

# GUAM FIRE DEPARTMENT

ORGANIZATION	
<b>Chapter:</b>	<b>V- Personnel Policies and Procedures</b>
<b>Subject:</b>	<b>Medical Documentation Requirements</b>
<b>Code:</b>	<b>1-V-31</b>
<b>Revised:</b>	

## 31.01 Purpose

To standardize what medical documentation the Guam Fire Department may request from employees and when, consistent with:

- **Guam law** (4 GCA Ch. 4; 22 GCA Ch. 3, Art. 6),
- **Guam DOA Personnel Rules & Regulations (PR&R)** (notably Chapter 8: Leave; Chapter 9: Medical Exams),
- **DOA Organizational Circular 2016-028** (Leave of Absence for Medical Reasons), and
- **Federal law** (ADA, FMLA, GINA), including confidentiality requirements. ([guamcourts.gov](http://guamcourts.gov))

## 31.02 Policy

To establish clear guidelines regarding when the Guam Fire Department may request medical documentation from employees, while ensuring compliance with applicable federal and local laws (ADA, FMLA, Workers' Compensation, and confidentiality standards).

## 31.03 Scope

Applies to all GFD employees (classified and, where applicable, unclassified) requesting or using sick leave, family/medical leave, fitness-for-duty evaluations, or job-related medical accommodations/exams. DOA PR&R apply government-wide and cover GFD employees.

## 31.04 Legal/Regulatory Authority (summary)

- **Guam DOA PR&R – Sick Leave & Physician Certification.** Agencies may require a physician's certification when an employee is absent **more than 3 consecutive days** or for the **full day immediately before or after** a holiday/day off; supervisors may also require certification for other periods using reasonable judgment.
- **DOA Circular 2016-028.** Clarifies what must appear on a physician's certification for medical leave (employee/family member info, condition/care required, and duration).
- **Guam DOA PR&R – Fitness-for-Duty / Special Exams.** Appointing authorities may require **special medical/psychological exams** to determine fitness for duty; such exams are **paid by the agency**. Periodic exams may be required for specified classes with DOA approval.
- **FMLA (federal) and Guam FMLA.** Employers may require **medical certification** using DOL optional forms (WH-380E/WH-380F); employers **cannot demand information beyond FMLA regulations** allow. Guam's FMLA (22 GCA, Art. 6) also provides job-protected leave, including bereavement. ([DOL](http://DOL))

- **ADA.** Disability-related inquiries/exams of employees must be **job-related and consistent with business necessity**; any medical info obtained must be **kept confidential in a separate medical file.** ([Legal Information Institute](#))
- **GINA.** Employers generally **may not request or collect genetic information**, including **family medical history**, except narrow exceptions (e.g., certain FMLA caregiving certifications). ([EEOC](#))
- **HIPAA (clarification).** HIPAA **does not apply** to employment records held by an employer; nonetheless, ADA requires confidentiality of employee medical information. ([hhs.gov](#))

## 3105 PROCEDURES

### 1. When Documentation Is Required

#### a) GFD may require a physician's certification when:

- Absence is **> 3 consecutive days** due to illness/injury/quarantine;
- The **full day immediately before or after** a holiday, weekend, or day off is missed;
- Other periods, if the department head deems appropriate and supervisors apply **reasonable judgment**.
- What the Certificate must include
  - Employee's name**;
  - Medical condition or care required** (a brief statement sufficient to show incapacity or treatment—diagnosis not required unless necessary to support the leave);
  - Timeframe/duration** the employee is excused from work.  
(If caring for a family member, include the **family member's name, relationship, condition/care required, who is the primary caregiver**, and duration.)

#### b) Advanced Sick Leave

- Requests for **advance sick leave** (up to 13 days) must include a **physician's certification of incapacitation** and intent to return.

#### c) Recertification

- When an employee remains absent beyond the timeframe stated on a medical certificate or requests an extension of sick leave, an updated physician certification is required to administer leave, plan staffing, and verify continued eligibility for paid sick leave.

#### d) Off-Island Treatment/ Change of Treating Provider

- When an employee is referred, or travels off-island for evaluation and/or treatment, and the employee's care is assumed by a different treating provider, **updated medical documentation and/or new medical certification** from the new provider to support continued use of sick leave or medically-related leave is required.

