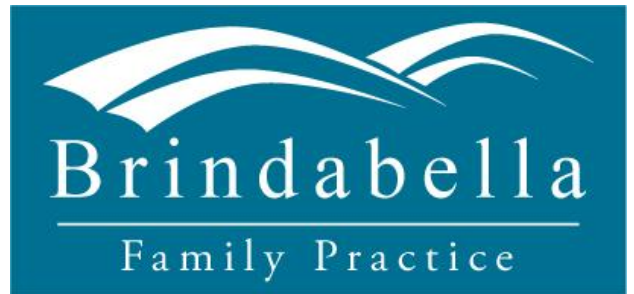


MEDICAL FORM FOR PROSPECTIVE RECREATIONAL SCUBA DIVERS



2/80 Morisset St Queanbeyan 2620 Ph 6299 6990 www.brindabellapractice.com.au

CANDIDATE DETAILS: THIS SECTION of first four pages TO BE COMPLETED BY CANDIDATE

**Please make an appointment for 30 min with our nurse and then 15 min with our doctor.
The Nurse will do an eye test, a lung function test and a audiogram (hearing test).**

All information in this form will be kept in strict confidence between you and the examiner. It will not be relayed to a third party without your consent. Diving can usually be undertaken even if you have a chronic infection (e.g. hepatitis B and C, herpes or HIV), however you should inform the medical examiner so that you can be advised how to dive safely.*

It is advisable to inform your instructor of any advice you have been given.

Positive responses to questions do not necessarily disqualify you from diving.

1 Surname Other Names Date of birth

3 Address Telephone (Home)

4 Sex: Male Female

5 Principal Occupation Telephone (Work)

6 Do you participate in any regular physical activity? Yes No

7 Description of activity:

8 Do you smoke? Yes No

9 Do you drink alcohol? Yes No

10 If yes, how many drinks per week?

11 Are you taking any tablets or medicines or drugs? Yes No

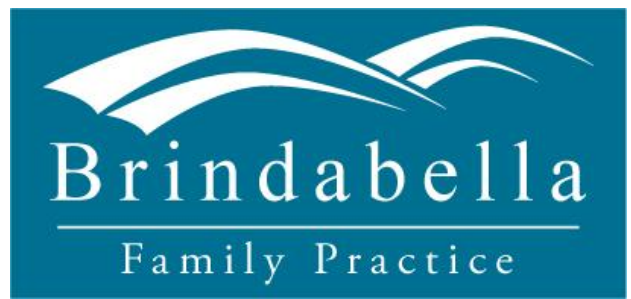
List:

12 Do you have any allergies? Yes No

Details:

13 Have you ever had any reactions to medicines or foods? Yes No

Details:



Your name _____

HAVE YOU EVER HAD OR DO YOU NOW HAVE
ANY OF THE FOLLOWING?

	NO	YES	DETAIL
14 Previous diving medical _____			
15 Prescription glasses _____			
16 Contact Lenses _____			
17 Eye or Visual Problems _____			
18 Hay fever _____			
19 Sinusitis _____			
20 Other nose or throat problem _____			
21 Dentures / Plates etc. _____			
22 Recent dental procedures _____			
23 Deafness or ringing tones in ear(s) _____			
24 Discharging ears or other infections _____			
25 Operation on ears _____			
26 Giddiness or loss of balance _____			
27 Severe motion sickness _____			
28 Seasickness medication _____			
29 Problems when flying in aircraft _____			
30 Severe or frequent headaches _____			
31 Migraine _____			
32 Fainting or blackouts _____			
33 Convulsions, fits or epilepsy _____			
34 Unconsciousness _____			
35 Concussion or head injury _____			
36 Sleep walking _____			
37 Severe depression _____			
38 Claustrophobia _____			
39 Mental illness _____			
40 Heart Disease _____			
41 Abnormal blood test _____			
42 ECG (Heart tracing) _____			
43 Awareness of your heart beat _____			
44 High blood pressure _____			
45 Rheumatic fever _____			
46 Discomfort in your chest with exertion			
47 Short of breath on exertion _____			
48 Bronchitis or pneumonia _____			
49 Pleurisy or severe chest pain _____			
50 Coughing up phlegm or blood _____			
51 Chronic or persistent cough _____			
52 TB (Tuberculosis) _____			
53 Pneumothorax ("Collapsed lung") _____			
54 Frequent chest colds _____			
55 Asthma or wheezing _____			
56 Use a puffer _____			

