### Scubaworld PADI 5 Star IDC Center

Calle Geminis 28 (Urb La Florida) 03189 Orihuela Costa Phone 0034-667057640

#### REGISTRATIONFORM DIVE COURSES

BY
REGISTRATION
TURN IN
2 PASSPORT
PHOTOS

I register for the following course	(s):				
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By registration a down payment of receiving the down payment and t before the start of the course . Fev	he registration form you	will receive tl	ne course materials s	so you can prepare your selves	
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By cancellation:					
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with in 2 weeks of the planned dat	es 50% of the deposit ma	ay be used fo	r registration costs a	nd time reservation.	
after the start of the course reimb	ursement is no more poss	sible. Only by	health problems. Th	nen you have to show a medical	
Statement from a doctor					
in these situation the following rei	mbursement will be paid:				
upto ¼ of the course: 75% of	f the remaining amount				
upto ½ of the course: 50 % o	oto ½ of the course: 50 % of the remaining amount				
after more than ½ of the course no	reimbursement will poss	sible.			
For extra sessions caused by negligence of s This registration is valid for 18 months. Les			1.		
	city:		Date:		

#### Learning Agreement with Scubaworld Dive Center

Welcome to the PADI Open water diver course. We're confident that you will find your dive training both fun and rewarding. To learn and practice important concepts and skills for using life-support equipment underwater, you must invest the time needed to do it. This learning agreement is between you (the student diver) and our instructional staff regarding our mutual responsibilities in this program.

#### **Student Diver Responsibilities**

I ......(student diver) agree to study independently as specified by the instructor. In general, this means that before each practical session, I will:

- Complete the assigned knowledge development portion of the course, including:
  - watch the course DVD and read the PADI Open Water Diver Manual section(s) and complete the Quick Quiz questions.
  - o Complete the assigned Knowledge Review(s).
  - o Complete the Final Exam (as assigned).

In addition, I agree to:

- Follow all course procedures as set forth by my instructor.
- Ask questions about anything not understood.
- Be on time and be prepared for each practical session.

If I do not follow the points above, I understand that I may need to reschedule practical sessions, and that I'm responsible for any additional costs related to this. In scheduling and determining additional costs, *Scubaworld* agrees to give every reasonable consideration to unforeseen events, such as family emergencies.

#### Instructor/Staff Responsibilities

The course instructor and staff agree to:

- 1. Start the class as scheduled.
- 2. Provide a positive learning environment.
- 3. Answer your questions to the best of our ability.
- 4. Assist you through any course challenges.
- 5. Provide opportunities for as many knowledge development, confined water dives and open water dives as necessary for you to comfortably master course-performance objectives. The course fee is based on an average, and includes all knowledge development assessments, 2 or 3 confined water (pool sessions) dives and 4 of open water dives. Because people learn skills at different rates, the course is student-centered and performance-based, not time-based. Additional sessions may be needed for you to comfortably meet course objectives for certification. Course fees and additional session fees are as listed on the fee schedule.

Student Diver Signature	Date
-	
Dive Center Authorized Signature	Date







established safety procedures are not followed, however, there are

To scuba dive safely, you should not be extremely overweight or out of condition. Diving can be strenuous under certain conditions. Your respiratory and circulatory systems must be in good health. All body air

#### MEDICAL STATEMENT

Participant Record (Confidential Information)

increased risks.

#### Please read carefully before signing.

This is a statement in which you are informed of some potential risks
involved in scuba diving and of the conduct required of you during the
scuba training program. Your signature on this statement is required for
you to participate in the scuba training program offered

