

Medical Fitness Certificate - MED2

This medical certificate is required for applicants who are working on commercially operated vessels including passenger vessels, on either inland waters or territorial waters.

Personal Details:

Name:	AE ID No.:	Mob. No.:
Nationality:	Date of Birth:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F
Address/Company Name:		

Occupation:

<input type="checkbox"/> Vessel Master/Mate	<input type="checkbox"/> Abra Operator	<input type="checkbox"/> Marine Surveyor
<input type="checkbox"/> Fishing Boat Operator	<input type="checkbox"/> Engine Operator	<input type="checkbox"/> Marine Trainer
<input type="checkbox"/> Powerboat Operator	<input type="checkbox"/> Seaman	<input type="checkbox"/> Marine Pilot

Assessment:

I confirmed the following has been assessed and meets the standards in **STCW A-1/9** (tick the relevant box)

Visual Acuity: <input type="checkbox"/> Yes <input type="checkbox"/> No	Colour Vision: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of test: / /
Visual Aids: (check if worn) <input type="checkbox"/> Spectacles <input type="checkbox"/> Contact Lens		
Hearing: Meets standards unaided <input type="checkbox"/> Yes <input type="checkbox"/> No If no, meets standards aided <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of test: / /	

I have examined the seafarer above and have found him/her to be free from any medical condition likely to be aggravated by service at sea, or to render the seafarer unfit for such service, or to endanger the health of the other persons on board.

Medical Fitness Category: (check the relevant box)

- Fit** - No limitations or restriction fitness Yes No (see below)
- Fit** - For lookout duties Yes No N/A
- Fit** - Subject to restrictions (details below)

Date of Examination: / /
Expiry Date: (Not more than 5 years from the date of examination) / /
I have read and understood the content of the certificate Applicant Signature:

Doctor's Name & Signature:
Doctor's Official Stamp: (Name, address, telephone no.)