

**CFT
Administrative
Document**



Page: 1 of 4
 Revision No.: 1
 Date Reviewed: 25/10/05
 Issued By: T Mc D
 Approved By: Executive 27-5-2006

Document Reference: CFT 409

Medical Examination Form

Candidates

- You require either a medical examination or a disclaimer that your condition has not changed every year
- Before commencing training you need a chest x ray as part of your medical
- If under 35 years medical examination is every five years - declaration every year
- If over 35 years a medical examination is required every three years - declaration every year
- A medical is required every year if there is a change in medical status or on long term medication.
- An ECG is required at age 50 and every five years thereafter
- An x ray is necessary as part of medical if clinically indicated
- Annually sign the disclaimer in your log book and have it witnessed by your DO
- Have the doctor sign the medical form and stamp it with the practice stamp
- Copy the medical form and send the front page of the original to CFT head office
- Keep a copy in case you need it to dive abroad

Surname	First Name	CFT number
Address		Date of Birth
Club	Diving qualification	Height
Phone	Occupation	Weight
Diving officer	Address	Phone

Form to be completed by Applicant

I believe that I am fit to dive and I declare that I am not aware of any medical reason for not diving. I declare that to the best of my knowledge and belief the above statements are true and complete. I hereby authorise the Medical officer of the Irish underwater council or his deputy to seek information from any source that would be useful in evaluating my fitness to dive. My club diving officer may be informed if I am unfit to dive.

Signature of candidate Dated

I have read the guidelines for medical fitness to scuba dive and I find the applicant **FIT** **UNFIT**

Signature of doctor date Practice stamp

**CFT
Administrative
Document**



Page: 2 of 4
Revision No.: 1
Date Reviewed: 25/10/05
Issued By: T Mc D
Approved By: Executive 27-5-2006

Document Reference: CFT 409

Medical Examination Form

DECLARATION BY CANDIDATE	yes	no
Ear disease or deafness attacks of sinusitis, hay fever or nasal problems		
Epilepsy unexplained los of consciousness blackouts Migraine		
Convulsions or head injury		
Chest disease, TB, asthma, collapsed lung, wheezing		
Heart and circulation disease i.e. chest pain high blood pressure palpitations.		
A family history of heart disease or stroke		
Has your mental or physical health changed in the last year		
Have you ever been refused insurance or failed a dive medical		
Are you pregnant or planning pregnancy		
Do you smoke? How many per day		
Do you drink alcohol? How many units per week		
Do you take any other intoxicants or narcotics		
Diabetes		
Have you ever had a serious illness		
Are you taking any medication or any kind of illness		
Have you had depression, anxiety or any nervous order?		
Have you had a diving accident or injury, decompression sickness or pulmonary barotrauma		
Do you have dentures		

Give details of any of the above if answer is yes

EXAMINATION BY DOCTOR

Are the following normal?

ENT	Auditory canal		CNS	Is sight normal	
	Tympani membrane			Fundi	
	Eustachian tube patent			Cranial nerves	
	Nasal septum			Sensation and coordination	
	Sinuses			Reflexes	
RS	Absent wheeze/bronchospasm		MS	Back	
	Normal expansion			Joints and limbs	
	Peak flow L/min			Mental state	
	Chest x ray			Skin	
CVS	BP		GU	Sugar in urine	
	Heart sounds			Protein in urine	
	Pulse at rest rpm			Blood in urine	
	Pulse immediately after exercise (25 Squats) rpm		GIT	Mouth & Throat	
	Pulse 2 minutes later rpm			Hernial orifices	
	Peripheral circulation			Abdomen	
	ECG at 50 years and every 5 years				

CFT
Administrative
Document



Page: 3 of 4

Revision No.: 1

Date Reviewed: 25/10/05

Issued By: T Mc D

Approved By: Executive 27-5-2006

Document Reference: CFT 409

Medical Examination Form

Comments

GUIDELINES FOR EXAMINING DOCTOR ON MEDICAL FITNESS TO SCUBA DIVE

Sport SCUBA diving in Ireland is a very safe sport. This is because of the comprehensive training, the care taken by the divers and not least by the exclusion of people who have medical conditions which would render them unsafe to dive. The guidelines are designed to alert physicians to the medical problems that may develop when diving and help them identify the persons at increased risk so that they can be discouraged from taking up the sport. The guidelines cannot be exhaustive, examining doctors are asked to use their clinical judgement and experience in making decisions on the fitness of individual applicants. Please carry out any investigations or tests you think necessary or get consultant opinion, where required. If you have any questions please contact the medical officer of CFT. Dr Tom McDonnell, 13 Upper Mallow Street, Limerick. 061 452995 mobile 086 2549160, E Mail tomern@eircom.net

Pulmonary system

Divers breathe air under pressure; this may result in lung over pressure accidents. Such accidents may release high pressure gas into the pulmonary vein and heart chambers resulting in cerebral artery embolus. Persons with lung conditions that increase the risk of air trapping must be excluded from diving. Such conditions include Cysts, blebs, bullae, COAD and asthma. However any form of lung condition compromising exercise capability increases the risk of drowning and limits one's ability to save others. Exercise induced asthma is very common and probably occurs in every asthmatic with sufficient provocation. The significant factors are the intensity of exercise and mouth breathing of dry cold air. Pneumothorax, if it occurs when diving, becomes a tension pneumothorax. Pneumothorax, either primary or secondary is an absolute contra-indication for diving.

