

**Guidance for electronic submission of Medical certificate and Declaration of unfitness, cf. the Regulations of 5 June 2014 No. 805 on medical examination of employees on Norwegian ships and mobile offshore units**

**Who can use Altinn**

The electronic form for issuance of Medical certificate and Declaration of unfitness shall be used by all Norwegian Authority approved seafarer's doctors with a Norwegian (I)D-number. Please log on to Altinn using your D-number and your personal password.

If you have not received a D-number you will not be able to log on.

By using Altinn you will have access to the Norwegian Maritime Authority's (NMA) database. The database contains medical information regarding seafarer's. You have to search for the seafarer before you can register medical information. If the seafarer is not to be found in the database, you can register the person yourself.

**Equipment needed**

To use the electronic forms you will need a PC/Mac with an Internet connection. A program for reading PDF files is also necessary. You may install such a program from [Adobe](#).

**Note:** The form for assessment of medical fitness (KS-0497 E) found on our website [www.sdir.no](http://www.sdir.no) is still to be used and kept on file.

This guidance relates to the electronic submission of Medical certificate and Declaration of unfitness, which is mandatory.

**Layout of the form**

The screen is divided into three parts. One/two of them are to be shown in this guidance.

On the left, you will find the overview of the form. In the middle of the screen you will find the actual form where you enter the information from the medical examination. On the right, help texts will be available when clicking the "?"-symbols throughout the form.

On the left of your screen you will see an overview of the following:

Information about the seafarer

Seafarer's address

Previous decisions

Medical certificate

Declaration of unfitness

About the decision

Summary

You may use the buttons "Previous" and "Next" to skip from one to another page in the form without losing any information.

Should you need to log out of Altinn before completing and submitting the form, the information you have entered in the form will still be available in "Inbox" when you log on to Altinn again.

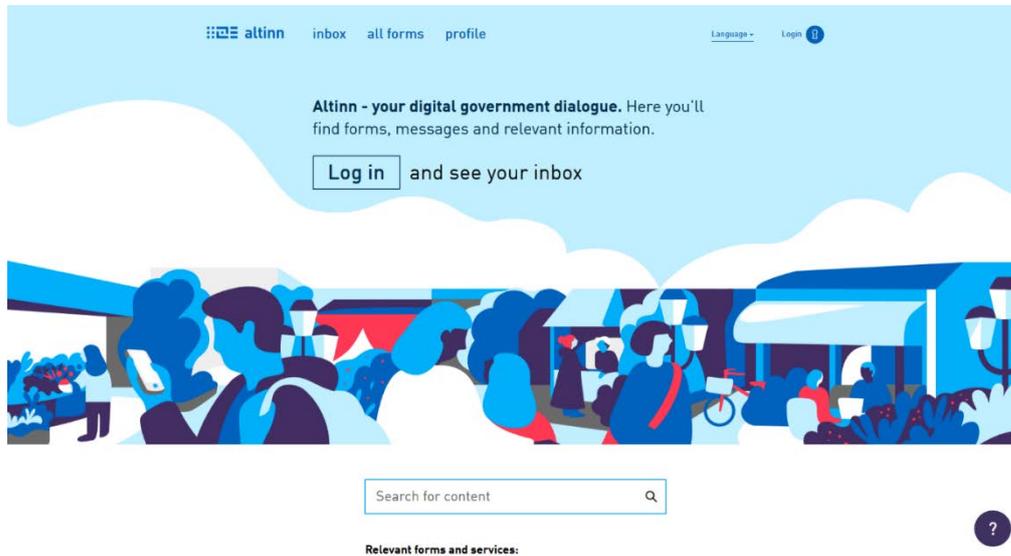


*Innhold*

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## 1. HOW TO LOG ON TO ALTINN

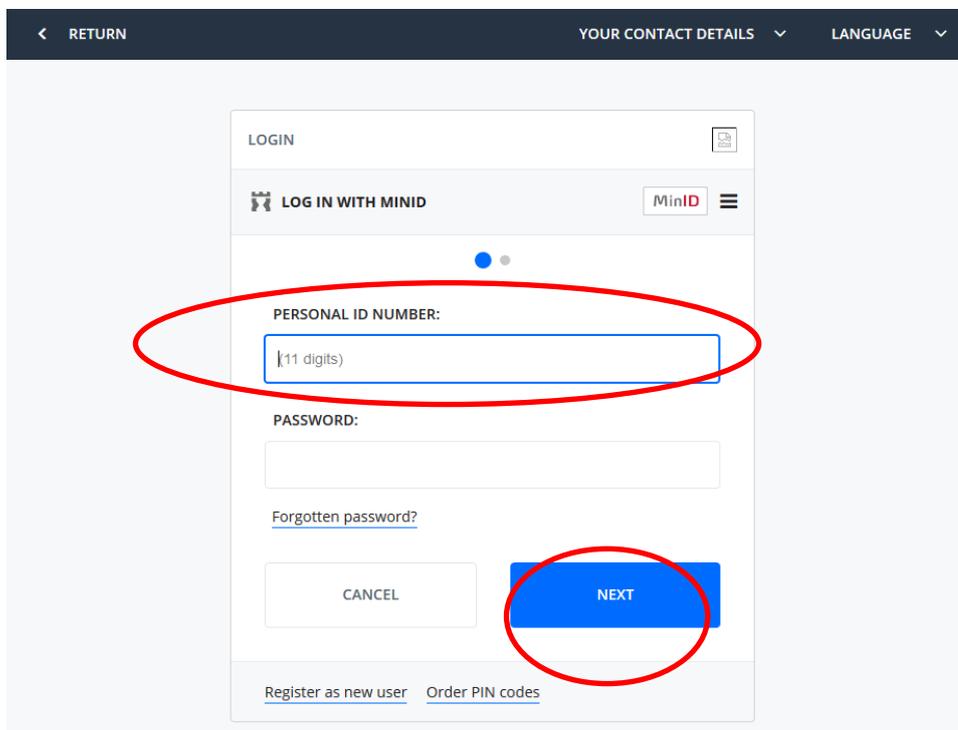
The forms for Medical certificate and Declaration of unfitness in electronic versions are accessible through the portal [Altinn.no](https://altinn.no)