by	and		es must be normal and healthy. A person with coronary disease, a	
Instruct	located in the	current cold or congestion, epilepsy, a severe medical problem or under the influence of alcohol or drugs should not dive. If you have		
city of	, state/province of	the ir	nstructor before participating in this program, and on a regular basis eafter upon completion. You will also learn from the instructor the	
Medical Stateme enroll in the scut this Statement si Diving is	s statement prior to signing it. You must complete this ent, which includes the medical questionnaire section, to be training program. If you are a minor, you must have igned by a parent or guardian.  an exciting and demanding activity. When performed ag correct techniques, it is relatively safe. When	important safety rules regarding breathing and equalization while scuba diving. Improper use of scuba equipment can result in serious injury. You must be thoroughly instructed in its use under direct supervision of a qualified instructor to use it safely.  If you have any additional questions regarding this Medical Statement or the Medical Questionnaire section, review them with your instructor before signing.		
<b>Divers</b> No the Particip	Medical Questionnaire			
The purpose of this ined by your docto response to a questresponse means the	s Medical Questionnaire is to find out if you should be exam- r before participating in recreational diver training. A positive stion does not necessarily disqualify you from diving. A positive nat there is a preexisting condition that may affect your safety ou must seek the advice of your physician prior to engaging in	with a you, v scuba	se answer the following questions on your past or present medical history a YES or NO. If you are not sure, answer YES. If any of these items apply to we must request that you consult with a physician prior to participating in a diving. Your instructor will supply you with an RSTC Medical Statement and elines for Recreational Scuba Diver's Physical Examination to take to your cian.	
Could you	be pregnant, or are you attempting to become pregnant?		_ Dysentery or dehydration requiring medical intervention?	
Are you pr	resently taking prescription medications? (with the exception of		Any dive accidents or decompression sickness?	
	ol or anti-malarial)		_ Inability to perform moderate exercise (example: walk 1.6 km/one mile	
Are you over following?	ver 45 years of age and can answer YES to one or more of the		within 12 mins.)?	
	r smoke a pipe, cigars or cigarettes		Head injury with loss of consciousness in the past five years?	
	nigh cholesterol level		-	
	amily history of heart attack or stroke ently receiving medical care		_ Back or spinal surgery?	
<ul> <li>high block</li> </ul>	od pressure		_	
	s mellitus, even if controlled by diet alone		Back, arm or leg problems following surgery, injury or fracture?	
_	er had or do you currently have		High blood pressure or take medicine to control blood pressure?	
	r wheezing with breathing, or wheezing with exercise?		_ Heart disease?	
•	or severe attacks of hayfever or allergy?		_ Heart attack?	
•	colds, sinusitis or bronchitis?		_ Angina, heart surgery or blood vessel surgery?	
	of lung disease?		_ Sinus surgery?	
	orax (collapsed lung)?		_ Ear disease or surgery, hearing loss or problems with balance?	
	st disease or chest surgery?		Recurrent ear problems?	
Behavioral closed or c	I health, mental or psychological problems (Panic attack, fear of open spaces)?		Bleeding or other blood disorders?	
	seizures, convulsions or take medications to prevent them?		Hernia?	

Recurring complicated migraine headaches or take medications to pre-

Frequent or severe suffering from motion sickness (seasick, carsick,

Blackouts or fainting (full/partial loss of consciousness)?

The information I have provided about my medical history is accurate to the best of my knowledge. I agree to accept responsibility for omissions regarding my failure to disclose any existing or past health condition.

Date

Signature of Parent or Guardian Date

Recreational drug use or treatment for, or alcoholism in the past five

Signature

vent them?

years?

Ulcers or ulcer surgery?

A colostomy or ileostomy?

#### STUDENT

### Please print legibly. Mailing Address \_\_\_\_\_ State/Province/Region \_\_\_\_\_ City\_ Country \_\_\_ Zip/Postal Code Home Phone ( Business Phone ( FAX Email \_ Name and address of your family physician Clinic/Hospital Physician \_\_\_\_\_ Address Date of last physical examination \_\_\_\_\_ Name of examiner\_\_\_\_\_ Clinic/Hospital\_\_\_\_ Address \_ Email Phone ( Were you ever required to have a physical for diving? ☐ Yes ☐ No If so, when?\_\_\_\_\_ **PHYSICIAN** This person applying for training or is presently certified to engage in scuba (self-contained underwater breathing apparatus) diving. Your opinion of the applicant's medical fitness for scuba diving is requested. There are guidelines attached for your information and reference. **Physician's Impression** $\hfill \square$ I find no medical conditions that I consider incompatible with diving. ☐ I am unable to recommend this individual for diving. Remarks \_\_\_\_ Date \_\_\_\_ Physician's Signature or Legal Representative of Medical Practitioner Physician\_\_\_\_\_ Clinic/Hospital\_\_\_\_\_ Address \_\_\_\_\_ Email \_\_\_\_\_ Phone (

### **Guidelines for Recreational Scuba Diver's Physical Examination**

#### **Instructions to the Physician:**

Recreational **SCUBA** (Self-Contained Underwater Breathing Apparatus) can provide recreational divers with an enjoyable sport safer than many other activities. The risk of diving is increased by certain physical conditions, which the relationship to diving may not be readily obvious. Thus, it is important to screen divers for such conditions.

