



BASMU Medical 1 Form

British Antarctic Survey Medical Unit
Diving Diseases Research Centre
Research Way
Plymouth Science Park
Plymouth. PL6 8BU
Tel: 01752 438621
Mob: 07342713701 (office hrs only)
Email: basmu.admin@nhs.net

**British Antarctic Survey Medical Unit (BASMU)
Medical Information Form for Polar Service Application**

This Information form introduces the medical requirements for Polar service and serves as the first level of the medical screening process. It is essential that you read the guidance notes below and complete the information and declaration at the end. Further information can be found in the BASMU 2 located on the BASMU web page under deploying this season section.

[British Antarctic Survey Medical Unit \(BASMU\) | University Hospitals Plymouth NHS Trust](#)

It is very important for you to be aware that BASMU is a part of an NHS Hospital (University Hospitals Plymouth NHS Trust) and thus has access to NHS records as per current availability. All information you provide is treated confidentially and in accordance with General Medical Council (GMC) and NHS regulations. Your notes are held securely and electronically- completely separately to BAS itself. BAS are unable to access your records. Medical information is only shared outside of BASMU with your consent where able or in guidance with GMC and legal frameworks.

We supply a limited quantity of medications for a limited range of medical issues. If you are on regular medications, you will need your own supply for the entire time you deploy. This includes both prescribed medications as well as things you may buy over the counter (except for paracetamol and ibuprofen). If you are not sure what you should be taking yourself, please contact the admin team at BASMU.

Many medical conditions can be safely supported in the Polar sphere, but declaring all known medical issues is important so that we can assess your risk and ensure that you are as safe as possible.

Developing a medical emergency while working in the polar regions usually carries with it a much higher risk than if it occurred back home. This is because of a combination of the remote location and limited medical capability. Getting a patient to high level medical care often takes many days (sometimes weeks) and can be much longer than you expect. There is usually even less capability for medical evacuation in Winter. All evacuation is associated with significant operational and personal impact and sometimes risk for rescuers, and it cannot be assumed or guaranteed to happen in a timely manner. All of this means that a person needs to be healthy, with a low risk of developing a serious issue whilst deployed.

As you know, it is impossible to reduce all risk and there always remains the chance of developing a medical issue while south. Many conditions are not predictable or preventable. However, our intent with the screening processes is to try to understand your individual risk as best as possible and ensure that your own risk lies at a reasonable level. This decision is made by BASMU based on the information that we receive about you.

It is essential that you have read and checked that you do not have the conditions listed. If you do, ensure that you contact us using the details above before continuing with your application.



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Please consider your own FITNESS TO DEPLOY. Speak with BAS if you are unsure.

Do you have the physical ability to do the job?
Do you have the physical / psychological attributes to live in the Polar environment?
Do you have the physical ability to help / rescue others?

You should be aware that BASMU will undertake a detailed medical and dental screening to exclude preventable causes of evacuation as best as able.

FAILURE TO DISCLOSE A MEDICAL PROBLEM DURING SCREENING MAY PUT YOUR LIFE AND THAT OF OTHERS AT RISK.

BASMU staff will always be happy to discuss any medical condition with you, with the aim of getting you cleared for Polar service. Certain conditions will preclude Polar service, but this is uncommon. There are many conditions that can be safely managed or well-controlled in your home environment. However, some may not be as stable or may carry higher risk in remote polar environments. This is why it is important that all conditions, even historic and well-controlled, should be declared- even if you are completely well now.

Should you be selected by BAS or by your employer for a Polar trip, further screening will be required. This will include a medical questionnaire and an examination by a doctor. Medical problems can often be resolved by early and open discussion, and BASMU will work to understand risks and mitigate where possible, sometimes with further investigation or specialist review.

Because there have been many preventable instances where people have not recalled, fully understood their issue, or failed to disclose significant medical history, BASMU is now routinely requesting a summary of your GP medical record (usually directly from your GP) as part of your medical assessment. This is usually a one-page summary of your current and previous medical problems. If you decline BASMU to receive a summary from your GP or you do not share with us your medical history, then this is likely to affect our ability to understand you deployed risk and thus you are unlikely to receive medical clearance to deploy.