### Log on with your personal (I)D number and your password

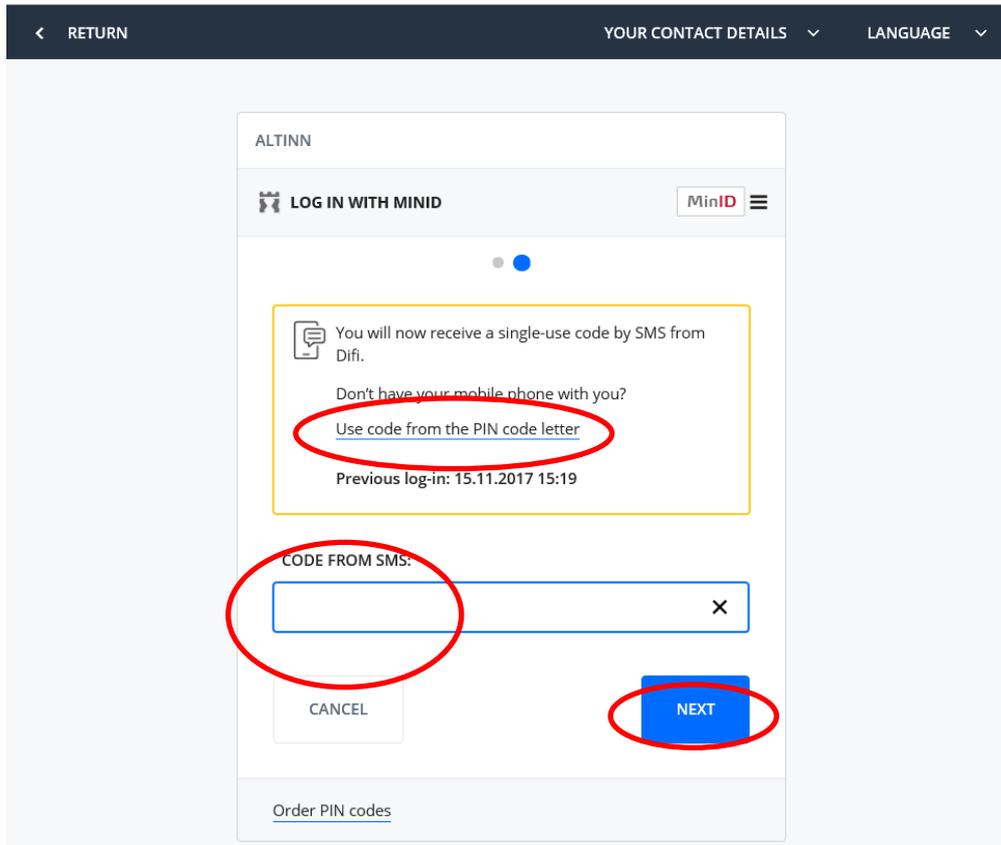
D number is given by The Central Coordinating Register for Legal Entities. Password is selected personally. (If you have forgotten your password please use the button “Forgotten password?” and follow the instructions given.)

Are you experiencing other problems to log on please send an e-mail to [line.myklebust@sdir.no](mailto:line.myklebust@sdir.no)

The image shows a screenshot of the Altinn login form. The form is titled 'LOGIN' and includes a 'LOG IN WITH MINID' section. The 'PERSONAL ID NUMBER:' field is highlighted with a red oval and contains the placeholder text '{11 digits}'. Below it is the 'PASSWORD:' field. There is a 'Forgotten password?' link. At the bottom, there are 'CANCEL' and 'NEXT' buttons, with the 'NEXT' button also highlighted by a red oval. The form is set against a dark header with 'RETURN', 'YOUR CONTACT DETAILS', and 'LANGUAGE' options.

Click “Next”.

## Type your Code from SMS or Code letter



ALTINN

LOG IN WITH MINID MinID

You will now receive a single-use code by SMS from Difi.

Don't have your mobile phone with you?  
[Use code from the PIN code letter](#)

Previous log-in: 15.11.2017 15:19

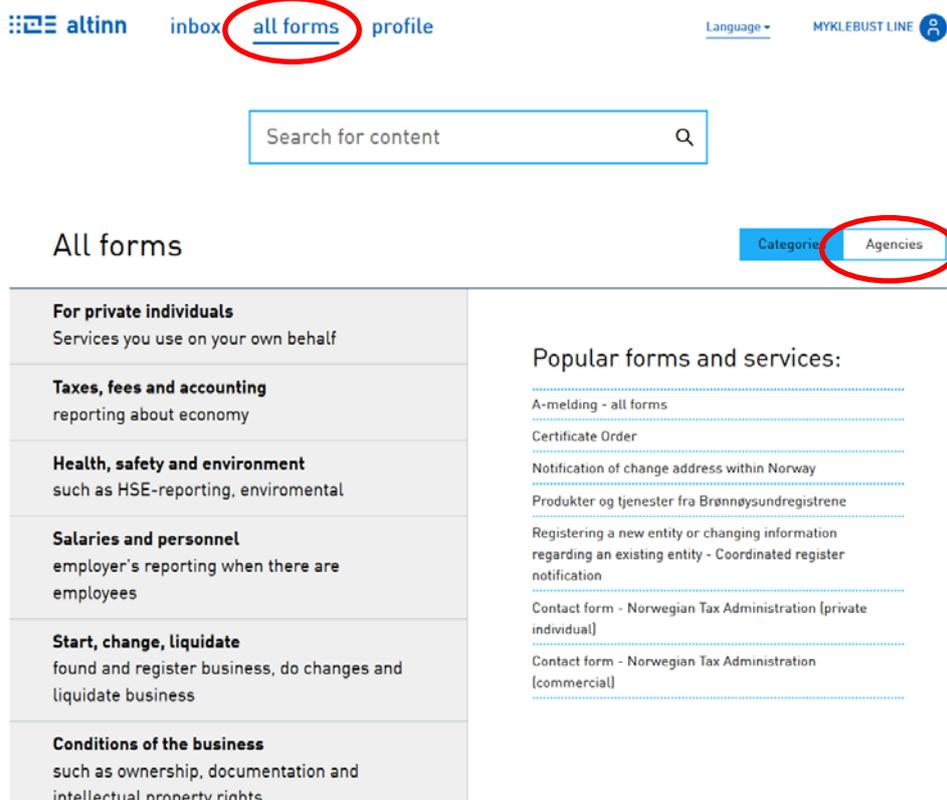
CODE FROM SMS:

CANCEL NEXT

[Order PIN codes](#)

Click "Next".

