



Sunshine Coast Adventures

HEALTH AND MEDICAL RECORD

THE SUNSHINE COAST ADVENTURES EXPERIENCE

Climatic conditions include temperatures from 50° to 95° F, high humidity, heat index reaching to 110°, and frequent, sometimes severe, afternoon thunderstorms. Activities include snorkeling, scuba diving, kayaking, canoeing, sailing, hiking, and other activities that may have potential for injury. Sunshine Coast Adventures strives to minimize risks to participants and advisors by emphasizing proper safety precautions. Sunshine Coast Adventures staff instructs participants in safety measures to be followed. Each participant and crew is expected to follow these safety measures and to accept responsibility for the health and safety of each of its members.

RECOMMENDATIONS REGARDING CHRONIC ILLNESSES

Sunshine Coast Adventures requires that this information be shared with the parent(s) or guardian(s) and examining physician of every participant. Sunshine Coast Adventures does not have facilities for extended care or treatment, therefore, participants who cannot meet these requirements will be sent home at their expense.

CARDIAC OR CARDIOVASCULAR DISEASE

Adults or youth having had any of the following should undergo a thorough evaluation by a physician before considering participation at Sunshine Coast Adventures. 1. Angina (chest pain caused by heart or coronary artery disease) 2. Myocardial infarction (heart attack) 3. Surgery or angioplasty to treat coronary artery disease; surgery to treat congenital heart disease or other heart surgery 4. Stroke or transient ischemic attacks (TIA's) 5. Claudication (leg pain with exercise caused by hardening of the arteries) 6. Family history of heart disease or a family member who died unexpectedly before age 50 7. Diabetes 8. Smoking and/or Excessive Weight The physical exertion during a high adventure activity may cause a heart attack or stroke in susceptible persons. An adult who is 40 years of age or older, or who has experienced any of the conditions above, should speak with his or her doctor about the possible need for an exercise stress test with thallium (a metallic element that helps in the diagnosis of stress) within three to six months before the scheduled trip to assess the adequacy of the heart muscle's blood supply. It is recommended that an adult who is over 40 years of age who has not experienced any of the conditions above have an ordinary stress test without thallium. **Even if the stress test is normal, the results of testing done without the exertions of a high adventure program do not guarantee safety.** If test results are abnormal, the individual is advised not to participate.

HYPERTENSION (HIGH BLOOD PRESSURE) The combination of stress and heat appear to cause a significant increase in blood pressure in many individuals participating in high adventure. Occasionally, hypertension reaches such a level that it is no longer safe for an individual to engage in strenuous activity. Persons whose blood pressures are increased mildly (greater than 135/85) may benefit from treatment before coming to a high adventure base. Individuals who are hypertensive (having blood pressure greater than 140/90) are urged strongly to be treated and to have normal blood pressure (less than 135/85) before arriving. Medications should be continued during the high adventure program. Those people taking beta-blocker medication should consider a change of medication before participating in the scuba program.

INSULIN DEPENDENT DIABETES MELLITUS Exercise and the type of food eaten will affect insulin requirements. Any individual with insulin-dependent diabetes mellitus should be able to monitor personal blood glucose and know how to adjust insulin doses based on these factors. The diabetic person also should know how to give a self-injection. Both the diabetic person and one other person in the group should be able to recognize indications of excessively high blood sugar (hyperglycemia or diabetic ketoacidosis) and to recognize indications of excessively low blood sugar (hypoglycemia). The diabetic person and at least one other individual in the group should know the appropriate initial responses for these conditions. A diabetic person who has had frequent hospitalizations for diabetic ketoacidosis or who has had frequent problems with hypoglycemia probably should not participate in a Sunshine Coast Adventures high adventure program until better control of the diabetes has been achieved. Any form of diabetes requiring insulin control with medication disqualifies an individual from participation in the scuba program.

SEIZURE DISORDERS OR EPILEPSY A seizure disorder or epilepsy does not exclude an individual from participating in high adventure. However, the seizure disorder should be well controlled by medications. A seizure-free period of at least one-year is considered adequate. Exceptions to this guideline may be considered by the Sunshine Coast Adventures health supervisor and will be based on the specific type of seizure and the likely risks to the individual and to other members of the crew. Any seizure activity regardless of control with medication disqualifies an individual from participation in the scuba program.