#### e) Family and Medical Leave Act (FMLA) / Guam FMLA

- GFD may require a **medical certification** using DOL optional forms (WH-380E for self; WH-380F for family).
- Employers **may not require information beyond** the FMLA regulations (i.e., **no extra diagnoses or records** beyond the form's "medical facts," dates of incapacity, treatment schedule, and functional limits). ([DOL](#))
- Guam FMLA** provides up to **12 weeks** job-protected leave for qualifying reasons and **14 calendar days of bereavement** leave as specified in statute/poster. ([dol.guam.gov](#)) *Note: These days are not included with the two days of bereavement leave allotted by Guam law and PR&R.*

- f) **Fitness-for-Duty / Special Medical Exams**
    - i. GFD may require **fitness-for-duty** or **special medical/psychological examinations** when necessary to determine whether an employee can safely perform duties; these are **job-related and business-necessity** determinations under ADA and permitted by DOA PR&R. Costs are paid by the agency.
2. **Exactly What GFD May Ask Employees to Provide**
- a) **Routine Sick Leave (>3 days or as permitted by PR&R):**
    - i. Employee name;
    - ii. **Brief statement** of illness/injury/medical condition **or care required** (sufficient to show incapacity or need for treatment—diagnosis not required unless essential);
    - iii. Dates of treatment/visit (if applicable);
    - iv. Expected **duration** of incapacity/absence;
    - v. Provider’s name, type, signature, and contact info.
  - b) **Periodic Medical Updates**
    - i. GFD may periodically require updates, limited to information allowed by **DOA PR&R**, throughout the duration of the granted sick leave;
    - ii. Confirmation that the employee remains unable to work or requires treatment/care;
    - iii. Expected return-to-work date or next re-evaluation date.
  - c) **Caring for a Family Member (non-FMLA or Guam FMLA):**
    - i. Family member’s **name and relationship**;
    - ii. Brief statement of the **serious illness/injury** and **care required**;
    - iii. Confirmation the employee is the **primary caregiver**;
    - iv. **Duration** of needed care.
  - d) **Federal FMLA certification (use WH-380 forms):**
    - i. **Medical facts** sufficient to support the need for leave (which **may** include a diagnosis or description of symptoms),
    - ii. Dates of onset/expected duration;
    - iii. Treatment schedule;
    - iv. Statement of **inability to perform essential job functions** (for self), or **need to care for** (for family);
    - v. No additional info beyond FMLA forms may be required ([DOL](#));
    - vi. GFD may request **recertification** of a medical condition every six months in connection with the absence of the employee or timeframes prescribed in 29 C.F.R. 825.308.
  - e) **Fitness-for-Duty (return-to-work) or Safety-Sensitive Concerns:**
    - i. **Referral Procedures**
      1. Statement whether the employee **can/cannot** perform **essential functions** (use approved GFD Release to Return to Work Form with the DOA Position Description Questionnaire form);
      2. Any **work restrictions** and expected **duration**;
      3. Whether restrictions can be accommodated (no detailed diagnosis required).
      4. Where necessary and consistent with ADA/PR&R, GFD may require or authorize a **special exam** to verify fitness for duty.

