ADMINISTRATIVE ORDER
No. 2007 – 0025

SUBJECT: Revised Guidelines for Conducting Medical Fitness Examinations for Seafarers

I. RATIONALE

One of the main thrusts of current health sector reforms under FOURmula One (F1) for Health is regulation. The main objective of regulatory reforms is to ensure access to quality and affordable health products, devices, facilities and services, especially those commonly used by the poor.

The Department of Health is currently updating its standards and technical requirements on medical fitness examinations for seafarers to improve and strengthen the quality of its accreditation and monitoring of medical facilities for overseas workers nationwide. This is in line with F1 regulatory reform objectives.

The guidelines contained in this Administrative Order took into account the recommendations made in the 1995 International Conference on STCW, jointly participated by the International Labor Organization (ILO), International Maritime Organization (IMO) and World Health organization (WHO), and was patterned after the first published 1998 ILO/WHO Guidelines on the same. This was also a result of several consultations and reviews made with various stakeholders.

II. OBJECTIVES

With a significant number of medical clinics, hospitals, and individuals attending to the medical certification requirement of seafarers, this Administrative Order aims to:

A. Reduce wide differences in medical requirements and examination procedures; and

B. Provide standards in the conduct of PEME of seafarer candidates and serving seafarers.

III. SCOPE AND COVERAGE

These guidelines are promulgated for the compliance of medical examiners in all DOH accredited medical clinics, hospitals and other facilities that issue medical certificates to seafarers as valid indicators of their fitness to work.
All requirements prescribed in this Order shall apply to all categories of seafarers, including new candidates and serving seafarers, with slight variations explained in the context.

IV. DEFINITION OF TERMS

For purposes of this Order, the following terms and acronyms shall be defined as follows:

1. Accredited Specialists – physicians from different medical specialties or subspecialties who are certified by the corresponding specialty or subspecialty boards.
2. BHFS – acronym for the Bureau of Health Facilities and Services
3. CHD – acronym for the Center for Health Development
4. DOH – acronym for the Department of Health
5. DOH Accredited Medical Clinics – medical clinics with registered licensed physicians authorized to conduct PEME to overseas workers or seafarers
6. Ishihara Test – a commonly used color test chart consisting of a series of plates designed to provide a test for quick and accurate assessment of color vision deficiency
7. Joint Committee – a tripartite committee composed of the DOH, the Maritime Industry Authority, and the Philippine Overseas Employment Agency
8. Manning Agency – commonly referred to as recruitment agency
9. New Candidates – inexperienced seafarers, considered as first-timers who are examined for a seafaring career
10. PEME – acronym for Pre-Employment Medical Examination. It refers to the complete medical examination that is implemented on an applicant as a requirement for screening to determine whether he is physically and mentally fit to work.
11. Pre-Licensure Examinees – seafarers who are required to undergo medical examination as pre-requisite for taking the licensure examination that is administered by the Professional Regulation Commission
12. Principals – employers or ship owners
13. Restricted Service Health Certificate – issuance of limited health certificate by the examining physician, the limitations of which may include a particular trade area, period of time or service (sea duties) on board. The most commonly encountered restriction includes “No navigational duties” for color-deficient seafarers.
14. Revalidation Package – minimum test requirements used to re-assess the continuing fitness of a seafarer issued a FIT PEME Certificate but not deployed within the ninety (90) day period from date of initial PEME.
15. Seafarers – ship officers and ratings that man ships. The following are the categories of seafarers:
   a) Cadets – student learners (deck or engine) performing on-the-job training on board ships;
b) Officers – duly certificated or licensed deck and engine officers
c) Ratings – a ship’s crew other than the Master or Officers performing deck or engine “watch keeping” duties;
d) Service Providers – personnel on board commercial ships who provide services other than those that relate to navigation, marine engineering and other technical jobs;
e) Offshore Workers – personnel deployed in oilrigs, offshore drilling, dredging, production platform, auxiliaries, floating power barges or seismic operations, and other similar contrivance;
f) Fishermen – people directly or personally and physically engaged in taking or culturing and processing fishery or aquatic resources.

16. Serving Seafarers – experienced seafarers, examinees, or returnees to sea duty
17. Snellen Test – a chart imprinted with block letters in gradually decreasing sizes, identified according to distances at which they are ordinarily visible. It is used in testing visual acuity.
18. STCW – acronym for Standards on Training, Certification and Watchkeeping
19. Sufficient Visual Field – a condition of the eye, which renders visual function adequate for seafarer’s duties.

V. GENERAL GUIDELINES

A. The BHFS of the DOH shall exercise the accreditation and regulatory functions for medical clinics, hospitals and other facilities in order for them to be authorized to conduct PEME of seafarers.
B. The BHFS shall be responsible for periodically updating the list of DOH accredited medical clinics and shall make this available to the other members of the Joint Committee.
C. An Adhoc Medical Arbiter or Peer Group Review Committee shall be created for purposes of arbitration by the Secretary of Health, based on the recommendations of the BHFS, and in response to appeals made by seafarers declared Unfit for Sea Duty or Restricted Service by medical examiners. The Peer Group Review Committee shall be comprised of, but not limited to the following: a physician from a selected government specialty center; an accredited specialist in the area of the case under evaluation; and, a physician from a clinic that is active in Maritime Health. The DOH accredited medical clinic shall be required to submit all pertinent medical information and documents to facilitate a comprehensive review of the diagnosis or recommendation. The decision of the Peer Group Review Committee shall be final.
D. All DOH accredited medical clinics shall issue PEME Certificates to the referring manning agencies within the thirty (30) day period from date of initial PEME.
E. Seafarers issued a “pending” or “temporarily unfit for sea duty” certificates may be accommodated for follow-up at the medical clinic beyond the thirty (30) day period if he is issued a referral letter from the manning agency for such purpose.
F. Seafarers issued a Fit PEME Certificate but not deployed within the ninety day (90) period from date of initial PEME must be appropriately referred to the examining clinic for a re-evaluation of his initial FIT PEME Certificate using the minimum revalidation package/ PEME test requirements such as but not limited to the following: history of present illness and complete physical examination, visual acuity, audiometry, routine urinalysis, complete blood count, chest X-ray and dental examination. Additional electrocardiogram, psychometric examinations and other tests may be prescribed by the examining physician only when PEME finding warrants further investigation.

