

## DIVE HISTORY/PROFILE

Complete as much as possible.

1. Type of Dive: Rescue  Commercial  Recreational
2. Type of Gas Used: Compressed Air  Nitrox  Heliox  Other \_\_\_\_\_
3. Water Type: Contaminated  Fresh  Salt
4. Water Temperature: \_\_\_\_\_
5. Number of Dives in the Past Several Days: \_\_\_\_\_

List Each Dive with:

Maximum Depth	Bottom Time	Surface Interval
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Time of Last Ascent: \_\_\_\_\_
7. Did Diver: Panic?  Emergency Ascend?  Run Out of Air?   
Hold Breath Upon Ascent?  Miss a Decompression Stop(s)?
8. Problems During Dive (e.g., Buoyancy, Clearing Ears, Equipment):  
\_\_\_\_\_  
\_\_\_\_\_

9. Possible Contact with Dangerous Marine Life: \_\_\_\_\_
10. Fly After Diving: \_\_\_\_\_ How Long After: \_\_\_\_\_
11. Alcohol Ingestion:  When: \_\_\_\_\_ Quantity: \_\_\_\_\_
12. Dive Workload (e.g., Currents, Hard Work, Over-weighted):  
\_\_\_\_\_  
\_\_\_\_\_

13. Any Post-dive Physical Activity: \_\_\_\_\_

14. Dive Buddy:  Is He/She Present?  Name and Phone Number:  
\_\_\_\_\_

15. Other Witnesses (Names and Phone Numbers):  
\_\_\_\_\_  
\_\_\_\_\_

16. Statements and Other Information:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_