The RECREATIONAL SCUBA DIVER'S PHYSICAL EXAMINATION focuses on conditions that may put a diver at increased risk for decompression sickness, pulmonary overinflation syndrome with subsequent arterial gas embolization and other conditions such as loss of consciousness, which could lead to drowning. Additionally, the diver must be able to withstand some degree of cold stress, the physiological effects of immersion and the optical effects of water and have sufficient physical and mental reserves to deal with possible emergencies.

The history, review of systems and physical examination should include as a minimum the points listed below. The list of conditions that might adversely affect the diver is not all-inclusive, but contains the most commonly encountered medical problems. The brief introductions should serve as an alert to the nature of the risk posed by each medical problem.

The potential diver and his or her physician must weigh the pleasures to be had by diving against an increased risk of death or injury due to the individual's medical condition. As with any recreational activity, there are no data for diving enabling the calculation of an accurate mathematical probability of injury. Experience and physiological principles only permit a qualitative assessment of relative risk.

For the purposes of this document, **Severe Risk** implies that an individual is believed to be at substantially elevated risk of decompression sickness, pulmonary or otic barotrauma or altered consciousness with subsequent drowning, compared with the general population. The consultants involved in drafting this document would generally discourage a student with such medical problems from diving. **Relative Risk** refers to a moderate increase in risk, which in some instances may be acceptable. To make a decision as to whether diving is contraindicated for this category of medical problems, physicians must base their judgement on an assessment of the individual patient. Some medical problems which may preclude diving are **temporary** in nature or responsive to treatment, allowing the student to dive safely after they have resolved.

Diagnostic studies and specialty consultations should be obtained as indicated to determine the diver's status. A list of references is included to aid in clarifying issues that arise. Physicians and other medical professionals of the Divers Alert Network (DAN) associated with Duke University Health System are available for consultation by phone +1 919 684 2948 during normal business hours. For emergency calls, 24 hours 7 days a week, call +1 919 684 8111 or +1 919 684 4DAN (collect). Related organizations exist in other parts of the world – DAN Europe in Italy +39 039 605 7858, DAN S.E.A.P. in Australia +61 3 9886 9166 and Divers Emergency Service (DES) in Australia +61 8 8212 9242, DAN Japan +81 33590 6501 and DAN Southern Africa +27 11 242 0380. There are also a number of informative websites offering similar advice.

#### **NEUROLOGICAL**

Neurological abnormalities affecting a diver's ability to perform exercise should be assessed according to the degree of compromise. Some diving physicians feel that conditions in which there can be a waxing and waning of neurological symptoms and signs, such as migraine or demyelinating disease, contraindicate diving because an exacerbation or attack of the preexisting disease (e.g.: a migraine with aura) may be difficult to distinguish

from neurological decompression sickness. A history of head injury resulting in unconsciousness should be evaluated for risk of seizure.

#### **Relative Risk Conditions**

- Complicated Migraine Headaches whose symptoms or severity impair motor or cognitive function, neurologic manifestations
- · History of Head Injury with sequelae other than seizure
- Herniated Nucleus Pulposus
- Intracranial Tumor or Aneurysm
- Peripheral Neuropathy
- Multiple Sclerosis
- Trigeminal Neuralgia
- · History of spinal cord or brain injury

#### **Temporary Risk Condition**

History of cerebral gas embolism without residual where pulmonary air trapping has been excluded and for which there is a satisfactory explanation and some reason to believe that the probability of recurrence is low.

#### **Severe Risk Conditions**

Any abnormalities where there is a significant probability of unconsciousness, hence putting the diver at increased risk of drowning. Divers with spinal cord or brain abnormalities where perfusion is impaired may be at increased risk of decompression sickness.