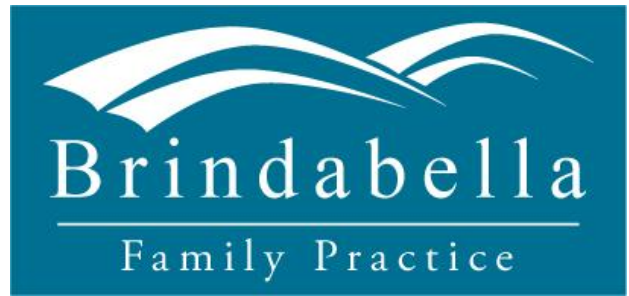
57 Other chest complaint _____			
58 Operation on chest, heart or lungs __			
59 Indigestion, peptic ulcer or acid reflux _____			
60 Vomiting blood or red or black motions			
61 Recurrent vomiting or diarrhoea _____			
62 Jaundice, hepatitis, or liver disease _____			
63 Malaria or other tropical disease _____			
64 Severe loss of weight _____			
65 Hernia or rupture _____			
66 Major joint or back injury _____			
67 Limitation of movement _____			
68 Fractures (broken bones) _____			
69 Paralysis or muscle weakness _____			
70 Kidney or bladder disease _____			
71 Any chronic disease (see note below) _____			
72 Syphilis _____			
73 Diabetes _____			
74 Blood disease or bleeding problem _____			
75 Skin disease _____			
76 Contagious disease _____			
77 Operations _____			
78 In hospital for any reason _____			
79 Life insurance rejected _____			
80 A job or license refused on medical grounds			
81 Unable to work for medical reasons _____			
82 An invalid pension _____			
83 Other illness or injury or any medical conditions			
HAVE ANY BLOOD RELATIONS HAD:			
84 Heart disease _____			
85 Asthma or chest disease _____			
FEMALES ONLY			
86 Are you now pregnant or are you planning to be? _____			
87 Do you have any incapacity during periods?			
88 Date of most recent chest X-Ray:			

If you answered yes to several questions
you may need a second appointment.

Your name _____

Please continue to next page





Your name _____

PREVIOUS DIVING EXPERIENCE YES NO

89 Can you swim? ____ ____

90 Have you ever had any problem during or after swimming or diving?

91 Have you ever had to be rescued?

92 Do you snorkel-dive regularly?

93 Have you tried SCUBA diving before?

94 Have you had any previous formal SCUBA training?

Approximate number of dives:

Maximum depth of any dive:

Longest duration of any dive:

Year trained:

I certify that the above information is true and complete to the best of my knowledge and I hereby authorise

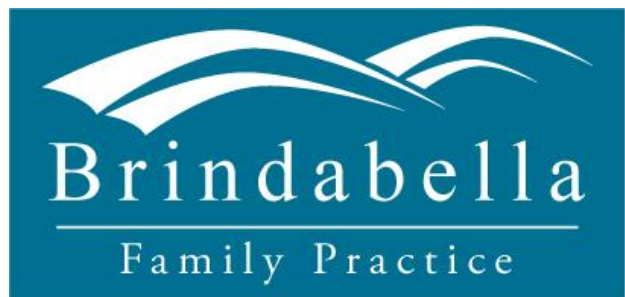
Dr _____ to give medical opinion as to my fitness, or temporary or permanent unfitness to dive

to my diving instructor. I also authorise him or her to obtain or supply medical information regarding me to other

doctors as may be necessary for medical purposes in my personal interest.