Select "all forms" and "Agencies":



altinn [inbox](#) [all forms](#) [profile](#) Language MYKLEBUST LINE

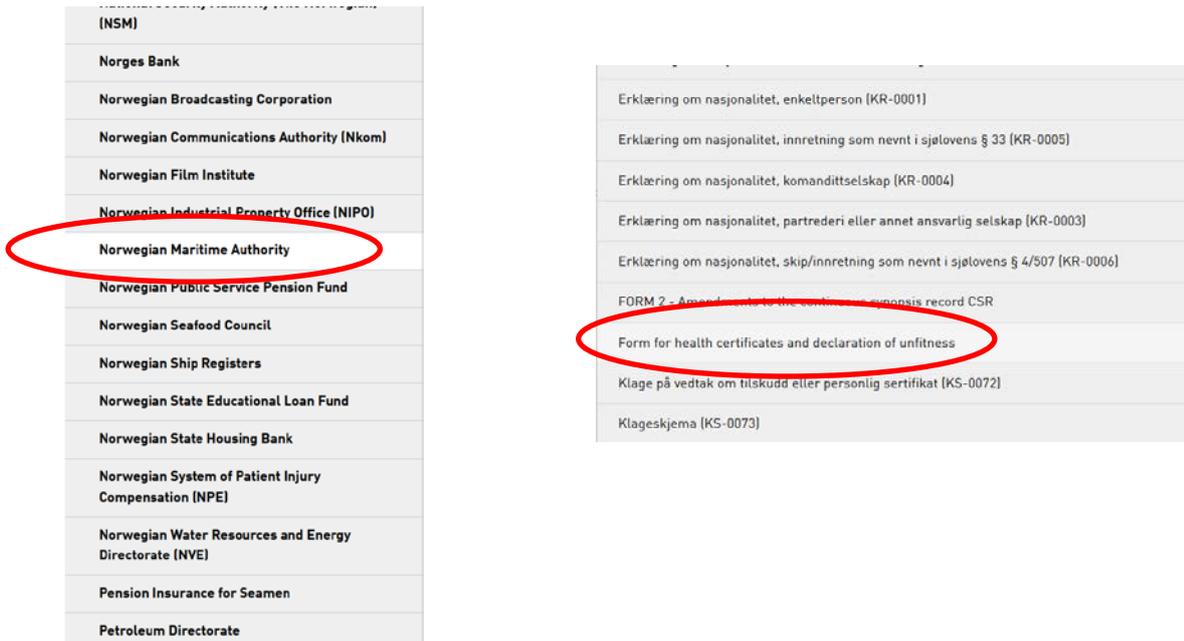
Search for content

### All forms

Categories Agencies

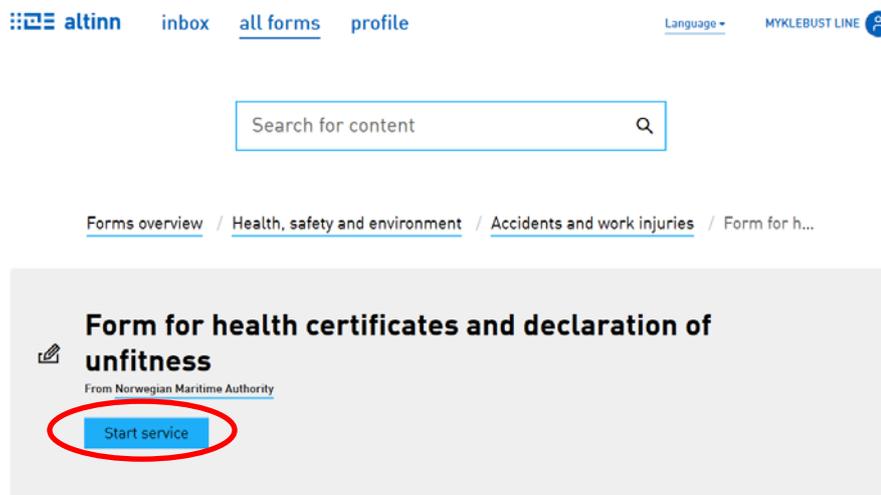
<b>For private individuals</b> Services you use on your own behalf	<b>Popular forms and services:</b> <a href="#">A-melding - all forms</a> <a href="#">Certificate Order</a> <a href="#">Notification of change address within Norway</a> <a href="#">Produkter og tjenester fra Brønnøysundregistrene</a> <a href="#">Registering a new entity or changing information regarding an existing entity - Coordinated register notification</a> <a href="#">Contact form - Norwegian Tax Administration (private individual)</a> <a href="#">Contact form - Norwegian Tax Administration (commercial)</a>
<b>Taxes, fees and accounting</b> reporting about economy	
<b>Health, safety and environment</b> such as HSE-reporting, environmental	
<b>Salaries and personnel</b> employer's reporting when there are employees	
<b>Start, change, liquidate</b> found and register business, do changes and liquidate business	
<b>Conditions of the business</b> such as ownership, documentation and intellectual property rights	

Find “Norwegian Maritime Authority” and select «Form for health certificates and declaration of unfitness»:



If you get an error saying “You do not have access to this form” please send an e-mail to [line.myklebust@mdir.no](mailto:line.myklebust@mdir.no)

Tick off «Start service»:



Tick off «open a new form/service” or “Go to inbox” if you want to continue to register an existing form/service:



## 1 INFORMATION ABOUT THE SEAFARER

### Check the seafarer's ID document

Fill in the information concerning the identification document used, the number of the *Bank identification with picture/National identification card/Driver's license/Passport/Norwegian Sea Service Book*, and the issuing authority. Remember to confirm that you have checked the identification documents.

**Identification document** ?

Fill in information about the identification document

Type	National identification card
Number	1234567
Issued by	Government

confirm that identification documents have been verified during the Medical examination

### Search for seafarer by date of birth

Please search for the seafarer by filling in the date of birth (mm.dd.yyyy) and click "Search".

**Search function** ?

Search below to retrieve data automatically

**Search for seafarer by date of birth** ?

Check here to search for seafarer by date of birth (mm/dd/yyyy) ?

Date of birth

If the seafarers information is archived in the NMA database, you will find the seafarer in the search result like this:

**Search results**

Choose a seafarer from search results

Personal id-number	Birth date	Nationality	First name	Last name	
01017011111	1/1/1970	Norge	Test	sertifikat	<input type="button" value="Choose"/>

When you choose the right profile from the search, the information in Personalia will automatically be pre-filled:

**Personalia** ?

Fill in when registering a new seafarer

Norwegian national identity number/D-number	01017022222
Date of birth	1/1/1970
First and middle name	Test
Last name	Helse
Citizenship	Norway
Gender	Female
Telephone	45065897
Email address	

If the seafarer is not to be found, please click "New seafarer" and manually register the seafarer. Click "Next".

