

	ABSOLUTE	RELATIVE	NO CONTRAINDICATION
<b>ENT</b>			
Auditory canal	Blocked canal		
Exostosis, meatal atresia	Blocked meatus	Exostoses, drum visible	Successful meatal surgery
External otitis	Stage 3 (drum not visible)	Stage 2	Stage 1
Traumatic perforation of drum	Perforation	Healed perforation needs to be assessed by ENT	
Septal deviation	Disturbed tube function	Restricted breathing, obstructed sinus passage	3 months post successful surgery; deviation with no obstruction
Nasal infection, sinusitis	If unable to equalize ears, chronic polypous rhinosinusitis	Chronic with normal pressure equalization but inexperienced diver	If all sinuses and middle ear ventilate well
Acute otitis media	Acute phase		Healed
Chronic otitis media	Yes	Healed with normal function; post op with proper counseling and evaluation	
Tympanic perforation	yes	Healed with normal function; post op with proper counseling and evaluation	
Tympanoplasty	Eustachian dysfunction	Atrophic areas - refer	3 months post op if transplant well healed
Radical ear surgery	Any canal wall down operations		
Hearing improvement surgery	All TORP	Exceptions must be cleared by ENT	
Acute balance disturbance	Yes	Acute vestibular dysfunction with normal inner ear function	Alternobaric vertigo in experienced divers; benign paroxysmal vertigo with remission, unil vestibular dysfunction with negative testing
Meniere's	On a completely theoretical basis		
Deafness		Unilateral deafness; impaired close to deafness	Slight to moderate hearing loss; bilateral complete deafness
Oral cavity	Inability to hold mouth piece	other	
Laryngeal	Recurrent laryngeal nerve palsy with about PFT, stenosis, tracheostomy	Subjective complaints without functional aberration	

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<b>OPHTHALMALOGIC</b>			
Conjunctivitis, keratitis	Unhealed		Post healing
Open angle glaucoma	None	With functional or morphologic damage	Without damage
Narrow angle glaucoma	With symptoms after attack	Without symptoms	Following iridotomy with YAG laser
Cataract surgery	After 1 mo	1-3 months	More than 3 mo
Corneal surgery	Corneal suture, penetrating keratoplasty, radial keratoplasty until 6-12 mo Lamellar and laser 3 mo		After recovery
Retinopathy	Severe vascular retinopathy		All other forms
Retinal detachment			none
Monocular vision	4 months after loss of one eye	4-12 months post functional loss	12 months after loss
Abn visual field	Based on underlying pathology	Restricted visual field of more than 80 degrees horizontal, 50 vertically	Slight visual field restriction
Refractive abnormalities	Uncorrected hyperopia more than 4 dioptres (ability to read gauges)	Display dependent	Correct to normal
Contact lenses	None	Contact of choice = soft gas permeable	
<b>CARDIOPULMONARY</b>			
CHD, angina	Any form	Following treatment	
CHD, MI	Angina, failure, arrhythmia, Abn ventricular function, abn stress test	1 year post treatment with normal hemodynamics, no exercise intolerance, etc	
CHD, bypass, PTCA	Residua	As above	
CHF	Dyspnea at rest, grade 2-3 exertional for advanced diver, grade 1 for beginner	Grade 1 for experienced divers	
Conduction abnormality	All except where noted		AV block 1 <sup>st</sup> degree, LAH, LPH, RBB, normal performance WPW without tachcardia on no meds
Arrhythmias, Supraventricular	All with myocardial disease, or affecting consciousness	Chronic AF, suprvnt extrasystoles	Physiologic sinus brady, symptom free intermittent junctional rhythm

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Arrhythmias, Ventricular	Lown clas 1-5, dysfunctional myocardium, long QT	Normal stress test class 3-4	PVC with lown class 1-2 normal exercise capacity, no underlying disease, no meds
Shunt, ASD, VSD	If exercise limited	Implanted model type	
PFO	Hx of undeserved DCI with neurologic hit Major pulm shunts	PFO and small pulm shunts with history of DCI	
Valvular disease	All functional defects, all stenotic defects	Any without functional abn	Asymptomatic MVP or bicuspid aortic valve
Valve replacement or plasty	Prosthetic malfunction, regurg	Normal function no arrhythmia, no LVH	
Endo, myo, pericarditis	For 6 months after	With no loss of function 6 months later	
Cardiomyopathy	Hypertrophic with obstruction of LV outflow tract or arrhythmia	No obstruction, no arrhythmia, normal size of ventricle	
Pulmonary embolism	Within 3 months All cases with pulmonary artery hypertension or respiratory failure	Functionally normal post event; anticoagulation is not an absolute contraindication	
Pulmonary hypertension	Yes		
Arterial hypertension	Poor control or intercurrent ds	Normal stress test and work capacity	
Orthostatic hypotension	Underlying disease		
Peripheral vascular disease	Stages IIb, III, IV	Stage IIa if stress test negative	Stage 1
Varicosities, chronic insufficiency	DVT, florid ulcus cruris		Varicosities Stage 1 or II insufficiency, healed stage III
DVT	Until mobile and good exercise capacity	6 months after	
<b>NEUROLOGICAL</b>			
Epilepsy	Any with attack < 5 yr ago, on meds, and abn EEG	Any but no attack for > 5 yr, normal EEG, no meds Get neuro clearance	Single seizure e.g. drug related or febrile etc and other features normal
Multiple sclerosis	Acute relapse Performance impaired	Slide persisting residua	
Paralysis	Acute central and peripheral	Certain impediments	Residua from disk disease, polio, minor peripheral paralysis due to injury etc
Cerebrovascular insufficiency	Anatomical abn vessels, recurrent neuro deficits, incomplete recovery from CVA	Single TIA, PRIND, complete recover and normal exam	

