# Information before traveling by air

# Long flight time and pressure change caused by changing flight altitude, may sometimes adversely affect passenger's medical condition. For these reason, air travel may not be suitable for all passengers.

# Handling of Personal Information

STARFLYER may share this MEDIF with a designated organization of medical specialists, who might contact customers if necessary.

### Cases when Medical Information Form (MEDIF) is requested

Person traveling with any of the following conditions are requested to notify our reservation staff and will be asked to prepare MEDIF when making a flight reservation.

- ① Person requiring medical oxygen or medical equipment or medical treatments on board.
- 2 Person with serious diseases or injuries
- ③ Person who correspond to any of the categories listed on the next page.(GUIDANCE FOR THE PHYSICIAN)
- ④ Other than above. Person traveling by air may have adverse affects to one's medical conditions due to recent treatment or surgery.

#### Submitting MEDIF

# MEDIF must be prepared and issued within 14 days, including the day of departure. (Example: If the departure date is March 16, the MEDIF must be issued no earlier than March 3.) For round-trip flight, the date of return flight may exceed 14 days if it states "Fit to travel" in the appropriate box of MEDIF.

However, if adverse change of the passenger's medical condition is observed our staff may ask to submit a new MEDIF to reconfirm the fitness for air travel.

If the validity period of the medical certificate is specified separately by the doctor, it will be accepted as a valid medical certificate as long as the date of boarding is within the validity period.

# Filling out MEDIF

#### For doctors

Please consider the itinerary and its potential effect on the patient's state of health when writing prognosis for the flight. Specify details if any other special attention should be considered in the lower part of MEDIF.

#### Fee or surcharge

#### For doctors and passengers

For doctors and passengers

Fee if any, relevant to the provision of "Special Assistance Request" or MEDIF and for carrier-provided special equipment are to be paid by the passenger concerned. For following cases, the passenger must purchase extra seats.

#### \*an oversized medical equipment that cannot be stored underneath the seat in front

For flight safety reasons, some medical equipment may not be allowed in cabin or as checked baggage. Please contact SF CALL CENTER for specific regulation.

The cabin environment and effect on one's body	For doctors and passengers
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Aircraft cabin pressure is regulated by pressurization device at between 0.7-0.8 bars (10.2psia to 12psia), which equals to that at an altitude of 2000-2500 meters However, significant changes in cabin pressure can occur 15-30 minutes after takeoff and before landing.

As air pressure becomes lower in the cabin, normal internal gases present in the human body expand. These expanded gases not discharged from the body may put pressure on wounds or internal organs possibly cause pain or breathing difficulties.

The cabin pressure drops oxygen density to 70-80% of that at sea level.

Respiratory organs, the heart, blood vessels in the brain and serious anemia can all be adversely affected by low oxygen concentrations. Moreover, this may also affect women in late stages of pregnancy and newborn babies.

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#### **GUIDANCE FOR THE PHYSICIAN AND PASSENGER**

As stipulated in the Japan Act on the Prevention of Infectious Diseases and Medical Care for Patients with Infectious Diseases, persons suffering from or suspected of having a Class 1, 2, 3 or 5 infectious disease, a new strain of influenza, a new infectious disease, or another serious acute infectious disease which may infect other persons on board and shall not be basically allowed to travel by air.

#### Person's condition which is not fit to travel

#### IA person who is prohibited from attending school by Japanese law("Act on School Health and Safety")

Other than above, a person who is prohibited from attending school by Japanese law<sup>(\*1)</sup> shall not be allowed to travel by air unless a physician confirms that there is no risk of the disease to be transmit from person to person.

