These i	notes are included for the guidance of divers co		ar with requirements for diving.
GENERAL	If in doubt, please discuss with your nearest Medical Referee. Should your health change, you must notify your diving organisation and see a Medical Referee. If your instructor is unhappy about any aspect of your health, you may be referred to a Medical Referee. If planning to dive abroad, some countries require a full medical examination. Check in good time before you travel. Diving is not advised during pregnancy or when trying to conceive. Smoking reduces fitness and increases the risk of air embolism, pneumothorax, and coronary thrombosis.		
SYSTEM	DISQUALIFYING FACTORS	ALLOWABLE FACTORS	OTHER POINTS
ENT	Perforated eardrum in new entrants, chronic vestibular disease in new entrants.	Perforated eardrum known to have been present during several years of diving. Healed perforation, including "paper thin" scars. Unilateral nasal block. Sinusitis if not adversely affected by diving	Ear clearing is best checked by a practical test in the pool. Perforated eardrums can be surgically repaired and enable the individual to dive.
Oral Cavity	Dentures must be retained in place on fully opening the mouth and not be dislodged by placing jaws together in any position, or by movement of one denture against the other. They should extend to the muco-buccal fold. If dentures do not satisfy these requirements, they should not be worn whilst diving. Cleft palate not acceptable without Referee's opinion.		Bad teeth and fillings should not normally disqualify from diving but dental attention is recommended as neglect leads to dental caries, toothache and loss of teeth.
Respiratory System	Suspicion of active tuberculosis. Tuberculosis scars other than healed primary focus in new entrants. History of spontaneous pneumothorax, lung cysts or bullae normally disqualifies. Possible surgical treatment should be discussed with a Medical Referee. Spontaneous pneumothorax that occurred more than four years ago may be allowable provided a full set of lung function tests are performed and are normal. A Medical Referee must be consulted.	Traumatic pneumothorax not necessarily a disqualifying factor. Asthma, surgical removal of lung tissue, chronic bronchitis or any other serious chest condition must be seen by a Medical Referee.	A chest X-ray is not required on entry or at repeat medical examination unless there is a history of significant cardiovascular disease, respiratory disease or occupational exposure (since the last medical in the case of a repeat medical) or if the physical examination reveals an abnormality in the cardiovascular or respiratory systems. Doctors must see film or report before signing certificate.
Cardiovascular System	Ischaemic heart disease (Coronary heart disease), significant valve disease. Other heart disease, systolic pressure over 160 mm Hg, diastolic pressure over 100 mm Hg in established divers and 90 mm Hg in new entrants, or other evidence of hypertensive damage.	Minor asymptomatic heart disease other than ischaemic (subject to more frequent medical checks). Subjects with well-controlled hypertension without evidence of damage may be permitted to dive. Intracardiac shunts ("Holes in the heart") must be seen by a Medical Referee.	Subjects with a pacemaker must be seen by a Medical Referee.
Haematology	Haemophilia if factor VIII is below 20%, sickle cell disease, thalassaemias and polycythaemia are not allowed to dive excep as noted under Allowable Factors.	Mild anaemia but advise investigation. Tumours and teukaemia may be allowable but must be seen by Medical Referee. Sickle cell trait. Von Willebrand's disease must see Medical Referee Polycythaemia if haematocrit normal with treatment.	Sickle cell test only where clinically indicated. Haemophiliacs may be permitted to dive provided factor VIII is more than 20% but only after being seen by Medical Referee. Subjects with sickle cell trait should exercise caution when using rebreathers owing to the risks associated with mild degrees of hypoxia.
Abdomen and Urogenital System	Significant proteinuria (albumin in the urine until the cause has been established.), Healed peptic ulcer. Abdominal hernias (but repair is advised).	
Nervous System and Vision	History of confirmed epilepsy including post traumatic fits must be seen by Medical Referee. Any serious head injury in past three months Currently symptomatic psychiatric or personality disorders. Any disease of CNS (MS, Polio, Petit Mal, etc.) to be seen by Medical Referee.	Febrile convulsions but no other type of fit allowable. Multiple Sclerosis – only stable patients	A single isolated fit or severe head injury to be seen by Medical Referee. Severe visual impairment to be reported to Referee. A long fit free period off anticonvulsants may be allowable.
Endocrine	Diabetes with any long-term diabetic complications or frequent hypoglycaemic attacks.	Referral to Medical Referee is required for diabetic subjects and for all other endocrine disorders.	An annual medical is mandatory for diabetics.
Drugs	The use of the following disqualifies: oral sympathomimetics (other than proprietary nasal decongestants), oral steroids, muscle relaxants, digoxin, and psychotropic drugs see comments in Other Points column. Alcohol, drug or narcotic abuse to disqualify	Antihistamines, anti-seasickness preparations, and analgesics should only be used with caution. Oral contraceptives and diuretics are allowable.	If any psychotropic drug (including tranquillisers, sedatives and hypnotics) has been used, the candidate should not dive for at least 3 months after complete cessation of therapy without the consent of a Medical Referee.
Decompression illness since last Medical	Must be seen by a Medical Referee		
Disabilities	Anyone with a significant disability must be assessed by a Medical Referee. Suitable organisations to contact are "Dolphin" (Tel No 01752 209999) or the Headquarters of the Diving Associations who have jointly published this form.		

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