## 2 SEAFARER'S ADDRESS

The seafarer's address will be pre-filled if the seafarer is already registered in the database. If the seafarer is not registered in the system, you need to fill in the seafarer's address manually. Please send an e-mail to [line.myklebust@sdir.no](mailto:line.myklebust@sdir.no) if you want to change the address.

Example of pre-filled address:



**Declaration of Health/unfitness**  
Form for submission of medical certificate/declaration of unfitness by seafarer's doctors

**Registered address**  
The seafarer's registered address

Address line 1: Bom  
Address line 2:   
Postal code: 5417  
City: Stord  
Country: Norway

Click "Next".

## 3 PREVIOUS DECISIONS

The system allows you to check previously issued medical forms. You can easily read the summary of any Medical Certificate/Declaration of Unfitness by entering the number of the form in the search field. The list is sorted by date. The most important form to read through is the last one registered. You can open any previous decisions by using the search field. Select by Serial number and you will have a summary of the specific form. The picture below on the right side is showing the summary of a previous decision.

4/26/2018	1,224,214	Health declaration	Fit	4/25/2019	Solfrid Therese Josefsen
4/26/2018	1,224,223	Health declaration	Fit	7/25/2019	Line Myklebust
4/26/2018	1,224,227	Health declaration	Fit	4/25/2019	Line Myklebust
5/11/2018	2,002,640	Unfitness declaration	Unfit	1/1/0001	Line Myklebust
5/14/2018	2,002,646	Unfitness declaration	Provisional unfit	1/1/0001	Line Myklebust
5/23/2018	1,229,121	Health declaration	Fit	5/23/2019	Line Myklebust

Select an examination from the list for more details

I'm familiar with the content of the previous decision. ?

This section is a confirmation that you have checked the seafarer's previous medical history before filling in the form.

**Examination**  
Details of the examination

Examination date: 12/9/2014  
Date/place of decision: 12/9/2014 Kontoret  
Signature from seafarer's doctor: BERNER JOHN KOLDAL  
Telephone/Email: 90110874

**Declaration of unfitness**  
Information in case a declaration of unfitness has been issued

Serial number: 2,000,639  
Status: Temporary unfit  
Permission to continue service on board has been granted until the complaint, appeal or application for exemption is decided by the Appellate body: Yes  
Permission has been granted after consultation with: Shipowner

**Health declaration**  
Information of a health declaration has been issued

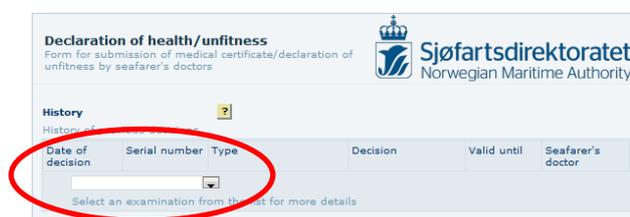
Serial number:  
Hearing meets the standards in STCW Code section A-1/9?  
Unaided hearing satisfactory?  
Visual acuity meets standards in STCW Code section A-1/9?  
Colour meets standards in STCW Code, section A-1/9?  
Date of last colour vision test:  
Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board?  
Fit for lookout duties?  
Fit for safety function(s)?  
Fit for other work on board

**Limitations**  
Service:  
Service area:  
Others (appellate body):

Reference to decision made by the appellate body:

Valid to:

Note: You will not find any previous decision if you are in the process of register a new seafarer. See below picture.



**Declaration of health/unfitness**  
Form for submission of medical certificate/declaration of unfitness by seafarer's doctors

**History** ?

Date of decision	Serial number	Type	Decision	Valid until	Seafarer's doctor

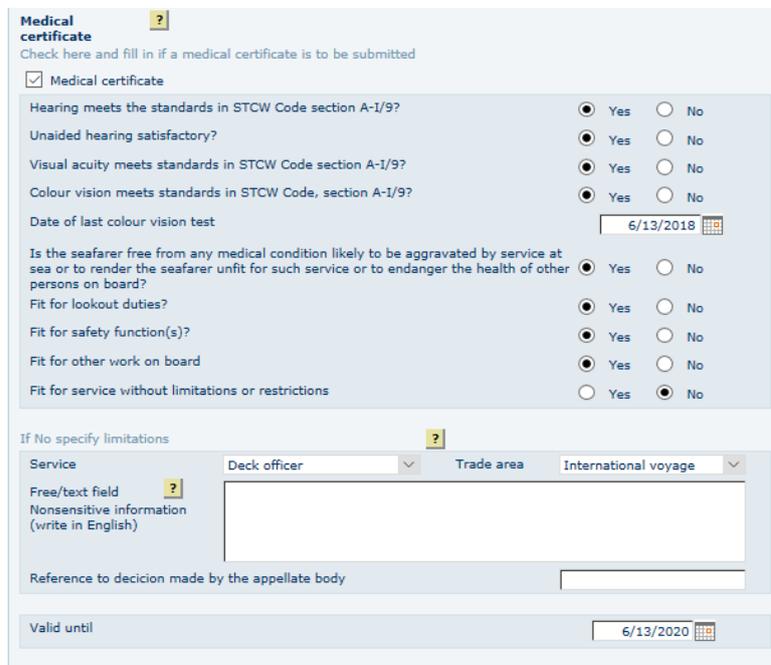
Select an examination from the list for more details

## 4 MEDICAL CERTIFICATE

### Fulfilled requirements

If the seafarer satisfies the health, sight and hearing requirements, a Medical certificate can be issued. Check the box for Medical certificate. A Medical certificate may be limited to a particular trade area, and/or a period of time, and/or service on board.

To limit the Medical certificate you need to choose “No” to “Fit for service without limitations or restrictions” to have access to the Limitations.



To select the date for the last colour vision test, click the calendar symbol. You may also change the date and year by writing **dd/mm/yyyy** (Please note that this is different from the date of birth).

If the seafarer has limitations/conditions concerning his/her fitness you must state which service and/or trade area the Medical certificate applies to. You may enter other limitations/conditions given by your or the Appellate body in the comment field.

*Please note: Information entered in this section will be printed on the Medical certificate/Declaration of unfitness when produced; please do not enter any sensitive information.*

If the Medical certificate to be issued is based on a decision by the Appellate body, please refer to the case number as this will inform other seafarer’s doctors about the decision.

