Physician Approval Form

Applicant Information – please print clearly.

Full Name	Birth Date	
Address		
Post & State	Country	
Phone	E-mail	
Family physician contact information		
Name	Clinic / Hospital	
Phone	E-mail / Fax	

Physician Information – please print clearly.

The person identified above hereinafter Applicant is applying for training or is presently certified to engage in scuba diving activities thru Disabled Divers International. Your opinion is requested of the applicant's medical fitness for scuba diving. General standard contraindications to scuba diving is attached for reference.

Please consider if any of the applicant's medical conditions may make scuba diving activities incompatible or a threat to the applicant or others, also consider if any limitations or conditions to the activities may change such incompatibility or threat to normal levels allowing scuba diving activities.

Limitations, Conditions and Comments

Please print clearly any limitations, conditions and comments to the applicant's medical approval for Scuba Diving activities. Any limitation enforceable may be used, including but not limited to the following examples: max depth 6m, max dive time 20 min, must dive with 3, min water temp 25°C, no salt water, pool only, mark certification card with "Diabetic"/"Epileptic"/"Allergic", approval expires on date, "separate signed page 1 of 1", must use full face mask, etc.

- APPROVAL I find no medical conditions in the applicant that I consider incompatible with scuba diving.
- LIMITED APPROVAL If compliant to above described limitations and conditions, I find no medical conditions in the applicant that I consider incompatible with scuba diving activities using DDI training and standards.

DISAPPROVAL - I am unable to recommend this applicant for scuba diving.

Name	,MD	Clinic / Hospital
Address		
Phone		E-mail / Fax
Signature & Date		
Physician's Signature or Legal Representative of Med	dical Practitioner	

Need advice or information? Contact the DDI Medical Board at medical@ddivers.org or +45 773 4 02 34

Reference Medical Contraindications for Diving

list of relative and absolute contraindications is not all inclusive. Contraindications that are absolute

permanently place the diver and his diving partners at increased risk for injury or death. Relative contraindications to scuba may be resolved with time and proper medical intervention or may be intermittent.

A bibliography is included to aid in clarifying issues that arise. The Divers Alert Network (DAN) physicians are available for consultation by phone (919) 684-2948 during normal business hours. For diving related emergencies call, DAN at (919) 684-8111 24 hours, 7 days a week.