ASTHMA It is expected that an individual with asthma will have consulted a physician in order to establish control of the condition. The asthma should be controlled to essentially normal lung function with the use of oral or aerosol bronchodilators. The patient should bring ample supplies of medication for the entire program. Individuals undergoing allergic desensitization therapy who require injections during their adventure should bring their medications and store a portion at Sunshine Coast Adventures upon arrival. At least one other crewmember should know how to recognize an asthma attack, how to recognize worsening of an attack, and how to administer bronchodilator therapy. Any person who is approved to go to Sunshine Coast Adventures who has required medical treatment for asthma within the past six years must carry a full-size prescribed inhaler for the length of the program. Asthmatic individuals whose exercise-induced asthma cannot be prevented with bronchodilator premedication, who require systemic corticosteroid therapy, or who have required multiple hospitalizations for asthma should not attempt to participate in the strenuous activities of high adventure. Any asthma history regardless of control, unless documented by a methacholine challenge test and found to be resolved, disqualifies an individual from participation in the scuba program.

PSYCHOLOGICAL AND EMOTIONAL DIFFICULTIES A psychological disorder does not necessarily exclude an individual from participation. Parents and advisors should be aware that a Sunshine Coast Adventures trip is not designed to assist participants to overcome psychological or emotional problems. Experience demonstrates that these problems frequently become magnified, not lessened, when a participant is subjected to the physical and mental challenges of a high adventure trip. Any condition should be well controlled without the services of a mental health practitioner. Under no circumstance should medication be stopped immediately prior to a Sunshine Coast Adventures trip. Participants requiring medication must bring an appropriate supply. Any psychological and emotional difficulties requiring medication may disqualify participation in the scuba program.

MEDICATIONS Each participant at Sunshine Coast Adventures who has a condition requiring medication should bring an appropriate supply and a complete listing of medication prepared by a physician. In certain circumstances duplicate or even triplicate supplies of vital medications are appropriate. People with an allergy to bee, wasp, hornet, or jellyfish sting must bring an EpiPen or equivalent with them to Sunshine Coast Adventures.

SCUBA DIVING Diving is an exciting and demanding activity. When performed correctly, applying correct techniques, it is very safe. When established safety procedures are not followed, however, there are extreme dangers. To scuba dive safely, you must not be extremely overweight or out of condition. Diving can be strenuous under certain conditions. Your respiratory and circulatory systems must be in good health. All body air spaces must be normal and healthy. A person with heart trouble, a current cold or congestion, epilepsy, asthma, a severe medical problem, or who is under the influence of alcohol or drugs should not dive. If taking medication, consult your doctor and the instructor before participation in this program. You will also need to learn from the instructor the important safety rules regarding breathing and equalization while scuba diving. Improper use of scuba equipment can result in serious injury. You must be thoroughly instructed in its use under direct supervision of a qualified instructor to use it safely.

An individual should always contact the family physician first and call Sunshine Coast Adventures at 305-942-9645 if there is a question about the advisability of participation. Sunshine Coast Adventures reserves the right to make medical decisions regarding the participation of individuals in Sunshine Coast Adventures programs.

WEIGHT GUIDELINES FOR HIGH ADVENTURE ACTIVITIES

Any participant or adviser who exceeds the maximum weight limits on the weight chart may want to reconsider participation in a Sunshine Coast Adventures program. Anyone who exceeds these limits is at extreme risk for health problems. Participants who fall within the guidelines are more likely to have an enjoyable program and avoid incurring health risks. The absolute weight limit for our programs is 300 pounds. The right hand column shows the **maximum recommended weight** for participating in a Sunshine Coast Adventures program. Anyone who exceeds these limits is at extreme risk for health problems. Individuals who exceed these limits **may want to reconsider participation** in a Sunshine Coast Adventures program.

Recommended Weight (lbs.)

Height	Age 19-34	Age 35+	Maximum
5'0"	97-128	108-138	166
5'1"	101-132	111-143	172
5'2"	104-137	115-148	178
5'3"	107-141	119-152	183
5'4"	111-146	122-157	189
5'5"	114-150	126-162	195
5'6"	118-155	130-167	201
5'7"	121-160	134-179	207
5'8"	125-164	138-178	214
5'9"	129-169	142-183	220
5'10"	132-174	146-188	226
5'11"	129-169	151-194	233
6'0"	140-184	155-199	239
6'1"	144-189	159-205	246
6'2"	148-195	164-210	252
6'3"	152-200	168-216	260
6'4"	156-205	173-222	267
6'5"	160-211	177-228	274
6'6"	164-216	182-234	281

This table is based on the revised Dietary Guidelines for Americans from the U.S. Department of Agriculture and the Department of Health and Human Services.