(\*1)

The name of a disease	
COVID-19	Until 5 days have passed after onset, and 1 day have passed after
	become less severe.
Influenza	Until 5 days heve passed after onset, and 2days(3days for infants) have passed after the temperature have dropped
Whooping cough	Until the characteristic cough has suppressed, or until 5days treatment with antibiotics has ended.
Measles	3 days after his/her temperature has dropped
Mumps	After 5days of onset of the swelling on submandibular, sublingual and parotid gland, and major symptoms general condition recovered
Rubella	Until eruption disappears
Chickenpox	Until the eruption changes to scab
Pharyngoconjunctival	2 days after the main symptom disappears
Tuberculosis, Epidemic keratoconjunctivitis, Acute hemorrhagic conjunctivitis	Until a physician evaluates that the disease becomes non-contageous.
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#### Person with other symptoms or conditions

Persons with the following conditions are generally considered unfit for air travel. However, if a physician certifies that the patient is stable, and that physician will be accompanying him/her on the entire journey, the airline may accept that individual for travel. Please contact STARFLYER for further information.

- 1. Those who have critical cardiac disease, severe heart diseases such a cardiac failure, cyanotic heart disease conditions, who have had an episode within the past 6 weeks are not acceptable for travel.
- 2. Those who have unstable angina pectoris, acute myocardial infarction, who have had an episode within the past 2 weeks are not acceptable for travel.
- 3. Those who have severe respiratory illness, server respiratory failure, severe chronic obstructive pulmonary disease, or pneumothorax whose lungs are not fully inflated.
- 4. Those who have repeated hemoptysis
- 5. Those with apoplexy who have had an episode within the past 4 weeks are not acceptable for travel.
- 6. Those lesions resulted in increased intracranial pressure, fracture of the skull, or those who underwent permanent wiring in the jaws for mandibular fracture
- 7. Those who have severe anemia
- 8. Those with lesions which may cause hematemesis, or melena, intestinal obstruction patients
- 9. Those who have severe otitis media
- 10. Those who have not completely recovered from surgery of head, chest or abdomen or women immediately after childbirth
- 11. Alcoholism or drug addiction
- 12. Those who have residual air or other gas in his/her body after operation. (for example eye operation)
- 13. Pregnant woman whose confinement may be expected in less than 28 days. However an escort by a physician will be required if traveling by aircraft within 14 days of the expected confinement for international flights and 7 days for domestic flights.
- 14. Newborn baby within the first 7 days of birth.



To be completed by the passenger or representative
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SPECIAL ASSISTANCE REQUEST Please answer ALL questions. Enter a cross (X) in the appropriate "yes" or "no" boxes.

	TIENTS								
							Age		
Name									
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	Contact Info TEL: TEL:								
Itinerary /		Date:	Flight No.:	Tr	ravel Segment (	DEP-ARR):(	— )		
	Flight Info	Date:	Flight No.:	Tr	ravel Segment (	<i>,</i> , ,	- )		
E	scort name				Phys	ician			
					Nurs	e			
					☐ Othe	ers (	)		
E	scort name				🗌 Phys	ician			
					🗆 Nurs	e			
					🗌 Othe	ers (	)		
*(	Our cabin cre	l w members can a	ssist vou in usina th	e onboard w	heelchair and s	towing or retrieving carry-o	n items, identifying in-flight		
n fe	neal items, ai eeding or per	nd opening packag	ges. However, our c	abin crew m	embers are not	permitted to provide medic ing such assistance, it is re	al services, assist with		
2 1	n escort. Wheelchair	needed?							
-			⊡ Yes→		not walk by mys	solf			
			L res→						
				_		an not ascend or descend			
				Can a	ascend or desce	end stairs by myself but car	n not walk long distance		
2	Wheelchair	needed in cabin?	🗆 No	☐ Yes					
3	Please tell u personal wh	is about your	🗌 No wheelch		*You can cheo	ck your wheelchair at th	e counter. We will take		
	•		Personal wi	neelchair	you to the p	lane in our wheelchair.			
	* From Aug 10, 2012, passengers will be allowed to		Manual Electric/Batte	ery-powered	$\rightarrow$ $\Box$ Spillable I	Battery (Wet-cell "non-seal	ed")		
	ion batteries	are Li-ion/Lithium- that power the	□ Non-spillable Battery (Wet-cell "sealed")						
	mobility device. If the battery is not fully encased and protected		□ Dry Battery * (□ Li-ion/Lithium-ion □ Ni-Cd □ Ni-MH)						
	to prevent	short circuit, the be removed and	*Please specify						
	transported in	n the cabin of the	Foldable						
aircraft. Please inform us in advance for limitation may apply. □ Non-foldable →If your wheelchair is non-foldable size and weighr.						-foldable or battery-powere	d,please tell us the		
				Length		cm Width cm Weight	cm		
				Height		cm Weight	kg		
	*We may not be able to accept large-size wheelchairs due to the size of cargo door and space.								
	* When you check your electric / battery-powered wheelchair, please tell our airport staff your wheelchair's specific battery type and instructions to disconnect / insulate the battery since some batteries are considered and the battery since some bat								
	•					nsulate the battery since some er aircraft only under certain co			
4		ylinder needed	□ No	-					
	in flght?		$\Box$ Yes $\rightarrow$			n cylinders			
5	Ambulance arranged? (Ambulance must be arranged by the passenger)								
	►Depa	rture point	Company name			Contact Info			
	►Arriva	-	Company name			Contact Info			
6	Destination (Hospital Name)								
6	Special instructions/Precautions								