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Neuropathy	Rapid progressive Unable to swim Sensory deficits	Sensory and pain only neuropathy	Slight deficits, peripheral weakness
Parkinson's	Treatment resistant with rigidity / tremors	Juvenile well compensated	
Aneurysm	Post hemorrhage or surgery	Asymptomatic or successfully treated	
Craniotomy	No yet closed Residua like seizures		Trephination or complete reconstruction p/ 6 mo Grade one head trauma after 10 days Grade 2 trauma p/ 6 mo
DCS, AGE	Panic involved in DCI or AGE; Persistent symptoms delay 6 months	Noresidual symptoms wait 3 months; undeserved hit with PFO	Stable peripheral sx, stable neurological sx after 6 months, with exceptions to right
<b>PSYCHIATRIC</b>			
Hyperventilation	True syndrome With multiple occurrences	Single attack if trigger can be identified	
Panic attack	Single or multiple episodes	One explainable episode	
psychosis	Active or in remission	Stable with normal social function	
Depression	Acute major, in remission on meds, prior suicide attempts	Reactive depression, single episode bereavement depression, mild to moderate on meds	
Bipolar	Acute mania or depression, psychosis	Manic episode with no current impairments, hypo manic	
Anorexia	Clinically manifest	With normal eating behavior now normal BME and psychosocial adjustments	
Substance abuse	Abuse, addiction	Resolved and abstinent for at least 1 year with organic functional impairment	Resolved and abstinent for at least 1 year with no organic functional impairment
<b>ENDOCRINE</b>			
Endocrinolopathy	pheochromocytoma		
Diabetes	With history hypoglycemia Poor control Neurologic abn, severity issues		
<b>HEMATOLOGIC</b>			

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Anemia	Acute Hgb < 11 Chronic Hgb < 8 Cryoglobulinemia	Acute and chronic thrombocytopenia	Normal exercise capacity, hemorrhagic conditions without pathologic bleeding, well controlled anticoagulation therapy, familial thrombophilia
<b>MUSCULOSKELETAL</b>			
Degenerative arthritis or trauma	Inability to swim	Swimming with aid or assist Self sufficient under water	Mod disability with preserved swimming ability and able to assist buddy
Dislocations, subluxation	During rehab	Recurrent	Healed without restricted function
Spinal degenerative disease	Recent or unhealed fx, osteoporotic fx, symptomatic disc disease, neurologic sx, thoracic deformity leading to pulm abn VC < 70%, FEV/VC < 0.7	Following surgery Healed fx	Healed with normal swimming ability
Aseptic necrosis	All acute	Symptom free	healed
<b>GI</b>			
Hernia	Non reducible, painful	Asymptomatic	Post repair
GERD, reflux	Acute ulceration	Hiatal hernia	Healed ulcer
Stoma	None except for continent stoma		
Inflammatory bowel	Acute	Symptom free	
<b>GU</b>			
Prostatic hypertrophy	Known retention	Dysuria, retention with cath	Post prostatectomy
Renal failure	Acute ID, dialysis, renal insufficiency	Post transplant Failure with creat cl > 20 ml/min	One kidney
Malformations	None		Based on organ function
Stones	Acute, ureteral even if asymptomatic	Asymptomatic post passing stones	One episode
<b>SURGERY</b>			
Post op abdominal	6 weeks	6-12 weeks	Post 3 mo
Post gyn surgery	6 weeks	6-12 weeks	Post 3 mo
Adhesions	Repeated hospitalization or surgery		Free of symptoms post adhesiolysis
<b>MISCELLANEOUS</b>			
Obesity		BMI over 30	
Skin		Infection, eczema, psoriasis,	
Pregnancy	yes		4-6 weeks post partum, 6-10 after C/S
Medications	Affecting consciousness or mentation	Impairing exercise tolerance	