



HEALTH DECLARATION FORM / COVID-19 for diving

Read this statement prior to signing it. You must complete this additional medical questionnaire to enrol in a diver training program or to participate in any diving activity. 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 dive. Please answer the following question with a 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.

1. Have you been diagnosed with COVID-19?

YES

NO

If the answer is "YES": Hospitalisation? Moderately symptomatic? Oligosymptomatic? Asymptomatic?

2. When did you vaccinated for COVID-19?

DATE :

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 Liamis Dive Centre about any symptom that may arrive after having filled in this Declaration and/or having come into contact with someone who has tested positive after signing the declaration.

ADDITIONAL DECLARATIONS / COVID-19

- I WILL, if asked, wear a protective mask at all times while participating in the diving training / activities arranged by Liamis Dive Centre, and will take all reasonable preventive steps that may be recommended by, or any relevant public authority.
- I WILL accept and observe all instructions by Liamis Dive Centre 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.
- I ACKNOWLEDGE and ACCEPT that this declaration will be considered as my consent to Liamis Dive Centre to retain this declaration and disclose it to any relevant authority or service provider for the purposes of ensuring the safety of any third parties that may come in contact with me prior to, during, and after any diving activity.

Full name _____

Date _____

Guardian's full name _____

Date _____

Signature _____

Signature _____

MEDICAL RECOMMENDATIONS:

- Divers who have tested positive with COVID-19 but have remained completely **asymptomatic**, should wait **1 month** before resuming diving.
- Divers who have had **symptomatic** COVID-19, should wait at least **3 months** before applying for fit-to-dive clearance conducted by a diving medical specialist.
- Divers who have been **hospitalised** with or because of pulmonary symptoms in relation to COVID-19, should wait at least **6 months** before applying for fit-to-dive clearance conducted by a diving medical specialist, with complete pulmonary function testing as well as a high-resolution CT scanning of the lungs.
- Divers who have been hospitalised with or because of cardiac problems in relation of COVID-19, should wait at least 6 months before applying for fit-to-dive clearance conducted by a diving medical specialist, with cardiac evaluation, including echocardiography and exercise test.
- Divers should consider a waiting period of **minimum 7 days** after each dose of COVID-19 vaccine, before engaging in compressed-gas or breath-hold diving activities.