



**Testimony on HB 1279**  
**Presented to the House Political Subdivisions Committee**  
**Prepared by Daniel Fuller, West Fargo Fire Chief**  
**Thursday, January 26<sup>th</sup>, 2023**

1 Chairman Longmuir and members of the Political Subdivisions Committee, I am  
2 Daniel Fuller, Chief of the Department, City of West Fargo Fire & Rescue and my  
3 testimony is in support of House Bill 1279. As a full-time firefighter in the State of North  
4 Dakota for the past sixteen years, I have had the peace of mind of knowing that any  
5 catastrophic cerebral vascular accident, sudden heart attack, cardiac arrest, and  
6 cancer diagnosis would be presumed to be job related given the extremely hazardous  
7 environment I've worked in over the years. I was not aware of the five-year clause  
8 relating to these protections, and in 2021, we were all reminded of the harsh reality of  
9 working in public safety with the on-duty sudden cardiac arrest of Officer Brown in West  
10 Fargo. The aftermath and impact on his financial health as he was fighting for his  
11 physical health created a sense of urgency in getting the five-year period adjusted.

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13 The amendments proposed fully address my concerns on those employees who  
14 have less than five years of service. A catastrophic medical event can take place,  
15 regardless of age or time on service, while on duty or up to 48 hours after duty.  
16 Firefighting is routinely recognized as one of the most dangerous professions in the  
17 world. Cardiac events account for up to 45% of firefighter line of duty deaths annually  
18 in the United States. The risk is not solely with older firefighters, but rather all firefighters,  
19 regardless of physical fitness and age. The heavy work firefighters complete, coupled  
20 with the hot and hostile environments and adrenaline surge from the work puts  
21 tremendous strain on the cardiac system, vascular system, and even the blood profile  
22 of the firefighter. Not only are firefighters at risk of a heart attack cause by the  
23 traditional thrombus (occlusion of a major artery) but also from cardiac arrhythmia  
24 triggered by trauma and exposure to chemicals such as hydrogen cyanide during a

25 fire. Firefighters have a 100x greater risk of death after firefighting activities compared  
26 to station duties. As a profession, and on the local level, we try to modify our risk factors  
27 as much as possible. This includes increasing our physical fitness, prohibiting tobacco  
28 use among employees and addressing nutritional issues. Most impactful, we have a  
29 mandatory annual physical conducted in accordance with the provisions of the  
30 National Fire Protection Association 1582 Standard on Comprehensive Occupational  
31 Medical Programs for Fire Departments. Beyond the NFPA 1582 physicals, our  
32 department also has implemented a cardiac screening program that includes a stress  
33 test, CT, lipid and cardiac marker panel, as well as a vascular ultrasound. The cardiac  
34 screening is administered on a risk basis, with a minimum of every five years for all fire  
35 department employees.

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37 Our career police officers and firefighters need to be covered for sudden,  
38 catastrophic cardiac or vascular events that occur on duty and up to 48 hours after  
39 duty, from their first day on the job. Our circumstance is uniquely different than the  
40 civilian population, our prevention programs are unique different, and as such, we  
41 deserve a unique solution to this challenge to make sure no other career police officer  
42 or career firefighter has to fight twice as hard to recover from these duty related  
43 incidents.

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45 Mr. Chairman, I'll stand for any questions from the committee.

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48 References:

49 National Fallen Firefighters Foundation. Emmitsburg, MD

50 First Responder Center for Excellence for Reducing Occupational Illness, Injuries, and

51 Deaths, Inc. Crofton, MD