#### Some conditions are as follows:

- · History of seizures other than childhood febrile seizures
- History of Transient Ischemic Attack (TIA) or Cerebrovascular Accident (CVA)
- History of Serious (Central Nervous System, Cerebral or Inner Ear) Decompression Sickness with residual deficits

### CARDIOVASCULAR SYSTEMS

#### **Relative Risk Conditions**

The diagnoses listed below potentially render the diver unable to meet the exertional performance requirements likely to be encountered in recreational diving. These conditions may lead the diver to experience cardiac ischemia and its consequences. Formalized stress testing is encouraged if there is any doubt regarding physical performance capability. The suggested minimum criteria for stress testing in such cases is at least 13 METS.\* Failure to meet the exercise criteria would be of significant concern. Conditioning and retesting may make later qualification possible. Immersion in water causes a redistribution of blood from the periphery into the central compartment, an effect that is greatest in cold water. The marked increase in cardiac preload during immersion can precipitate pulmonary edema in patients with impaired left ventricular function or significant valvular disease. The effects of immersion can mostly be gauged by an assessment of the diver's performance while swimming on the surface. A large proportion of scuba diving deaths in North America are due to coronary artery disease. Before being approved to scuba dive, individuals older than 40 years are recommended to undergo risk assessment for coronary artery disease. Formal exercise testing may be needed to assess the risk.

\* METS is a term used to describe the metabolic cost. The MET at rest is one, two METS is two times the resting level, three METS is three times the resting level, and so on. The resting energy cost (net oxygen requirement) is thus standardized. (Exercise Physiology; Clark, Prentice Hall, 1975.)

#### **Relative Risk Conditions**

- History of Coronary Artery Bypass Grafting (CABG)
- Percutaneous Balloon Angioplasty (PCTA) or Coronary Artery Disease (CAD)
- History of Myocardial Infarction
- Congestive Heart Failure
- Hypertension
- History of dysrythmias requiring medication for suppression
- Valvular Regurgitation

#### **Pacemakers**

The pathologic process that necessitated should be addressed regarding the diver's fitness to dive. In those instances where the problem necessitating pacing does not preclude diving, will the diver be able to meet the performance criteria?

\* NOTE: Pacemakers must be certified by the manufacturer as able to withstand the pressure changes involved in recreational diving.

#### **Severe Risks**

Venous emboli, commonly produced during decompression, may cross major intracardiac right-to-left shunts and enter the cerebral or spinal cord circulations causing neurological decompression illness. Hypertrophic cardiomyopathy and valvular stenosis may lead to the sudden onset of unconsciousness during exercise.

#### **PULMONARY**

Any process or lesion that impedes airflow from the lungs places the diver at risk for pulmonary overinflation with alveolar rupture and the possibility of cerebral air embolization. Many interstitial diseases predispose to spontaneous pneumothorax: Asthma (reactive airway disease), Chronic Obstructive Pulmonary Disease (COPD), cystic or cavitating lung diseases may all cause air trapping. The 1996 Undersea and Hyperbaric Medical Society (UHMS) consensus on diving and asthma indicates that for the risk of pulmonary barotrauma and decompression illness to be acceptably low, the asthmatic diver should be asymptomatic and have normal spirometry before and after an exercise test. Inhalation challenge tests (e.g.: using histamine, hypertonic saline or methacholine) are not sufficiently standardized to be interpreted in the context of scuba diving.

A pneumothorax that occurs or reoccurs while diving may be catastrophic. As the diver ascends, air trapped in the cavity expands and could produce a tension pneumothorax.

In addition to the risk of pulmonary barotrauma, respiratory disease due to either structural disorders of the lung or chest wall or neuromuscular disease may impair exercise performance. Structural disorders of the chest or abdominal wall (e.g.: prune belly), or neuromuscular disorders, may impair cough, which could be life threatening if water is aspirated. Respiratory limitation due to disease is compounded by the combined effects of immersion (causing a restrictive deficit) and the increase in gas density, which increases in proportion to the ambient pressure (causing increased airway resistance). Formal exercise testing may be helpful.