G. Seafarers boarding international vessels shall have a Fit PEME Certificate for every contract of sea duty. For seafarers employed locally and considered as regular employees of domestic shipping companies, an initial PEME following the minimum requirements shall be required. The schedule of subsequent medical examinations shall follow company set policies and related medical guidelines.

H. These guidelines, as well as applicable medical standards by the Maritime Directorate, shall be in effect with or without the concurrence of the host country guidelines.

I. An inspection tool which prescribes the standards, criteria and technical requirements formulated by the DOH for the issuance of certificate of accreditation, shall be utilized and posted at the DOH website www.doh.gov.ph

VI. SPECIFIC GUIDELINES

A. On Medical Examiners

The authority to conduct PEME of seafarers and issue corresponding medical fitness certificate shall only be vested on medical examiners who possess the following requirements:

1. Licensed as physician with experience in general medicine;
2. Duly signed Contract of Service with a DOH accredited medical clinic.

B. On PEME

1. The PEME shall be administered on the following: Seafarers, including cadets, trainees, regular employees of local shipping lines, contractual employees of foreign-owned shipping companies, and pre-licensure examinees.

2. The PEME to be conducted shall, among others, undertake and consider the following procedures and criteria, accordingly:
   a.) Past medical history of the examinee shall be taken. When necessary, previous medical records of each seafarer candidate/ serving seafarer shall be reviewed.
   b.) The current Joint National Committee Recommendation on Prevention, Detection, Evaluation and Treatment of High Blood Pressure shall be used for reference. Minimum PEME test
requirements for seafarers shall follow the Minimum PEME Test Requirements posted at the DOH website www.doh.gov.ph

c.) Distant and near vision, including color perception test (Ishihara Plates), shall form part of the initial and periodic PEME requirements. Test for primary colors shall be considered in case of defective Ishihara result. It shall not impair the seafarer's capability to work provided it is cleared by an accredited eye specialist or low vision specialist. Results of visual acuity shall be expressed in both decimal and Snellen's notation provided in the format of the PEME Fitness Certification for Seafarers posted at the DOH website www.doh.gov.ph

d.) Audiometric exam shall form part of the initial and regular PEME requirements. Hearing acuity shall be measured from 500 Hz to 8000 Hz.

e.) Full clinical notes and results of the laboratory, x-ray, ECG, and other examinations shall be kept along with the form describing the examinee's previous medical history duly signed by the examinee as stated in the Instructions to Accredited Medical Clinics posted at the DOH website www.doh.gov.ph

f.) Physical capabilities required for entry-level seafarers shall be based on shipboard task, function, event or condition as mentioned under Job Requirements and Fitness Standards posted at the DOH website www.doh.gov.ph

g.) In case of crew members of ships in coastal trade, offshore supply vessels, tugboats and barges, the international fitness standard and health requirement of these guidelines may be modified by national maritime authorities, and restricted service health certificates may be issued to the crew members. Nevertheless, the safety of the vessel at sea must be maintained, seafarers' duties must be performed safely, and their health must be safeguarded.

3. Initial and Periodic PEME:

a.) Serving seafarers need a satisfactory standard of continuing good health throughout their career. An applicant shall be excluded at the initial PEME if there is any doubt about his continuing fitness.

b.) Flexibility shall be exercised only during examinations for retention of servicing in employment, particularly in the case of seafarers who have spent many years at sea, gained valuable experience and progressed in their professional careers (captains, mates and chief engineers).

c.) For regular seafarers and employees of domestic shipping companies, allowance shall be made for the inevitable impairment of health that time and chance may bring so that a reasonably fit seafarer can continue at sea until the age of retirement. Nevertheless, firm recommendations have been made in most countries with established Maritime Directorate to exclude persons suffering from significant medical conditions that can render seafarers unfit for sea duty. A list of medical
conditions per System Classification which may render a seafarer unfit are provided under the Medical Standards in the Conduct of PEME for Seafarers posted at the DOH website www.doh.gov.ph

4. Validity of Fit PEME Certificate
   a.) Unless a shorter period is required by reason of the specific duties to be performed by the seafarer concerned or is required under STCW, the following schedule of validity shall hold:
      i. A medical certificate shall be valid for a maximum period of two years while on board unless the seafarer is under the age of 18, in which case the maximum period of validity shall be one year;
      ii. A Fit PEME Certificate shall not exceed two (2) years from date it is granted; Provided that, the seafarer is issued a Fit PEME Certificate within thirty (30) days from the time of his initial PEME;
      iii. When a seafarer is promoted on board to a job position with critical functions or specific requirements for the position, the PEME test requirements for the new job position must be passed.
   b.) Offshore workers shall follow the PEME requirements of the host country of the principal.
   c.) In urgent cases, the competent authority shall permit a seafarer to work without a valid medical certificate until the next port of call where the seafarer can obtain a medical certificate from a qualified medical practitioner, provided that:
      i. The period of such permission does not exceed three months; and
      ii. The seafarer concerned is in possession of an expired medical certificate of recent date.
   d.) If the period of validity of a certificate expires in the course of a voyage, the certificate shall continue in force until the next port of call where the seafarer can obtain a medical certificate from a qualified medical practitioner, provided that the period shall not exceed three months.
   e.) The medical certificates for seafarers working on ships ordinarily engaged on international voyages must as a minimum be provided in English.

