

SAINT CHRISTOPHER AND NEVIS  

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**STATUTORY RULES AND ORDERS**

**No. 16 of 2012**  

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**MERCHANT SHIPPING (MEDICAL EXAMINATION) REGULATIONS, 2012**  

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**Merchant Shipping (Medical Examination) Regulations, 2012**

In exercise of the power conferred under section 456 of the Merchant Shipping Act,  
Cap. 7.05, the Minister responsible for Maritime Affairs makes these Regulation:

*[Published 19<sup>th</sup> April 2012, Official Gazette No. 18 of 2012]*

**1. CITATION.**

These Regulations may be cited as the Merchant Shipping (Medical Examination) Regulations, 2012.

**2. INTERPRETATION.**

In these Regulations

“Act” means the Merchant Shipping Act, Cap 7.05;

“approved medical practitioner” for the purposes of these Regulations means a medical practitioner qualified under the Medical Act or other legislation in Saint Christopher and Nevis or the equivalent National legislation in the practitioner’s home country or country that has issued his medical qualifications where those countries are a signatory to the Medical Examination (Seafarers) Convention 1946 (International Labour Organization Convention 73 of 1946) or the Merchant Shipping (Minimum Standards) Convention 1976 (International Labour Organization Convention 147 of 1976) or the International Labour Organization Maritime Labour Convention 2006 (MLC 2006);

“authorised person” means a person authorised in writing by or on behalf of the Director or the Designated Authority for the purpose of these Regulations;

“chemical” means any liquid product listed in Chapter 17 of the International Code for the Construction and Equipment of Ships carrying Dangerous Chemicals in Bulk (IBC Code) and includes products not so listed but which have been accepted for carriage in chemical tankers under International Maritime Organization guidelines, pending their inclusion in Chapter 17 of the Code;

“GT” means gross registered tons as defined in the tonnage regulations;

“medical fitness certificate” means a certificate issued under regulation 5, whether or not subject to restrictions, or a certificate deemed to be equivalent thereto under regulation 6 or 7;

“IMO” means the International Maritime Organization;

“offshore installation” means a fixed or floating platform capable of engaging in operations for the exploration or exploitation of resources beneath the seabed, whether on location or not;

“Shipping Notice” means a Notice described as such, issued by the Director and includes a reference to any document amending that Notice which is considered by the Minister to be relevant from time to time and is specified in a Shipping Notice;

“surveyor” means a surveyor appointed by a Certifying Authority or a surveyor of ships appointed pursuant to section 411 of the Act.

(2) Any approval in pursuance of these Regulations shall be given in writing and shall specify the date on which it takes effect and the conditions, if any, on which it is given.

### **3. APPLICATION.**

(1) These Regulations apply to sea-going Saint Christopher and Nevis ships.

(2) Regulations 13 and 14 apply to sea-going foreign ships when they are in a Saint Christopher and Nevis port or Saint Christopher and Nevis waters, being ships which are of 100 GT or over other than fishing vessels and pleasure craft and offshore installations whilst on their working stations.

### **4. PROHIBITION ON EMPLOYMENT.**

(1) Subject to sub-regulation (6), no person shall employ a seafarer in a ship unless that seafarer is the holder of a valid medical fitness certificate.

(2) Any seafarer who has served at sea on a Saint Christopher and Nevis ship at any time during one year immediately preceding the coming into force of these Regulations may continue his seagoing employment without such a medical fitness certificate for a period of one year from that date.

(3) Any seafarer, the validity of whose certificate expires while he is in a location where medical examination in accordance with these Regulations is impracticable, may continue to be employed without such a certificate for a period not exceeding three months from the date of expiry of such medical certificate.

(4) Subject to sub-regulation (6), no person shall employ a seafarer in a ship in a capacity or in a geographical area precluded by any restriction in that seafarer’s medical fitness certificate.

(5) Subject to sub-regulation (6), no person shall employ a seafarer in a ship carrying chemicals in bulk unless that seafarer is the holder of a valid medical fitness certificate issued in respect of a medical examination undertaken not more than twelve months previously, notwithstanding that the period of validity specified in the medical fitness certificate may exceed twelve months.

(6) Sub-regulations (1), (4) and (5) shall not apply to the employment of

(a) a pilot who is not a member of the crew;

(b) a person employed in a ship or offshore installation solely in connection with the construction, alteration, repair or testing of the ship, its machinery or equipment, and not engaged in the navigation of the ship;

- (c) a person solely employed in work directly related to
  - (i) the exploration of the seabed or subsoil or the exploitation of their natural resources;
  - (ii) the storage of gas in or under the seabed or the recovery of gas so stored;
  - (iii) the laying, inspection, testing, repair, alteration, renewal or removal of any submarine telegraph cable; or
  - (iv) pipe-line works, including the assembling, inspection, testing, maintaining, adjusting, repairing, altering, renewing, changing the position of, or dismantling a pipe-line or length of pipe-line,
 who is not engaged in the navigation of the ship or in the deck, engine room, radio, medical or catering department of that ship or offshore installation;
- (d) a person employed in a port who is not ordinarily employed at sea; or
- (e) a person employed in a ship or offshore installation solely to provide goods, personal services or entertainment on board who is not employed by the owner or the person employing the master of the ship and has no emergency safety responsibilities.

#### **5. ISSUE OF MEDICAL FITNESS CERTIFICATES.**

(1) Every applicant for a medical fitness certificate shall be examined by an approved medical practitioner.

(2) Where, upon such examination, the approved medical practitioner considers that the applicant is fit, having regard to the medical standards specified in the First Schedule, he shall issue the applicant with a medical fitness certificate in the form set out in the Second Schedule or an equivalent form, which is acceptable to the Director, according to the National Regulations for Medical Examination of Seafarers in the approved medical practitioner's practising country and that certificate may be restricted to such capacity of sea service or geographical area as the approved medical practitioner considers appropriate.