#### **Relative Risk Conditions**

- History of Asthma or Reactive Airway Disease (RAD)\*
- History of Exercise Induced Bronchospasm (EIB)\*
- History of solid, cystic or cavitating lesion\*
- Pneumothorax secondary to:
  - -Thoracic Surgery
  - -Trauma or Pleural Penetration\*
  - -Previous Overinflation Injury\*

- Obesity
- History of Immersion Pulmonary Edema Restrictive Disease\*
- Interstitial lung disease: May increase the risk of pneumothorax
- \* Spirometry should be normal before and after exercise

Active Reactive Airway Disease, Active Asthma, Exercise Induced Bronchospasm, Chronic Obstructive Pulmonary Disease or history of same with abnormal PFTs or a positive exercise challenge are concerns for diving.

#### **Severe Risk Conditions**

- History of spontaneous pneumothorax. Individuals who
  have experienced spontaneous pneumothorax should avoid
  diving, even after a surgical procedure designed to prevent
  recurrence (such as pleurodesis). Surgical procedures either
  do not correct the underlying lung abnormality (e.g.: pleurodesis, apical pleurectomy) or may not totally correct it (e.g.: resection of blebs or bullae).
- Impaired exercise performance due to respiratory disease.

#### **GASTROINTESTINAL**

#### **Temporary Risks**

As with other organ systems and disease states, a process which chronically debilitates the diver may impair exercise performance. Additionally, dive activities may take place in areas remote from medical care. The possibility of acute recurrences of disability or lethal symptoms must be considered.

#### **Temporary Risk Conditions**

- Peptic Ulcer Disease associated with pyloric obstruction or severe reflux
- Unrepaired hernias of the abdominal wall large enough to contain bowel within the hernia sac could incarcerate.

#### **Relative Risk Conditions**

- Inflammatory Bowel Disease
- Functional Bowel Disorders

#### Severe Risks

Altered anatomical relationships secondary to surgery or malformations that lead to gas trapping may cause serious problems. Gas trapped in a hollow viscous expands as the divers surfaces and can lead to rupture or, in the case of the upper GI tract, emesis. Emesis underwater may lead to drowning.

#### **Severe Risk Conditions**

- Gastric outlet obstruction of a degree sufficient to produce recurrent vomiting
- Chronic or recurrent small bowel obstruction
- · Severe gastroesophageal reflux
- Achalasia
- Paraesophageal Hernia

#### **ORTHOPAEDIC**

Relative impairment of mobility, particularly in a boat or ashore with equipment weighing up to 18 kgs/40 pounds must be assessed. Orthopaedic conditions of a degree sufficient to impair exercise performance may increase the risk.

#### **Relative Risk Conditions**

- Amputation
- Scoliosis must also assess impact on respiratory function and exercise performance.
- Aseptic Necrosis possible risk of progression due to effects of decompression (evaluate the underlying medical

cause of decompression may accelerate/escalate the progression).

#### **Temporary Risk Conditions**

Back pain

#### **HEMATOLOGICAL**

Abnormalities resulting in altered rheological properties may theoretically increase the risk of decompression sickness. Bleeding disorders could worsen the effects of otic or sinus barotrauma, and exacerbate the injury associated with inner ear or spinal cord decompression sickness. Spontaneous bleeding into the joints (e.g.: in hemophilia) may be difficult to distinguish from decompression illness.

#### **Relative Risk Conditions**

- Sickle Cell Disease
- · Polycythemia Vera
- Leukemia
- Hemophilia/Impaired Coagulation

#### **METABOLIC AND ENDOCRINOLOGICAL**

With the exception of diabetes mellitus, states of altered hormonal or metabolic function should be assessed according to their impact on the individual's ability to tolerate the moderate exercise requirement and environmental stress of sport diving. Obesity may predispose the individual to decompression sickness, can impair exercise tolerance and is a risk factor for coronary artery disease.

#### **Relative Risk Conditions**

- Hormonal Excess or Deficiency
- Obesity
- · Renal Insufficiency

#### **Severe Risk Conditions**

The potentially rapid change in level of consciousness associated with hypoglycemia in diabetics on insulin therapy or certain oral hypoglycemic medications can result in drowning. Diving is therefore generally contraindicated, unless associated with a specialized program that addresses these issues. [See "Guidelines for Recreational Diving with Diabetes" at www/wrstc.com and www.diversalertnetwork.org.]