C. On the Assessment of PEME Results

1. PEME recommendations shall be given as follows:
   a.) *Fit for Sea Duty* – The seafarer is assessed as able to perform safely the duties of his position aboard a ship in the absence of medical care, without danger to his health or to the safety of the vessel, crew and passengers.
   b.) *Unfit for Sea Duty* – The seafarer is assessed to be not fit for sea duty.
c.) **Temporarily Unfit for Sea Duty** – The seafarer is assessed to be temporarily unfit for sea duty when, at the time of PEME, the result shows an abnormal finding, a suspected medical or surgical condition, or a disclosed significant past medical history which needs further investigation and reevaluation. The examinee shall be given thirty (30) days to undergo further assessment in accordance with the established referral system of the accredited medical clinic. Within the said period, the seafarer may either be medically upgraded to fitness or downgraded to unfitness indefinitely based on the results of the follow-up evaluation.

d.) For purposes of PEME status reporting to manning agency, the term classifications shall be utilized by accredited clinics with regard the following cases:

i. **Pending for PEME Completion** – When a seafarer has not completed the PEME test requirements on day one of his initial PEME, the seafarer shall be given five (5) working days to complete the requirements.

ii. **Pending for completion of Prescribed Additional Tests, Observation, Monitoring or Treatment** – When a seafarers’ condition during PEME falls under borderline cases and the findings are observable, treatable or manageable within the fourteen (14) days after the date of initial PEME, the seafarer becomes eligible for employment at sea upon favorable recommendation of the medical examiner.

e.) An acute condition that poses as threat to the health of the seafarer, crew and passengers, or the safety of the vessel disqualifies the person from service until there is a complete recovery.

f.) When reexamining a seafarer, after a period of illness, the medical examiner must consider the limited availability of medical care on board ship, the duration of the voyage, and the effects of specific medical findings on the safety of the crew and vessel.

g.) Serving seafarers declared unfit for sea duty may appeal their case to the BHFS.

VII. **VIOLATIONS**

Any violation of this Administrative Order by any medical clinic for overseas workers shall be penalized under Section IX Paragraph 2 of Administrative Order No. 181 s. 2004.

VIII. **REPEALING CLAUSE**

Provisions from previous issuances that are inconsistent or contrary to the provisions of this Order are hereby rescinded and modified accordingly.
IX. SEPARABILITY CLAUSE

In the event that any provision or part of this Order be declared unauthorized or rendered invalid by any court of law or competent authority, those provisions not affected by such declaration shall remain valid and effective.

X. EFFECTIVITY

This Order shall take effect fifteen (15) days after its approval and publication in the official gazette or newspaper of general circulation.

FRANCISCO T. DUQUE III, M.D., M.Sc.
Secretary of Health
ADMINISTRATIVE ORDER
No. 2007 – 0025

SUBJECT: Revised Guidelines for Conducting Medical Fitness Examinations for Seafarers

**PEME “A” – For New Candidates:**
1. Complete physical examination and medical history
2. Visual Acuity (Far and Near Vision)
3. Color Perception Test (Ishihara)
4. Audiometry
5. Routine Urinalysis
6. Routine Stool
7. Complete Blood Count and Blood Typing
8. Chest X-ray (At least 11 x 14 plate size)
9. RPR
10. Hepatitis B Screening
11. HIV
12. ECG
13. Dental examination
14. Psychometric examinations, to include autobiography, interview, and at least these tests: one (1) IQ test and two (2) Personality Tests, as appropriate to job position

**PEME “B” – For Serving Seafarers (below 40 years old):**
1. Complete physical examination and medical history
2. Visual Acuity (Far and Near Vision)
3. Color Perception Test (Ishihara)
4. Audiometry
5. Routine Urinalysis
6. Routine Stool
7. Complete Blood Count and Blood Typing
8. Chest X-ray (At least 11 x 14 plate size)
9. RPR
10. Hepatitis B Screening
11. HIV
12. Dental examination
13. Psychometric examinations, to include autobiography, interview, and at least these tests: one (1) IQ test and two (2) Personality Tests, as appropriate to job position
**PEME “C” – For Serving Seafarers (40 years old and above):**

1) Complete physical examination and medical history  
2) Visual Acuity (Far and Near Vision)  
3) Color Perception Test (Ishihara)  
4) Audiometry  
5) Routine Urinalysis  
6) Routine Stool  
7) Complete Blood Count  
8) Chest X-ray (At least 11 x 14 plate size)  
9) RPR  
10) Hepatitis B Screening  
11) HIV  
12) ECG  
13) FBS  
14) Total Cholesterol  
15) Triglyceride  
16) Creatinine  
17) BUA (uric acid)  
18) Dental examination  
19) Psychometric examinations, to include autobiography, interview, and at least these tests: one (1) IQ test and two (2) Personality Tests, as appropriate to job position

**PEME “D” – For Food Handlers:**

1) PEME “A”, “B”, or “C”, as appropriate  
2) Stool Culture
Related Documents to AO No. 2007 – 0025:  
FORMAT OF THE PEME CERTIFICATION FOR SEAFARERS

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Disclaimer and Waiver:
In undergoing this pre-employment medical examination, I acknowledge that there is no patient – doctor relationship between me and the physicians/ consultants who are hired/ employed by the medical clinic. The medical clinic and manning agency, which are entitled to keep a copy of this certificate, may use the information found herein for any legal purpose they may deem proper. Hence, I shall not hold the medical clinic, its owner/s, physicians, or employees liable, nor make any claim against them whatsoever, in connection with the communication and disclosure of the information contained.

I do hereby permit the DOH/ MARINA/ POEA and the undersigned physician to furnish such information the company may need pertaining to my health status and other pertinent medical findings, and release them from any false statement, undisclosed material and/ or information in regard to past or present illnesses and/ or medical conditions, which will disqualify me from any employment benefits and claims.

In compliance with Convention No. 73 Medical Examination (Seafarers Convention 1946) Article No. 5
1. The Fit PEME Certificate shall remain in force for a period not exceeding two (2) years from date it is granted;
2. If the validity period of the Fit PEME Certificate expires during the course of a voyage, the certificate shall continue in force until the end of that voyage.