(3) Where the approved medical practitioner considers that an applicant has failed to meet the required medical standards, he shall give to that applicant notice of such failure in the form set out in the Third Schedule or an equivalent form, which is acceptable to the Director, according to the National Regulations for Medical Examination of Seafarers in the practitioner's practising country.

#### **6. CERTIFICATE EQUIVALENT.**

(1) Subject to sub-regulation (2), any certificate of medical and visual fitness for seafaring employment issued by an approved medical practitioner to a seafarer in respect of a medical examination conducted before the coming into force of the Regulations shall be deemed for the purposes of these Regulations to be equivalent to a medical fitness certificate issued under these Regulations.

(2) Any such certificate issued by an approved medical practitioner shall remain valid from the date of the medical examination only for the appropriate maximum period, according to the age of the seafarer, prescribed in regulation 8, or for such lesser period as may be specified in the certificate.

## **7. CERTIFICATES ISSUED BY FOREIGN STATES.**

Any medical fitness certificate issued to a seafarer in accordance with the Medical Examination (Seafarers) Convention 1946 (International Labour Organization Convention 73 of 1946) or the Merchant Shipping (Minimum Standards) Convention 1976 (International Labour Organization Convention 147 of 1976) or the International Labour Organization Maritime Labour Convention 2006 (MLC 2006)

- (a) by an authority empowered in that behalf by the laws of the country outside Saint Christopher and Nevis which is a party to either of those Conventions; or
- (b) by an approved authority empowered in that behalf by the laws of any other country outside Saint Christopher and Nevis,

shall be deemed for the purposes of these Regulations to be equivalent to a medical fitness certificate issued under these Regulations.

## **8. PERIOD OF VALIDITY.**

An approved medical practitioner who issues a medical fitness certificate under regulation 5 shall specify the period of validity of the certificate commencing with the date of the medical examination subject to the following maximum periods

- (a) in respect of seafarers under 18 years of age, one year;
- (b) in respect of seafarers 18 years of age and over, two years;
- (c) in respect of colour vision certificates for a maximum of six years.

## **9. SUSPENSION OR CANCELLATION OF CERTIFICATE.**

Where an approved medical practitioner has reasonable grounds for believing that

- (a) there has been a significant change in the medical fitness of a seafarer during the period of validity of his medical fitness certificate; or
- (b) when the medical fitness certificate was issued the approved medical practitioner, had he been in possession of full details of the seafarers condition, could not reasonably have considered that the seafarer was fit, having regard to the medical standards referred to in regulation 5; or
- (c) the medical fitness certificate was issued otherwise than in accordance with these Regulations,  
he shall notify the seafarer concerned and may
  - (i) suspend the validity of the certificate until the seafarer has undergone a further medical examination;
  - (ii) suspend the certificate for such period as he considers the seafarer will remain unfit to go to sea; or
  - (iii) cancel the certificate where he considers that the seafarer is likely to remain permanently unfit to go to sea.

## **10. APPLICATION FOR REVIEW.**

- (1) Subject to sub-regulation (2), a seafarer who is aggrieved by

- (a) the refusal of an approved medical practitioner to issue him with a medical fitness certificate; or
- (b) any restriction imposed on such a certificate; or
- (c) the suspension of a certificate for a period of more than three months or cancellation of a certificate pursuant to regulation 9,

may apply to the Director or if the Director so directs, the Registrar, for the matter to be reviewed by a single referee appointed by the Director.

(2) An application for a review shall be in the form set out in the Fourth Schedule and made only by

- (a) a seafarer who has served at sea on a Saint Christopher and Nevis ship at any time during the two years immediately preceding the date on which these regulations come into operation; or
- (b) a seafarer who has held a valid medical fitness certificate at any time during the two years immediately preceding that refusal, imposition of a restriction, suspension or cancellation.

(3) Any such application shall

- (a) be submitted to the Director or if the Director so directs, the Registrar, within one month of the date on which the seafarer is given notice of the refusal, imposition of a restriction, suspension or cancellation, or such longer period as the Director may determine, where the delay is caused by the seafarer's employment on board ship away from Saint Christopher and Nevis; and
- (b) include the applicants consent for the approved medical practitioner responsible for the refusal, imposition of a restriction, suspension or cancellation to provide a report to the medical referee, and specify the name and address of that practitioner.

(4) The medical referee to whom the matter is referred by the Director or if the Director so directs, the Registrar, shall

- (a) obtain a report from the approved medical practitioner by whom the applicant was examined and shall examine the medical condition of the applicant;
- (b) where the applicant so requests, disclose to the applicant the report of the approved medical practitioner and any other evidence not produced by the applicant himself but such disclosure is not required to be made, where the medical referee considers that disclosure would be harmful to the applicant's health;
- (c) have regard to any relevant medical evidence, whether produced by the applicant, his employer, or otherwise, and whether or not disclosed as aforesaid.

(5) In the light of the medical evidence before him, the medical referee shall, where he considers that the applicant is fit having regard to the medical standards referred to in regulation 5, issue the applicant with a medical fitness certificate in the approved form.

(6) Where the medical referee considers that restrictions should be imposed as to capacity or geographical area other than those imposed on the medical fitness certificate

issued to the applicant or that any restrictions so imposed should be deleted or varied, he shall issue to the applicant, a revised medical fitness certificate and the former certificate shall thereupon cease to have effect and in any other case, he shall notify the applicant of his decision.