Pregnancy: The effect of venous emboli formed during decompression on the fetus has not been thoroughly investigated. Diving is therefore not recommended during any stage of pregnancy or for women actively seeking to become pregnant.

#### **BEHAVIORAL HEALTH**

Behavioral: The diver's mental capacity and emotional make-up are important to safe diving. The student diver must have sufficient learning abilities to grasp information presented to him by his instructors, be able to safely plan and execute his own dives and react to changes around him in the underwater environment. The student's motivation to learn and his ability to deal with potentially dangerous situations are also crucial to safe scuba diving.

#### **Relative Risk Conditions**

- · Developmental delay
- History of drug or alcohol abuse
- · History of previous psychotic episodes
- · Use of psychotropic medications

#### **Severe Risk Conditions**

 Inappropriate motivation to dive – solely to please spouse, partner or family member, to prove oneself in the face of

#### personal fears

- · Claustrophobia and agoraphobia
- · Active psychosis
- · History of untreated panic disorder
- · Drug or alcohol abuse

#### **OTOLARYNGOLOGICAL**

Equalisation of pressure must take place during ascent and descent between ambient water pressure and the external auditory canal, middle ear and paranasal sinuses. Failure of this to occur results at least in pain and in the worst case rupture of the occluded space with disabling and possible lethal consequences.

The inner ear is fluid filled and therefore noncompressible. The flexible interfaces between the middle and inner ear, the round and oval windows are, however, subject to pressure changes. Previously ruptured but healed round or oval window membranes are at increased risk of rupture due to failure to equalise pressure or due to marked overpressurisation during vigorous or explosive Valsalva manoeuvres.

The larynx and pharynx must be free of an obstruction to airflow. The laryngeal and epiglotic structure must function normally to prevent aspiration.

Mandibular and maxillary function must be capable of allowing the patient to hold a scuba mouthpiece. Individuals who have had mid-face fractures may be prone to barotrauma and rupture of the air filled cavities involved.

#### **Relative Risk Conditions**

- · Recurrent otitis externa
- · Significant obstruction of external auditory canal
- · History of significant cold injury to pinna
- Eustachian tube dysfunction
- · Recurrent otitis media or sinusitis
- · History of TM perforation
- History of tympanoplasty
- · History of mastoidectomy
- Significant conductive or sensorineural hearing impairment
- Facial nerve paralysis not associated with barotrauma
- Full prosthedontic devices
- · History of mid-face fracture
- Unhealed oral surgery sites
- · History of head and/or neck therapeutic radiation
- · History of temperomandibular joint dysfunction
- · History of round window rupture

#### **Severe Risk Conditions**

- Monomeric TM
- Open TM perforation
- Tube myringotomy
- · History of stapedectomy
- History of ossicular chain surgery
- · History of inner ear surgery
- Facial nerve paralysis secondary to barotrauma
- Inner ear disease other than presbycusis
- Uncorrected upper airway obstruction
- Laryngectomy or status post partial laryngectomy
- Tracheostomy
- Uncorrected laryngocele
- · History of vestibular decompression sickness

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- Undersea and Hyperbaric Medical Society (UHMS) www.UHMS.org
- Divers Alert Network (DAN) United States, 6 West Colony Place, Durham, NC <u>www.DiversAlertNetwork.org</u>
- Divers Alert Network Europe, P.O. Box 64026 Roseto, Italy, telephone non-emergency line: weekdays office hours +39-085-893-0333, emergency line 24 hours: +39-039-605-7858
- Divers Alert Network S.E.A.P., P. O. Box 384, Ashburton, Australia, telephone 61-3-9886-9166
- Divers Emergency Service, Australia, <u>www.rah.sa.gov.au/hyper-baric</u>, telephone 61-8-8212-9242
- South Pacific Underwater Medicine Society (SPUMS), P.O. Box 190, Red Hill South, Victoria, Australia, <u>www.spums.org.au</u>
- 16. European Underwater and Baromedical Society, www.eubs.org

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## Welcome -

Exploring the underwater world is both fun and serious.

Scuba diving is enjoyed by millions of people all over the world.

## Scuba Diving requires:

- Some physical fitness
- Ability to solve problems that come up
- Emotional maturity

You should have good general health and be comfortable in and around the water to scuba dive.



