

Order on medical examinations of seafarers and fishermen¹

In pursuance of section 4(2), section 66(ii)(a), section 70 and section 75a of the act on seafarers' conditions of employment, etc. (*lov om søfarendes ansættelsesforhold m.v.*), cf. consolidated act no. 742 of 18 July 2005, as amended by act no. 511 of 17 June 2008 and act no. 493 of 12 May 2010, and section 19(1) of the act on the manning of ships (*lov om skibes besætning*), cf. consolidated act no. 168 of 27 February 2012, and following negotiations with the National Board of Health and consultation with the shipowner and seafarer organisations, the following provisions are laid down:

Part 1 *Application*

Section 1. This order shall apply to employees on board ships, cf. section 1(1) as well as section 49 of the act on seafarers' conditions of employment, etc. (*lov om søfarendes ansættelsesforhold m.v.*), except for employees on board cargo ships with a gross tonnage below 20 only engaged on voyages within Danish ports, rivers, lakes or similar sheltered waters and part-time professional fishermen.

Subsection 2. In case of doubt whether the person concerned shall be considered as employed on board, the issue shall be decided by the Danish Maritime Authority following consultation with the shipowner and seafarer organisations that the issue concerns.

Subsection 3. This order shall also apply to the owner of the ship if he serves on board the ship.

Section 2. This order shall also apply to persons who are required to hold a valid health certificate in connection with the following:

- 1) The acquisition or renewal of certificates of competency under the provisions of the act on the manning of ships (*lov om skibes besætning*).
- 2) The enrolment as a student at an approved training programme covered by the act on maritime training programmes (*lov om maritime uddannelser*).
- 3) The completion of a smoke diver training programme as part of a training programme approved by the Danish Maritime Authority.

Subsection 2. As regards persons covered by subsection 1, the Danish Maritime Authority shall issue or endorse the health certificate when the medical examination in accordance with section 4 has taken place abroad.

Part 2 *Medical examinations of seafarers and fishermen*

Section 3. Employees serving on board a ship shall hold a certificate stating that they have been subject to a medical examination in accordance with the provisions of this order (health certificate) and found fit for ship service, with limitations, if relevant.

Subsection 2. The provision of subsection 1 shall also apply to the owner of the ship if he serves on board the ship.

¹ This order contains provisions implementing parts of Council Directive 2009/13/EC of 16 February 2009 implementing the Agreement concluded by the European Community Shipowners' Associations (ECSA) and the European Transport Workers' Federation (ETF) on the Maritime Labour Convention, 2006, and amending Directive 1999/63/EC, Official Journal 2009, L 124, pp. 30-50, and Council Directive no. 2003/88/EC of 4 November 2003 concerning certain aspects of the organisation of working time, Official Journal 2003, L 299, pp. 9-19.

Section 4. During the examination, the doctor shall assess whether the examined person's physical and mental condition is in general such that the person in question is fit for serving on board a ship, cf. annex 1. If it is expressly stipulated in the annex what is the consequence of the disease or defect, the doctor shall observe this, cf. however subsection 3.

Subsection 2. The fitness of the person examined may be limited as regards the following:

- 1) The validity of the health certificate.
- 2) The field of work on board.
- 3) The trade area. Annex 2 stipulates the limitations as regards trade areas that should normally be applied.

Subsection 3. If, in special cases, the doctor assesses that, in consideration of the introduction to annex 1, there is reason to deviate from the provisions of the annex on the consequence of the disease or defect, he shall give the reasons for the deviation in writing.

Section 5. For the examination, marine doctors appointed by the Danish Maritime Authority shall use the guidelines given in annex 1 to this order and the medical certificate drawn up by the Danish Maritime Authority. The medical certificate is incorporated in the electronic reporting system.

Subsection 2. Doctors outside Denmark shall use the English translation of the Danish medical certificate as well as the associated guidelines, which are available from the English webpage of the Danish Maritime Authority, www.dma.dk. Other medical certificates shall not be used.

Subsection 3. Marine doctors and foreign doctors carrying out medical examinations of seafarers and fishermen in accordance with this order shall be professionally completely independent when making their medical assessment during the medical examination of seafarers and fishermen.