(7) Action by the medical referee under sub-regulation (5) or (6) shall be taken not later than two months from the date on which the application for review is submitted to the Director or if the Director so directs, the Registrar, who shall notify the medical referee of the date, or within such longer period as the Director may determine

## **11. RECORDS.**

Any approved medical practitioner who conducts a medical examination in accordance with these Regulations shall

- (a) make a report in the form set out in the Fifth Schedule of each such medical examination; and
- (b) retain a record of each report of the medical examination for a period of six years.

## **12. INSPECTION AND DETENTION OF SAINT CHRISTOPHER AND NEVIS SHIP.**

(1) An authorised person or surveyor may inspect any Saint Christopher and Nevis ship to which these Regulations apply and may detain the ship where upon inspection the authorised person or surveyor is satisfied that

- (a) any seafarer whose employer is required by regulation 4 to ensure that he is the holder of a medical fitness certificate is unable to produce such a certificate; and
- (b) the state of his health is such that the ship could not sail without serious risk to the safety and health of those on board.

(2) The authorised person or surveyor shall not in the exercise of these powers detain or delay the ship unreasonably.

## **13. INSPECTION AND DETENTION OF FOREIGN SHIP.**

(1) An authorised person or surveyor duly authorized by the Director may inspect any foreign ship to which these Regulations apply when the ship is in a Saint Christopher and Nevis port, and where he is satisfied that any seafarer is unable to produce a valid medical fitness certificate he may

- (a) send a report to the Director
- (b) subject to sub-regulation (2), where he is satisfied that conditions onboard are hazardous to safety or health
  - (i) take such measures as are necessary to rectify those conditions; and
  - (ii) detain the ship.

(2) Measures referred to in sub-regulation (1)(b) may be taken only when the ship has called at a Saint Christopher and Nevis port in the normal course of business or for operational reasons.

(3) Where an authorised person or surveyor takes either of the measures specified in sub-regulation (1)(b), on receipt of his report, the Director, shall forthwith notify the nearest maritime, consular or diplomatic representative of the flag state of the ship and send a copy of the report to the Director General of the International Labour Office and the Secretary General of the International Maritime Organisation.

(4) Sections 436 and 437 of the Act shall have effect in relation to a ship detained under these Regulations.

#### **14. PENALTIES.**

(1) An employer who contravenes regulation 4 shall be guilty of an offence and liable to a fine not exceeding Level 3 on the standard scale of fines as set out under the Merchant Shipping Act, Cap 7.05, section 452 (4).

(2) In any proceedings for an offence under these Regulations it shall be a defence for the employer to show that all reasonable steps had been taken by him to ensure compliance with the Regulations.

### **FIRST SCHEDULE**

*(Regulation 5(2))*

#### **MEDICAL AND EYESIGHT STANDARDS FOR SEAFARERS**

##### **PART I**

##### **GENERAL**

##### **Introduction**

1.1.1 The medical and eyesight standards are framed to provide the maximum flexibility in their interpretation compatible with ensuring the health of the individual seafarer and maintaining the safety of ships at sea.

1.1.2 It is clearly not possible to cover every condition within the specified standards. As a general principle the medical examiner should be satisfied in each case that no disease or defect is present which could either be aggravated by working at sea or represent an unacceptable health risk to the individual seafarer, other crew members or the safety of the ship.

1.1.3 Apart from the purely medical aspects, the occupational circumstances which apply at sea should be fully considered, especially in any borderline case. Particular factors to be taken into account are:

- .1 the potentially hazardous nature of seafaring, which calls for a high standard of health and continuing fitness;
- .2 the restricted medical facilities likely to be available on board ship; few ships carry doctors, medical supplies are limited, and there will be a delay before full medical treatment is available;
- .3 the possible difficulty of providing/replacing required medication; as a general rule a seafarer should not be accepted if the loss of a necessary medicine could precipitate the rapid deterioration of a condition;

- .4 the confined nature of life on board ship and the need to be able to live and work in a closed community;
- .5 the limited crew complements which mean that illness of one crew member may place a burden on others or impair the safe and efficient working of the ship;
- .6 the potential need for crew members to play a role in an emergency drill, which may involve strenuous activity in adverse conditions;
- .7 since many seafarers will need to join and leave ships by air, they should be free from any condition which precludes air travel or could be seriously affected by it, such as pneumothorax or conditions which predispose to barotrauma.

1.1.4 Seafarers attending a medical examination should produce personal identification. The examining doctor should be satisfied that no condition is present which is likely to lead to problems during voyages and no treatment is being followed which might cause adverse side effects. It would be unsafe practice to allow a seafarer to go to sea with any known medical condition where there was the possibility of serious exacerbation requiring expert treatment. Where medication is acceptable for seafarers, the individual seafarer should arrange for a reserve stock of the prescribed drugs to be held in a safe place, with the agreement of the ship's Master.

#### **Frequency of Medical Examination**

- 1.2.1 Seafarers below the age of 18 are required to have a yearly medical examination.
- 1.2.2 Seafarers aged 18 and over are required to be examined at intervals not exceeding two years.
- 1.2.3 Seafarers serving on bulk chemical carriers are required to have medical examinations, which may include blood tests, at yearly or more frequent intervals, according to the nature of the cargo.
- 1.2.4 Seafarers who, while holding a valid medical certificate suffer a condition covered by this Schedule which precludes seafaring, should arrange for an additional approved medical examination as soon as possible after diagnosis, and revised certification should be issued. It is also the seafarer's responsibility to reveal to the examining doctor if he or she has been issued with a certificate indicating that he or she has failed a medical examination by an approved medical practitioner.

#### **Period of Validity of Medical Certificates**

1.3.1 In line with paragraph 2, the period of validity must be entered on the certificate according to the following maximum periods:

- .1 seafarers under 18 years of age - one year
- .2 seafarers 18 years and over - two years.