***All programs involve snorkeling and boarding a vessel via ladder - No one may participate who exceeds 300 pounds.**

HEALTH AND MEDICAL RECORD

Date of Trip _____

Name _____

Date of Birth* _____ Age _____

Address _____

City _____ State _____ Zip _____

Phone # (_____) _____

Council Name _____ Unit # _____

Religious Preference _____

***PARTICIPANTS MUST BE THIRTEEN (13) YEARS OLD BY SEPTEMBER 1 OF THE YEAR OF PARTICIPATION. SCUBA PARTICIPANTS MUST BE FOURTEEN (14) YEARS OLD BY DATE OF ATTENDANCE. YOU MUST COMPLY WITH THIS REQUIREMENT. SUNSHINE COAST ADVENTURES CAN MAKE NO EXCEPTIONS.** This health and medical record, including limitations indicated, is valid for participation in for 12 months after date completed by physician. Each participant is subject to a medical recheck at Sunshine Coast Adventures. Sunshine Coast Adventures recognizes the right of a participant not to have immunizations, etc. because of religious beliefs, however, a statement signed by the parents is required, indicating that the participant is free from contagious disease and is able to physically tolerate the conditions as described in this form. Write Sunshine Coast Adventures for a copy of the statement. Sunshine Coast Adventures meals consist of a wide variety of fresh foods, canned products, and frozen meats. The menu does not take into account special dietary concerns. If the participant has a problem with the diet described above, contact Sunshine Coast Adventures for a copy of the menu and plan to send supplemental food.

PARTICIPANT HEALTH HISTORY

Are you now, or have you ever been treated for any of the following: (Answer "Yes" or "No")

Sinus trouble _____ Kidney disease _____ Earaches/infections _____ Abdominal problems _____ Rheumatic fever _____ Hay fever _____ Tuberculosis _____ Fainting spells _____ Epilepsy _____ Asthma _____ Ear Problems _____ Pneumothorax _____ Seizures _____ High Blood Pressure _____ Hypertension _____ Heart trouble _____ Diabetes _____ Frequent diarrhea _____ For Women: menstrual problems _____ Any mental illness _____

Explain _____

Allergies or reactions to any medication _____

Allergy to insect or jellyfish stings _____

Have you had more than a brief minor illness (24 hrs or more), injury or emotional difficulty during the past year?

_____ If so, what? _____

Operations, serious injuries or hospitalization with date(s), for any reason _____

Any restriction of activity for medical reasons? _____

Explain _____

Have you taken any medication for more than two (2) weeks in the past year? (What?

Why?) _____ Are you now taking medication or treatment?

(Why?) _____

List current medications and dosages below:

In Case of Emergency, Notify:

Name _____

Relationship _____

Address _____

Home Phone # (_____) _____ Business Phone # (_____) _____

Cell Phone # (_____) _____

Alternate Contact _____

Phone # (_____) _____

ATTACH A PHOTOCOPY OF INSURANCE CARD. IF FAMILY HAS NO MEDICAL INSURANCE, STATE "NONE". Family Medical Insurance Company _____
 Policy # _____ Phone # (____) _____
 Address of Insurance Company _____
 City, State, Zip _____

PARENT'S/GUARDIAN'S AUTHORIZATION REQUIRED FOR THOSE UNDER 18 YEARS OF AGE. I, the undersigned, have read and understand this entire form, including the sections entitled *PHYSICIAN PLEASE NOTE*, *THE SUNSHINE COAST ADVENTURES EXPERIENCE*, AND *RECOMMENDATIONS REGARDING CHRONIC ILLNESSES*. This health history of the applicant is accurate and complete, and the person herein described has permission to engage in all Sunshine Coast Adventures activities described, except as specifically noted on this form by the physician or myself. If I cannot be reached in an emergency, I hereby give permission for the captain or the adult advisor in charge, to treat, hospitalize, secure anesthesia or to order injection, surgery or other treatment needed for the person described herein. While on a Sunshine Coast Adventures trip, the Sunshine Coast Adventures captain has permission to obtain all information connected with treatment by a physician, hospital or other treatment facility.

MEDICATION DOSAGE _____

NOTE: BE SURE TO BRING MEDICATION NEEDED WHILE AT SUNSHINE COAST ADVENTURES.

INFORMATION ABOVE IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE

APPLICANT SIGNATURE (REQUIRED) _____ DATE _____

PARENT/GUARDIAN SIGNATURE (Required if applicant under 18) _____

PHYSICIAN'S MEDICAL EVALUATION

1. PHYSICAL EXAMINATION:

Height: _____ **Blood Pressure:** _____ **Weight:** _____

Maximum Weight: _____ (from chart) Any individual exceeding the maximum weight of 300 lbs. will not be permitted to participate.

