

NOTES FOR PARACHUTISTS Parachutists need a reasonably high standard of physical fitness and must not be overweight in relation to their sex, age, and height. No person above the age of 55 years will normally be accepted for novice parachute training. Exceptions to this rule may be allowed if the candidate either has previous experience or is of a high standard of fitness and can convince the instructor of that fitness.

As well as the conditions listed overleaf, the following may cause problems to parachutists and if you have ever suffered from any of them you must seek medical approval before parachuting:

Previous fractures, back strain, arthritis and severe joint sprains. Chronic bronchitis. Asthma. Rheumatic fever. Pneumothorax. Liver or Kidney disease. Thyroid, adrenal or other glandular disorder. Chronic ear or sinus disease. Any condition which requires the regular use of drugs. Anaemia. Recent blood donation.

If you wear spectacles they should be securely attached while parachuting. If contact lenses are used, protective goggles should be worn. Your sight must be adequate to read a car number plate at 25 yards.

NOTES FOR DOCTORS Cardiorespiratory fitness is important. Sport parachutists make descents from unpressurised aircraft at heights of 2,000 to 15,000 feet above sea level without supplementary oxygen. At 15,000 feet there is a 40% reduction in available oxygen. A tachycardia of 120 - 160 bpm is common in experienced parachutists and 200 bpm is not unusual in novices. The tachycardia may be present at the same time as relative hypoxia and considerable physical exertion.

Musculoskeletal fitness is required. The parachutist must be able to operate his equipment with either hand and should be able to exert a pull of 30 lbs with either hand in any direction. During the parachute deployment there is a brisk deceleration, usually about 4g but occasionally up to 15g. The landing impact typically involves a descent rate equivalent to jumping from a wall 4 feet high, with a horizontal speed of 0 - 15mph. Occasionally the landing impact may be considerably greater than this. Pre-existing spinal or joint injuries may be exacerbated. Obesity increases the likelihood of lower limb or spinal injuries.

A visual acuity of at least 6/12 (after correction with spectacles or contact lenses) is required. Blindness in one eye is acceptable provided that the remaining eye has a full field and the candidate has adapted to monocular vision. Middle ear or sinus disease may cause problems due to the rapid changes in ambient air pressure. The rate of descent in freefall may exceed 10,000 ft/min and under an open canopy 1,000 ft/min. Normal peripheral sensation and coordination are required to activate the parachute but may be impaired by disorders of the nervous system or peripheral vasculature. On early jumps the candidate is responsible mainly for his own safety but must behave in such a way as to cause no hazard to others. After further training, but no further medical evidence, the candidate may be the sole person responsible for the safety of an aircraft full of student parachutists. The candidate must be physically and psychologically fit to carry this responsibility.

The following conditions will normally make a candidate UNFIT to parachute, although there are some exceptions: Any condition which can lead to blackouts, impaired consciousness or impaired concentration. Tendency to persistent or recurrent weakness or dislocation of any limb particularly dislocating shoulder (unless successfully corrected by surgery). Conditions requiring the use of medication with sedative or psychotropic side effects. A history of ischaemic heart disease, uncontrolled hypertension, other significant cardiac or respiratory disease, cerebrovascular disease, epilepsy, diabetes, mental illness, drug addiction, alcohol dependence, significant CNS disease. **A certifying doctor is not stating that a candidate will remain free of injury or problems during parachuting, but that records, history or appropriate clinical examination have not suggested unacceptable medical risk factors.** The preferred level of skill is usually that of a GP without specialist knowledge of parachuting but usually with access to the candidate's records or a specialist responsible for the patient's care. Other doctors completing the certificate should remain aware that lack of access to the medical record can result in important conditions being overlooked. In cases of doubt, or where further information is required, the Medical Adviser to the British Parachute Association or the National Coach and Safety Officer will be pleased to help, and may be contacted at the address overleaf.

These notes are not exhaustive. Some candidates who are 'unfit' using the above criteria may still be fit to make a tandem parachute descent (strapped into a common harness with an experienced instructor) - see separate 'Student Tandem Parachutist' form.

VALIDITY The *Parachutist's Declaration* overleaf places the parachutist under a permanent obligation to cease parachuting until obtaining a doctor's certificate if he/she develops any of the listed conditions. It should be renewed every 10 years up to the age of 40, and thereafter whenever a doctor's certificate is reissued. *Doctor's Certificates* are valid as follows:

If required under age 40	-	As indicated by stability of medical condition (but not beyond age 40)
Age 40 - 49 years	-	The longer of "3 years" or "until age 50"
Age 50 years or over	-	3 years

providing that the examining doctor can specify a shorter period of validity if he/she feels it appropriate.