Please remember to fill in valid until, by using the calendar symbol. It is easy to adjust by only changing the year. I.e. 06/13/2018 to 06/13/2020.

Click “Next”.

### Unfit

If the seafarer is found unfit; i.e. if he/she fails to satisfy the health, sight or hearing requirements, you should not check the box for a Medical certificate to be issued, but continue to next page.

## 5 DECLARATION OF UNFITNESS

If the seafarer fails to satisfy the health, sight or hearing requirements, a Declaration of unfitness must be issued. Check the box for Declaration of unfitness, and select the type of Declaration of unfitness to be issued: *Permanent, Temporary or Provisional unfitness.*



Click “Next”.

## 6 POSTPONED EXECUTION OF DECISION

Please find detailed information regarding this in Section 17 in the [Regulations](#).

You shall fill out a declaration of unfitness and a medical certificate if the requirements in Section 17 are met.

Please find different examples of postponed execution of decision:

### Permanent declaration of unfitness and medical certificate

Tick off “Declaration of unfitness”, “Permanent unfitness”, “Postponed execution of decision” and by whom the written permission is given. Furthermore, you have to tick off and fill in the “Medical certificate”. Please note that the medical certificate can only be valid for six months.




## Temporary declaration of unfitness and medical certificate

Tick of “Declaration of unfitness”, “Temporary unfitness”, Postponed execution of decision” and by whom the written permission is given. Furthermore, you have to tick off and fill in the “Medical certificate”. Please note that the medical certificate can only be valid for six months.

**Declaration of unfitness** ?

Check here and select type if a declaration of unfitness is to be submitted

Declaration of unfitness

Permanent unfitness

Temporary unfitness

Postponed execution of decision

Ship owner      ....has granted permission in writing to continue service on board until the appeal or application for exemption is decided by the Appellate Body

Shipmaster

Provisional unfitness

**Medical certificate** ?

Check here and fill in if a medical certificate is to be submitted

Medical certificate

Hearing meets the standards in STCW Code section A-1/97  Yes  No

Unaided hearing satisfactory?  Yes  No

Visual acuity meets standards in STCW Code section A-1/97  Yes  No

Colour vision meets standards in STCW Code, section A-1/97  Yes  No

Date of last colour vision test

Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board?  Yes  No

Fit for lookout duties?  Yes  No

Fit for safety function(s)?  Yes  No

Fit for other work on board  Yes  No

Fit for service without limitations or restrictions  Yes  No

If no specify limitations

Service  Trade area

Free/text field  
Nonsensitive information  
(write in English)

Reference to decision made by the appellate body

Valid until

## 7 ABOUT THE DECISION

Enter the information from the medical examination. To state the date, click the calendar symbol. You may also type the date and year by writing **mm/dd/yyyy**.

Your address and contact information is pre-filled. It is however possible to change the given address.

**Declaration of health/unfitness**

Form for submission of medical certificate/declaration of unfitness by seafarer's doctors

**Helseundersøkelsen** ?

Fyll ut informasjon om undersøkelsen

Date of decision

Undersøkelsesdato

Vedtakssted

**Sjømannslegens kontaktinformasjon**

Telefon

Address line 1

Address line 2

Postal code

City

Country

Click “Next”.

## 8 SUMMARY

The form must be free from defaults before you may proceed. If you receive any messages, you have to amend the defaults before you submit the form.

Please click “Check form” and follow the given instructions.

Click “Close”

**Form check**

Main form  
Declaration of health and unfitness  
This form has been checked, and is ready for submission.

### Proceed to submission

When you have entered all necessary information in the form, and the form is ready for submission, there will be a new available check box next to “Check form”; “Proceed to submission”.

Click "Proceed to submission"

Identification document	
Number	167456
Type	Driving licence
Issued by	Government Authority
Submitter has confirmed the validity of the identity document	
Consultation	
Examination date	6/15/2018
Date of decision	6/15/2018
Place of decision	Haugesund
Submitter confirms that he/she is familiar with previous declarations.	
Medical certificate	
Hearing meets the standards in STCW Code section A-1/9?	Ja
Unaided hearing satisfactory?	Ja
Visual acuity meets standards in STCW Code section A-1/9?	Ja
Colour meets standards in STCW Code, section A-1/9?	Ja
Date of last colour vision test	6/15/2018
Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board?	Ja
Fit for lookout duties?	Ja
Fit for safety function(s)?	Ja
Fit for other work on board	Ja
Valid until	6/15/2019

<< Previous    Next >>    Check form    **Proceed to submission**

**Please ignore the next window, do not print this PDF version; this is only a receipt from Altinn.**

### Submit the form

Click “Submit” to send the electronic report.

< To My Message Box

Submission: Declaration of health and unfitness. Norwegian Maritime Authority

1.Completion ⇒ 2.**Submit** ⇒ 3.Receipt  
[View step information](#)

Step 2 of 3: Submit

Forms	Actions
Declaration of health and unfitness, sertifikat, Test	Print version (pdf) Print all forms (pdf) (Takes time if there are many forms)

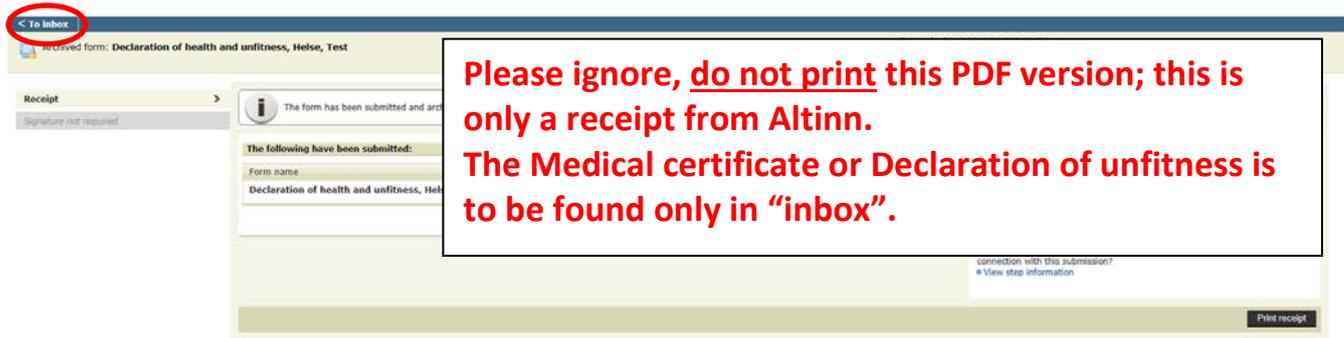
[Help with submitting form](#)  
[Help with signing](#)  
[Help with the reporting process](#)  
[Notify others by email](#)

[Return for completion](#)    **Submit**

If you choose to send the electronic report now, a medical form will be produced and archived in the NMA’s database. All seafarer’s doctors will have a full overview of the seafarer’s medical history of medical forms from now on.