	Normal	Abnormal		Normal	Abnormal
Eyes			Ears		
Knees (both			Nose		
Ankles (both			Spine		
Throat			Lungs		
Heart			Abdomen		
Contacts			Genitalia		
Dentures			Skin		
Braces			Inguinal Hernia		
Emotional					

Explain any abnormalities: _____

2. ALLERGIES: (Any history of, list all problems: to what agent; type of reaction; treatment)

3. IMMUNIZATION HISTORY: (REQUIRED) Tetanus immunization must have been received within 10 years prior to arrival at Sunshine Coast Adventures: Date of Last Inoculation: _____ Measles History: Inoculation: _____ Disease: _____ Unknown: _____

4. RECOMMENDATIONS AND/OR RESTRICTIONS: A. I certify that I have, today, reviewed the health history, examined this person, and find him/her physically fit to participate in the Sunshine Coast Adventures experience as outlined on this form, including: Camping/Hiking: Yes No Snorkeling: Yes No SCUBA diving Yes No Other Activities: Yes No B. Restrictions (if none, so state) _____

5. PHYSICIAN'S SIGNATURE: Physician licensed to practice medicine (MD, DO). An examination conducted by a certified physician's assistant or a nurse practitioner will be recognized. (Please include the name and phone number of sponsoring physician)

PHYSICIAN PLEASE NOTE A. Sunshine Coast Adventures is an ocean program where participants: • are on or in the water for extended periods of time • are in high humidity with heat indexes reaching 110 degrees • experience temperature ranges from 50-90 degrees F B. Care for injuries or illness: • may take 6-12 hours or longer for direct assessment and evacuation • may be delayed by thunderstorms or other natural problems

Signature: _____

Address: _____

City, State, Zip: _____

Office Phone: (_____) _____ Date: _____

To Health Care Provider: Do not certify individuals whom: Weigh in excess of 300 pounds Have significant heart disease, asthma, or hypertension Have incompletely controlled psychiatric disorders Are subject to anaphylaxis Does not meet age requirements

SUNSHINE COAST ADVENTURES RESERVES THE RIGHT TO DENY THE PARTICIPATION OF ANY INDIVIDUAL ON THE BASIS OF A PHYSICAL EXAMINATION AND/OR THEIR MEDICAL HISTORY. SUNSHINE COAST ADVENTURES WILL CHECK ALL MEDICAL EVALUATION FORMS BEFORE A PARTICIPANT BEGINS A TRIP. AREAS OF CONCERN INCLUDE, BUT ARE NOT LIMITED TO: HEART DISEASE, HIGH BLOOD PRESSURE, SEIZURE DISORDER, SICKLE CELL ANEMIA, AND HEMOPHELIA, ASTHMA, DIABETES, AND EXCESSIVE WEIGHT.

-SUNSHINE COAST ADVENTURES USE ONLY: DO NOT WRITE IN THIS BOX

REVIEWED BY: _____ DATE: _____

CAPTAIN SIGNATURE: _____ DATE: _____

RISK ADVISORY

Sunshine Coast Adventures has had an excellent health and safety record from its inception in 2003. Sunshine Coast Adventures strives to minimize risks to participants and adult leaders by emphasizing proper safety precautions. Sunshine Coast Adventures participants typically do not experience injury during their adventure precisely because they are aware of the risks involved and because they exercise proper safety precautions. If you are planning to attend this program, you should be physically fit, have proper clothing and equipment, be willing to follow the instructions of your captain and leaders, work as a team and take responsibility for your own health and safety. Parents, guardians, adult leaders and participants in Sunshine Coast Adventures programs are advised that Sunshine Coast Adventures programs and journeying to and from Sunshine Coast Adventures embarkation points can involve exposure to accidents, illness and/or injury associated with a physically demanding program conducted in a sometimes hostile aquatic environment. Participants may be exposed to severe weather conditions such as high heat and humidity, tropical weather and intense tropical sun. Other possibilities include sunburn, heat exhaustion and heat stroke, dehydration, asthma and heart attacks. For participants in the SCUBA programs please read, study and review the special medical constraints. Sea creatures such as rays, anemones, sea urchins, coral, barracuda and sharks, pose little or no threat if safe distances and respect are given them. Sunshine Coast Adventures has a no-touching policy with regard to the coral and creatures of the reef. Sunshine Coast Adventures is dedicated to the mission of serving young people in a safe, educational, enjoyable, aquatic environment. (We are trained for emergencies and able to act in an expedient manner.) Furthermore, professional medical services such as hospitals and physician's offices are available in the operational region. We hope that this information will motivate leaders, parents, guardians and participants to be prepared and informed. By working together as well-prepared and informed people, we can all enjoy a safe Sunshine Coast Adventures experience.