Signature Over Printed Name of Candidate
______________________________

Seal and Signature Over Printed Name of Examining Physician
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A. Checklist for the Medical Examiner

1. Check the identity of the person to be examined, note his valid Identification Card (e.g. Seaman’s Book, NBI Clearance, SSS ID, Company ID, Driver’s ID, PRC ID, Voter’s ID, Passport), and record accurately the number on his PEME form.

2. Check the examinee’s previous medical records (if available and necessary).

3. Collect information on previous medical history. Ask point-by-point for details of diseases or injuries, tick the respective boxes on the form, and add further details if the examinee reports diseases or injuries. Note tobacco use and the number of cigarettes smoked per day. Note alcohol intake. After collecting these data, the examinee signs the form certifying it is a true statement.

4. Measure and record the weight, pulse rate and blood pressure. Perform the physical examination and record the results. Check the results of laboratory, ECG, chest x-ray and other examination if necessary. Record the results on the form.

5. Check hearing, eyesight and color vision. Record the results on the form.

6. Evaluate the results of the examination. Assess the fitness of the seafarer for sea duty and for the specified job on board.

7. If the examinee is found fit for sea duty, issue the Fit PEME Certificate.

8. If the examinee is found temporarily unfit for sea duty, explain to him the reasons during follow-up visit. Advise him to undergo additional test/s, refer him appropriately to an accredited specialist or to undergo the necessary treatment as may be necessary within thirty (30) days from date of initial PEME.

9. After checking the vaccination record of the examinee, advise on obligatory and voluntary immunization that will protect him from infectious diseases (e.g. hepatitis, poliomyelitis, tetanus).

10. If necessary and time permits, encourage the examinee to modify his lifestyle (e.g. limit alcohol intake, stop smoking, lose weight).

B. Important Information

1. Printed health education materials (e.g. information booklets on HIV/ AIDS prevention, smoking cessation) may be distributed to seafarers in accredited medical clinics.

2. For seafarers employed on chemical bulk carrier, additional blood tests shall be required as part of the PEME test requirements.

3. Audiometric test shall form part of the PEME test requirements for all seafarers.

4. ECG shall be done before sea duty and shall form part of the periodic PEME for seafarers aged 40 years old and above.

5. In the fitness assessment for a specific job, the medical examiner shall make use of the job description in the Seafarers’ Training, Certification and Watchkeeping Code and the Mandatory Standards and Recommendation Guidance of the Maritime Safety Committee.

6. Full clinical notes and results of PEME shall be kept in the record section of the clinic following a minimum record retention of three (3) years.

7. The cadet seafarer may request a copy of his Fit PEME Certificate from his agency.

8. The PEME of seafarers are conducted in accordance with internationally ratified conventions. The Fit PEME Certificate shall certify that the hearing,
Related Documents to AO No. 2007 – 0025: INSTRUCTIONS TO ACCREDITED MEDICAL CLINICS

sight and color vision of the seafarer are satisfactory, and that he is not suffering from any disease likely to be aggravated by or render him unfit for sea duty, or to endanger the health of the crew and passengers.

9. If the validity period of the Fit PEME Certificate expires during the course of a voyage, the certificate shall continue to be valid until the end of that voyage.

10. The Fit and Temporarily Unfit PEME Certificate shall be issued to the manning agency. All pending for both completion of PEME and completion of prescribed additional tests shall be reported properly to the manning agency. After the specified period lapses, the Pending PEME Certificate shall be stamped ‘Unfinished’ and delivered to the manning agency with the billing statement.

11. No ‘Light Duty’ is available.

C. Minimum In-Service Eyesight Standards:

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<th>Category of Seafarer</th>
<th>Distant Vision</th>
<th>Near Immediate Vision</th>
<th>Color Vision</th>
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<tr>
<td>New Candidates Cadets (Deck and Engine)</td>
<td>20/20 (1.0)</td>
<td>20/20 (1.0)</td>
<td>Normal Vision</td>
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<td></td>
<td>20/30 (0.66)</td>
<td>20/30 (0.66)</td>
<td>Normal Vision</td>
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<tr>
<td>Deck Officers/ Ratings Performing Deck Watchkeeping Duties</td>
<td>20/20 (1.0)</td>
<td>20/40 (0.5)</td>
<td>Vision required for ship’s navigation (e.g. chart and nautical publication reference, use of bridge equipment, identification of aids to navigation)</td>
<td>Normal (Ishihara)</td>
<td>Normal</td>
<td>Vision required to perform all necessary functions in darkness without compromise</td>
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<tr>
<td></td>
<td>20/100 (0.2)</td>
<td>20/100 (0.2)</td>
<td>Normal Vision</td>
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<td>Normal</td>
<td>Vision required to perform all necessary functions in darkness without compromise</td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Category of Seafarer</th>
<th>Distant Vision</th>
<th>Near Immediate Vision</th>
<th>Color Vision</th>
<th>Visual Field</th>
<th>Night Blindness</th>
<th>Diplopia (Double Vision)</th>
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<tbody>
<tr>
<td></td>
<td>One Eye</td>
<td>Other Eye</td>
<td>Both Eyes Aided or Unaided</td>
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<tr>
<td>Engine Officers/ Ratings Performing Engine Watchkeeping Duties</td>
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<td>20/30 (0.66) 20/100 (0.2)</td>
<td>Vision required reading instrument in close proximity to operate equipment and identify systems/components as necessary.</td>
<td>Able to distinguish the colors red, yellow and green</td>
<td>Sufficient</td>
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<td>Aided</td>
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<td>20/50 (0.4) 20/100 (0.2)</td>
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<tr>
<td>Service Providers (Housekeeping Managers, Supervisors, Bartenders, Entertainers, Waiters/Waitresses, Cabin Attendants, etc.)</td>
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<td></td>
<td>20/30 (0.66) 20/200 (0.1)</td>
<td>Sufficient</td>
<td>Sufficient</td>
<td>Sufficient</td>
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<tr>
<td>Aided</td>
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<td></td>
<td>20/70 (0.28) 20/200 (0.1)</td>
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<td>Unaided</td>
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</table>
Assessment of a seafarer’s fitness shall be of most use when the medical examiner knows as much about the job on board the ship as about the individual being assessed. The physical demands of a job are defined in the following terms: strength, climb and balance, stoop, kneel, crouch and crawl, reach, handle, touch and feel, talk and hear, and visual acuity (distant vision, near vision, color vision, visual field).