1.3.2 Medical surveillance is important in maintaining the health of the seafarer. This is particularly so after an illness or accident ashore involving a condition covered by this Schedule and lasting for a month or more.

#### **Categories of Medical Fitness**

1.4.1 The following categories are applied in assessing whether or not the seafarer is fit in terms of the medical and visual standards:

- .1 The seafarer may be assessed as fit:
  - (a) A for unrestricted sea service
  - (b) A(T) for unrestricted service, subject to medical surveillance
  - (c) B for restricted service only, with the restriction being clearly specified on the medical report.
- .2 The seafarer may be assessed as not fit:
  - (a) C temporarily: review in four weeks
  - (b) D indefinitely: review in six months
  - (c) E permanently

1.4.2 Category A(T) may be used where a seafarer can be considered fit for all shipping trades, geographical areas, types of ships or jobs but where medical surveillance is required at intervals. The medical certificate should be validated only for the appropriate period which should take into account the expected duration of the tour of duty. Approved medical practitioner should make full use of the categories B, C, and D before declaring a serving seafarer permanently unfit.

1.4.3 It is the responsibility of the employer, or those authorised to act on his behalf, to ensure that the category recommended by the approved medical practitioner is taken fully into account when the engagement or the continued employment of a seafarer is under consideration.

1.4.4 It may be necessary, with the seafarer's consent, for the approved medical practitioner to consult the seafarer's doctor. When it is necessary to consult with other doctors the usual ethical considerations apply, but the decision on fitness in accordance with the required standard rests with the approved medical practitioner, subject to the medical appeal procedure.

1.4.5 Full clinical notes should be kept of any detailed medical examination. All sections of the approved report form (Fifth Schedule) should be completed.

### **Restricted Service**

1.5 Restricted service means that the seafarer's employment is restricted to certain shipping trades, geographical areas, types of ships or jobs for such period of time as may be stipulated by the approved doctor. The type of restriction and the length of time it will operate should be made clear. Restriction to ferry and coastal work, for example, might be applied to seafarers who are physically and mentally fit for their duties but who require medical treatment or review at frequent intervals.

### **Permanent Unfitness**

1.6 In a serving seafarer, a decision of permanent unfitness should be reached only after a full investigation and consideration of the case and should be fully discussed with the seafarer.

### **Medical Appeals**

1.7.1 All seafarers who have served on a Saint Christopher and Nevis ship and been found permanently unfit or fit only for restricted service have a right of appeal to an independent Medical Referee appointed by the Director. There is no right of appeal for new entrants at

their first examination. Wherever possible, Medical Referees should be assisted by the disclosure, in confidence, of any necessary medical information.

1.7.2 Medical Referees are empowered, while working to the same standards:

- .1 to ensure that the diagnosis has been established beyond reasonable doubt, in accordance with the medical evidence on which the approved doctor reached his decision and, normally with the assistance of a report from a Consultant in the appropriate speciality;
- .2 to determine whether the standards have been properly interpreted; and
- .3 to consider the possibility of a seafarer previously declared permanently unfit, returning to sea.

1.7.3 In cases not covered by the medical standards or in Category “E” cases where exceptional medical considerations apply, the Medical Referee should decide an appropriate disposal after consultation with the approved doctor involved and consideration of all the evidence presented to him.

## **PART II — MEDICAL STANDARDS**

### **2.1 Infectious Diseases**

2.1.1 *Gastro-Intestinal Infectious Diseases* -until satisfactorily treated - C. Special care should be taken in respect of catering staff.

2.1.2 *Other Infectious or Contagious Diseases* until satisfactorily treated - C.

2.1.3 *Active Pulmonary Tuberculosis.*

- 1 When the examining doctor is satisfied, on the advice of a chest physician, that the lesion is fully healed and that the patient has completed a full course of chemotherapy, then re-entry should be considered. In such cases, Category “A(T)” would be appropriate initially to allow for adequate surveillance.
- .2 Cases where either one or both lungs have been seriously affected are rarely suitable for re-employment. All relapsed cases should be E.

2.1.4 *Sexually Transmissible Diseases*

- .1 All cases of acute infection or while under treatment - C. Cases under surveillance having finished treatment will usually be fit for normal service but restricted service may be necessary if facilities for supervision are inadequate. In all cases evidence of satisfactory tests of cure should be produced.

2.1.5 *AIDS* related complex and clinical AIDS - All confirmed cases - E.

### **2.2 Malignant Neoplasms**

2.2.1 *Malignant Neoplasms* - including Lymphoma, Leukemia and similar conditions.

2.2.2 Each case should be graded on diagnosis - D. Later progression to Categories A, A(T), B or C should be dependent on assessment of progress, prognosis, measure of disability and the need for surveillance following treatment. No unrestricted category A grading should be given within 5 years of completion of treatment, except in cases of skin cancer.

### 2.3 Endocrine and Metabolic Diseases

- 2.3.1 Serving seafarers developing *thyroid disease* - for investigation - C, then A, A (T), B or C on case assessment.
- 2.3.2 All other cases of *endocrine disease* in serving seafarers - for investigation - C upon which assessment will depend.
- 2.3.3 *Diabetes Mellitus* -
- .1 all cases requiring insulin - E;
  - .2 serving seafarers whose diabetes is controlled by food restriction; an initial period of 6 months should be allowed to achieve stabilization - D. Thereafter, to be subject to medical review at appropriate intervals. The current treatment regimen should be confirmed with the general practitioner at each review. A (T);
  - .3 serving seafarers requiring hypoglycemic agents: an initial period of 6 months should be allowed to achieve stabilization - D. Thereafter, in the absence of any complication, service may be considered subject to 6 monthly medical reviews and assessment for suitable job and sea trade. A (T) on assessment.
- 2.3.4 *Obesity* - A general degree of obesity, with or without complications, and adversely affecting exercise tolerance, mobility and general health - C for treatment.