In the event of a query, one of the BASMU staff may contact you directly and we may ask for further information from your doctor (GP) over and above the summary record, or other specialists for clarification to enable a more accurate understanding of your personal circumstances.



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A (non-exhaustive) guide to current or historic conditions that may cause concern

Conditions that preclude service Decisions depend on many different factors but people with the conditions in this column will not be deployable on medical grounds	Conditions which <i>may</i> preclude service. These will be assessed on an individual basis and in relation to the capacity to undertake activity/work in the anticipated environment.
Cardiac & Circulation problems Angina & Heart Attacks Leaky Heart valves or Rheumatic Fever Uncontrolled High Blood Pressure Heart Rhythm Abnormalities Pacemaker / ICD fitted Heart Failure Arterial Disease (Arterial aneurysm or dilation) Peripheral vascular disease Anticoagulant medication High overall risk of cardiac event or stroke	Treated abnormal rhythms Severe varicose veins Previous Frostbite Severe Reynaud’s disease Previous leg thrombosis Previous clot on the lung Previous Heart Surgery Cardiac Syncope
Respiratory (chest) problems Recurrent pneumothorax Cold-induced or severe asthma Chronic Bronchitis or emphysema Active Tuberculosis Sleep Apnoea/ use CPAP	Single episode of pneumothorax History of moderate Asthma
Gastrointestinal problems Active stomach / duodenal ulcer Liver Disease Pancreatitis Untreated Hernia Inflammatory bowel disease	Previous exploratory abdominal surgery Severe piles History of stomach/duodenal ulcers
Genito- urinary problems Recurrent Kidney Stones Kidney failure	Single kidney stone (fully resolved) Recurrent kidney infections
Neurological Conditions Epilepsy or fits History of non – traumatic Brain Haemorrhage Unexplained episodes of loss of consciousness Degenerative neuromuscular conditions Significant neurological deficit secondary to trauma	Previous brain surgery ME POTS





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<p>Metabolic Conditions Type 1 Diabetes Cushing's Disease Addison's Disease Obesity BMI >35</p>	<p>Well-controlled mild type II diabetes (ENG 1 criteria) Other endocrine disorder Thyroid disease Obesity BMI 30-34</p>
<p>Musculoskeletal and Rheumatological conditions Rheumatoid Arthritis Ankylosing Spondylitis</p>	<p>Systemic lupus erythematosus Slipped disc Recurrent back pain Severe knee problems Unstable joint Frequent Gout Lower Limb Amputation Recurrent dislocations</p>
<p>Cancer and Haematological Disorders Most cancers Clotting or bleeding disorders Anticoagulant Medication Active bone marrow disease</p>	<p>Treated cancer with low risk of recurrence Treated leukaemia Treated Hodgkin's disease</p>
<p>Gynaecological conditions Current Pregnancy</p>	<p>Pelvic inflammatory Disease Ovarian disease</p>
<p>Dermatological conditions Blistering Skin diseases Severe psoriasis</p>	
<p>Mental Health Problems Schizophrenia Manic depression (Bipolar Affective Disorder) Personality Disorder Current Drug or alcohol abuse</p>	<p>Current psychiatric illness Depression Self-harm Previous drug / alcohol problems Previous severe mental illness Eating disorders</p>
<p>Other conditions Immunosuppressant medications Immunomodulatory medications Immunological disorders Immune suppression Anaphylaxis to non-drugs Angioedema</p>	<p>Prescribed EpiPen Allergic reaction to food Prostatic hypertrophy (untreated)</p>





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If you do not have anything listed above but you do have a condition and you are unsure- please do contact BASMU. We are always happy to receive proactive enquiries and will gladly provide advice.

Annual Medical Requirements:

You must complete the minimum of a self-assessment and dental every year you are due to deploy.