In the fitness assessment for a specific job, the medical examiner shall make use of the job description in the Seafarers’ Training, Certification and Watchkeeping Code and the Mandatory Standards and Recommendation Guidance of the Maritime Safety Committee, and the physical capabilities based on shipboard tasks, functions, events or conditions.

**Guidance on Assessment of Minimum Entry-Level and In-Service Physical Abilities for Seafarers**

<table>
<thead>
<tr>
<th>Shipboard Task, Function, Event or Condition</th>
<th>Related Physical Ability</th>
<th>The Medical Examiner Should Ensure that the Candidate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine movement on slippery, uneven and unstable surfaces Risk of injury</td>
<td>Maintain balance/ equilibrium</td>
<td>Has no disturbance in sense of balance</td>
</tr>
<tr>
<td>Routine access between levels Emergency response procedures</td>
<td>Climb up and down vertical/ inclined ladders and stairways</td>
<td>Is able without assistance to climb up and down vertical/ inclined ladders and stairways</td>
</tr>
<tr>
<td>Routine movement between spaces and compartments Emergency response procedures</td>
<td>Step over coamings e.g. up to 60 cm in height</td>
<td>Is able to grasp, lift and manipulate various common shipboard tools; move hands/ arms to open and close valve wheels in vertical and horizontal directions; rotate wrists to turn handles</td>
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<tr>
<td>Open and close watertight doors Hand cranking systems Open and close valve wheels Handle lines Use hand tools e.g. spanners, fire axes, valve wrenches, hammers, screwdrivers, pliers</td>
<td>Manipulate mechanical devices (manual and digital dexterity and strength)</td>
<td>Is able to grasp, lift and manipulate various common shipboard tools; move hands/ arms to open and close valve wheels in vertical and horizontal directions; rotate wrists to turn handles Required range of motion is 90 degrees</td>
</tr>
<tr>
<td>Access throughout ship Use tools and equipment Emergency response procedures e.g. donning of life jacket or response suit</td>
<td>Move with agility</td>
<td>Does not have any impairment or disease that can prevent normal movement and physical activity</td>
</tr>
<tr>
<td>Handle ship’s store room Use tools and equipment Handle lines Emergency response procedures</td>
<td>Lift, pull and carry load</td>
<td>Does not have any impairment or disease that can prevent normal movement and physical activity</td>
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<tr>
<td>Overhead storage Open and close valve wheels</td>
<td>Reach above shoulder height</td>
<td>Does not have any impairment or disease that can prevent normal movement and physical activity</td>
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<tr>
<td>Shipboard Task, Function, Event or Condition</td>
<td>Related Physical Ability</td>
<td>The Medical Examiner Should Ensure that the Candidate</td>
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<tr>
<td>General ship maintenance</td>
<td>Crouch (lowering height by bending knees)</td>
<td>Does not have any impairment or disease that can prevent normal movement and physical activity</td>
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<tr>
<td>Emergency response procedures e.g. damage control</td>
<td>Kneel (placing knees on ground)</td>
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<td>Stoop (lowering height by bending at the waist)</td>
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<tr>
<td>Emergency response procedures e.g. escaping from smoke-filled spaces</td>
<td>Crawl (ability to move the body with hands and knees)</td>
<td>Does not have any impairment or disease that can prevent normal movement and physical activity</td>
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<td>Feel (ability to handle or touch in order to examine or determine differences in temperature)</td>
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<tr>
<td>Stand watch for a minimum of 4 hours</td>
<td>Stand and walk for extended period</td>
<td>Is able to stand and walk for extended period</td>
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<tr>
<td>Access between spaces</td>
<td>Work in constricted spaces and move through restricted openings e.g. 60 cm by 60 cm</td>
<td>Does not have any impairment or disease that can prevent normal movement and physical activity</td>
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<tr>
<td>Emergency response procedures</td>
<td>Distinguish an object or shape at a certain distance</td>
<td>Fulfills the eyesight standards</td>
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<tr>
<td>React to visual alarms, warnings and instructions</td>
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<tr>
<td>Emergency response procedures</td>
<td>Hear a specified dB sound at a certain distance</td>
<td>Fulfills the eyesight standards</td>
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<tr>
<td>React to audible alarms, warnings and instructions</td>
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<tr>
<td>Emergency response procedures</td>
<td>Describe immediate surroundings and activities; pronounce words clearly</td>
<td>Is capable of normal conversation</td>
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<td>Make verbal reports</td>
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<tr>
<td>Call attention to suspicious or emergency conditions</td>
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Related Documents to AO No. 2007 – 0025:
MEDICAL STANDARDS IN THE CONDUCT OF PEME FOR SEAFARERS

These medical guidelines are intended to allow the maximum flexibility in interpretation that is compatible with the paramount aim in maintaining the safety of seafarers at sea in the performance of their duties and, at the same time, protecting their health, the health of their fellow crew members and passengers on board.

The list of medical conditions cited below per System Classification are mere examples which may render a seafarer unfit. These can also be used to justify restrictions on time, position, trade area or type of vessels. It can only provide guidance for all examining physicians and shall never replace a sound medical judgment. Also, it may be used with other endorsed medical-related standards set by Trade Associations, Maritime Directorates, P and I Club or Principals/ Employers.

A. INFECTION DISEASES

There shall be no active infectious disease. Any infectious disease in its communicable or carrier state shall not present as a health hazard to other crew members by casual contact. It shall not pose as a medical risk in the development of a debilitating condition while seafarer is serving his contract term. Post-treatment evaluation of infectious disease as well as periodic monitoring of carrier state may be necessary to check if condition shall be medically upgraded or downgraded following complete assessment of its clinical significance by an accredited Infectious Disease Specialist.