Signed: _____ Date: _____

Thank you. Please hand this completed form to the receptionist when you arrive. _



MEDICAL EXAMINATION: TO BE COMPLETED BY NURSE at a 30 min appointment and then by Doctor at a 15 min appointment

1 Height cm

2 Weight kg

3 Vision

R6/.....Corr6/

L6 Corr6/

4 Blood Pressure 5 Pulse

6 Urinalysis Albumen Glucose

7 Respiratory function test

Vital capacity

FEV

Percentage

8 Chest X-ray

(if indicated)

Date:

Place:

Result:

9 Audiometry (air conduction) hearing test

Frequency Hz 500 1000 2000 4000 6000 8000

Loss in dB, (R)

Loss in dB, (L)

If abnormal, enter in diver's logbook, on certificate, or both

Now you have finished with the Nurse please see the doctor

Name -----

Clinical examination **BY DOCTOR**

- 10 Nose, septum, airway
- 11 Mouth, throat, teeth, bite
- 12 External auditory canal
- 13 Tympanic membrane
- 14 Middle ear auto-inflation
- 15 Neurological
 - Eye movements
 - Pupillary reflexes
 - Limb reflexes
 - Finger-nose
 - Sharpened Romberg*
- 16 Abdomen
- 17 Chest hyperventilation
- 18 Cardiac auscultation
- 19 Other abnormalities

Results should be descriptively detailed at right to assist future comparison.

Fit to Dive

Yes Advice put on certificate:

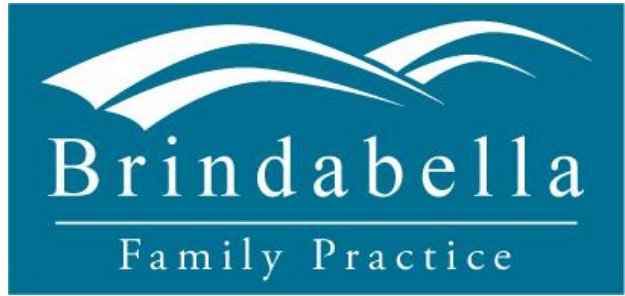
No-Temporary Reasons:

No-Permanent Reasons:

Name: (print): _____

Signed : _____ Date: ____/____/____

Detach the certificate below and hand to candidate. Medical benefits refund and/or medical rebate is not permissible, by law, for this examination. Issuing an itemized account, which enables the patient to claim Medicare benefits for diving medical examinations, has been prohibited since 1st February 1984



This is to certify that I have examined on the ____/____/____

Name _____

Address _____

In accordance with the requirement of AS 4005.1 Appendix A, and have found him/her to be:

FIT

PERMANENTLY UNFIT

TEMPORARILY UNFIT

For diving and diving training undertaken using compressed air underwater.

Audiogram Normal / Abnormal

Printed Name: _____ Signed:

Address

Advice:

ADVICE TO THE EXAMINING PHYSICIAN

Issuing an itemized account, which enables the patient to claim Medicare benefits for diving medical examinations, has been prohibited since 1st February 1984.

Diving is a sport carried out in a non-respirable environment using breathing apparatus. Sudden unconsciousness underwater is usually fatal when using SCUBA equipment, as the relaxation of muscle tone accompanying unconsciousness results in the breathing regulator falling from the victim's mouth. The diver's next breath will then be water. This makes any condition which can cause sudden unconsciousness an absolute bar to diving. Such conditions include epilepsy and diabetes where the patient requires insulin.

A further problem with the water environment is that pressure increases very rapidly with descent, i.e. by one atmosphere of extra pressure for every 10 m of depth in the sea. The use of breathing apparatus, providing gas at ambient pressure, prevents problems of pressure-volume imbalance in the lungs during descent.

However, the middle ears and sinuses will develop problems on descent unless the pressure in these spaces equals the ambient pressure.