Refractory or relapsing cases - E.

*Note:* When a body mass index (BMI - weight in kg/height in m<sup>2</sup>) is 30 or over, it is especially important to take into account other existing risk factors for mobility and mortality.

### 2.4 Diseases of the Blood and Blood Forming Organs

- 2.4.1 There should not be any significant disease of the haemopoetic system.
- 2.4.2 *Unexplained or symptomatic anaemia* - C, then A, A(T), B or E on case assessment.

### 2.5 Mental Disorders

- 2.5.1 *Acute Psychosis*, - whether organic, schizophrenic, manic depressive or any other psychosis listed in the International Classification of Diseases - E.
- 2.5.2 *Alcohol Abuse (Dependency)* - where persistent and affecting health by causing physical or behavioural disorder - E.

#### 2.5.3 *Drug Dependence*

- .1 A history of abuse of drugs or substances within the last 5 years - E.
- .2 *Neurosis* - e.g. - Anxiety state, depression, or any other mental disorder likely to impair safe performance at sea - C, for assessment Chronic or recurrent - E.

### 2.6 Diseases of the Nervous System and Sense Organs

- 2.6.1 .1 *Organic Nervous Disease* - especially those conditions causing defect of muscular power, balance, mobility and co-ordination - E
- .2 Some minor localized disorders not causing symptoms of incapacity and unlikely to progress, may be - A.

### 2.6.2 *Epilepsy*

- .1 Any type of epilepsy since the age of 5 years - E.
- .2 A single fit in a serving seafarer - C for investigation. Then, providing that the post medical history is clear and investigation has shown no abnormality; re-entry can be considered after 1 year without seizure without treatment or after 1 year without seizure following the cessation of treatment.
- .3 Serving seafarers who have had cranial surgery or significant traumatic brain damage - D for 12 months - then A, B or E on case assessment.

2.6.3 *Migraine* - slight infrequent attacks responding quickly to treatment - A. Frequent attacks causing incapacity - E.

2.6.4 *Syncope or Other Disturbances of Consciousness* for assessment - C. Recurrent attacks with complete or partial loss of consciousness - E.

2.6.5 *Meniere's Disease* - E.

## 2.7 **Cardiovascular System**

2.7.1 The Cardiovascular System should be free from acute or chronic disease causing significant disability.

- .1 *Valvular disease* - causing significant impairment or having required surgery - E.
- .2 Satisfactorily treated *patent ductus arteriosus or arterial septal defect* could be accepted.

### 2.7.2 *Hypertension*

- .1 All cases for investigation - C.
- .2 Serving seafarers with hypertension whose blood pressure can be maintained below 170/100mm by dietary control - A (T) for annual assessment.
- .3 Serving seafarers whose blood pressure can be maintained below 170/100mm by anti hypertension therapy without significant side effect B A(T) to allow for health surveillance and to ensure that arrangements have been made for continuation of treatment.
- .4 All other cases - E.

### 2.7.3 *Ischaemic Heart Disease*

- .1 A history of Coronary Thrombosis Myocardial infraction - E.
- .2 Confirmed Angina - E.

### 2.7.4 *Other Cardiovascular Disorders*

Any clinically significant abnormality of rate or rhythm or disorder of conduction - E.

### 2.7.5 *Cerebro-vascular Disease*

- .1 Any cerebro-vascular accident including transient ischaemic attacks - E.
- .2 General cerebral arteriosclerosis including dementia and senility - E.

### 2.7.6 Diseases of Arteries

A history of *intermittent claudication* - including any case where vascular surgery was required - E.

### 2.7.7 Disease of Veins

- .1 *Varicose Veins* B slight degree - A. Moderate degree without symptoms or oedema may be A, but with symptoms - C for treatment. Recurrent after operation, with symptoms - D for further surgical opinion or, where not suitable for further treatment - E.
- .2 *Chronic varicose ulceration* - E. Thin unhealthy scars of healed ulcers or unhealthy skin of varicose eczema - E.
- .3 Recurrent or persistent *deep vein thrombosis* or *thrombophlebitis* - E.
- .4 *Haemorrhoids* -not prolapsed, bleeding or causing symptoms - A. Other cases should be C until satisfactory treatment has been obtained.
- .5 *Varicocoele* - symptomless - A. With symptoms - D for surgical opinion.

## 2.8 Respiratory System

The respiratory system should be free from acute or chronic disease causing significant disability.

- 2.8.1 *Acute Sinusitis* - until resolved - C.
- 2.8.2 *Chronic Sinusitis* - where disabling and frequently relapsing despite treatment - E.
- 2.8.3 *Nasal Obstruction*, septal abnormality or polypus - until satisfactorily treated - C.
- 2.8.4 *Throat Infections* - a history of frequent sore throats or unhealthy tonsils with adenitis - until satisfactorily treated - C.
- 2.8.5 *Chronic Bronchitis or Emphysema* - class depends on severity. Mild uncomplicated cases with good exercise tolerance may be - A, but cases with recurrent illness causing significant disability in relation to the job should be - E.
- 2.8.6 *Bronchial Asthma* - C, for investigation. Where confirmed - E subject to consideration of exceptions as follows -
  - .1 a history of bronchial asthma resolving, without recurrence, before the age of 16 may be disregarded.
  - .2 Well controlled asthma (confirmed by investigation and appropriate supporting evidence) treated with inhaled medication only and without a history of exacerbation requiring hospital admission or oral steroids, and subject to suitable follow up - A (T) or E.
- 2.8.7 *Occupational Asthma* to avoid the allergen - B.
- 2.8.8 *Pneumothorax* - All cases to be classified - D for at least 12 months. With recurrences - E.

