

SNORKEL/Freediving SILFRA MEDICAL STATEMENT

To be read and signed by each participant

Snorkeling/freediving in silfra is a beautiful experience that we love to share with everyone. However, it is a demanding activity that can lead to overexertion and exhaustion. It is also important to understand that exposure to near freezing point glacial melting water includes potential hazards. To minimize the risks involved in this activity, we request that every potential participant read and fill out this form carefully. Your safety is our primary concern!

Please be aware that there have been serious incidents at Silfra involving participants in the medical risk groups identified in this release. This form is to be taken seriously and a full YES or NO answer must be given to each of the medical conditions listed on the righthand side.

Please be aware of the following conditions related to snorkeling or freediving in Silfra:

- Because of the geographical layout of Silfra, participants must walk in full gear about 150 meters to the entry point and later 350 meters from the exit stairs back to where the tour started.
- In-water duration is 30-50 minutes and the water temperature is 2° Celsius. For his reason, participants should have eaten breakfast or lunch before the activity starts.
- Participants wear a neoprene hood and semi-dry neoprene gloves. This means that the heads and hands are exposed to the water. Part of the face will not be covered by the hood and therefore be in direct contact with the water.
- There is a slight current in Silfra and participants must be comfortable swimming against it during the last part of the tour.
- Participants use a snorkel to breathe throughout the activity. This is a breathing tube with one end in the water and the other in the air.
- Silfra is situated in the Þingvellir national park. This is a UNESCO World Heritage Area and new constructions are not allowed. This means that participants change in our tour vans in potentially wet, windy, and cold weather conditions. In winter, outside temperatures in Iceland may be far below the freezing point.
- Participants should bring adequate thermal protection for the time before and after the freedive/snorkel and keep in mind that the weather in Iceland may change within minutes. Make sure to have a hat and gloves along during winter!
- Participants cannot wear most types of jewelry in the water. Please leave accessories not needed on tour at your accommodation so that they do not get lost.

Please answer the following questions about your past and current medical history.

Section 1: Do any of the following apply to you? A **YES** or **NO** answer must be provided for each question. A **YES** in this section means that unfortunately we cannot take you on our snorkeling/freediving tour. This is for your own safety!

- Inability to perform moderate exercise (walk 1 mile/1.6 km within 12 minutes)?
- Are you pregnant?
- Any form of lung disease?
- Pneumothorax (collapsed lung), other chest disease or chest surgery?
- Head injury with loss of consciousness in the past five years?
- Any kind of heart disease, heart surgery or heart attack?
- Thrombocytopenia or other blood disorders?
- Colostomy or ileostomy?
- Epilepsy or conditions resulting in sudden unconsciousness?

Section 2: Do any of the following apply to you? A **YES** or **NO** answer must be provided for each question. A **YES** in this section means that you need to get medical clearance from a doctor in order to participate in the tour. You can find the required medical form on page two of this document.

- Are you currently taking any prescription medication?
- Currently or recently under any kind of medical care (last 12 months)?
- High cholesterol level?
- High blood pressure or taking medicine to control blood pressure?
- Diabetes, mellitus, even if controlled by diet alone?
- Asthma, or wheezing with breathing or wheezing with exercise?
- Behavioral or mental health problems (panic, fear of closed/open spaces)?
- Dysentery or dehydration?
- Back, arm or leg problems following surgery, injury or fracture?
- Ulcer or ulcer surgery?
- Recreational drug use or treatment for Alcoholism in the past 2 years?
- Raynaud's syndrome?
- Vertigo/dizziness?
- Cancer?
- Age 60 or older? (note: the age limit for Silfra tours is 65)

I fully understand the content of this form and the information I have provided about my medical history is accurate to the best of my knowledge. I agree to accept responsibility for omissions that are a result of my failure to disclose any existing or past medical health condition/s.

Name: _____

Date: _____

Signature: _____

PHYSICIAN APPROVAL

For Snorkeling/Freediving Silfra Tours in Iceland

Participant Name _____

Dear Physician,

The above patient of yours wishes to participate in a snorkeling or Freediving tour with us here in Iceland, but has answered YES to a question in Section 2 on the preceding page. Your assessment of the individual's fitness for the tour is therefore required.

Please note that there have been serious medical incidents in Silfra involving participants in the risk groups identified in Section 1 and Section 2 on the preceding page.

Snorkeling and Freediving in Silfra includes the following:

- Participants wear full body wetsuits.
- Participants must walk in full gear about 150 meters to the entry point and later 350 meters from the exit stairs back to where the tour started.
- In-water duration is 30-50 minutes and the water temperature is 2° Celsius.
- The heads and hands of participants are exposed to the 2° Celsius water through a mitigating material.

Part of the face is not covered by the hood and will therefore be in direct contact with the water.

- There is a slight current in Silfra and participants must be able to swim against it during the last part of the tour.
- Participants use a snorkel to breathe throughout the activity. This is a breathing tube with one end in the water and the other in the air.
- Participants change in our tour vans in potentially wet, windy and cold weather conditions. In winter, outside temperatures in Iceland may be far below the freezing point.

Physician's Impression

- I find no medical conditions that I consider incompatible with the activity described above.
- I am unable to recommend this individual for the activity described above.

Remarks _____

Physician's Signature _____

Date ____/____/____

Physician Name _____

Clinic/Hospital _____

Address _____

Phone _____ Email _____