There is no way of establishing the patency of sinus ostia by clinical examination. However, patency of the Eustachian tubes, and so the ability to equalise the middle ear pressures, can be established easily. Observation of the tympanic membrane while the patient holds his or her nose, shuts the mouth and blows, (Valsalva maneuver) will reveal ingress of air to the middle ear by movement of the drum. The Eustachian tube opening in the nasopharynx is normally closed.

Swallowing opens the ostium. Therefore a combination of Valsalva and swallowing during the maneuver will give the best chance for air to travel up the Eustachian tube. Another way of opening the Eustachian tube is to protrude the jaw and wriggle it from side to side while performing the Valsalva maneuver. Failure to auto-inflate a middle ear is an absolute bar to diving until the person can auto-inflate.

A further set of pressure related problems also occur during ascent when the ambient pressure is decreasing. If an air-filled space cannot vent when the surrounding pressure is reduced, two things can happen. A space with elastic sides will expand but if the space has rigid walls, the pressure in the space remaining at the original pressure becomes higher than ambient pressure. The chest wall is elastic, but after a certain expansion the stretching of the lungs results in tearing of the lung substance. Air can then enter the pulmonary venous drainage, pass through the left portion of the heart and be carried to the brain as air embolism. Unconsciousness and death can result. Thus, any condition preventing normal emptying of the lungs is an absolute bar to diving.

Asthma, lung cysts, bullae, and other areas that empty slowly or not at all are an absolute bar to breathing air under pressure. These conditions are best detected by taking an X-ray of the chest in full inspiration and another in full expiration. Asthma is another such condition. To detect expiratory airway obstruction, a Vitalograph (or similar) test is required. Experience in the navies of the world, with submarine escape training of many thousands, has that a disproportionate number of those suffering burst lungs have FEV1/FVC ratios of below 75%. Such people do not need to hold their breath on ascent to damage their lungs; all they have to do is rise too rapidly. A FEV1/FVC ratio below 75% may be an exclusion from diving and should be further investigated.

A normal FEV1/FVC ratio but clinical signs of bronchospasm, especially on forced, deep, rapid ventilation is an indication of unfitness to dive. Treatment with drugs is not suitable as the effects can wear off underwater and the combined effects of pressure and bronchodilator drugs are uncertain. It is hoped that the foregoing makes the following list of absolute and relative contraindications to diving logical and comprehensible:

ABSOLUTE CONTRAINDICATIONS RELATIVE CONTRAINDICATIONS

Conditions causing unconsciousness FEV1/FVC ratio less than 75%

Epilepsy Poor physical condition

Diabetes where the patient requires insulin Previous myocardial infarction

ENT conditions Pregnancy

Inability to auto-inflate the middle ears. Previous middle ear surgery with insertion of prosthesis to replace any of the ossicles found in AS 4005.1, available from Standards Australia. Further information about medical standards for minimum entry-level SCUBA divers is to be found in AS 4005.1, available from Standards Australia.

Lung conditions

Asthma

Lung cysts

Previous spontaneous pneumothorax

Obstructive lung disease

Lungs which empty unevenly (X-ray appearance)

Previous thoracotomy

If in doubt about a candidate's fitness, it is safer for the candidate to be classed as unfit than fit to dive. Difficult decisions should be referred to a doctor experienced in diving medicine. These are to be found in each State. The South Pacific Underwater Medical Society maintains a list of its members with training in diving medicine. Enquiries should be addressed to the Secretary of SPUMS, C/- Australian College of Occupational Medicine, PO Box 2090, St Kilda West, Victoria, 3182, Australia. URGENT specialist advice can be obtained from the hyperbaric units in each State, the RAN School of Underwater Medicine, HMAS Penguin, Balmoral, N.S.W. 2091, Phone: (02) 9960 0444, and the Diving Emergency Service, C/- Hyperbaric Medical Unit, Royal Adelaide Hospital, Phone: (1800) 088 200.