**Please ignore the next window, do not print this PDF version; this is only a receipt from Altinn.**

## 9 WHERE TO FIND THE MEDICAL CERTIFICATE/DECLARATION OF UNFITNESS

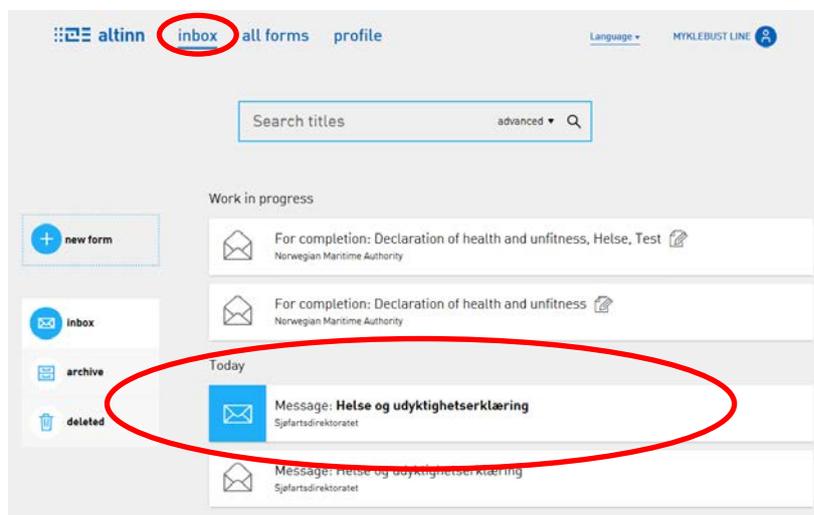


**Please ignore, do not print this PDF version; this is only a receipt from Altinn.  
The Medical certificate or Declaration of unfitness is to be found only in "inbox".**

The screenshot shows a receipt page for a submitted form titled "Declaration of health and unfitness, Helse, Test". A red circle highlights the "< To inbox" link in the top left corner. A large red text box is overlaid on the page with the instructions above.

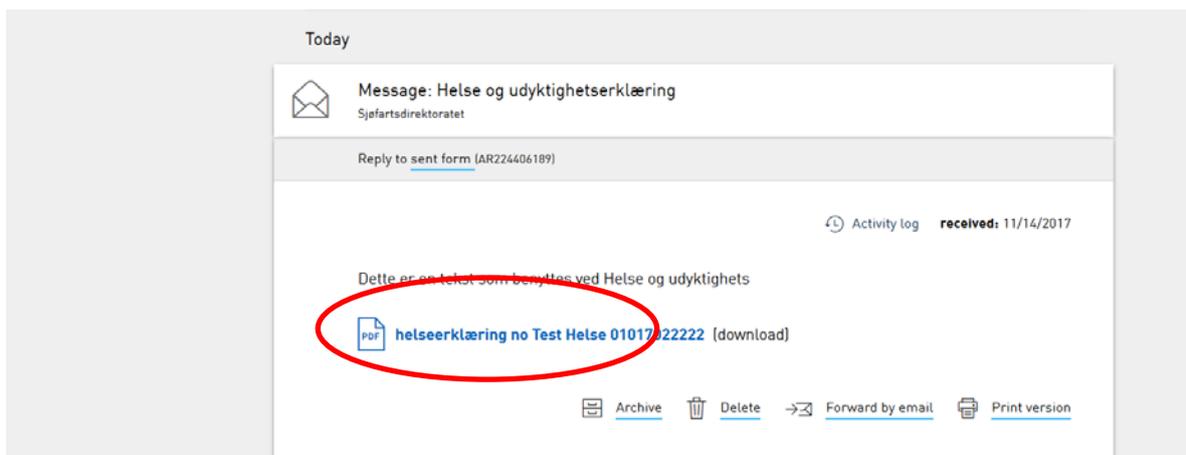
Return to "inbox" to find the medicals.

When the registration is completed, select "inbox". Please find the submitted form below "Today":



The screenshot shows the Altinn user interface. The "inbox" tab is selected and circled in red. Under the "Today" section, a message titled "Message: Helse og udyktighetserklæring" from Sjøfartsdirektoratet is circled in red.

Please open the PDF-link and print the medical form.



The screenshot shows the content of the email message. The text "Dette er en tekst som benyttes ved Helse og udyktighets" is followed by a PDF link: "helseerklæring no Test Helse 0101722222 (download)". This link is circled in red. Below the link are options for "Archive", "Delete", "Forward by email", and "Print version".

## 9.1 The Medical certificate

Any person working on board a Norwegian flagged ship shall have a valid medical certificate. The medical certificate gives information about the seafarer's medical fitness.

Given limitations/restrictions on the form indicates what is relevant for the seafarer in regards to service, trade area and validity period.

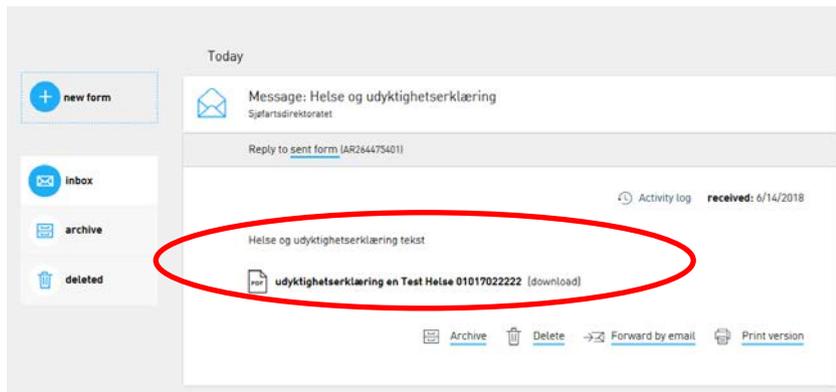
The form is to be printed, stamped, signed and given to the seafarer.

The seafarer shall sign it too. Please keep a copy for the file.

