Medical assessment of commercial divers during the COVID-19 outbreak

Guidance for AMEDs, divers and employers

In the light of advice from Public Health England on COVID-19, HSE issued guidance on 24 March 2020, setting out a proportionate and flexible approach to enable medical assessment of commercial divers to continue. The advice set out below, updates that guidance. It continues to balance the need to protect the health, safety and welfare of divers and the current constraints presented by the COVID-19 outbreak. It also takes account of emerging evidence of lung and cardiac changes arising in individuals with COVID-19¹.

The guidance takes effect from 27th May 2020. HSE will continue to review it as appropriate.

Medical assessments

Step 1: Preliminary considerations

As part of a risk assessment for conducting medicals, when a diver contacts an Approved Medical Examiner of Divers (AMED) about their medical, the AMED should ask them to confirm that:

- they do not currently have any symptoms of COVID-19 (eg new continuous cough or high temperature or loss of, or change in, normal sense of taste or smell, or shortness of breath) and are not self-isolating;
- where previously they had symptoms of COVID-19 or tested positive for coronavirus but were asymptomatic, they have observed the minimum recovery period set out under Step 2 below;

- where previously they had symptoms of COVID-19, they are back to their baseline level of exercise tolerance (eg not getting more out of breath or needing longer recovery times);
- they are not included in a group that is shielding in relation to COVID-19;
- they understand their legal duty under regulation 13(1) of the Diving at Work Regulations 1997, which requires that they must not dive in a diving project if they know of anything, including any illness or medical condition, which makes them unfit to dive.

Step 2: Return to work, annual and initial medical assessments

Important notes for AMEDs on medical examinations:

- Where a face to face medical examination is required as set out in the table below, you should undertake a suitable and sufficient risk assessment and put in place appropriate controls, taking into account PHE advice on COVID-19.
- For return to work and annual face to face medical examinations, you may decide to exclude spirometry. This is permitted, providing all other aspects of the medical are satisfactory, including the result of an exercise test, and previous spirometry results being acceptable for the diver. For annual medicals, you can then issue a medical certificate for 6 months. If you decide to include spirometry in annual medicals and if all aspects of the medical are satisfactory, you can issue a certificate for 12 months.
- Initial face to face medical examinations on new divers should include spirometry.
- You can defer performing fundoscopy and checking for herniae using a 'cough-impulse'.

COVID-19 status	Minimum recovery time from symptoms resolving before diving can resume	Medical assessment and return to diving
Category 1 No symptoms and not needed to self-isolate, or similar symptoms to COVID-19 and tested negative for coronavirus.	N/A	Return to work assessment: N/A. Annual assessment: A medical certificate of longer duration than the 3-month extension following an interim assessment (see below), can only be issued by AMEDs who conduct a face to face medical examination in accordance with MA1. Interim assessment: If, as a result of the restrictions due to COVID-19, a diver is unable to find an AMED available to provide a face to face medical examination, they may be able to obtain a medical certificate of shorter validity. For divers in category 1, the AMED should obtain a completed medical questionnaire from them as a self-declaration plus their last MA2 form and undertake a telephone consultation. Providing there are no problems and the diver's last medical certificate was for 12 months, they can issue a medical certificate for 3 months. If there are problems, they can assess them further by telephone and decide if a face to face medical examination is justified. At the end of the 3-month extension period, an AMED should perform a face to face medical examination to renew the diver's certificate. In accordance with previous HSE guidance issued on 24 March 2020, some divers had an automatic extension of their medical certificate to 1 June 2020. For such divers in category 1, the AMED can follow the interim assessment procedure above. If there are no problems, they can issue a new medical certificate which extends the diver's 12-month certificate up to a maximum of 3 months from its expiry date (eg if the diver's certificate expired on 10 April and was automatically extended to 1 June, the AMED can issue a certificate with an expiry date of 10 July).

		Initial assessment: For initial assessment of new divers, the AMED should obtain a completed medical questionnaire from the individual, countersigned by their GP, and conduct a full medical examination in accordance with MA1.
Category 2	1 month	Return to work assessment: Not required.
Previously asymptomatic and tested positive for coronavirus.		Annual assessment: The AMED should conduct a medical examination in accordance with MA1.
		Initial assessment: As for category 1.
Category 3 Previously had mild symptoms that improved	1 month	Return to work assessment: Not required. Annual assessment: As for Category 2.
within a week with complete resolution and back to their baseline level of exercise tolerance.		Initial assessment: As for Category 1.
Category 4 Previously had moderate symptoms and back to their baseline level of exercise tolerance.	2 months	Where a diver reports more severe pulmonary symptoms that did not require hospitalisation, the AMED should consider advising them to contact their GP for follow up and obtain the outcome to decide when it is appropriate to carry out a medical.
(Moderate symptoms are not as mild as Category 3 but not severe enough to require hospitalisation as for		Return to work assessment: The AMED should perform a return to work medical assessment, examining the respiratory and cardiac systems and conducting an exercise test, in accordance with MA1. If there is any doubt about fitness to dive in relation to previous COVID-19, the AMED should discuss the case with a diving medical specialist.
Category 5)		Annual assessment: The AMED should conduct a medical examination in accordance with MA1. If there is any doubt about fitness to dive in relation to previous COVID-19, the

		AMED should discuss the case with a diving medical specialist. Initial assessment: For initial assessment of new divers, the AMED should obtain a completed medical questionnaire from the individual, countersigned by their GP, and conduct a full medical examination in accordance with MA1. If there is any doubt about fitness to dive in relation to previous COVID-19, the AMED should discuss the case with a diving medical specialist.
Category 5 Previously had severe symptoms requiring hospitalisation and back to their baseline level of exercise tolerance.	3 months	 Initially, the AMED should carry out a telephone consultation and paper review to establish, as far as possible, the diver's level of pulmonary and cardiac function. They should consult the doctor responsible for their clinical care and obtain detailed, up to date information on the diver's respiratory (chest CT scan, lung function tests), cardiac (echocardiogram, ECG) and renal status. The AMED can use the information they obtain to decide when it is appropriate to carry out a medical. Return to work assessment: As for category 4. Annual assessment: As for category 4.
		Initial assessment: As for category 4.

1 http://www.eubs.org/wp-content/uploads/2020/04/2020-0412-Position-of-the-BVOOG.pdf

Questions

Divers should contact: <u>diving@hse.gov.uk</u>

AMEDs should contact: <u>AMED@hse.gov.uk</u>

27th May 2020