## 2.9 DISEASE OF THE DIGESTIVE SYSTEM

### 2.9.1 Diseases of the Oral Cavity

- .1 *Mouth or gum infection* until satisfactorily treated - C.
- .2 *Dental defects* - until satisfactorily treated - C. Seafarers should be dentally fit.

### 2.9.2 Diseases of the Oesophagus, Stomach and Duodenum

- .1.1 *Peptic Ulceration* - for investigation - C.
- .1.2 Cases of proven ulceration should not return to seafaring until they are free from symptoms. There should also be evidence of healing on gastroscopy and the seafarer should have been on an ordinary diet, without treatment, for at least 3 months - A (T).
- .1.3 Where there has been gastro-intestinal bleeding, perforation or recurrent peptic ulceration, in spite of maintenance H2 blocker treatment, or an unsatisfactory operation result - normally E.
- .2 *Recurrent attacks of Appendicitis* - pending surgical removal - C.
- .3 *Non-Infective Enteritis and Colitis* -severe or recurrent or requiring special diet - E.
- .4 *Intestinal Stoma* - E.

### 2.9.3 Diseases of the Liver and Pancreas

- .1 *Cirrhosis of the Liver* - for investigation - C, then where condition is serious or progressive or where complications such as oesophageal varices or ascites are present - E.
- .2 *Biliary Tract Diseases* - after complete surgical cure - A or A(T) on case assessment.
- .3 *Pancreatitis* - recurrent pancreatitis and all cases where alcohol is an aetiological factor - E.

## 2.10 Diseases of the Genito-urinary System

- 2.10.1 All cases of *proteinuria*, *glycosuria* or other urinary abnormalities should be referred for investigation.
- 2.10.2 *Acute Nephritis* - until resolved - C.
- 2.10.3 *Subacute or Chronic Nephritis or Nephrosis* - for investigation - C, then B or E on case assessment.
- 2.10.4 *Acute urinary infection* - until satisfactorily treated - C. Recurrent cases - B unless full investigation has proved satisfactory.
- 2.10.5 *Renal or Ureteric Calculus* - for investigation and any necessary treatment - C. An isolated attack of renal colic with passage of small calculus may be - A after a period of observation, provided urine and renal function remain normal and there is no clinical and radiological evidence of other calculi. Recurrent stone formation - E.

- 2.10.6 *Urinary Obstruction* B from any cause for investigation - D, where not remediable - E.
- 2.10.7 *Removal of Kidney* - in serving seafarers, provided remaining kidney is healthy with normal function - A(T). Such cases may be unsuitable for service in the tropics or other conditions of high temperature, in which case - B.
- 2.10.8 *Renal Transplant* - E.
- 2.10.9 *Incontinence of Urine* for investigation - C. Where irremediable - E.
- 2.10.10 *Enlarged Prostate* for investigation - C.
- 2.10.11 *Hydrocoele* - Small and symptomless - A. Large or recurrent - C or, where untreated - E.
- 2.10.12 *Abnormality of the Primary and Secondary Sexual Characteristics* for investigation - C, upon which final assessment will depend.
- 2.11 **Obstetrical and Gynaecological Conditions**
- 2.11.1 There should be no persistent gynaecological disorder or disease affect working capacity at sea.
- 2.11.2 *Pregnancy*
- .2.1 The doctor should discuss with the seafarer the implications of continuing to work at sea, particularly if it is a first pregnancy.
- .2.2 A seafarer with a normal pregnancy before the 28<sup>th</sup> week may be permitted to work on short haul trips or a long haul trip on a vessel carrying a doctor - to allow for ante-natal care -B.
- .2.3 Employment shall not be permitted after the 28<sup>th</sup> week of pregnancy until at least 6 weeks after delivery.
- 2.11.3 *Abnormal Pregnancy*, on diagnosis - D.
- 2.12 **Skin**
- Special care is required in passing fit for care in the tropics where there is a history of skin trouble. Catering staff in particular should have no focus of skin sepsis.
- Any condition liable to be aggravated by heat, sea air, oil, caustics or detergents or specific occupational allergens may be - A(T), B, C, D or E on case assessment.
- 2.12.1 *Infections of Skin*
- .1 until satisfactorily treated C.
- .2 *Acne* - Most cases A, but severe pustular cystic acne - E.
- 2.12.2 *Other Inflammatory Skin Conditions*
- .1 *Atopic Dermatitis* and Related Conditions until satisfactorily treated - C.
- .2 *Contact Dermatitis*. Refer for dermatological opinion - C.
- .3 *Acute Eczema*. No seafarer should return to duty until skin is healthy - C.
- .4 *Recurrent Eczema* of more than minimal extent - E.

- .5 *Psoriasis* B Most cases can be - A, but some widespread or ulcerated cases should be - C for treatment. Severe cases resistant to treatment, frequently relapsing or associated with joint disease - E.

### 2.13 **Musculo-skeletal System**

It is essential that seafarers should not have any defect of the musculo-skeletal system which might interfere with the discharge of their duties; muscular power, balance, mobility and co-ordination should be unimpaired.

#### 2.13.1 *Osteo-arthritis* for assessment - C.

Advanced cases where disability is present - E.

#### 2.13.2 *Limb prosthesis* normally would not be acceptable.

#### 2.13.3 *Back Pain* - recurrent incapacitating back pain - E.

#### 2.13.4 *Hernia*

.1 *Hernia* until repaired - C.

.2 *Diaphragmatic Hernia* - to be assessed according to the disability.

### 2.14 **Speech Defects**

#### 2.14.1 Where likely to interfere with communication - E.

### 2.15 **Hearing**

#### 2.15.1 *Acute and Chronic Otitis Externa* - C. Should be completely healed before returning to sea. Care is required for passing fit for tropics.