Like any adventurous activity, there are potential risks in scuba diving. However, these are well known and easy to avoid by following some simple rules.

Possible risks specific to scuba diving include:

- Problems with your ears
- Drowning and breathing-in water
- Getting cold in the water
- Lung over-expansion injury

It is important to follow some simple rules to avoid injury, which, although unlikely, could be serious, even fatal.

You will learn these rules during your scuba diving program.

When you follow these rules and suggestions, scuba diving is a reasonably safe and fun activity.

## Roles and Responsibilities

PADI's Role: to provide the best training materials and educational support possible.

**PADI Instructor's Role:** to supervise your training, follow PADI's guidelines and provide as safe a diving experience as possible.

Parent's Responsibility: to help evaluate your medical, physical and emotional readiness to participate in scuba diving.

- If you or your parents know of any medical problems you may have, you'll need to see a medical doctor before scuba diving.
- The PADI Medical Statement will help you, your parents and the doctor review your medical fitness to participate.

**Your Responsibility:** to understand and put to use the following six *ACTION* steps during your scuba diving adventure.





## ATTENTION

- Pay attention, listen and follow the rules.
- Diving is exciting and you can become distracted, but stay focused on your instructor and the assistants.
- Be sure to follow the rules covered by your instructor to help lower your risks and increase your fun.
- Failure to follow these rules can lead to serious injury, even fatality.

# COMMUNICATION

- If you don't understand something, or get confused, ask your instructor.
- Your instructor is there to help and to answer your questions.
- Don't be shy, it's important for you to understand.
- You may find that other people have the same questions you have!





## TAKE CARE OF YOUR EQUIPMENT

- We were not born to live underwater. That's why we have to use scuba equipment.
- Without properly cared for equipment, you increase your risks and make it harder to dive safely and comfortably.
- It's very important that all your equipment is designed for scuba diving and fits you properly.
- Be sure to take care of your equipment every time you use it.



# INFORM

- Inform your instructor of how you feel.
- Tell your instructor if you're cold, tired, having a problem or don't understand something.
- You'll learn hand signals so you can "talk" with your instructor underwater.



# OBSERVE

- Observe how your instructor does things and follow the example.
- Watch where your instructor is and be sure to watch for signals and direction.





## **NOW HAVE FUN!**

- Don't forget to have fun!
- Scuba diving is a serious activity and there are risks involved. But you can manage these risks and avoid injury by following the simple <u>ACTION</u> steps.
- Paying careful attention to proper training and instruction will teach you how to avoid injury and reduce the risk of hurting yourself.
- So take <u>ACTION</u> and have a great time. The fun has just begun!





## Youth Diving: Responsibility and Risks Acknowledgment

(Please read carefully, fill in all blanks, an	d sign and date below.)		
I/we,	, and my/our child,	,	
have been advised and thoroughly inform participant. These risks may include, but sinuses and ears, drowning, panic and ot	Diving: Responsibility and Risks video or fined that diving is an adventure sport with are not limited to, pressure related injuring her serious injury or death. We also under, in participating in scuba activities and a	inherent risks to the es affecting the lungs, rstand our responsi-	
to evaluate whether my/our child should knowledge of the mental, physical and er	d, I/we understand and agree it is solely mean participate in scuba activities. Our decise motional abilities of our child, as well as he esponsibility to discuss with a physician at and participation in this activity.	sion is based upon our is/her medical history.	
	ny/our responsibility to continue to monitor the abilities and health r he/she should continue in this program and continue to dive after		
I/we agree to abide by all supervisory an certification.	d depth limitations that may accompany	my/our child's PADI	
I/we understand that PADI certifies instruoped by PADI.	actors/dive centers and provides material	s for programs devel-	
I/we understand that the dive center/resovision of this activity	ort and the instructor are responsible for	the conduct and super	
I/we understand my responsibilities and ties and Risk video or flip chart.	those of my child as set forth in the Youtl	n Diving Responsibili-	
•	derstand and agree to the terms and cond binding contract between us, the dive pro		
Parent/Guardian Name	Parent/Guardian Signature	(Day/Month/Year)	
Participant/Minor Name	Participant/Minor Signature	(Day/Month/Year)	

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