BASMU 3 (self-assessment)- will be forwarded to you via email.

BASMU 7 or 8 - Dental forms will be forwarded to you via email.

BASMU 4 - Medical completion frequency below. A BASMU 4 may also be requested outside of these periods if there are any changes in your health condition or at the discretion of BASMU. This will be emailed for you to share with the person completing the medical.

Up to 35 years	Every 5 years
35 years to 49 years (inc)	Every 3 years
50 and above	Annually including an annual 12-lead ECG

All forms are now electronic, and easily accessible and useable by mobile device or computer. The information you submit is automatically and directly loaded into your personal, secure electronic patient record. **Paper documents are no longer accepted.** If you have a problem submitting electronic forms, please contact the BASMU office

Your Electronic Patient Record is managed by a health record provider who is compliant with UK regulatory standards and frameworks and meets all current encryption and security requirements.



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Immunisations

When completing the online Immunisation form please give dates of the last time you had your vaccinations:

GENERAL ADVICE:

All necessary vaccines are available from your GP or a Travel Clinic the vaccinations listed when completing the form are recommended except for the COVID vaccine which is mandated.

Consultation with your Doctor about travel plans should take place 2-3 months prior to travel as some vaccinations (e.g. Rabies) require more than one dose at set intervals. Complete any initial courses of travel vaccines prior to leaving the UK but be aware there may not be time to fully immunise you before your departure.

Mandated: 1 x COVID vaccine in your lifetime.

YOU WILL NOT BE CLEARED TO TRAVEL WITH BAS UNLESS YOU HAVE HAD 1 X COVID VACCINE

Recommended: TETANUS booster every 10 years (from GP or travel clinic)

Those planning to travel/return via South America, Africa, Asia, India or the Middle East may require additional vaccination/prophylaxis. It is the individual's responsibility to ensure they have the appropriate vaccines/medications. Advice changes frequently and is important to obtain up to date information from the latest Department of Health advice to travellers or from the websites listed below.

MALARIA: the most likely tropical disease you may encounter. Advice is country/region specific. Please check www.cdc.gov for the latest advice regarding Malaria prophylaxis. Ensure you have enough medication for the duration of your trip as the station/ship doctor does not carry stocks of these medications. In the UK these medications can be obtained via private prescription or purchased from a pharmacist.

YELLOW FEVER: no longer required when travelling by RAF flights from Brize Norton to the Falklands, or those returning to the UK directly by air or BAS ship.

If your cover lapses whilst you are in the Antarctic, as an independent traveller, boosters/medications can be obtained by you at health centres/clinics in major towns/cities en route to the areas in which you plan to travel.

Useful information on vaccinations and disease avoidance:

www.nhs.uk/conditions/travel-immunisation

www.fitfortravel.nhs.uk

<https://travelhealthpro.org.uk/countries>

www.cdc.gov

For everyone: Please complete immunisation form that will be emailed to you. This will remain on your records and PLEASE UPDATE BASMU OF ANY IMMUNISATION CHANGES should you have future deployments.



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ALL fields MUST be completed. Please complete details below for **any** upcoming deployment and return completed form to basmu.admin@nhs.net

Please complete name as on passport.

Surname	
First name	
Middle name(s)	
Preferred name/ nickname	
Date of birth	
Sex	
Gender	
Address	
Mobile number	
Email address (that you are happy to use for medical info)	
Occupation and destination	
Duration (in weeks or months)	<input type="checkbox"/> Summer only <input type="checkbox"/> Winter

I declare that I have read the conditions listed above and confirm (tick relevant boxes):

I have none of the conditions.	<input type="checkbox"/>
I have one or more conditions, and I have contacted BASMU and been cleared to continue my application.	<input type="checkbox"/>
I consent to BASMU (University Hospitals Plymouth NHS Trust) accessing my GP and medical records as necessary for the determination of my fitness to deploy with BAS.	<input type="checkbox"/>

Signed:

Print name:

Date:

If you feel unable or unwilling to sign or give consent, please call BASMU directly.



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