

**MEDICAL INFORMATION (MEDIF) FORM
FOR INTERNATIONAL OPERATIONS**

TO BE COMPLETED BY PASSENGER'S ATTENDING PHYSICIAN

(To be given to all sick passengers or those requiring any medical assistance in transit / in-flight)

SITTING CASE REQUIRING OXYGEN WHEEL CHAIR CASE

PASSENGER / FLIGHT DETAILS:

Passenger's Name : Surname _____ First Name _____

Permanent Address : _____

Tel. No. Departure City : _____ Tel. No. Arrival City : _____

Flight Requested 9W _____ Date _____ From _____ To _____

**MEDICAL DETAILS - TO BE COMPLETED BY PASSENGER'S DOCTOR AFTER READING
SPECIAL NOTE & GUIDELINES ON THE NEXT PAGE**

- 1) Doctor's Name, Address, Tel. / Fax No., Qualifications, Registration No : _____

- 2) Patient's Name : _____ M / F Age : _____
- 3) Diagnosis & Date of Onset of Illness : _____
- 4a) Is the disease contagious or infectious in any form Yes No
- 4b) Is the patient's condition OFFENSIVE to other passengers
(smell / appearance / conduct) No Yes Specify _____
- 5a) Present Symptoms : _____ 5b) Prognosis during flight : _____
- 6) Vital Parameters (Pulse, BP, Temperature, Respiratory Rate, Level of Consciousness) :
Normal Abnormal Please specify : _____
- 7) Dyspnoea: Nil On Accustomed Exertion At Rest
- 8) Details of ongoing medical treatment / any special comments regarding
treatment on flight : _____
- 9) Give requirement for Oxygen (O2 flow rate in litres/min.) : _____ *
- (a) Continuously throughout journey (at Airport & during Flight)
- (b) Continuously throughout Flight only
- (c) As & when required (At Airport or during Flight)
- 10) Does patient have full control of bowels / bladder Yes No
- 11) Can patient eat / drink unaided Yes No
- 12) Can patient use aircraft toilet unaided Yes No
- 13) Does patient require wheelchair Yes No
If yes, which of following (a) to aircraft steps (b) to cabin door (c) to seat
- 14) Does patient require Doctor / Qualified Nurse / Non-Medical Escort Yes No
- 15) Is patient accompanied No Yes If so, by whom _____
- 16) Are arrangements for Ambulance/ Hospitalization made at Embarkation/ Destination
No Yes If so, give details _____
Have above details been specified to passenger Yes No

- 17) Any other remarks / information regarding patient to ensure smooth, comfortable flight
 No Yes If so, specify _____
- 18) Any other ground arrangements needed at Departure / Transit / Arrival
 No Yes If so, specify _____
- 19) Any special in-flight arrangements required (eg special meal / seat)
 No Yes If so, specify _____
- 20) The above mentioned Medical details are completely correct to the best of my knowledge and have been provided after getting due consent from my patient.
- 21) PASSENGER DECLARED FIT TO FLY

Signature :

Rubber Stamp :

Date :

***SPECIAL NOTE :**

- * (1) Limited number of Oxygen cylinders are available in the aircraft for use in emergencies. Additional therapeutic Oxygen can be provided on request ONLY IF 72 hours advance notice is given. Please note however that aircraft oxygen cylinders can deliver oxygen only at fixed flow rates of 2 or 4 litres / minute.
- * (2) Due to security reasons, personal oxygen cylinders, oxygen concentrators, etc., will not be carried on board the aircraft.
- * (3) Cases requiring oxygen should be accompanied by an escort who is familiar with the procedure of administering oxygen, or by a qualified nurse / doctor.
- (4) The attendant should ensure that all items / medical equipment brought on the aircraft by the patient (needles, syringes, unused medications) are removed at the time the patient is disembarked from the aircraft.
- (5) Cabin staff are trained in First Aid only & are not expected to render special nursing care to critically ill cases. First Aid Kits carried on board the aircraft do not contain syringes, special drugs or instruments. Cabin crew are not permitted to administer injections or open Physician's kits, which contain life-saving drugs / equipment, and can be opened only under instructions of Registered Medical Practitioners.
- (6) Wheelchairs can be provided on request ONLY IF advance notice is given and the duly completed MEDIF Form has been processed by the 9W Medical Department.
- (7) Patients with intravenous (IV) drips are not allowed to fly unless they go as stretcher cases as there is no provision for IV drip stands on board the aircraft. All cases on intravenous drips must be accompanied by a qualified nurse / doctor.
- (8) Any fee for the completion of this certificate or for further medical examination requested by Jet Airways doctors for purpose of certification, will be the responsibility of the passenger.
- (9) Any electronic medical equipment will have to be cleared by engineering AND security before it can be carried on board the aircraft.
- (10) All medical details asked for must be completed and submitted at least 48 hours in advance of the flight, as clearance has to be got from the regional company doctors. The form should be accurately filled and clearly typed. As this form is transmitted by telex / fax, all medical terms should be legible & completed in black ink.
- (11) The Jet Airways doctor's decision regarding fitness of the passenger to fly or the requirement of medical escort will be final. If at time of embarkation the condition of the passenger is worse than the details provided, carriage may be refused. Any case which Jet Airways feels might jeopardize the safety or operation of the aircraft will not be accepted. Patients with symptoms likely to cause distress or inconvenience to other passengers will not be accepted.