- Acquired Immune Deficiency Syndrome (AIDS)
- Enteritis
- Hepatitis
- Lice
- Malaria
- Scabies
- Schistosomiasis
- Sexually Transmitted Disease
- Tinea, active
- Tuberculosis ¹
  - Newly diagnosed cases until full treatment course is done, or clearance by an accredited chest specialist or infectious disease specialist is granted
  - Radiological findings of PTB, less than one (1) year stability for newly diagnosed cases with recent record of treatment (within one year). Temporary unfitness of disclosed cases may be upgraded when the examining physician is satisfied on the advice of an accredited Chest Specialist that the PTB lesion is fully healed, stable, and inactive as evidenced by satisfactory comparative chest x-ray review/s and negative AFB smears, including record of completed full treatment course.
  - Cases where either one or both lungs are infected i.e. moderately advanced to far advanced PTB
  - Extra-pulmonary tuberculosis, which include Miliary TB, Scrofula and Renal TB
- Typhoid carrier within one year from infection is not acceptable for food handlers.

¹ Clearance may depend upon host country guidelines
B. MALIGNANT NEOPLASM

There shall be neither finding nor suspected finding of neoplasm at the time of pre-employment medical examination. Significant history of any type of malignancy for new candidates is medically disqualifying. Exception may be appropriate for serving crew members after complete course of treatment. Final evaluation before any fitness recommendation shall consider prognosis of the disease, rate of recurrence, effect of the disease on job performance and the need for subsequent monitoring.

C. ENDOCRINE, NUTRITIONAL AND METABOLIC CONDITIONS AND IMMUNITY DISORDERS

There shall be no endocrine, nutritional, metabolic and immunity disorders present in all candidates. When these disorders are present in serving seafarers, further investigation and complete assessment shall be done before any recommendation is made.

- Acromegaly
- Acute Gouty Arthritis and Hyperuricemia
- Adrenal Insufficiency, uncontrolled
- BMI of less than 18
- Cases undergoing Immunosuppressive Therapy
- Diabetes Mellitus, requiring insulin
- Hyperthyroidism, Toxic Diffuse Goiter, Toxic Nodular Goiter, Thyrotoxicosis, Thyroiditis
- Obesity, incapacitating or Body Mass Index of 34 and above with or without co-morbid pre-existing conditions
- Osteoporosis
- Pheochromocytoma
- Uncontrolled cases of Diabetes Mellitus Type II
- Persistent abnormal liver or kidney test results

D. DISEASES OF THE BLOOD AND BLOOD FORMING ORGANS

There shall be no significant hematological condition that requires treatment where medication causes immunosuppression, work interruption, and periodic monitoring to ensure continuing fitness in the work place.

- Any abnormal condition requiring treatment that will inhibit or increase blood coagulation
- Bleeding and Clotting Disorders
- Malignancies of the blood and blood forming organs
- Myelodysplasia
- Persistent asymptomatic or unexplained anemia, where hemoglobin level is below 10 g/dl among females and below 12 g/dl among males, until satisfactory investigation or treatment is done
- Polycythemia
- Splenomegaly
E. MENTAL DISORDERS

There shall be no manifestation of any anxiety, depressive, psychotic, personality and psychological disorders identified and observed during the conduct of PEME and psychological testing. Appropriate psychologist’s or psychiatrist's evaluation shall be sought to determine if condition renders a seafarer permanently unsuitable for seafaring duties.

- Active alcohol or drug dependence as evidenced by diagnostic test result/s and confirmatory drug test result including physical finding or identified related behavioral disorder
- Acute Psychosis, whether organic, schizophrenic or any other listed in the International Classification of Diseases
- Dementia/ Senility
- Depression, active requiring medication
- History of documented mental disorder (psychosis)
- Identified "phobias" which will not fit into the job requirement
- Observation of Acute Manifestation of a Psychiatric Disorder that indicates a need for psychiatric evaluation
- Personality Disorder
- Psychoneurosis, Major Depression or Mania

F. CONDITIONS OF THE NERVOUS SYSTEM AND SENSE ORGANS

There shall be no existing manifestation of an acute or chronic neurological or sensory disorder. Any significant past history of such condition/s that may recur or limit functional capacity to perform sea duties and require medical care or periodic monitoring such as but not limited to the following should be carefully assessed.

Conditions of the Nervous System:
- Ataxia, active (unsteadiness of Gait)
- Impairment of the Central Nervous System Function resulting from secondary or active medical disorders e.g. Diabetes, Toxic Reaction, and Thyroid Disorder
- Migraine, frequent attacks causing incapacity
- Narcolepsy or Sleep Disorders resulting to unpredictable drowsiness when individual is awake
- Post -Concussion Syndrome, Active
- Seizure Disorder Secondary to structural abnormality, epilepsy, alcohol or drug withdrawal or metabolic disorder
- Stroke
- Syncope and other disturbances of consciousness
- Tremors, active, interfering with the fine motor functions
- Vertigo, central or peripheral in origin

Conditions of the Sense Organs:
- Cholesteatoma until successful surgical intervention
- Chronic Mastoiditis of both ears
- Chronic Otitis Media
- Chronic Sinusitis until successful surgical intervention
- Frequent Epistaxis
- Hearing Loss, sudden or progressive, sufficient to interfere with communication and or affecting work function (For catering positions, use of hearing aid may be allowed)
- Hypertrophied Tonsils or Laryngeal Cyst causing obstruction and or requiring surgery
- Laryngeal Cyst causing obstruction
- Laryngeal Tumor
- Meniere’s Disease
- Nasal Polyp/s
- Otosclerosis with moderate hearing impairment (for positions with critical watchkeeping functions)

G. CONDITIONS OF THE CARDIOVASCULAR SYSTEM

There shall be no acute or chronic cardiovascular condition limiting physical activity required for sea duties, requiring more than two (2) maintenance oral medicines and close monitoring, or causing significant disability.