Section 6. Insofar as possible, medical examinations in accordance with section 4 shall take place in Denmark, and in Denmark they shall be carried out only by marine doctors appointed by the Danish Maritime Authority.

Subsection 2. Persons who are to be subject to medical examinations in pursuance of this order shall themselves choose the marine doctor who is to perform the examination, except in cases where the Danish Maritime Authority designates a specific marine doctor, cf. section 9(2) and section 10(1).

Subsection 3. If the medical examination is carried out by a doctor outside Denmark, the doctor shall be duly qualified for carrying out medical examinations of seafarers or fishermen in accordance with the legislation in the country where the person in question has his practice.

Section 7. Anyone who commences service on board a ship for the first time or who has not been working legally on board a ship during the past five years shall be found fit at the medical examination or, if relevant, fit with limitations, cf. annex 1, column A.

Section 8. Persons below the age of 18 shall, at the medical examination, be found fit or, if relevant, fit with limitations, cf. annex 1, column A, at intervals of no more than one year.

Subsection 2. Persons who are 18 years old or older shall, at the medical examination, be found fit or, if relevant, fit with limitations, cf. annex 1, column B, at intervals of no more than two years.

Section 9. If a person is found unfit for ship service, a new medical examination in accordance with the provisions of this order shall be carried out only if the Danish Maritime Authority has granted permission for this.

Subsection 2. If a person is found fit with limitations, the Danish Maritime Authority may require that a renewed medical examination be made in accordance with section 8 by a marine doctor designated by the Danish Maritime Authority.

Section 10. The Danish Maritime Authority may require that a person who holds a valid health certificate is subject to a new medical examination by a doctor designated by the Danish Maritime Authority when, on the basis of available health information, inter alia in connection with discharges due to illness, it must be

considered doubtful whether the person in question is still fit for his field of work on board ships. The designated doctor shall be a marine doctor or a specialist.

Subsection 2. The Danish Maritime Authority may, when circumstances so require, decide that a person shall not serve on board a ship when a new medical examination is required in accordance with subsection 1.

Subsection 3. If the person in question serves on board a ship at the time when a medical examination is required in accordance with subsection 1, the Danish Maritime Authority may require that the person in question signs off or decide that the examination shall be carried out within a stipulated time-limit. If the Danish Maritime Authority requires that the person in question signs off, the Danish Maritime Authority shall pay the travel and subsistence expenses in connection with the return to the person's place of residence.

Subsection 4. The person in question shall not serve on board a ship after the time-limit stipulated in subsection 3 unless the medical examination establishes that he is still fit for his field of work.

Part 3

Health certificate

Section 11. The form and contents of the health certificate shall be determined by the Danish Maritime Authority. Upon request, the Danish Maritime Authority shall forward the health certificate free of charge to marine doctors and shipping companies.

Section 12. If the examination in accordance with section 4 has taken place in Denmark, the marine doctor shall issue a health certificate to the person examined or endorse a health certificate already issued in accordance with the results of the examination. The marine doctor shall submit the result of the examination to the Danish Maritime Authority.

Subsection 2. The marine doctor shall submit the result of the medical examination to the Danish Maritime Authority electronically in accordance with instructions given by the Danish Maritime Authority.

Subsection 3. If the medical examination has taken place abroad and the medical examination has not been carried out by a marine doctor appointed by the Danish Maritime Authority, the master shall issue or endorse the health certificate in accordance with the medical certificate and submit the original certificate to the Danish Maritime Authority as soon as possible.

Subsection 4. If a person has previously been found unfit for work on board ships, the Danish Maritime Authority may – irrespective of the result of the latest medical certificate – require that the person in question signs off in the first port at which the ship calls and from where a home journey may conveniently be arranged.

Section 13. An employee commencing service on board a ship shall hand over his health certificate to the master, who shall keep it for as long as the employee serves on board.

Subsection 2. The master shall forward health certificates kept in accordance with subsection 1 in case the Danish Maritime Authority so requests.

Subsection 3. Persons holding a health certificate shall forward it if the Danish Maritime Authority so requests.

Section 14. If a time-limit under section 8 for a medical examination expires during a voyage, the endorsement given in the health certificate shall remain valid until the first call at a port in which it is possible to carry out an examination without undue delay. However, the health certificate shall remain valid for no more than three months.

Part 4
Complaint provisions

Section 15. The person examined, the shipping company or the Danish Maritime Authority may bring the result of a medical examination in accordance with section 4 before the Danish Shipping Tribunal established in pursuance of the act on safety at sea (*lov om sikkerhed til søs*), cf. however subsection 4.

Subsection 2. The person examined or the shipping company may bring a decision made in accordance with section 10(1) before the Danish Shipping Tribunal mentioned in subsection 1. It shall not be possible to bring the decisions of the Danish Shipping Tribunal before any other administrative authority.

Subsection 3. Complaints to the Danish Shipping Tribunal shall be made in writing to the Danish Maritime Authority, the Secretariat of the Danish Shipping Tribunal, Carl Jacobsens Vej 31, DK-2500 Valby, e-mail: anke@dma.dk.

Subsection 4. The person examined or the shipping company may bring the marine doctor's decision as regards the importance of the visual and auditory senses to the work on board a ship, cf. annex 1, part V, items 1, 4 and 7, before the Danish Maritime Authority, Carl Jacobsens Vej 31, DK-2500 Valby, e-mail: sfs@dma.dk which shall make a decision in the case, if relevant after further examinations by a specialist.

Subsection 5. The time-limit for an appeal against the decisions mentioned in subsections 1, 2 and 4 is eight weeks. The Danish Shipping Tribunal and the Danish Maritime Authority may disregard the time-limit in case there are special reasons for this.

Part 5
General provisions

Section 16. Employees who use glasses or contact lenses to meet the visual power required by annex 1 shall use this correction during their work and shall, at any time, be in possession of an extra set of glasses or contact lenses providing optimum correction.

Section 17. Persons who are, in pursuance of this order, examined by a doctor or specialist shall be able to present photo ID upon request.

Section 18. Medical examinations pursuant to this order shall be paid by the relevant person's employer. In case the person examined does not have an employer at the time of the examination, the first employer who hires him in a position for which a valid health certificate is required shall refund the expenses paid for the medical examination that has formed the basis of the issuance of the certificate provided that the seafarer is able to present the original receipt of payment.

Subsection 2. Medical examinations of maritime students who have concluded a training and educational agreement with an approved shipping company shall be paid by the relevant shipping companies. The Danish Maritime Authority shall pay for medical examinations of other students enrolled at approved maritime training programmes where it is an admission requirement that the student has been subject to an approved medical examination and has been found fit for ship service, with limitations, if relevant.

Subsection 3. The Danish Maritime Authority shall pay for medical examinations required by the Danish Maritime Authority pursuant to section 10(1) and medical examinations carried out in connection with the Danish Shipping Tribunal's case consideration and complaints about the visual and auditory abilities, cf. section 15(1), (2) and (4).

Subsection 4. Students at approved maritime training programmes as mentioned in subsection 2, the second sentence, shall document to the marine doctor that they have been admitted to an approved maritime training programme on the condition that they acquire a health certificate meeting the admission requirements.

Subsection 5. Marine doctors shall receive a fee for examinations paid by the Danish Maritime Authority in accordance with subsection 2, the second sentence, and subsection 3 when the result of the examination has been received by the Danish Maritime Authority. In cases where medical examinations in accordance with subsections 1 and 2 shall be paid by an employer or an approved shipping company, the marine doctor

shall collect his fee from the person examined, who shall be refunded by his employer or the shipping company.

Subsection 6. The fee for medical examinations carried out in Denmark shall be determined following negotiations between the Danish Maritime Authority and the Authorisation Committee of the Danish Medical Association (*Den Almindelige Danske Lægeforenings Attestudvalg*).

Section 19. The master of the ship shall be responsible that the provisions of section 6(3), section 10(4), section 12(3) and (4) and section 13(1) and (2) are complied with.

Part 6 *Penalty provisions*

Section 20. Contraventions of section 3, section 13(3), section 18(1) and (2) and section 19 shall be liable to punishment by fine.

Subsection 2. Companies etc. (legal personalities) may be liable to punishment according to the provisions of part 5 of the penal code (*straffeloven*).

Subsection 3. When determining criminal liability pursuant to subsection 2, persons employed to carry out work on board the ship by others than the shipowner shall also be considered as being associated with the shipowner. If a document of compliance has been issued pursuant to the International Safety Management Code or a certificate has been issued pursuant to the Maritime Labour Convention to another organisation or person, the master as well as the seafarers shall be considered to be associated with the one to whom the document has been issued.

Part 7 *Entry into force and interim provisions*

Section 21. This order shall enter into force on 20 August 2013.

Subsection 2. Order no. 575 of 19 June 2008 on medical examinations of seafarers and fishermen shall be repealed, cf. however subsections 3 and 4.

Subsection 3. Marine doctors designated in accordance with the order mentioned in subsection 2 shall retain their permit to carry out medical examinations and issue health certificates for the safety of the ship.

Subsection 4. Health certificates issued in accordance with the order mentioned in subsection 2 shall remain valid on the conditions stipulated in the certificate.

Danish Maritime Authority, 12 August 2013
Jan Gabrielsen / Jørgen Løje

List of diseases, defects, etc. that would normally lead to rejection or limitations

Introduction

The purpose of medical examinations is to ensure the health of each individual seafarer and fisherman as well as the safety of the ship. When assessing whether seafarers and fishermen are fit to go to sea, the following shall therefore always be taken into account:

1. Does the disease or condition involve an increased risk of acute complications that cannot be treated by a layman on board a ship and that may, consequently, represent a considerable risk to the seafarer or fisherman himself?
2. Will an acute disease in a seafarer or fisherman represent a risk to the safety of the ship or place other crewmembers in an unnecessarily difficult situation?
3. Does the disease or condition mean that the seafarer or fisherman would have difficulties handling an emergency on board?

When assessing persons who sign on for the first time, special account should be paid to whether the disease or condition could, in the future, be expected to become a hindrance to working on board merchant and fishing vessels.

		Column A <i>Persons who sign on for the first time, i.e. anyone who goes to sea for the first time, who has not worked on board a ship within the last five years as well as all seafarers and fishermen below the age of 18.</i>	Column B <i>Professional seafarers, i.e. seafarers and fishermen older than 18 years who have worked on board a ship within the last five years and for whom the maritime or fishing business must be considered their main occupation.</i>
I.	MALIGNANT TUMOURS, including lymphoma and leukaemia	Absolute rejection in cases where the disease, its consequences and risk of recurrence result in immediate danger or risk of inability to work. Otherwise, possible limitation in time and trade area.	Absolute rejection in cases where the disease, its consequences and risk of recurrence result in immediate danger or risk of inability to work. Otherwise, possible limitation in time and trade area.
II.	ENDOCRINE DISORDERS		
	1. Hyper-hypothyroidism:		
	- well-controlled	Possible limitation in time and trade area.	Possible limitation in time and trade area.
	- not well-controlled	Absolute rejection.	Absolute rejection.
	2. Diabetes mellitus:		
	- Insulin dependent	Well-regulated, no hypoglycaemic episodes with influence on consciousness within the last two years. The treatment shall be under regular supervision by a doctor and the seafarer shall have the necessary understanding of his disease and be able to perform blood sugar measurements. Limitations: Time – no more than one year. Field of work on board – not in a position mentioned in a ship’s minimum safe manning document or in a training position leading to such a position. Duty on board fishing vessels not accepted.	Well-regulated, no hypoglycaemic episodes with influence on consciousness within the last two years. The treatment shall be under regular supervision by a doctor and the seafarer shall have the necessary understanding of his disease and be able to perform blood sugar measurements. Limitations: Time – no more than one year – and possibly in field of work on board.
	- Tablet treated	Well-regulated, no hypoglycaemic episodes with influence on consciousness within the last two years. The treatment shall be under regular supervision by a doctor and the seafarer shall have the necessary understanding of his disease. Limitations: Time – no more than one year. Field of work on board – not in a position mentioned in a ship’s minimum safe manning document or in a training position leading to such a position.	Well-regulated, no hypoglycaemic episodes with influence on consciousness within the last two years. The treatment shall be under regular supervision by a doctor and the seafarer shall have the necessary understanding of his disease. Limitations: Time – no more than one year – and possibly in field of work on board.
	- Adiposity	The condition shall be stable without any important symptoms. The treatment shall be under regular	The condition shall be stable without any important symptoms. The treatment shall be under regular

		supervision by a doctor. Possible limitation in time.	supervision by a doctor. Possible limitation in time.
	3. Considerable fatness:		
	A <u>B</u> ody <u>M</u> ass <u>I</u> ndex (BMI) > 40 kg/m ² shall cause a specific evaluation.		
	If the conclusion of the evaluation is that the fat and muscle distribution is a severe limitation to mobility.	Absolute rejection.	Possible limitation in time, field of work on board and trade area.
III.	MENTAL DISORDERS ²		
	1. Psychoses and serious mood (affective) disorders (F2 and F3, possibly F20-F29 and F30-F39):		
	- Present and previous with less than two years without symptoms.	Absolute rejection.	Absolute rejection.
	- Previous, with at least two years without symptoms or without treatment.	Possible limitation in time, field of work on board and trade area.	Possible limitation in time, field of work on board and trade area.
	2. Milder cases of mood (affective) disorders (F3, possibly F30-F39), nervous conditions (F4 and F5, possibly F40-F48 and F50-F59) and personality disorders (F6, possibly F60-F69), causing insufficient functional capability or disabling symptoms.	Absolute rejection.	Absolute rejection.
	- Previous, with at least two years without symptoms or without treatment.	Possible limitation in time, field of work on board and trade area.	Possible limitation in time, field of work on board and trade area.
	3. Pervasive mental functional disorders, including dementia and other organic conditions	Absolute rejection.	Absolute rejection.

² The designation used consisting of an “F” followed by one or more figures refers to the international classification of diseases and health problems (ICD 10).

	(F0, possibly F00-F09), mental retardation (F7, possibly F70-F79), pervasive developmental disorders (F84) and hyperkinetic disorders (F90).		
	4. Abuse of psychoactive substances, including regular use of psychoactive substances which possibly may have a negative influence on the examined person's judgment in relation to safety and health at sea. Beyond this, dependence syndromes, harmful abuse or psychic disorders caused by psychoactive substances. Psychoactive substances shall mean alcohol and other psychoactive substances, including opiates, sedatives and hypnotics, cocaine and other stimulants, cannabinoids, hallucinogens and volatile solvents (F1, possibly F10-F19).	Absolute rejection.	Absolute rejection.
	- Previous, with at least two years of abstinence from drug use confirmed by a doctor.	Possible limitations in time, field of work on board and trade area.	Possible limitations in time, field of work on board and trade area.
IV.	DISEASES OF THE NERVOUS SYSTEM		
	1. <u>Epilepsy:</u>		
	- with attacks within the last two years with or without medical treatment.	Absolute rejection.	Absolute rejection.
	- with attacks within the last ten years, but not within the last two years with or without medical treatment.	Absolute rejection for a position mentioned in a ship's minimum safe manning document or in a training position leading to such a position.	Absolute rejection for a position mentioned in a ship's minimum safe manning document or in a training position leading to such a position.

	- without attacks for at least ten years, of which the last five years shall be without medical treatment.	For a position mentioned in a ship's minimum safe manning document, a declaration on the risk of attacks shall be available from a specialist in neurological diseases.	For a position mentioned in a ship's minimum safe manning document, a declaration on the risk of attacks shall be available from a specialist in neurological diseases.
	2. Cerebrovascular diseases.	Absolute rejection in the first six months after the disease initiated. Hereafter individual assessment of the risk of recurrence. There must not be <i>sequelae</i> of importance and any underlying disease shall be treated. Possible limitation in time, field of work on board and trade area.	Absolute rejection in the first six months after the disease initiated. Hereafter individual assessment of the risk of recurrence. There must not be <i>sequelae</i> of importance and any underlying disease shall be treated. Possible limitation in time, field of work on board and trade area.
V.	DISEASES OF THE SENSORY ORGANS		
	1. Hearing.		
	<i>All services</i> - Ability to hear normal speech at a distance of 4 metres, possibly by the use of a hearing aid.	If not: Absolute rejection.	If not: Possible limitation in field of work on board.
	<i>Look-out duty</i> - Ability to hear normal speech at a distance of 4 metres, both ears tested simultaneously without the use of hearing aid.	If not: No look-out duty.	If not: No look-out duty.
	2. Menière's disease.	Absolute rejection.	Possible limitation in time and field of work on board.
	3. Chronic infection of the middle ear.	Limitation in time and trade area.	Possible limitation in time and trade area.
	4. Vision. ³ <i>All services</i> - Visual acuity, possibly with correction, shall on either right or left eye or both eyes measured simultaneously be at least 0.3.	If not: Absolute rejection.	If not: Absolute rejection.
	<i>Engine room duty</i>	If not: No service in the engine room.	If not: No service in the engine room.

³ Visual acuity is indicated according to Snellen decimal notation and shall be measured at a distance of 6 metres.

	- Visual acuity with correction shall, on each eye, be at least 0.5 and test of field of vision, using the finger method, shall not reveal defects in the field of vision.		
	<i>Radio service</i> - Visual acuity with correction shall, on each eye, be at least 0.5 and test of field of vision, using the finger method, shall not reveal defects in the field of vision.	If not: No radio service.	If not: No radio service.
	<i>Look-out duty</i> - Visual acuity without correction shall on each eye be at least 0.1. Visual acuity with correction shall on each eye be at least 0.5. Field of vision shall be normal and the examined person shall not have recognised difficulties in sense of locality under reduced lighting.	If not: No look-out duty.	If not: No look-out duty.
	5. Serious and possibly recurrent diseases of the inner eye and outer eye (iridocyclitis, glaucoma and similar diseases).	Absolute rejection.	Limitations in time and field of work on board.
	6. Double vision (diplopia).	Absolute rejection.	Limitations in time and field of work on board.
	7. Colour vision. ⁴ Colour blindness.	No look-out duty.	No look-out duty.
VI.	CARDIOVASCULAR DISEASES		
	1. Ischaemic heart disease with symptoms, significant heart cardiac incompensation.	Absolute rejection if treatment cannot normalise the condition. Possible limitation in time and trade area.	Absolute rejection if treatment cannot normalise the condition. Possible limitation in time and trade area.

⁴ Colour vision shall be examined according to Ishara's "Test for Colour-blindness. Complete edition." One misreading is accepted.

	2. Cardiac arrhythmia with considerable risk of acute symptoms.	Absolute rejection if treatment cannot normalise the condition. Possible limitation in time and trade area.	Absolute rejection if treatment cannot normalise the condition. Possible limitation in time and trade area.
	3. Hypertension, <u>diastolic</u> blood pressure of > 110 mm Hg, <u>systolic</u> blood pressure of > 180-200 mm Hg.	Absolute rejection until well-regulated. Possible limitation in time.	Absolute rejection until well-regulated. Possible limitation in time.
	4. Acute myocardial infarction (AMI), bypass operation, Percutaneous Transluminal Coronary Angioplasty (PTCA), implantation of pacemaker.	Absolute rejection in the first two months after AMI and/or intervention. Hereafter careful individual assessment of functional performance and the risk of late complications. Possible limitation in time and trade area.	Absolute rejection in the first two months after AMI and/or intervention. Hereafter careful individual assessment of functional performance and the risk of late complications. Possible limitation in time and trade area.
	5. Diseases demanding anticoagulant therapy.	Absolute rejection in a position mentioned in a ship's minimum safe manning document or in a training position leading to such a position. For others, absolute rejection in a period after initiating the treatment. After the condition has been stabilised, limitation in time, field of work on board and trade area depending on the cause of the treatment and the prognosis of the disease.	Absolute rejection for a period after initiating the treatment. After the condition has been stabilised, limitation in time, field of work on board and trade area depending on the cause of the treatment and the prognosis of the disease.
VII.	DISEASES OF THE RESPIRATORY SYSTEM		
	1. Pulmonary diseases causing major reduction in functional performance and/or with serious attacks demanding medical treatment (for example asthma) within the last two years.	Absolute rejection.	Absolute rejection.
	2. Less severe pulmonary diseases.	Limitation in field of work on board and trade area.	Possible limitation in field of work on board and trade area.
VIII.	INFECTIOUS DISEASES		
	1. Tuberculosis:		
	- in infectious stage or suspicion of this or insufficient treatment.	Absolute rejection.	Absolute rejection.
	- not in infectious stage, but	Absolute rejection.	Possible limitation in time and trade area.

