

Eyesight Requirements

As we get older our eyesight deteriorates. Firefighters require a certain level of eyesight to enable them to carry out their role. With this natural deterioration, it stands to reason that firefighters must meet a required standard of vision when applying to join the fire service as firefighters.

If you have any doubts regarding your eyesight we suggest that you book an appointment with your optician and take the information below to ask his/her opinion:

Colour Blindness

Candidates who believe they have colour blindness may wish to be formally assessed prior to submitting an application form. The minimum standard accepted is the Farnsworth D-15 standard test. We also conduct functional tests as part of the medical process if candidates display difficulties with colour perception. Candidates must also pass the Ishihara test.

The vision standards for eyesight are:

Visual Acuity

- Use of aids to vision should be possible at the recruit stage
- Corrected visual acuity should be 6/9 binocularly, and a minimum of 6/12 in the worse eye
- The minimum uncorrected vision for recruits should be 6/18 in the better eye and 6/24 in the worse eye for both full time and retained firefighters
- The current 6/60 unaided limit should be retained for serving firefighters
- An upper hypermetropic limit of +3.00
- Testing for myopic corrections is no longer required
- VA testing protocols must be better defined (e.g. for Snellen, distances, ambient lighting and use)
- Vision must be binocular
- Be able to read N12 at 30cm unaided with both eyes open (applicants aged 25 and over)
- Be able to read N6 at 30cm unaided with both eyes open (applicants under 25 years of age)

Visual Fields

- Normal binocular field of vision is required.

Eye Disease

- Have no history of night blindness or any ocular disease that is likely to progress and result in future failure of the visual standards for firefighters
- Individuals with keratoconus are unlikely to be fit for firefighting duties
- Compound astigmatism assess for capability, history of headaches and eyestrain

Refractive Surgery

- Successful Photorefractive Keratectomy (PRK), laser assisted in-situ keratomileusis (LASIK), Laser Epithelial Keratomileusis (LASEK) and EpiLASIK treatments should be allowable if satisfy post operative visual tests
- RK (radial Keratotomy) and astigmatic ketatotomy are NOT suitable due increased risk of rupture and fluctuation in vision
- Intraocular Refractive Surgery – Used for high myopes therefore still risk of complications
- Wavefront Guided Laser Refractive Surgery – since a Wavefront treatment aims to reduce aberrations, in theory it should produce better outcomes for night vision and vision in difficult low lighting levels or reduced contrast as might be encountered in a smoke-filled room; this technology could therefore have great relevance for firefighters – research is still underway to aid our understanding of this relatively new technology

Assessment after Refractive Surgery – an examination to consider the suitability of a refractive surgery patient for operational firefighting should include:

- A slit lamp examination to confirm that the eye has returned to normal and that there is no significant loss of corneal transparency over the pupil area
- Refraction, topographic examination and pachymetry to screen for keratectasia

Candidates should have their visual performance assessed using a technique sensitive to the presence of scattered light and aberrations.

Candidates should not be considered until at least 12 months post-surgery and when all medication has ceased.

Please note: The eyesight requirements to join the fire and rescue service have changed considerably from service to service over the past few years. You must check what the standard requirements are, of the service you are applying to join.