Medical Form for STCW Basic Training

In compliance with Maritime Rule Part 34 “Medical Standards”, Section 2 requires all seafarers that are employed on SOLAS ships to pass a medical examination by an approved medical practitioner for issue of a medical fitness certificate. Such certificates are valid for a period of 2 years. This Section implements the requirements of the International Convention on Standards of Training, Certification and Watchkeeping for Seafarers (STCW). The medical examination must be carried out by a registered medical practitioner, not necessarily one approved by Maritime New Zealand.

This Medical examination is only valid for:
STCW Competence in Personal Survival Techniques
STCW Competence in Fire Prevention and Fire Fighting
STCW Competence in Personal Safety and Social Responsibilities
STCW Competence in Elementary First Aid

Dear Doctor

Your patient __________________________ has applied to undertake training in the STCW Basic Certificates of Competency as detailed above at Nelson Marlborough Institute of Technology, Nelson, New Zealand.

As part of the medical assessment you are requested to confirm from your examination of the patient that he/she suffers from no conditions which may place him/her at greater risk while carrying out the required training necessary to sit the STCW Basic Training Certificates of Competency.

Students are expected to perform at simulated emergencies involving the following environmental work factors:
(a) Operate as a member of a team and independently at incidents of uncertain duration.
(b) Being exposed to the elements (cold, heat, wind and water) and jump into the sea.
(c) Experience transition from hot to cold and humid to dry atmospheres.
(d) Make rapid transitions from rest to maximum exertion without warm up periods.
(e) Work for short periods under sustained physical activity and concentration (up to 20 mins each.)
(f) Wear and use compressed air breathing apparatus used for fire Fighting.
(g) Enter dark enclosed spaces, fight small oil and carbonaceous fires.
(h) Perform effective and sustained CPR on a manikin.
(i) Other medical condition which could affect sustained performance.

Consideration of the training environment is requested in making your assessment of your patient. Could you please complete the box below and hand to your patient for return to NMIT.

In my opinion the above named patient is FIT to undertake training necessary to sit the STCW Basic Training Certificates of Competency.

Doctor: __________________________ (Print) Signature: __________________________

Clinic Stamp: __________________________ Date: __________________________

Thank You
International Maritime Institute of New Zealand / NMIT

Privacy Act
This information is sought solely for the purposes of the business of Nelson Marlborough Institute of Technology and will not be used or revealed in any other context.

Form must be dated within two months of start of your course.