



HEALTH DECLARATION FORM / COVID-19

Read this statement prior to signing it. You must complete this additional medical questionnaire to to participate in diving activities.
If you are a minor, you must have this statement signed by your parent or guardian.

DIVER MEDICAL QUESTIONNAIRE

The purpose of this medical questionnaire is to ensure that you are medically fit to participate in diving and related activities. Please answer the following questions by checking YES or NO. If you are not sure, answer YES. A positive response means that there may be a preexisting condition that could affect your safety while diving. If any of these items apply to you, we must request that you consult with a physician, preferably a specialist in diving medicine, prior to participating in diving activities.

Within the 40 days immediately preceding the date of this Health Declaration Form, have you:

- TESTED POSITIVE OR PRESUMPTIVELY POSITIVE WITH COVID-19 (THE NEW CORONAVIRUS OR- SARS-COV2) OR BEEN IDENTIFIED AS A POTENTIAL CARRIER OF THE CORONAVIRUS?
 YES NO
- EXPERIENCED ANY SYMPTOMS COMMONLY ASSOCIATED WITH COVID-19 (FEVER; COUGH; FATIGUE OR MUSCLE PAIN; DIFFICULTY BREATHING; SORE THROAT; LUNG INFECTIONS; HEADACHE; LOSS OF TASTE; OR DIARRHEA)?
 YES NO
- BEEN IN ANY LOCATION/SITE DECLARED AS HAZARDOUS WITH AND/OR POTENTIALLY INFECTIVE WITH THE NEW CORONAVIRUS BY A RECOGNIZED HEALTH OR REGULATORY AUTHORITY?
 YES NO
- BEEN IN DIRECT CONTACT WITH OR IN THE IMMEDIATE VICINITY OF ANY PERSON WHO TESTED POSITIVE WITH COVID-19 OR WHO WAS DIAGNOSED AS POSSIBLY BEING INFECTED BY THE NEW CORONAVIRUS?
 YES NO

The information I have provided about my medical history is accurate to the best of my knowledge. I agree to accept responsibility for any omissions in disclosing my existing or past health conditions.
I also commit to inform DIVE WITH MARTIN about any symptom that may occur after having filled in this declaration and/or having come into contact with someone who has tested positive after signing the declaration.

Full Name	Date	Guardian's Full Name	Date
Signature		Guardian's Signature	

ADDITIONAL DECLARATIONS / COVID-19

- I WILL, if asked, wear a protective mask at all times while participating in ANY activities arranged by DIVE WITH MARTIN, and will take all reasonable preventive steps that may be recommended by any relevant public authority.
- I WILL accept and observe all instructions by DIVE WITH MARTIN intended to abide by all existing regulations, required to help prevent the risk of transmission, including having my temperature taken prior to participating in any diving activities, if asked.
- I ACKNOWLEDGE and ACCEPT that this declaration will be considered as my consent to DIVE WITH MARTIN to retain and disclose this form, if asked, to any relevant authority or service provider for the purposes of ensuring the safety of any third parties who may come in contact with me prior to, during and after any DIVE WITH MARTIN activity.

Full Name	Date	Guardian's Full Name	Date
Signature		Guardian Signature	



PLEASE NOTE

COVID-19 shares many of the same symptoms as other serious viral pneumonias that require a period of convalesce before returning to full activities – a process that can take weeks or months depending on symptom severity (1).

MEDICAL RECOMMENDATIONS (2):

- Divers who have had symptomatic COVID-19, should wait a minimum of TWO months, preferable THREE, before resuming their diving activities.
- Divers who have tested positive with COVID-19 but have remained completely asymptomatic, should wait ONE month before resuming diving.
- Divers who have been hospitalised with pulmonary symptoms related to COVID-19, should, after a three-month waiting period, undergo complete pulmonary function testing as well as a cardiac evaluation with echocardiography and exercise test (exercise electrocardiography) to ascertain normal cardiac function prior to their return to diving.

GENERAL RECOMMENDATION

- Divers and dive centers should observe strictly the guidelines for disinfection of diving gear (as issued by the diving federations and DAN Europe / Divers Alert Network).

REFERENCES

- (1) [Return to Diving Post COVID-19](#) - issued by the Undersea and Hyperbaric Medical Society (UHMS) in the USA.
- (2) [Diving after COVID-19 pulmonary infection](#). A position statement of the Belgian Society for Diving and Hyperbaric Medicine (SBMHS-BVOOG).