

MEDICAL INFORMATION FORM (MEDIF)
 (to be completed or obtained from attending physician (PART ONE))
 (Scroll below for guiding principles)



1. Patient's name
 Date of Birth Sex Height Weight
2. Attending physician E-mail
 Telephone (mobile preferred), indicate country and area code Fax
3. Diagnosis (including date of onset of current illness, episode or accident and treatment, specify if contagious)
 Nature and date of any recent and /or relevant surgery
4. Current symptoms and severity
5. Will a 25% to 30% reduction in the ambient partial pressure of oxygen (relative hypoxia) affect the passenger's medical condition?
 (Cabin pressure to be the equivalent of a fast trip to a mountain elevation of 2400 meters [8000 feet] above seal level)? Yes _____ No _____ Not sure _____
6. Additional clinical information
 - a. Anaemia _____ Yes _____ No. If yes, give recent result in grams of haemoglobin
 - b. Psychiatric and seizure disorder _____ Yes _____ No. If yes, see Part 2
 - c. Cardiac condition _____ Yes _____ No. If yes, see Part 2
 - d. Normal bladder control _____ Yes _____ No. If no, give mode of control

 - e. Normal bowel control _____ Yes _____ No. _____
 - f. Respiratory condition _____ Yes _____ No. If yes, see Part 2
 - g. Does the patient use oxygen at home? _____ Yes _____ No. If yes, specify how much _____
 - h. Oxygen needed in the flight? _____ Yes _____ No. If yes, specify __2LPM __ 4LPM ____
 Others _____
7. Escort
 - a. Is the patient fit to travel unaccompanied? _____ Yes _____ No
 - b. If no, would a Meet-and-Assist (provided by the Airline to embark and disembark be sufficient? _____ Yes _____ No
 - c. If no, will the patient have a private escort to take care of his/her needs on board? _____ Yes _____ No
 - d. If yes, who should escort the passenger? _____ Doctor _____ Nurse _____ Other
 - e. If other, is the escort fully capable to attend to all the above needs? _____ Yes _____ No
8. Mobility
 - a. Able to walk without assistance? _____ Yes _____ No
 - b. Wheelchair required for boarding _____ Aircraft _____ to seat
9. Medication list
10. Other medical information

MEDICAL INFORMATION FORM (MEDIF)

(to be completed or obtained from attending physician (PART TWO))



1. Cardiac Condition

- a. Angina Yes No When was last episode?
- Is the condition stable? Yes No
 - Functional class of the patient?
 No symptoms Angina with important efforts Angina with light efforts Angina at rest
 - Can the patient walk 100 meters at the normal pace or climb 10-12 stairs without symptoms Yes No
- b. Myocardial infraction Yes No. Date
- Complication? Yes No. If yes, give details
 - Stress EKG done? Yes No If yes, what was the result Metz
 - If angioplasty or coronary bypass, can the patient walk 100 metres at the normal pace or climb 10-12 stairs without symptoms? Yes No
- c. Cardiac Failure Yes No. When was last episode?
- Is the patient controlled with medication? Yes No
 - Functional class of the patient? No symptoms Shortness of breath with important efforts
 Shortness of breath at rest
- d. Syncope Yes No. Last episode?
- Investigation? Yes No. If yes, state results

2. Chronic pulmonary condition Yes No

- a. Has the patient had recent arterial gasses? Yes No
- b. Blood gasses were taken on: Room air Oxygen LPM
If yes, what were the results pCO₂ pO₂
Saturation Date of exam
- c. Does the patient retain CO₂? Yes No
- d. Has he/she condition deteriorated recently? Yes No
- e. Can the patient walk 100 meters at a normal pace or climb 10-12 stairs without symptoms? Yes No
- f. Has the patient ever taken a commercial aircraft in these conditions? Yes No
- If yes, when?
 - Did the patient have any problems?

3. Psychiatric conditions Yes No

- a. Is there a possibility that the patient will become agitated during flight? Yes No
- b. Has he/she taken a commercial aircraft before? Yes No
- If yes, date of travel? Did the patient travel alone escorted?

4. Seizure Yes No

- a. What type of seizures?
- b. Frequency of seizures?
- c. When was the last seizure?
- d. Are the seizures controlled by medication? Yes No

5. Prognosis for the trip Good Poor

Physician's Signature _____ Date _____

Note: Cabin attendants are not authorised to give special assistance i.e. (lifting) to particular passengers, to the _____ of their service to other passengers. Additionally, they are trained only in first aid and are not permitted to administer any injection, or give medication.

Important: Fees, if any relevant to the provision of the above information and for canter-provided social equipment are to be paid by the passenger concerned.

PRINCIPLES FOR THE GUIDANCE OF PHYSICIAN

There are certain guiding principles deciding whether or not a person is physically and emotionally fit to travel by air. Although each case will be considered on its own merit by the carrying airline, the following conditions are generally considered:

UNACCEPTABLE for air travel:

- a) Very severe and critical heart conditions, such as: the severely de-compensate cardiac patient or the patient who has sustained a recent coronary occlusion with myocardial infarction. Such cases are normally not eligible within six weeks of the onset and are at discretion of the carrier.
- b) Those patients with entrapped gas, such as a recent pneumothorax, or one who has had air introduced into the nervous system recently for ventriculography.
- c) Psychotic patient requiring heavy sedation or restraint unless attended and special arrangement made. Some carriers will not accept psychotic passengers under any circumstances.
- d) Severe cases of otitis media with blockage of the Eustachian tube.
- e) Acute contagious or communicable disease
- f) Pregnancy beyond the third-second week (on short flights, pregnancy up to the thirty-sixth week is acceptable by some carriers)
- g) Person with contagious repulsive skin conditions.
- h) Recent cases (less than 2 weeks) of haemorrhagic cerebro-vascular accidents, passengers with altered level of consciousness at any time unless special arrangements are made with the carrier.
- i) Persons with large mediastinal obstruction, cardiac disease involving increase pressure, fracture of the skull and those with recent fracture of the mandible with permanent wiring of the jaw.
- j) Recent surgical cases with insufficient time for wound healing.