Sjøfartsdirektoratet Norwegian Maritime Authority		Helseerklæring / Medical certificate Serienummer / Serial number H- 1233675	
1. Etternavn <i>Family name</i>	Helse	2. Kjønn <i>Gender</i>	
3. For- og mellomnavn <i>First and middlename</i>	Test	Mann <i>Male</i>	Kvinne <i>Female</i> <input checked="" type="checkbox"/>
4. Nasjonalitet <i>Nationality</i>	Norge/Norway	5. Fødselsdato <i>Date of birth</i>	0 1 0 1 1 9 7 0
6. Personnummer <i>Norwegian personal identity number</i>	01017022222	7. Sjekk av ID <i>ID checked</i>	Ja <i>Yes</i> <input checked="" type="checkbox"/> Nei <i>No</i> <input type="checkbox"/>
8. Type ID dokument <i>Type of ID document</i>	Førerkort/Driving licence		
9. Hørsel møter kravene i STCW konvensjonen, avsnitt A-I/9? <i>Hearing meets the standards in STCW Code section A-I/9?</i>	Ja <i>Yes</i> <input checked="" type="checkbox"/> Nei <i>No</i> <input type="checkbox"/>		
10. Hørsel tilfredsstillende uten hjelpemidler? <i>Unaided hearing satisfactory?</i>	Ja <i>Yes</i> <input checked="" type="checkbox"/> Nei <i>No</i> <input type="checkbox"/>		<p>Denne helseerklæringen er gitt ut med hjemmel i lov 16. februar 2007 nr. 9 om Skipssikkerhet § 17. Dette helseerklærings-skjemaet tilfredsstillende krav som følger av MLC-konvensjonen og STCW-konvensjonen.</p> <p><i>This medical certificate has been issued under the provisions of Act of 16 February 2007 No. 09 relating to ship Safety and Security § 17. This certificate meets the requirements set out in the Maritime Labour Convention and the STCW convention.</i></p>
11. Synet møter kravene i STCW konvensjonen, avsnitt A-I/9? <i>Visual acuity meets standards in STCW Code section A-I/9?</i>	Ja <i>Yes</i> <input checked="" type="checkbox"/> Nei <i>No</i> <input type="checkbox"/>		
12. Fargesyn møter kravene i STCW konvensjonen, avsnitt A-I/9? <i>Colour vision meets standards in STCW Code, section A-I/9?</i>	Ja <i>Yes</i> <input checked="" type="checkbox"/> Nei <i>No</i> <input type="checkbox"/>		
13. Dato for forrige test av fargesyn <i>Date of last colour vision test</i>	0 8 0 6 2 0 1 8		
14. Skikket for utkikk <i>Fit for lookout duties?</i>	Ja <i>Yes</i> <input checked="" type="checkbox"/> Nei <i>No</i> <input type="checkbox"/>		
15. Skikket til sikkerhetsfunksjon? <i>Fit for safety function(s)?</i>	Ja <i>Yes</i> <input checked="" type="checkbox"/> Nei <i>No</i> <input type="checkbox"/>		
16. Skikket til annet arbeid om bord <i>Fit for other work on board?</i>	Ja <i>Yes</i> <input checked="" type="checkbox"/> Nei <i>No</i> <input type="checkbox"/>		
17. Skikket til tjeneste uten begrensinger <i>Fit for service without limitations or restrictions?</i>	Ja <i>Yes</i> <input checked="" type="checkbox"/> Nei <i>No</i> <input type="checkbox"/>		
Hvis «Nei» spesifiser begrensingen <i>If «No», please specify</i>			
18. Er arbeidstakeren fri for sykdom som det er sannsynlig vil bli verre ved å gjøre tjeneste til sjøs, eller som vil gjøre vedkommende uegnet til slik tjeneste eller sette helsen til andre personer om bord i fare? <i>Is the seafarer free from any medical condition likely to be aggravated by service at sea or to render the seafarer unfit for such service or to endanger the health of other persons on board?</i>		Ja <i>Yes</i> <input checked="" type="checkbox"/> Nei <i>No</i> <input type="checkbox"/>	
19. Sjømannslegens navn <i>Name of the seafarer's doctor</i>	Line Myklebust	20. Sjømannslegens telefonnummer <i>Seafarer's doctor's phone number</i>	52 74 51 26
21. Sjømannslegens adresse <i>Seafarer's doctor's address</i>	Smedasundet 50 A, Postboks 2222 5509 Haugesund Norge		
22. Sjømannslegens signatur, stempel og dato for undersøkelsen <i>Seafarer's doctor's signature, stamp and date of health examination</i>			
23. Utløpsdato for helseerklæringen <i>Expiry date of the medical certificate</i>	1 4 1 2 2 0 1 8		
24. Arbeidstakerens signatur <i>Seafarer's signature</i>			

## PDF link – Declaration of unfitness

Open the PDF link “udyktighetserklæring en First and middle, and Last name Personal number“.



## 9.2 The Declaration of unfitness

The Declaration of unfitness is to be printed, stamped, signed and given to the seafarer.



Udyktighetserklæring/  
Declaration of unfitness  
Serienummer/Serial number U- 2002697

1. Etternavn/Family name: Helse	2. Kjønn/Gender Mann/Male <input type="checkbox"/> Kvinne/Female <input checked="" type="checkbox"/>
3. For- og mellomnavn/First and middle name: Test	5. Fødselsdato/Date of birth: 0 1 / 0 1 / 1 9 7 0
4. Nasjonalitet/Nationality: Norge/Norway	7. Sjekk av ID/ID checked Ja/Yes <input checked="" type="checkbox"/> Nei/No <input type="checkbox"/>
6. Personnummer/National identity number/D-number: 01017022222	8. Type ID-dokument/Type of identity document: Førerkort/Driving licence
9. Vedtak/Decision Arbeidstaker har av helsemessige årsaker fått følgende vedtak (sett kryss i ruten som passer)/ On medical grounds, the following decision is made concerning the employee (tick as appropriate)	
Permanent udyktighet (Vedtaket er basert på en personlig undersøkelse av arbeidstaker)/ Permanent unfitness (The decision is based on a personal examination of the employee) ..... <input checked="" type="checkbox"/>	
Foreløpig udyktighet/Temporary unfitness ..... <input type="checkbox"/>	
Midlertidig udyktighet/Provisional unfitness ..... <input type="checkbox"/>	
10. Utsatt iverksetting Arbeidstaker er gitt tillatelse til å fortsette i tjeneste om bord inntil klage/søknad om dispensasjon er avgjort av Fagnemnda/The employee is granted to continue service on board until the appeal/application for exemption from requirements of the Regulations is made by the Appellate Body ..... <input type="checkbox"/>	
Avgjørelsen er skriftlig bekreftet av/This decision is accepted in written consent by rederi/company..... <input type="checkbox"/> eller/or skipsfører/master..... <input type="checkbox"/>	
11. Sjømannslegens navn/Seafarer's doctor's name: Line Myklebust	
12. Sjømannslegens kontoradresse/Seafarer's doctor's office address: Smedasundet 50 A, Postboks 2222 5509 Haugesund Norge	
13. Sjømannslegens telefonnummer/Seafarer's doctor's phone number: 52 74 51 26	
14. Sjømannslegens e-post/Seafarer's doctor's e-mail: lmh@sdir.no	
15. Sjømannslegens signatur, stempel og dato for helseundersøkelsen/Seafarer's doctor's signature, stamp and date of the health examination:	