OTOLARYNGOLOGICAL	CARDIOVASCULAR	METABOLIC AND ENDOCRINOLOGICAL
Relative Contraindications:	Relative Contraindications:	Relative Contraindications:
History of	The suggested minimum criteria for stress testing	Hormonal excess or deficiency
 significant cold injury to pinna 	are 13 METS.	Obesity
– TM perforation	History of	Renal insufficiency
– Tympanoplasty	- CABG or PCTA for CAD	Absolute Contraindications:
 Mastoidectomy 	 myocardial infarction 	 Diabetics on Insulin therapy or oral anti-
 mid-face fracture 	 dysrhythmia requiring medication for 	hypoglycemia medication
 head and/or neck herapeutic radiation 	suppression	
 temporomandibular joint dysfunction 	Hypertension	PREGNANCY
 Recurrent otitis externa 	 Valvular regurgitation 	Absolute Contraindications:
 Significant obstruction of the external auditory 	 Asymptomatic mitral valve prolapsed 	Venous gas emboli formed during decompression
canal	Pacemakers	may result in fetal malformations. Diving is
 Eustachian tube dysfunction 	Note: Pacemakers must be depth certified by	absolutely contraindicated during any state of
 Recurrent otitis media or sinusitis 	the manufacturer to at least 130 feet (40	pregnancy.
 Significant conductive or sensorineural hearing 	meters) of sea water.	
impairment	Absolute Contraindications:	HEMATOLOGICAL
 Facial nerve paralysis not associated with 	• Asymmetric sepal hypertrophy and valvular	Relative Contraindications:
barotraumas	stenosis	Sickle cell trait
 Full prosthodontic devices 	Congestive heart failure	
 Unhealed oral surgery sites 		Acute anemia Acute Control disations:
Absolute Contraindications:	PULMONARY	Absolute Contraindications:
		Sickle cell disease
History of Standectomy	Asthma (reactive airway disease), COPD cystic or	Polycythemia
- Stapedectomy	cavitating lung diseases all may lead to air	Leukemia
 ossicular chain surgery inport our surgery 	trapping.	
 inner ear surgery 	Relative Contraindications:	ORTHOPEDIC
 round window rupture 	History of	Relative Contraindications:
 vestibular decompression sickness 	 prior asthma or reactive airway disease 	Chronic Back Pain
Monomeric TM	(RAD)*	Amputation
Open TM perforation	 exercise/cold induced bronchospasm (EIB) 	Scoliosis - assess impact on pulmonary function
Tube myringotomy	 solid, cystic or cavitating lesion 	Aseptic osteonecrosis
 Facial nerve paralysis secondary to 	 Pneumothorax secondary to: thoracic surgery *, 	
Barotraumas	trauma or pleural penetration*, previous over	BEHAVIORAL HEALTH
 Inner ear disease other than presbycusis 	inflation injury*	Relative Contraindications:
 Uncorrected upper airway obstruction 	 Restrictive Disease** 	History of
 Laryngectomy or status post partial 	(*Air Trapping must be excluded)	
laryngectomy	(**Exercise Testing necessary)	 drug or alcohol abuse
Tracheostomy	Absolute Contraindications:	 previous psychotic episodes Developmental delay
Uncorrected laryngocele	 History of spontaneous pneumothorax 	Developmental delay
, , ,	 Active RAD (asthma), EIB, COPD or history of 	Absolute Contraindications:
NEUROLOGICAL	the same with abnormal PFS or positive	History of panic disorder
Relative Contraindications:	challenge	Inappropriate motivation for scuba training
History of	Restrictive diseases with exercise impairment	 Claustrophobia and agoraphobia
 history of head injury with sequelae other than seizure 		Active psychosis or while receiving psychotropic
 – nead injury with sequelae other than secure – spinal cord or brain injury without residual 	GASTROINTESTINAL	medications
	Relative Contraindications:	 Drug or alcohol abuse
neurologic deficit – cerebral gas embolism without residual,	Peptic ulcer disease	BIBLIOGRAPHY
5	 Inflammatory bowel disease 	The Physiology and Medicine of Diving, 4 th
pulmonary air trapping has been excluded	Malabsorption states	edition, 1993;
 Migraine headaches whose symptoms or 	•	Diving and Subaquatic Medicine, 3 rd edition
severity impair motor or cognitive function	Functional bowel disorders	1994; Diving Physiology
Herniated nucleus pulposus	Post gastrectomy dumping syndrome	
Peripheral neuropathy	Paraesophageal or hiatal hernia	
 Trigeminal neuralgia 	Absolute Contraindications:	
 Cerebral palsy in the absence of seizure activity 	 High grade gastric outlet obstruction 	
Absolute Contraindications:	Chronic or recurrent small bowel obstruction	
History of	 Entrocutaneous fistulae that do not drain freely 	
- seizures other than childhood febrile seizures	Esophageal diverticula	
– TIA or CVA	 Severe gastroesophageal reflux 	
 spinal cord injury, disease or surgery with 	• Achalasia	
residual sequelae	 Unrepaired hernias of the abdominal wall 	
 Type II (serious and/or central nervous 	-	
system) decompression sickness with	, , , , , , , , , , , , , , , , , , , ,	
permanent neurologic deficit		1
 seizures other than childhood febrile seizures TIA or CVA spinal cord injury, disease or surgery with residual sequelae Type II (serious and/or central nervous 	Esophageal diverticulaSevere gastroesophageal refluxAchalasia	