GUIDELINES FOR ASSESSING PATIENT'S FITNESS FOR TRAVEL ON JET AIRWAYS

When assessing a patient's fitness for air travel, the effects of reduced atmospheric pressure and consequent reduction in oxygen tension must be considered. Even in pressurized aircraft the cabin pressure will be equivalent to an altitude of 5000-8000 feet. Although each case will be considered on its merit, the following guidelines are laid down for the treating physician's reference**

- (A) Critical heart and respiratory conditions (e.g. decompensated cardiac patients / patients with severe valvular disease / unstable angina / significant cardiac arrhythmias / severe asthma) are usually not permitted to fly. Patients with recent coronary occlusion with myocardial infarction are normally not permitted to fly within 3-6 weeks of onset. Patients who have undergone angioplasties are usually allowed to fly only after 4-7 days. Cases of uncontrolled severe hypertension are not allowed to fly. Patients with severe bronchitis, emphysema, other conditions where respiratory exchange is compromised or may be affected by the hypoxia are permitted to fly only if arrangements are made for supplemental oxygen for use inflight & are accompanied by a medical escort. Patients with active open tuberculosis /untreated pneumothorax are not permitted to fly. Cases with tracheostomies are permitted to fly only if accompanied by medical escort and suitable equipment.
- (B) Introduction of air into body cavities for diagnostic / therapeutic purposes are allowed to fly only after 7 days following the procedure.
- (C) Cases of psychiatric disorder are allowed to fly only if sedated and accompanied by suitable escort.
- (D) Mentally challenged / Autistic patients are permitted only with medical clearance AND suitable attendant.
- (E) CVA / Head Injury - Permitted only after 2-3 weeks.
- (F) Severe cases of acute otitis media / sinusitis / post middle ear surgery - Permitted to fly only after 2-3 weeks.
- (G) Patients with Acute contagious / communicable diseases are not allowed to fly.
- (H) Patients with Fractures of the mandible with fixed wiring of the jaws are not allowed to fly.
- (I) POP casts should be bivalved in case flying is required within the first 48 hours of their application.
- (J) Peptic ulceration with hemorrhage - Not permitted within 3 weeks of onset, except when permitted by the treating consultant. Flying may be permitted after 2-3 days of a MINOR laproscopic procedure.
- (K) Post-Operative cases are usually not permitted to fly within
 - (i) 10 days of abdominal operations
 - (ii) 21 days of chest surgery.
- (L) In cases of uncomplicated single pregnancy, medical clearance (specifying the number of weeks of pregnancy) is required from the start of the 29th week. Flying is not permitted beyond 35 weeks. Cases of multiple pregnancy / complicated single pregnancy are accepted only till the end of the 32nd week, provided they have medical clearance from the treating obstetrician & are accompanied by an MBBS doctor. Passengers are allowed to fly after 48 hours of normal delivery provided they have medical clearance. Newborns are not allowed to fly in the first 7 days of life, unless they are medically cleared by the treating neonatologist & are accompanied by an MBBS doctor.
- (M) Patients with deep vein thrombosis should not fly till patient is stabilized on anticoagulant therapy and there are no pulmonary complications.
- (N) Patients with severe anemia (Hb < 8.5 gm/dl) are not permitted to fly. However in exceptional cases, they may be permitted to fly with specialist's certificate. Patients with uncontrolled diabetes mellitus are not permitted to fly.
- (O) Patients with impaired mobility should be provided with diapers / condom / indwelling catheters.
- (P) Flying is not permitted for 3-4 weeks following surgery for retinal detachment.

**** References :**

- (1) Aerospace Medical Association (Air Transport Medicine Committee). Medical Guidelines for Air Travel. Aviat Space Environ Med, 1996, 67 (10): Section II, B1-16.
- (2) Medical Effects of Air Travel and Selection of Patients for Air Travel. In : Current Medical Diagnosis & Treatment, 38th edition, 1999, Appleton & Lange, USA.

FOR ANY QUERIES / CLARIFICATIONS CONTACT :

Mumbai Medical Dept.:

Telefax: 022-2615 6740 • Email : bommedical@jetairways.com

Delhi Medical Dept.:

Telefax: 011-25672422 • Email : delmedical@jetairways.com

Chennai Medical Dept.:

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Kolkata Medical Dept.:

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Jet Airways Medical Clearance Form (to be filled by the Company Doctor) :

- (1) Passenger is Fit to Fly as a Wheelchair case under Indemnity Bond with Medical / Paramedical / Non-Medical Escort / Not Fit to Fly.
- (2) Request uplift of _____ number of bottles of oxygen from _____ to _____ sector, to be given @ _____ litres/minute.
- (3) Request Maintrol to arrange for uplift of the same.
- (4) Request treating Physician to give additional sedation / bivalve POP cast / provide condom / indwelling urinary catheter drainage / adult diapers / any other specific treatment _____
- (5) Request Engineering & Security to inspect & clear _____ medical equipment from flight safety point of view.
- (6) Request Commercial to arrange seat near toilet / with extra leg space / any other specifications.
- (7) Request Catering for uplift of special meals (e.g. diabetic meal) from _____ to _____ sector.
- (8) Relatives to confirm arrangement for ambulance with / without doctor at destination station.

9W Doctor's Name, Registration No. & Designation :

Station :

Date :

9W Medical Dept Stamp :