Denne udyktighetserklæringen er gitt ut med hjemmel i lov 16. februar 2007 nr. 9 om Skipssikkerhet § 17  
Denne udyktighetserklæringen tilfredsstiller de krav som følger av MLC-konvensjonen og STCW-konvensjonen.

This Declaration of unfitness has been issued under the provisions of Act of 16 February 2007 No. 09 relating to Ship Safety and Security section 17.  
This Declaration of unfitness meets the requirements set out in the Maritime Labour Convention and the STCW Convention

## 10 IF ELECTRONIC SUBMISSION IS NOT AVAILABLE

The electronic submission system is mandatory, and shall always be used when issuing medical forms. The exception is when the electronic system is not available for the seafarer’s doctor due to unforeseen events. When the system is unavailable, forms in paper are to be used as a back-up.

For the time being, KS-0499-1 B/E and KS-0415 B/E shall be used if the system is not available. The information from the medical examination should however be submitted electronically as soon as possible. Print the Medical certificate from “inbox” in Altinn, sign and stamp it and send/give it to the seafarer. The seafarer is to destroy the paper version when the new electronic form is received.

KS-0499-1 B/E and KS-0415 B/E are likely to be updated. The forms in paper are intended to be a backup. Until you receive new forms or information regarding this, the KS-0499 1 B/E and KS-0415 B/E should be ordered and kept as a back-up in case the system is not available.

## 11 IF ALTINN/THE ELECTRONIC FORM IS NOT AVAILABLE

- 1) Always keep paper versions of Medical certificate (KS-0499-1 B/E) and Declaration of unfitness (KS-0415 B/E) available. If Altinn is not available, please fill out paper versions of the Medical certificate/Declaration of unfitness.
- 2) Log on to Altinn and submit the information from the medical examination **as soon as possible**.
- 3) Print the Medical certificate from “inbox” in Altinn, sign and stamp it and send/give it to the seafarer. The seafarer is to destroy the paper version when the new electronic form is received.

## 12 IF MEDICAL FORMS ARE NOT RECEIVED WITHIN REASONABLE TIME

- 1) Please open “archive” and select the relevant archived form



The archived form looks like:

<b>Receipt - Invalid as Medical Certificate</b>	
<b>Seafarer</b>	
Norwegian national identity number	01017022222
Date of birth	01.01.1970
First name	Test
Last name	Helse
Gender	Female
Citizenship	Norway

Archived: 14-06-2018 18:27:59 AR264475401

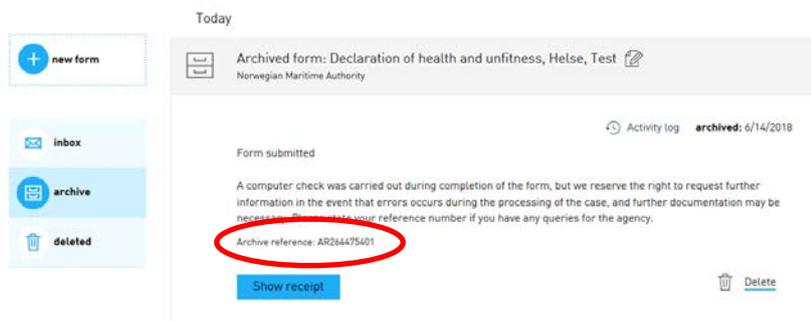
Do you see any mistyping in the seafarer’s names, or in his/her date of birth/D number/Norwegian National Identity number?

*Please contact the NMA if you find any faults. Remember to state the AR-code (AR+8digits), the serial number, name of the seafarer and his/her date of birth when notifying the NMA.*

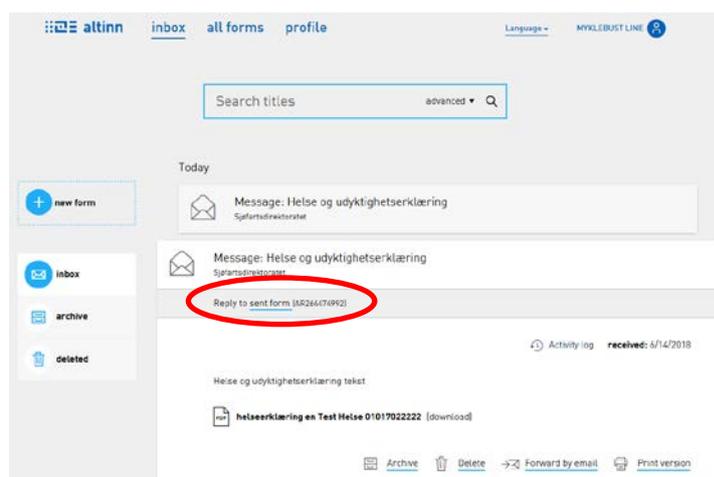
Once the NMA has done necessary adjustments/amendments, you will receive the adjusted medical form by e-mail. Please note that the corrected medical form will not enter your “inbox”. Print the medical form from your e-mail, sign and stamp it, and send/give it to the seafarer. The seafarer is to destroy the paper version when the new electronic form is received.

### 13 THE AR-CODE

The AR-code is the identity number of the submitted medical form. You will find the AR-code in “archive” if the medical form does not appear in “inbox”.



Normally you will find the AR-code in “inbox”.



### 14 ADDITIONAL INFORMATION

Do not generate “fictitious seafarers”; only report actual medical examinations.

We encourage you to practice before you are to perform a medical examination by using the information from a previous issued medical form in paper.

If you find any difficulties, please do not hesitate to contact [line.myklebust@sdir.no](mailto:line.myklebust@sdir.no)