Cont'd

Otolaryngology -Pressure equalisation must take place in the sinuses and middle ear air spaces, failure to do so causes barotraumas, leading to pain and if unrelieved, rupture of the occluded space. Old injury or surgery increases the risk of pressure injury. Divers must have a normal bite so that they can hold the scuba mouth piece. The outer, middle and inner ear must be disease free. Ability to auto inflate the ears should be demonstrated by the diver.

Gastrointestinal system -Gas trapping can take place in the bowel and lead to sudden rupture. In the gastric area it can cause vomiting which would lead to drowning underwater. Abdominal wall hernias should be corrected before diving. Gastric outlet obstruction, small bowel obstruction, Fistula, Diverticula, paraoesophageal or hiatal hernia can all cause gas trapping. No diving is allowed when on treatment for active ulcers. Chronic bowel disease i.e. inflammatory bowel, malabsorption impairs a diver's fitness.

Pregnancy - Diving is absolutely contra indicated during any stage of pregnancy. When PMT is present diving is contra indicated.

Endocrinology and metabolic disorders. In all insulin dependent diabetics there is a danger of hypoglycaemia and loss of consciousness. Altered consciousness may occur in N.I.D.D.M. This can result in drowning. In controlled NIDDM with no history of hypoglycaemia or other complications, diving may be permitted. Decompression sickness is more common in obese people. If more than 28% above desirable weight this will disqualify for diving. Consultant opinion should be sought in individual cases.

Haematology -Haemophilia, sickle cell disease, polycythaemia are all contra indications.

Cardiovascular – Disqualification from diving is recommended for any condition which leads to decreased exercise tolerance, cardiac ischaemia, or the risk of sudden collapse. The main categories are outlined as follows: **Coronary artery disease** - clinical evidence of coronary artery disease, a history of angina, myocardial infarction, or coronary artery bypass grafting warrants immediate disqualification. **Arrhythmias** – dysrhythmias, conduction defects such as second degree or complete heart block, will all disqualify. **Pacemakers** – refer to CFT medical officer or cardiologist. Valvular heart disease – aortic or mitral stenosis or significant regurgitation should lead to permanent exclusion, as should the presence of prosthetic valves and the use of anticoagulant medicine. **Congenital heart disease** – unrepaired septal defects are absolute contra indications to diving, as the left to right shunt may at times be bi-directional, increasing the risk of decompression illness. Coarctation of the aorta also warrants disqualification. **Hypertension** – those with evidence of hypertensive end organ damage should be excluded from diving. Blood pressure should be within the normal range. **Drugs** - any medication that impairs the cardiac response to exercise or stress is absolutely contraindicated to divers. **Other** – congestive heart failure and cardiomyopathy will disqualify as may intolerance to cold.

Nervous system – abnormalities where the level of consciousness is subject to impairment put the diver at risk of an in-water incident. Divers with spinal cord or brain abnormalities where perfusion is impaired are at increased risk of spinal

CFT Administrative Document		Page: 4 of 4
		Revision No.: 1
Document Reference: CFT 409		Date Reviewed: 25/10/05
		Issued By: T Mc D
		Approved By: Executive 27-5-2006
Medical Examination Form		

cord or cerebral decompression sickness. Neurological conditions that affect a diver's ability to perform exercise should be considered and assessed individually. A diver's mental capacity and emotional make-up are important to safe diving. Inappropriate motivation to dive should be taken into consideration. **Absolute contra-indications** are – history of convulsions, any cause, except childhood febrile convulsions; Recent serious head injury: spinal cord injury; history of TAA or CVA; history of CNS decompression sickness: severe visual impairment; recent eye surgery; severe migraine or migraine during or after a dive; active psychosis or neurosis, drug or alcohol abuse; psychotropic medication. Relative contra-indications are Neurological diseases (MS, Poliomyelitis, migraine, Gullian-Barre syndrome, head injury, peripheral neuropathy, trigeminal neuralgia).

Orthopaedic – a diver may carry up to 50 kg of equipment onto a small boat. Chronic back disease, back surgery, amputation or other musculoskeletal disorders may make this impossible.