#### 2.15.2 *Acute Otitis Media* - C. Until satisfactorily treated.

#### 2.15.3 *Chronic Otitis Media* - C. May become A or B after satisfactory treatment or surgery. Special care is required in passing fit for tropics, where air travel is required, or where the job requires food handling.

#### 2.15.4 *Loss of Hearing* - A degree of impairment sufficient to interfere with communication - E.

#### 2.15.5 *Unilateral Complete Loss of Hearing* in serving seafarers - assessment of this condition should be considered in relation to the job.

#### 2.15.6 A serving seafarer in whom impaired hearing acuity is found should be referred for full investigation by an ENT surgeon.

#### 2.15.7 .1 *Hearing Aids*. The use of a satisfactory hearing aid at work by certain catering department personnel could be considered where not hearing an instruction would not result in a danger to the seafarer or others. The hearing aid should be sufficiently effective to allow communication at normal conversational tones.

.2 The use of a hearing aid by those working in, or associated with, the deck or engine room departments, including electricians and radio officers, should not be permitted.

### PART III - EYESIGHT STANDARDS

- 3.1 No person should be accepted for training or sea service where any irremediable morbid condition of either eye, or the lids of either eye, is present and liable to risk of aggravation or recurrence.
- 3.2 Binocular vision is necessary for all categories of seafarers. However, monocular seafarers serving and those who become monocular in service and meet the required standard should be allowed to continue at sea.
- 3.3 In all cases where visual aids, spectacles or contact lenses, are required for the efficient performance of duties, a spare pair must be carried while seafaring. Where different visual aids are used for distant and near vision, a spare pair of each must be carried.
- 3.4 Colour Vision for deck officers and ratings is tested with Ishihara plates; using the introductory plate and all the transformation and vanishing plates. Candidates who fail the Ishihara colour plate test may ask for their colour vision to be re-tested using a Holmes Wright B lantern at a nominated centre. For engineer and radio department personnel colour vision is tested using either Ishihara plates (as for deck department) or Farnsworth D15 test or City University test.

**Table**

Category of seafarer	Basic Visual Acuity Standard - unaided		Higher visual acuity - standard - aided if necessary		Near	Colour	Visual Field
Deck or dual career	Better eye 6/60	Other eye 6/60	Better eye 6/6	Other eye 6/12	N8	Ishihara or Lantern 2 miles	No pathological field defect
Engineer / Radio	6/60		6/18	6/18	N8	Ishihara or Farnsworth D15 or City University	Sufficient to undertake duties efficiently
Others	Sufficient to undertake duties efficiently						
Those who become monocular in service with no evidence of progressive eye disease in the remaining eye							
Deck	6/60	-	6/6	-	N8	Ishihara or Lantern 2 miles	No pathological field defect
Engineer / Radio	6/60	-	6/9	0	N8	Ishihara or Farnsworth D15 or City University	Sufficient to undertake duties efficiently
Others	Sufficient to undertake duties efficiently						
There should be a sufficient period of adaptation after becoming monocular to enable stairs to be descended rapidly and safely.							

## Notes

1. No diplopia, congenital night blindness, retinitis pigmentosa or any other serious or progressive eye disease is permitted.
2. Where bifocal glasses are worn there should be a period of adaptation first because of the risk of falls.
3. Where glasses or contact lenses are needed to meet the higher standard, a spare pair (distance and near vision if necessary) should be carried.
4. Aids to colour vision, e.g. Red-tinted, x-chroma, chromas lenses and chromagen lenses are not permitted.
5. Seafarers who suffer pathological field defects (i.e. not new entrants, deck officers and monocular seafarers) should have a field of vision at least 120 degrees in the horizontal measured by the Goldman perimeter using the iii/4 setting (equivalent perimetry) in addition there should be no significant defect in the binocular field which encroaches within 20 degrees of fixation above or below the meridian. Homonymous or bi temporal defects which come close to fixation where hemianopic or quadrantopic are not accepted.
6. Where the vision standard in this Schedule is marginally higher than the previous standard, seafarers in service before the date of publication of this Schedule may continue to be assessed according to the old standard, to ensure that serving seafarers are not penalised. This means that the following standards may continue to apply for seafarers already in service:
  - .1 deck department personnel required to operate lifting plant: 6/9 for the better eye (as opposed to the new standard of 6/6) for aided visual acuity;
  - .2 deck department personnel not required to perform lookout duties or to operate lifting plant: 6/18 for the better eye (as opposed to the new standard of 6/6) for aided visual acuity;
  - .3 engineers: 6/60 for the other eye (As opposed to the new standard of 6/18) for aided visual acuity.

**SECOND SCHEDULE**

**FORM OF MEDICAL FITNESS CERTIFICATE**

*(Regulation 5(2))*

**MEDICAL FITNESS CERTIFICATE**

**ISSUED UNDER THE MERCHANT SHIPPING (MEDICAL EXAMINATION) REGULATIONS, 2011**

Seafarer's Name .....

Seafarers Number .....

Date of expiry of this Certificate (dd/mm/yy) .....

*This certificate is valid for 12 months, from date of issue, for seafarers below the age of 18 and for 24 months for seafarers over 18 years of age.*

I certify that I have examined the seafarer named above to the Medical and Visual Standards for Seafarers as contained in the First Schedule of the above-named Regulations and have found \*him/her fit for seafaring subject to the following restrictions: \*Delete as appropriate

Restrictions:

Official Stamp

Signed .....

Name .....

(An approved medical practitioner)

Date of Examination (dd/mm/yyyy) .....

The original or certified copy of the physical report must accompany an application for a Seafarers Document/Certificate. A duplicate copy clearly labelled 'certified copy' on its face and initialled by the examining Medical Doctor must be maintained by the applicant as evidence of physical qualification while serving on board a vessel.

