

Diver's Medical Record

This form is for use alongside MA1 and for retention with MA2 and any additional clinical notes.

Diver Details

Title	Forename	Family Name	Date of birth
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address Line 1	<input type="text"/>		<i>(eg building name)</i>
Address Line 2	<input type="text"/>		<i>(eg street)</i>
Address Line 3	<input type="text"/>		<i>(eg district)</i>
Town	<input type="text"/>		
County	<input type="text"/>		
Postcode	<input type="text"/>		

AMED Details

Title	Forename	Family Name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address Line 1	<input type="text"/>		<i>(eg building name)</i>
Address Line 2	<input type="text"/>		<i>(eg street)</i>
Address Line 3	<input type="text"/>		<i>(eg district)</i>
Town	<input type="text"/>		
County	<input type="text"/>		
Postcode	<input type="text"/>	Phone Number	<input type="text"/>

Date of Examination and Signature of AMED

	Date	Signature
Year 1	<input type="text"/>	<input type="text"/>
Year 2	<input type="text"/>	<input type="text"/>
Year 3	<input type="text"/>	<input type="text"/>
Year 4	<input type="text"/>	<input type="text"/>
Year 5	<input type="text"/>	<input type="text"/>

Occupational History, Medical History and Examination Details

Past diving history

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Past medical history

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Medication

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Allergies

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	Year 1	Year 2	Year 3	Year 4	Year 5
Smoking status					
Alcohol consumption					
Height (m)					
Weight (kg)					
BMI (kg/m ²)					
Waist circumference (cm)					

Mental Health	Year 1	Year 2	Year 3	Year 4	Year 5
Mental health assessment					

Respiratory System	Year 1	Year 2	Year 3	Year 4	Year 5
Air entry					
Percussion note					
Added sounds					
FEV ₁					
FVC					
FEV ₁ /FVC%					
PEF (resting)					

PEF or FEV₁ (5 min post-exercise)

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PEF or FEV₁ (10 min post-exercise)

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PEF or FEV₁ (15 min post-exercise)

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Cardiovascular System

Year 1 Year 2 Year 3 Year 4 Year 5

Pulse

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BP

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ECG (as required)

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Heart sounds

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Murmur

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Peripheral pulses

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Varicose veins

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Exercise Testing

Year 1 Year 2 Year 3 Year 4 Year 5

Risk assessment satisfactory

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VO₂ max (ml/kg/min)

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Nervous System

Year 1 Year 2 Year 3 Year 4 Year 5

Appearance

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Posture

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Gait

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Balance

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Coordination

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Involuntary movements

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Speech

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Cranial Nerves

Year 1 Year 2 Year 3 Year 4 Year 5

II-XII

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Pupils

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Eye movements (including nystagmus)

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Peripheral Nerves

Year 1 Year 2 Year 3 Year 4 Year 5

Tone

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Power

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Reflexes

Year 1 Year 2 Year 3 Year 4 Year 5

Biceps

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Triceps

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Supinator

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Knee					
Ankle					
Plantar					

<i>Sensory</i>	Year 1	Year 2	Year 3	Year 4	Year 5
Light touch					
Pinprick					
Temperature					
Two-point discrimination					
Proprioception					
Vibration					

Musculoskeletal System	Year 1	Year 2	Year 3	Year 4	Year 5
Spine					
Upper limbs					
Lower limbs					

ENT	Year 1		Year 2		Year 3		Year 4		Year 5	
	R	L	R	L	R	L	R	L	R	L
Audiometry (as required)										
External meatus										
Tympanic membranes										
Eustachian function										
Nasal airways										

Vision	Year 1		Year 2		Year 3		Year 4		Year 5	
	R	L	R	L	R	L	R	L	R	L
Distance vision										
Near vision										
Visual fields										
Fundi										
Colour vision (as required)										

Dental Health	Year 1	Year 2	Year 3	Year 4	Year 5
Regular dental assessments					

Endocrine System

Evidence of diabetes, thyroid disease or other endocrine disorder

Year 1	Year 2	Year 3	Year 4	Year 5

Abdomen

Masses/organomegaly

Year 1	Year 2	Year 3	Year 4	Year 5

Hernial orifices

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Haemorrhoids

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Urinalysis

Protein

Year 1	Year 2	Year 3	Year 4	Year 5

Sugar

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Blood

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Skin

Functionally intact

Year 1	Year 2	Year 3	Year 4	Year 5

Haematology

Haemoglobin (as required)

Year 1	Year 2	Year 3	Year 4	Year 5

Overall Assessment

Fit/Unfit

Year 1	Year 2	Year 3	Year 4	Year 5

Restrictions

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Additional findings