- f) **ADA Accommodation Requests (medical verification):**
    - i. Confirmation of a **disability/medical impairment**;
      - 1. Management must not assume a disability or ask an employee if a disability exists. The employee **MUST** declare that he/she is disabled.
    - ii. **Functional limitations** relevant to essential job functions;
    - iii. **Accommodation(s)** needed and expected **duration**.
      - 1. Questions must be **job-related** and **consistent with business necessity**. ([EEOC](#))
    - iv. **Prohibited or Restricted**
      - 1. **Family medical history** (parents, children, etc.) or **genetic test results (prohibited by GINA)**—except limited FMLA caregiving certifications where family member’s condition is addressed. ([EEOC](#))
      - 2. **Unnecessary diagnoses** or **entire medical records** unrelated to the leave/fitness question. (For FMLA, don’t ask beyond WH-380 content.) ([DOL](#))
      - 3. Any disability-related inquiries/exams **not** tied to a legitimate, job-related business necessity (ADA). ([Legal Information Institute](#))
3. **Confidentiality & Recordkeeping**
- a) All medical information obtained (certifications, exam results, accommodation notes) must be **kept confidential** and **stored in a medical file separate** from the personnel file; access limited to those with a legitimate need-to-know (e.g., supervisors regarding restrictions; first aid/safety where necessary). ([EEOC](#))
  - b) **HIPAA**: The federal HIPAA Privacy Rule generally **does not apply to employer employment records**; however, **ADA** confidentiality rules do apply and must be followed. ([hhs.gov](#))
4. **Procedures (operational)**
- a) **Employee Notice & Request**
    - i. For illness: notify as soon as possible **on first day**; submit leave request on DOA form; attach medical certificate when required.
  - b) **Supervisor Review**
    - i. Verify whether certification is required (e.g., >3 days, pre/post-holiday, patterns of unscheduled absence) and that the certificate contains **only** the allowed elements above.
  - c) **Insufficient/Unclear Certifications**
    - i. If incomplete or unclear, HR may (a) seek clarification limited to the permitted topics, (b) request a new certification, or (c) for FMLA, use the DOL “cure” process; absences without required certification may be coded **LWOP** under PR&R.
  - d) **Second/Third Opinions (FMLA) and Special Exams**
    - i. For FMLA, second/third opinions may be used per regulations. For fitness-for-duty concerns, the appointing authority may request a **special exam** per PR&R; GFD pays the cost. ([DOL](#))
  - e) **Return-to-Work**
    - i. Require **fitness-for-duty** certification when appropriate (e.g., after significant illness or when restrictions exist). For maternity scenarios, PR&R expressly permits requiring **physician certification of fitness** to return.
  - f) **Storage & Access**
    - i. File all medical documents in **secured medical files**; disclose only to: supervisors (work restrictions/accommodations), safety/first aid personnel, investigators/auditors as authorized by law. ([EEOC](#))

5. **Examples: What to Ask (model prompts)**

a) **Routine >3-day sick leave:**

“Please provide a note from a licensed health care provider stating your name, a brief description of the condition or care requiring absence, and the dates you’re unable to work (or reduced/modified duty), including the expected return date.”

b) **Care of family member:**

“Please provide a provider’s note stating your family member’s name and relationship to you, a brief statement of the condition/care required, that you are the primary caregiver, and the expected duration of care.”

c) **FMLA:**

“Please complete and return the DOL **WH-380E** (self) or **WH-380F** (family) certification; we cannot require information beyond those forms.” ([DOL](#))

d) **Fitness-for-duty:**

“Please have your provider confirm whether you can perform the **essential functions** (Use approved GFD Medical Certification Return to Work Form and appropriate DOA Position Description Questionnaire) and identify any **work restrictions** and their expected duration. Diagnosis is not required.”

6. **Enforcement & Non-Retaliation**

- a) Requesting or using medical leave or accommodations **will not** result in adverse action. Any retaliation or improper collection/disclosure of medical information may violate federal and/or Guam law and is subject to discipline.

7. **References (key Sources)**

a) **DOA PR&R (GovGuam), Chapter 8 (Leave) & Chapter 9 (Medical Exams)**, including:

- i. **8.210 Physician’s Certification** (>3 days; pre/post holiday) and **advance sick leave** with physician certification; **firefighter sick-leave charge**.
- ii. **9.002–9.004; 9.100–9.101** (conditional offer, **periodic** and **special** medical exams; fitness-for-duty; costs paid by agency).

b) **DOA Org. Circular 2016-028** (what medical certifications must specify; applies immediately).

c) **Guam Code Annotated, Title 4, Ch. 4** (Sick Leave §4108; related leave statutes). ([guamcourts.gov](http://guamcourts.gov))

d) **Guam Family & Medical Leave Act** (22 GCA Ch. 3, Art. 6) & GDOL poster summary. ([dol.guam.gov](http://dol.guam.gov))

e) **FMLA (federal):** DOL Fact Sheet #28G; **WH-380E/WH-380F**; 29 C.F.R. §825.306.

**Recertifications** for Leave taken because of an employee’s own serious health condition or the serious health condition of a family member; 29 C.F.R. §825.308. ([DOL](#))

f) **ADA:** EEOC Enforcement Guidance (medical inquiries/exams); 29 C.F.R. §1630.14(c); EEOC “Your Responsibilities” (confidentiality). ([EEOC](#))

g) **GINA:** EEOC overview and Q&A (restrictions on genetic info/family history). ([EEOC](#))

h) **HIPAA clarification (HHS):** Employment records exception. ([hhs.gov](http://hhs.gov))