

[Medical Questionnaire](#)
[For](#)
[Arctic Expedition Cruising](#)

There are no sophisticated medical facilities available in the Arctic, and although our vessel carries a qualified physician and a limited infirmary with basic medications and equipment, the voyage is for people in good health.

All guests must complete this confidential medical questionnaire (Parts I & II). Furthermore, guests with a pre-existing medical condition must also consult with a medical professional and complete Part III of this questionnaire. Non-compliance in this can result in embarkation being denied. Guests in poor health with a risk of complications during the trip should not join the voyage.

Guests are further advised that medical evacuation, if available, is expensive. All guests must have purchased the relevant travel insurance for an expedition cruise to the Arctic. If you have any doubts regarding your insurance policy, it is vital you contact your insurance provider. The locations visited are very remote, and in the areas where Medevacs (Medical Evacuations) are possible, it can take a long time to be reached.

The completed questionnaire must have been received, together with any other required documentation by the time of your final payment. This is part of our obligation for self-sufficiency. You are expected to carry your own regular medications.

[Privacy Policy](#)

Your personal information belongs to you, and it is important for Albatros Expeditions (AE) to protect the personal information you share with us. The purpose of AE's personal data policy is to explain in a concise and transparent way how we collect, transfer, use and protect your personal information. Albatros has a clear ambition of minimizing the distribution of your personal information and creating a high degree of transparency in relation to the information being processed. This policy also aims at informing you of the rights you may make use of.

AE conducts all the handling of personal data in accordance with the applicable rules for processing personal data (GDPR and PDL). This Privacy Policy applies to all our customers, suppliers and associates.

The medical information collected in this form will be destroyed upon completion of the actual cruise.

Part I

Guest's Health Statement & Personal Data Consent

I hereby attest that I am in good general health, and capable of performing normal activities on this expedition and will not impede the progress of the expedition. I understand that this expedition will take me to remote areas far from the nearest medical facility and that all guests must be self-sufficient. I certify that I have not been recently treated for, nor am I aware of, any physical or other condition or disability that would create a hazard to myself or other members of the expedition.

I also give my consent that all the below information may be disclosed and used by the relevant Albatros Expeditions personnel, relevant cooperation partners and the onboard Medical Doctor for the duration of my expedition cruise.

I also confirm I have read and accepted [Albatros Expeditions personal data policy](#).

| | |
|------------|----------------|
| Name | Date |
| Signature | |
| Expedition | Departure Date |

Part III

Pre-existing medical conditions

Pre-existing medical conditions are usually defined as an illness or injury you had before or when you take out a travel insurance policy. This includes physical conditions such as cancer, diabetes, or respiratory issues, as well as non-physical conditions such as anxiety and depression.

Some of the most commonly declared pre-existing medical conditions include:

- Chronic illness, including cancer
- Crohn's disease and Colitis
- Circulatory problems, including stroke and high blood pressure
- Heart conditions
- Respiratory issues, including asthma
- Diabetes
- Cystic fibrosis
- Back pain or joint problems and Arthritis
- Allergies
- Psychological conditions
- Alzheimer's disease
- Epilepsy

Anyone traveling with a pre-existing medical condition **must:**

- Consult with medical professional prior to taking part in an expedition cruise. This is best done at home by a medical professional who has knowledge of your condition and sent to us before final payment.
- Ask your doctor for a medical certificate confirming that you are fit to undertake an expedition cruise to the Arctic (see below).
- Carry copies of your medical records. This will help explain your condition to medical professionals should you need their support.
- It is vital that you have travel insurance documents with you and accessible, as you may need to show these if you require treatment
- Obtain a print-out of all medication you are taking together with dosage. It is the guest's own responsibility to have the adequate amount of medication for the duration of the expedition cruise.

Is pregnancy a pre-existing medical condition?

Pregnancy is not generally classed as a pre-existing condition, and you are welcome to undertake an expedition cruise to the Arctic until the 24th week of your pregnancy, providing you have not had any prior complications. There are no proper medical facilities or treatment possibilities in case of complications.

Medical Advisor's Opinion

Please give this form along with your itinerary to your personal physician.

Dear Doctor,

Our guest is planning an expedition cruise to the Arctic, where sophisticated medical facilities are unavailable. Each vessel carries a physician and a small infirmary. While not strenuous, guests who participate on excursions must negotiate a steep gangway, get in and out of landing boats with assistance and be capable of walking a short distance over uneven and slippery terrain ashore. Please note, the locations being traveled in are very remote, and in the areas where Medevacs (Medical Evacuations) are possible, it can take a long time to be reached.

We would like to be sure that every guest is in adequate medical health for the voyage and that our shipboard physician is fully alerted to any potential health issues. Please feel free to contact us if you have any questions at:

We would appreciate your evaluation of our future guest

Guest's name:

| | | | | |
|--|------|------|------|-----------|
| The guest's overall physical condition | Poor | Fair | Good | Excellent |
|--|------|------|------|-----------|

| | | | | |
|---|------|------|------|-----------|
| The guest's ability to participate in this expedition and excursions: | Poor | Fair | Good | Excellent |
|---|------|------|------|-----------|

Please elaborate on any medical conditions that you feel our shipboard physician should be aware of:

| | |
|-----------------------|------------|
| Doctor's name: | Date: |
| Doctor's signature: | Telephone: |
| City, State, Country: | |
| Official Stamp: | |