- Abnormal TST result or terminated Treadmill Stress Test, the reason for such termination is clinically significant
- All Rheumatic Heart Conditions
- Angina Pectoris, current
- Aortic Aneurysm, current
- Arrhythmia, significant unless granted cardiac clearance
- Claudication, current
- Conditions requiring anticoagulant maintenance medications
- Congenital Heart Disease (ASD, VSD and PDA) unless with history of complete surgical correction and recent clearance from an accredited cardiologist
- Congestive Heart Failure
- Coronary Artery Disease (CAD)
- Coronary Angioplasty (within six months), with history of AMI, left ventricular systolic dysfunction, uncontrolled Diabetes Mellitus, Hypertension and Dyslipidemia
- Coronary By Pass (within six months), with co-morbid illness such as left ventricular systolic dysfunction, AMI, uncontrolled DM, Hypertension and Dyslipidemia (re-evaluation and clearance from an accredited cardiologist before any possible medical upgrade to fitness)
- ECG finding of Complete BBB and WPW unless cleared by an accredited cardiologist
- ECG finding of old MI, 2nd and 3rd degree AV Block
- Hypertension – Uncontrolled Hypertension, 140/90 and above
  - Hypertension requiring three (3) or more drugs
- Hypertension with associated clinical conditions such as but not limited to:
  - Cerebrovascular Disease (Stroke, TIA)
  - Heart Disease (LVH, Ischemic Heart Disease, prior MI, prior revascularization)
  - Non-Essential Hypertension to include renal or Hypertensive Nephrosclerosis or any Secondary Hypertension
  - Obesity and Metabolic Syndrome
  - Poorly controlled Diabetes Mellitus or complicated Diabetes Mellitus
Related Documents to AO No. 2007 – 0025:
MEDICAL STANDARDS IN THE CONDUCT OF PEME FOR SEAFARERS

- Renal Disease (persistent hematuria, proteinuria, and elevated creatinine)
- Ischemic Heart Disease
- Miscellaneous Heart Disease (MVP, Bicuspid Aortic Valve)
- Recent history (within 3 months) of Thrombophlebitis or Phlebothrombosis
- Syncope of Cardiac Etiology
- Valvular Heart Disease with Stenotic physiology accompanied by Chamber Enlargement or Hypertrophy (Mitral Stenosis, Aortic Stenosis, Pulmonic Valve Stenosis)
- Varicose Veins, moderate to severe or with signs of stasis, ulcers or other complications

H. CONDITIONS OF THE RESPIRATORY SYSTEM

There shall be no acute, chronic, pre-existing (per disclosed medical history), recurrent condition needing further investigation and full assessment, limiting work performance on board/workplace or causing significant disability.

- Abnormal radiological finding such as Residual Fibrosis, Calcifications suggestive of PTB until satisfactory pulmonary clearance of an accredited chest specialist
- Atelectasis where FEV1/FVC is less than 60% (moderately impaired lung function) or FEV1 is less than 60% predicted value
- Bronchial Asthma, with physical finding at time of examination or measured as moderate Obstructive Lung Disease per Spirometry where FEV1/FVC is less than 70% with FEV1 less than 80% of predicted value or where condition requires systemic oral corticosteroid, continuing monitoring, observation, and has the likelihood for recurrence per accredited chest specialist’s evaluation
- Chronic Bronchitis or Emphysema
- History of Pulmonary Embolism
- Moderate COPD where FEV1/FVC is less than 70% with FEV1 less than 80% of the predicted value
- Other Lung Conditions such as finding of bullae, pneumothorax and the like which precludes air travel or that which could be seriously affected by it or conditions that predispose to barotraumas
- Pneumothorax, spontaneous (secondary type)
- Tumors

I. ORAL HEALTH

There shall be no mouth disease, gum infections and dental defects.

J. CONDITIONS OF THE DIGESTIVE SYSTEM

There shall be no acute, chronic, or recurrent gastrointestinal disturbance affecting seafarer's function, requiring medication, and causing significant disability.

- Abscess, abdominal or peri-rectal
- Appendicitis
- Bleeding, rectal

2 Condition disqualifies new candidates
Related Documents to AO No. 2007 – 0025:
MEDICAL STANDARDS IN THE CONDUCT OF PEME FOR SEAFARERS

- Cholangitis
- Cholecystitis
- Cholelithiasis until successful surgery
- Chronic Active Hepatitis
- Diarrhea, active
- Esophageal Varices
- Gallbladder polyps (multiple)
- Gallbladder polyp, single, of significant size (1.8 cm), warranting surgical removal
- Gastric or Intestinal Ulceration
- Hemorrhoids with surgical indication for surgery
- Hepatic Nodule
- Hepatitis
- Hepatomegaly, significant and with concomitant liver enzyme elevation
- History of hematemesis within three months
- Liver Cirrhosis
- Multiple Liver Cysts of Unknown etiology
- Peptic ulcer in new candidates. In the case of serving seafarers, those with proven ulceration shall not return to sea duty until free of symptoms. There shall be proof of healing as evidenced by negative gastroscopy or endoscopy finding and the seafarers shall be on ordinary diet for at least three (3) months. Those with history of gastrointestinal bleeding, perforation, recurrent peptic ulceration (despite treatment), or complications after surgery shall remain unfit for sea duty.
- Peri-anal fistula and fissures
- Schistosomiasis

K. CONDITIONS OF THE GENITO-URINARY SYSTEM

There shall be no genito-urinary condition that would require periodic monitoring, surgical interventions, and prolonged treatment. Infectious conditions shall be fully treated or controlled before resumption to sea duty.

