

Frequently Asked Questions About Our Program



What is the CORE Program?

The Cardiac One Risk Evaluation (CORE) Program is meant to aid in the management of the health of Colorado firefighters. As a part of Colorado State University's Heart Disease Prevention Program, we do both outreach and research. The CORE Program is designed as an affordable and mobile testing program intended for easy yet accurate cardiovascular risk screening. We are able to complete screening on location anywhere in Colorado and the program meets the requirements for the Colorado Firefighter Heart and Circulatory Benefits Trust.

What types of tests are performed with the CORE Program?

- Resting 12-lead electrocardiogram (ECG) - This ECG is printed and taken back to CSU with us for the cardiologist to read.
- 12 Hour Fasting lipids and glucose - These parameters are measured using blood from a finger prick with a Cholestech machine (portable blood analyzer). The lipids include cholesterol, HDL, LDL and triglycerides.
- Height and weight - These are measured as they would be at a physician's office with a stadiometer and electronic scale. Height and weight are used to calculate body mass index (BMI).
- Waist circumference - We measure five circumferences around the midsection of the body using a spring-loaded measuring tape to ensure adequate and similar tension on the tape during the measurement. This provides information on abdominal obesity.
- Resting blood pressure - This measurement is taken with a properly sized cuff after several minutes of rest.
- Review of other risk factors including family and personal health history and smoking habits - Family history is a risk for heart disease and is particularly important in assessing risk for early (before age 35) heart conditions. Smoking is a major risk factor for heart disease. The other factors that we review include physical activity habits and signs/symptoms of heart problems.

Who will be able to view the results from these tests and will there be any report summary sent to the department?

Each individual firefighter receives his/her own results with additional information and feedback based on identified areas of risk. The department does NOT receive any individual firefighter results. We also provide a general summary of the data collected from the whole department. It does not provide any individual results or does not indicate who has an abnormal level. The report includes a review of

the physiological parameters to help inform the next steps for your department such as wellness programming.

What suggestions for follow-ups are made to the participants that complete testing with CORE?

As stated previously, each firefighter will get his/her personalized results, but if a firefighter needs follow-up, s/he is referred back to his/her personal primary care physician. Thus, it is the responsibility of the firefighter to do any recommended follow-up. The exception to this is if there is a condition that impacts the safety of the firefighter. For example, if we found that a firefighter has undiagnosed heart issue like atrial fibrillation, we would need to contact someone at your department to remove him/her from on-duty status until the firefighter could be seen by a physician and approved to return by a physician who understands the Job Performance Requirements of a firefighter.

How is the Fire Department reimbursed from the Heart Trust?

The Heart Trust does not receive anything directly from the CORE program. The fire department receives one form (in the link below) for each person evaluated that will indicate which tests were done (CORE includes all of these tests) and is signed by the cardiologist that reviews the 12 lead ECG. The department will submit these forms to the Heart Trust for reimbursement.

<http://www.cfhtrust.com/wp-content/uploads/2016/02/Firefighter-Heart-Fitness-Grant-Doctor-Confirmation-Fillable.pdf>

What happens to the data once it is collected and results are sent out?

Each firefighter signs a consent form to allow or not allow the use of the collected data for research which protects the data. Our data is stored on paper and, unlike a medical records system that any healthy system employee can access, our system is only accessible to the Heart Disease Prevention Program staff approved to work in the program. Each firefighter is assigned a number that is not associated with any identifying information. With individual approval of consent for use, the data is added to the research database. The research database and procedures have been approved through our institutional review board, which has a mandatory annual review of the process. In the end, the collected data belongs to the firefighter. ***We cannot use the data in any way that is not approved by the firefighter. We cannot send the information to anyone without written consent from the firefighter.***

You collect information on firefighter's family history, does this violate the Genetic Information Nondiscrimination Act (GINA) of 2008?

The Genetic Information Nondiscrimination Act is meant to eliminate any discrimination of access to health insurance and employment status based solely on genetic information. For the CORE testing program, providing any information of family history is optional because of GINA as identified in the Heart Trust form in the link shared above. The Fire Department will not see any individual data collected from any firefighter. Therefore the Heart Trust form simply indicates that we reviewed pieces of information such as family history and smoking status in relation to the individuals risk for cardiovascular disease. No family history or genetic information will be shared with the department. If a firefighter does not feel comfortable with answering questions related to family history, s/he can simply choose to opt out of these questions. When an individual does not complete the family history portion of testing, family history is counted as a risk factor. This occurs in other situations such as with individuals who are adopted and may not know their family history.

For more information or to schedule a visit, please contact Cory Fellhauer at cory.fellhauer@colostate.edu or 970-491-5144.