

## Jetttime Medical Information & Handling Advice for Air Transport of Incapacitated Passengers

The Physician coordinating/referring the incapacitated passenger is requested to answer all questions. Please type or use block letters.			
I do hereby certify that (Date of birth):		Booking number:	Sex: Age:
Insurance Company:		Policy Number:	
Date of outbound flight: Flight number: Route:		Date of homebound flight: Flight number: Route:	
<b>MANDATORY.</b> Diagnose, brief medical history and treatment:		The prognosis for the flight(s) is good: The passenger is able to use normal seat:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
Contagious: <input type="checkbox"/> Yes <input type="checkbox"/> No		Offensive to other passengers:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>MANDATORY.</b> If diagnosis is COPD or any other lung diseases and oxygen is required, the approving physician must be a COPD specialist. Oxygen required: If oxygen is otherwise required - please indicate saturation:		If yes: ____ SpO2 (without oxygen) ____ SpO2 (with oxygen) ____ / liter pr. min.	<input type="checkbox"/> Yes <input type="checkbox"/> No
The patient will bring own: Oxygen concentrator Oxygen bottle		If yes: ____ 1 liter/minute ____ 2 liter/minute	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Note!</b> An escort qualified and capable of assisting the patient during flights, is required when the patient: <ul style="list-style-type: none"> <li>- must be lifted, moved, or supported.</li> <li>- requires assistance during meals.</li> <li>- requires medical observation or/and attention</li> </ul>			
<b>The patient will be escorted by:</b> A Doctor A Nurse An assisting person		<input type="checkbox"/> Yes <input type="checkbox"/> Yes <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> No <input type="checkbox"/> No
<b>Wheelchair is needed:</b>	<input type="checkbox"/> No	<input type="checkbox"/> Yes WCHC Completely immobile/ carried to the seat	<input type="checkbox"/> Yes WCHR Can ascent/ descend steps
<b>Coordinating/referring physician/Specialist</b>		<b>Passenger</b>	
Name:		Name:	
Telephone Number:		Telephone Number:	
Address/Email:		Address/Email:	
Date, signature and stamp:		Date and signature:	
<b>This form must be sent to Jetttime Prior to flight.</b> The scanned document can be sent by email to: <a href="mailto:customerservice@jetttime.com">customerservice@jetttime.com</a> For further information call: Direct phone: +45 3246 7317			

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### INFORMATION TO THE PHYSICIAN

The following factors are of predominant importance when considering recommendations of transport of sick and incapacitated persons by civil aircraft:

1. The air pressure within the pressurized cabin will be equivalent to an altitude of 1500-2500 meters (5000-7000 ft.) with consequent expansion of any gas within the body cavities and reduction of alveolar oxygen pressure.
2. All JETTME aircrafts carry supplies of oxygen for use in cases of emergency. For passengers requiring a regular EXTRA supply of oxygen during flights, JETTME will make available, if notified at least 3 days prior to departure, oxygen bottles supplying about 2-4 liters of oxygen/minute.
3. Technical limitations of space and comfort. Stretcher dimensions will be given by JETTME on request.
4. Any medicine or equipment for treatment on route must be provided by the passenger if not otherwise agreed with JETTME.
5. Cabin Attendants are trained in First Aid only and are not expected to give particular attention to sick and/or incapacitated passengers to the detriment of other passengers. Cabin attendants are not allowed to dispense medication (except for medication included in the JETTME First Aid Kit) or give injections.
6. Any transport of patients/incapacitated passengers with JETTME requires submission of this form to HQ JETTME for approval prior to the transport. Lack of submission will result in denial of patient access to JETTME aircraft.
7. Any transfer of sick or incapacitated passengers (patients) requiring any medical observation, attention or help must be escorted by competent medical personnel.

#### **CONDITIONS GENERALLY CONSIDERED UNACCEPTABLE FOR AIR TRAVEL**

GUIDING PRINCIPLES for use, when deciding whether a person is physically and psychically fit to travel by air, are listed below. The principles are based on The International Air Transport Association (IATA) Medical Committee recommendations but are modified by JETTME for use on JETTME aircraft.

Although each case will be considered on its own merits, the following conditions are generally considered unacceptable for air travel.

1. Anemia of severe degree (< 10 mg % / < 6 mmol/l).
2. Otitis media and sinusitis.
3. Acute contagious or communicable disease (i. e. open tuberculosis).
4. Recent Myocardial infarction. Unstable ischemic cardiac disease and/or severe cardiac arrhythmia.
5. Severe congestive cardiac failure.
6. Hypertensive disease with severe complications.
7. Pulmonary insufficiency and pulmonary embolism.
8. Peptic ulceration with hemorrhage and bleeding from gastro-esophageal varices within the last 2 weeks.
9. Post-operative cases (only if without complications):
  - a. Within one week of laparoscopic abdominal surgery.
  - b. Within one week of simple abdominal surgery.
  - c. Within 10-14 days of chest surgery.
10. Persons with acute intra-abdominal infections (to include pancreatitis).
11. Pregnancies:
  - a. Beyond the end of the 36th week for international flights lasting more than 4 hours.
  - b. Beyond the 38th week for any flight.
  - c. With severe complications (i.e. imminent abortion or delivery, abruption of placenta, bleeding etc.).
12. Persons with contagious or repulsive skin diseases.
13. Persons with entrapped gas such as a recent pneumothorax, recent intraocular lesions, or surgery, recent ventriculography, cranial lesions or surgery, and conditions with increased intracranial pressure or conditions (i.e. intracranial tumors) likely to develop increased intracranial pressure.
14. Infections involving the CNS (i.e. meningitis, recent poliomyelitis unless one month has elapsed since the onset of the disease, bulbar poliomyelitis etc.).
15. Cerebral infarction within the last 2 weeks.
16. Persons with large mediastinal tumors, large unsupported hernias, and intestinal obstructions.
17. Persons with recent fracture of the mandible with permanent wiring of the jaw.
18. Psychotic patients.
19. Burn patients with 2nd and 3rd degree burns, except for minor (< 1%), non-smelling burns.
20. Unstable fractures of Column vertebrae.
21. Incontinence, unless special arrangements are made.

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