- Active Venereal Disease
- BPH symptomatic, with moderate urinary retention and with positive PSA
- Gynecological Conditions, acute or chronic which among others include abnormal uterine bleeding, PID, vaginal discharge suspected to be infectious in origin, pelvic mass by physical examination and vaginal warts
- Hernias unless successful surgical intervention and or surgical clearance
- Hydrocoele, large and recurrent until clearance from an accredited urologist
- Incontinence of urine, if irreremediable
- Nephritis, acute, sub-acute, or chronic
- Persistent proteinuria, glucosuria and other urinary abnormalities
- Polycystic Kidneys
- Prostatism with retention
- Recurrent UTI
- Removal of one kidney secondary to a pathological condition (congenital absence may be considered after clearance from an accredited Kidney Specialist)
- Renal Calculus until successful surgery or lithotripsy
- Renal Cyst(s) depending on the specialist’s discretion (nephrologist/ urologist)
- Symptomatic undescended testis with or without accompanying hernia
Related Documents to AO No. 2007 – 0025:
MEDICAL STANDARDS IN THE CONDUCT OF PEME FOR SEAFARERS

- Urethral Discharge, active
- Urinary Obstructions, if not remediable
- Varicocele, moderate

L. PREGNANCY

Pregnancy shall disqualify all candidates for seafaring duties.

M. CONDITIONS OF THE MUSCULOSKELETAL SYSTEM

There shall be no musculoskeletal defect that could interfere with discharge of seafarer's duties such as decrease in muscular power, loss of balance, mobility and lack of coordination. Limb prosthesis shall not be acceptable.

- Acute and chronic osteoarthritis, gouty arthritis with the following additional risk factors:
  - Previous history of disability, repatriation reasonably affecting musculoskeletal function
  - Presence of bone spurs and other related conditions that will limit work function
  - Slipped disk, status post-laminectomy and other conditions requiring weight carrying restrictions as a risk to safety
- Any radiologic or orthopedic specialist's finding of moderate to severe Scoliosis (for serving crew members, careful re-evaluation shall be made in relation to job functions)
- History of receiving disability recommendation for a significant medical condition or work-related injury
- Limb atrophy secondary to Poliomyelitis
- Muscular Atrophies, Dystrophies and related disorders
- Slipped disk by MRI if symptomatic
- Status Post-Laminectomy within one year
- Radiologic finding of Lumbar Instability until full accredited orthopedic surgeon’s evaluation and clearance

N. CONDITIONS OF THE SKIN

There shall be no active communicable skin disease or recurrent skin disease refractory to medical management that poses a threat to seafarer's health, health of other crew members on board or ship's passengers. Also, careful assessment of exposure to substances which may act as irritants including job functions shall be taken into account in determining if seafarer is fit to resume sea duties.

- Acute and recurrent Eczema, Atopic Dermatitis and related conditions
- Acute skin infection until satisfactory treatment
- Folliculitis, carbuncles, abscesses until I and D and antibiotic therapy
- Generalized Tinea, active
- Leprosy
- Multiple Viral Warts until successful cautery and/ or management
- Persistent Contact and Irritant Dermatitis
- Severe Pustular Cystic Acne
Related Documents to AO No. 2007 – 0025:
MEDICAL STANDARDS IN THE CONDUCT OF PEME FOR SEAFARERS

- Skin cancer such as malignant Melanoma as documented histologically
- Skin manifestation of a Systemic Disease (e.g. Lupus and other Autoimmune Diseases)
- Stasis Dermatitis
- Widespread Psoriasis uncontrolled and resistant to treatment

O. HEARING

For new candidates, unaided average threshold shall not be higher than 30db in better ear and 40db in other ear at 500, 1000, 2000, 3000, 4000 and 6000 Hz and/ or functional speech discrimination (unaided SRT) shall not be less than 90% at 55 db in both ears.

For serving seafarers, unaided average threshold shall not be higher than 50db in both ears at 500, 1000, 2000, 3000, 4000 and 6000 Hz and/ or functional speech discrimination (unaided SRT) shall not be less than 90% at 55 db in both ears.

P. SEVERE SPEECH IMPEDIMENT

There shall be no existing significant speech impediment or hearing acuity problem that interferes with communication especially for deck officers and crew members with special communication functions.

Q. EYESIGHT

There shall be no acute or chronic eye condition or history of eye disease that may result to unsatisfactory work performance, pose a threat to working safely at sea, require medical care due to progressive nature, provide high medical risk, and may recur or aggravate during the contract term of sea duty.

- Amblyopia where vision does not meet minimum sight standard for seafarer's position
- Chronic Uveitis
- Conjunctivitis
- Dacrocystitis
- Glaucoma
- Hordeolum
- Mature cataract
- Moderate to Severe Pterygium
- Night blindness

Binocular Vision is necessary.

The following minimum eyesight standards shall apply as follows:

- New candidates (deck and engine cadets) shall have at least unaided vision of 0.66 (20/30) in each eye and this shall be properly corrected to 1.0 (20/20).
- For serving seafarers:
  o Deck officers shall have (either with or without glasses) at least 1.0 (20/20) vision in one eye and at least 0.5 (20/40) in the other. If the applicant wears
glasses, he shall have an unaided vision of 0.2 (20/100) on each eye. Deck
officers and crew members with lookout functions shall have normal color
perception test result.

- Engineer and radio officers/ engine crew members shall have at least 0.5
  (20/100) unaided vision in each eye. This shall be corrected to at least 0.66
  (20/30) vision in one eye and at least 0.4 (20/50) in the other eye.
- Engineers, engine crew members and radio officers must be able to
distinguish colors red, yellow and green.

- Food handlers and other non-deck, non-engine staff (those without safety/critical
  functions) shall have an unaided vision of at least 0.1 (20/200) for each eye. This
  shall be corrected to at least 0.66 (20/30) in one eye and at least 0.285 (20/70) in
  the other eye.

- When visual aids (spectacles or contact lens) are required for the efficient
  performance of duties, a spare pair shall be carried by the seafarer. When
  separate visual aids for both far and near vision are necessary, a spare pair for
  each kind shall be complied with.

- For seafarer students, apprentices, and pre-licensure examinees, the minimum
  requirements for deck crew members shall apply appropriately.