyle. By sharing this information, you and your doctor can discuss ways to reduce risk, watch for early warning signs, and consider appropriate preventive care, screening or testing.

**SECTION ONE** – Complete this section before your doctor's appointment.

## Occupation and work history

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Name:

Years of service:

Type of firefighter:

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Type of firefighter:

Typical duties (for example, structural fire suppression, wildland fire, wildland/urban interface, overhaul, vehicle fires, training, apparatus maintenance):

Number of years as a shift worker:

Shift pattern (for example, 24-hour shifts, nights):

**Occupational hazards** in your line of work related to cancer (check all that apply):

Asbestos

Hepatitis B or C

Benzene

Lead

Cadmium

Night shift

Crystalline silica

Polycyclic aromatic hydrocarbons (PAHs)

Diesel exhaust

Per- and polyfluoroalkyl substances (PFAS)

Fine particulate matter

Sun

Formaldehyde

Volatile organic compounds (VOCs)

Other:

**Personal and lifestyle factors**

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Family history of cancer:

Alcohol use (for example, number of drinks per week):

Recreational drug use:

Level of physical activity (for example, sedentary, light, moderate, vigorous):

Nutrition (for example, type of diet):

Smoking status (for example, never/former):

Sun exposure (for example, gardening, sunbathing):

Sleeping habits:

**Suggested questions for discussion with your doctor**

1. Are there screenings you recommend earlier due to my job?
2. Are there baseline tests I can take now for future comparison?
3. How should occupational exposures be documented in my medical record?
4. Are you familiar with any medical guidelines specific to firefighters?
5. What symptoms should prompt me to call you immediately rather than waiting?
6. Do I need a referral to another health care provider, such as an occupational physician?
7. Are there any vaccines or supplements you recommend?
8. What lifestyle changes can I make to reduce my risk?

**Other questions or concerns:**

Date of next doctor's visit: