

## Medical Form

**To the examining physician: Mountain guiding involves leading clients in roped climbing and otherwise hazardous terrain in summer and winter. The profession demands the highest level of physical and mental fitness. Failure of the guide's health in the mountain environment would seriously jeopardize the lives of the guide and clients.**

Health History	Yes	No	Comments (attach sheet if necessary)
CV Dis (ischaemic, arrythmia):			
Neurological Dis (epilepsy):			
Respiratory Dis (asthma, Pneumonia):			
Metabolic Dis (diabetes):			
Psychiatric Dis:			
Addictions (alcohol, drugs):			
Sensory (visual, hearing, vertigo):			
Other significant Dis:			
Medications:			

Details of any Yes answers and how they might impair professional performance.

Physical Examination	Normal	Abnormal	Comments (attach sheet if necessary)
CV System:			
Musc-Skeletal System:			
Nervous System:			
Respiratory System:			
Psychiatric Evaluation:			
GI System			
GI System:			
Auditory Acuity:			
Visual Acuity (with correction):			
Blood Pressure – Systolic:			Diastolic:
Urinalysis-Protein:			Glucose :

Details of any abnormalities and how they might affect professional performance.

**Health Evaluation:**

Is the aspirant fit to guide? YES \_\_\_\_ NO \_\_\_\_

(If in doubt arrange the appropriate consultation and include results).

Name of aspirant (Please print): \_\_\_\_\_

Examining physician (Please print): \_\_\_\_\_

Signature of physician: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_