	under treatment.		
	2. Other infectious diseases in infectious stage.	Absolute rejection.	Individual evaluation based on symptoms and danger of infection.
	3. HIV positive with complications of importance or AIDS.	Absolute rejection, but may pass if trade area is limited to coastal trade after individual evaluation.	Absolute rejection, but may pass if trade area is limited to coastal trade after individual evaluation.
IX.	GASTROINTESTINAL DISEASES		
	1. Dental and gingival diseases, if unsatisfactorily and incompletely treated.	Limitation in trade area.	Limitation in trade area.
	2. Gastric and duodenal ulcers.	Limitation in time and trade area.	Limitation in time and trade area.
	3. Chronic enteritis or colitis at a pronounced stage.	Absolute rejection.	Possible limitation in time and trade area.
	4. Hernias with risk of incarceration.	Limitation in field of work on board and trade area.	Limitation in trade area and possibly field of work on board.
	5. Gallstones giving symptoms.	Absolute rejection.	Absolute rejection.
	6. Pancreatitis giving symptoms.	Absolute rejection.	Absolute rejection.
X.	UROGENITAL DISORDERS		
	1. Kidney stones:		
	- with acute symptoms.	Absolute rejection.	Absolute rejection.
	- recurring with acute symptoms within the last two years.	Limitation in trade area and possibly field of work on board.	Limitation in trade area and possibly field of work on board.
	2. Chronic and sub-chronic nephritis and nephroses.	Absolute rejection.	Possible limitation in time and trade area depending on certificate from specialist in renal diseases.
XI.	SKIN DISEASES		
	Serious infectious or allergic skin reactions.	Possible limitation in field of work on board and trade area.	Possible limitation in field of work on board and trade area.
XII.	CONGENITAL DISEASES IN THE SKELETON, ORGANS OF LOCOMOTION AND CONNECTIVE TISSUE, OR CONSEQUENCES OF INJURY AND INFECTIONS		
	1. Resulting in reduced performance affecting work and in the event of an emergency situation.	Absolute rejection.	Possible limitation in time, field of work on board and trade area.

	2. Polyarthritis, chronic.	Absolute rejection.	Possible limitation in time, field of work on board and trade area.
	3. Arthroses, spondylosis, severe.	Absolute rejection.	Possible limitation in time, field of work on board and trade area.
	4. Slipped disc (prolapsed intervertebral disc) with serious radicular symptoms.	Absolute rejection.	Absolute rejection.
XIII.	PREGNANCY		
	Pregnancy, uncomplicated.	Up to the end of 6 th month, limitation in field of work on board and trade area. Hereafter absolute rejection.	Up to the end of 6 th month, limitation in field of work on board and trade area. Hereafter absolute rejection.
XIV.	OTHER DISEASES OF IMPORTANCE FOR SEAFARERS AND FISHERMEN		
	Other conditions which may cause a significant risk for own health or cases where an acute disease contracted by the seafarer or the fisherman has significance for the safety of the ship.	Individual assessment of risk. May result in absolute rejection or possibly limitation in time, field of work on board and trade area.	Individual assessment of risk. May result in absolute rejection or possibly limitation in time, field of work on board and trade area.

List of standard limitations normally used in trade area

Coastal trade

Trade in the North Sea east of 3° E longitude and south of 62° N latitude, trade in the Baltic Sea south of 58° N latitude as well as trade along the coasts of Greenland at a distance not exceeding 30 nautical miles from the coast (the base line).

Limited waters

Coastal trade as well as trade south of 62° N latitude, north of 48° N latitude and east of 12° W longitude, trade in the Baltic Sea north of 58° N latitude, trade off the Faroe Islands and trade along the coasts of Greenland at a distance not exceeding 200 nautical miles from the coast (the base line).

Defined navigation route

After individual assessment, fitness may be limited to a specific navigational route, normally a ferry service or similar.

Defined area

After individual assessment, fitness may be limited to a specific lake, port or inlet.