**THIRD SCHEDULE**

**FORM OF NOTICE OF FAILURE TO MEET MEDICAL FITNESS STANDARDS FOR SEAFARERS**

*(Regulation 5(3))*

**NOTICE OF FAILURE TO MEET MEDICAL FITNESS STANDARDS FOR SEAFARERS**

TO:

Full Name..... Seafarers Number.....

I have examined you in accordance with the standards of fitness for seafarers, as contained in the First Schedule for the Merchant Shipping (Medical Examination) Regulations 2011, and found that you are -

- † \* A(T) Fit for full range of duties but for restricted period only
- † \* B Fit for restricted service only
- † C Temporarily unfit for service: For review in .....(max. four) weeks.
- † D Indefinitely unfit for sea service. For review in .....(max. six) months.
- † E Permanently unfit for service

For the following reasons: .....  
.....  
.....

Official Stamp

Signed .....

Name .....

(An approved medical practitioner)

Date of Examination (dd/mm/yyyy) .....

\* *Restrictions, where applicable, are to be detailed in the Medical Fitness Certificate*  
† *delete whichever is not applicable*

*Note: Any application for review of the above decision must be lodged in writing on the prescribed form within one month of the date of the examination to Director or if the Director so directs, the Registrar.*

**FOURTH SCHEDULE**

**FORM OF APPLICATION FOR REVIEW OF DECISION**

*(Regulation 10(2))*

**APPLICATION FOR REVIEW OF DECISION TO:**

- \*Refuse to issue a Medical Certificate
  - \*Impose Restriction on Medical Certificate
  - \*Suspend or Cancel Medical Certificate
- (Delete whichever is inapplicable)*

I hereby apply for a review of the above decision and request that arrangements be made for me to be examined by an independent medical referee.

I agree that a report of my case may be submitted to the medical referee by the medical practitioner concerned.

I understand that I am entitled to present any medical evidence available to me in support of my case and agree to any medical report prepared by the examining doctor being made available to the medical referee.

Signed.....  
(Name in block letters)

Address.....Telephone No.....

**NOTE.** *Before lodging an appeal you are advised to consult your usual medical practitioner and, should you wish to submit medical evidence in support of the appeal, you should arrange for this to be sent to the medical referee before the appointment date.*

*You will be advised of the name and address of the referee and the date for your appointment as soon as this has been arranged*

## FIFTH SCHEDULE

## FORM OF REPORT OF MEDICAL EXAMINATION

(Regulation 11(a))

**PHYSICAL EXAMINATION REPORT** (This Report comprises 2 pages)

PLEASE COMPLETE CLEARLY IN CAPITAL LETTERS IN BLACK INK OR BY USE OF A TYPEWRITER

<b>Last Name of Applicant:</b>		<b>First Name of Applicant:</b>		<b>Middle Initial:</b>	
<b>Seafarers Number (if assigned)</b>					
<b>Date of Birth:</b>			<b>Place of Birth:</b>		<b>Sex:</b>
<i>Month            Day            Year</i>			<i>City            Country</i>		<input type="checkbox"/> : Male
					<input type="checkbox"/> : Female
<b>Examination for Duty As:</b>			<b>Mailing Address of Applicant:</b>		
<input type="checkbox"/> : Master <input type="checkbox"/> : Radio Officer <input type="checkbox"/> : Mate <input type="checkbox"/> : Rating <input type="checkbox"/> : Engineer					
<b>MEDICAL EXAMINATION</b>					
<b>Height:</b>	<b>Weight:</b>	<b>Blood Pressure:</b>	<b>Pulse:</b>	<b>Respiration:</b>	<b>General Appearance:</b>
<b>Vision:</b>	<b>Right Eye:</b>	<b>Left Eye:</b>	<b>Hearing:</b>		
With Glasses					
Without Glasses			<i>Right Ear</i>	<i>Left Ear</i>	
<b>Colour Test Type:</b> <input type="checkbox"/> : Book <input type="checkbox"/> : Lantern			<b>Check if Colour Test is Normal:</b> Yellow__Red__Green__Blue		
<b>Head and Neck:</b>			<b>Heart (Cardiovascular):</b>		
<b>Lungs:</b>			<b>Speech</b> (Is speech unimpaired for normal voice communication?)		
<b>Extremities:</b>					
<i>Upper</i>			<i>Lower</i>		
Is applicant suffering from any disease likely to be aggravated by, or to render him/her unfit for service at sea or likely to endanger the health of other persons on board? (Give further details overleaf if necessary):					

This is to certify that a physical examination was given to:    Name of Applicant

The Shipping (Medical Examination) Regulations have been/have not been\* met and a Medical Certificate has/has not\* been issued.

Delete as appropriate and tick box below

A Unrestricted sea service [ ] A(T) Unrestricted sea service, subject to medical supervision [ ]  
B Restrictive Service only [ ]

Details of any Restriction .....

.....  
Period of restriction

- C. Temporarily [ ] (Review in ..... (max. four) weeks)
- D. Indefinitely [ ] (Review in .....(max. six ) months)
- E. Permanently [ ]

Name and Degree of Medical Doctor .....

Address .....

Name of Medical Doctor's Certifying Authority .....

Date of Issue of Medical Doctor's Certificate .....

Signature of Medical Doctor .....

..... Date .....

Signature of Applicant

.....  
Date of Application

*The signature should be affixed in the presence of the examining Medical Doctor and signed without touching any of the box lines.*

**Remarks to or further details of Medical Examination:**

(to be completed by examining Medical Doctor)

.....

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.....

.....

Made this 13<sup>th</sup> day of April 2012.

**RICHARD SKERRITT**  
*Minister responsible for Civil Aviation*