#### MEDICAL INFORMATION FORM (MEDIF)

#### To be completed by ATTENDING PHYSICIAN

The Physician Attending is requested to answer ALL questions. Enter a cross (X) in the appropriate boxes, and/or give precise concise answers. STARFLYER or a designated medical organization may contact the customer for clarification if necessary. Completion of the form in BLOCK LETTERS will be appreciated.

ΡΑΙ	IENIS							
							AGE	
NAME,INITIAL(S)								
MEDICAL DATA								
	AGNOSIS in details ncluding vital signs)	Please write so tha	it no	n medical personnel are	able understand.			
Date of first symptoms/ Diagnosis (Date of Operation)					For expecting mother (Estimated delivery date)	Date:		
Diag	gnostic content							
1	PROGNOSIS for the * Please consider the potential effect on th health	itinerary and its e patient's state of		<ul> <li>Fit to Travel</li> <li>One-Way Itinerary</li> <li>NOT Fit to Travel</li> <li>Round-Trip Itinerary Date of retum flight</li> <li>*For round-trip itineraries, please also enter the departure date of the last flight in your itinerary</li> </ul>				
2	Contagious AND com Disease ?	municable	<ul> <li>Yes →If Yes,may the disease be infectious to other persons?</li> <li>Yes</li> <li>No</li> </ul>					
3	3 Can sit upright with seat belt fastened ? (during take-off and landing)			<ul> <li>Yes</li> <li>No →If not,Stretcher shall be necessary.However,as STARFLYER does not off stretcher at this time,those passengers cannot fly with us.We are sorry.</li> </ul>				
4	4 Is the patient fit to travel unaccompanied?			<ul> <li>Yes</li> <li>No, Must be accompanied by Physician or Nurse</li> <li>No, Must be accompanied by a person who</li> <li>Escort name</li> <li>Is approved by Physician</li> </ul>				
5	5 Oxygen needed in flight?		Yes       If yes, please enter the amount of oxygen.         No       Liters per minute					
6	6 Do you need oxygen continuously?			Yes No				
7	<ul> <li>Does patient need any medical equipment in flight? (e.g., ventilator, oxygen concentrator, etc.)</li> </ul>		Yes     →If yes, specify       No     IThe Name of Medical Equipment					
	* If you bring oversized medical equipment that cannot be stored under the seat in front, you may need to purchase another seat.			Product	cturer or Distributor / name / type or model number type and capacity/size			
8	8 Does patient need any MEDICATION In flight?			Yes →If yes,				
9	Specify more det	ails, if necessar	y					

Prognosis as above. I will provide necessary information required by the airline's medical department for the purpose of determining his/her fitness to travel by air with consent of the patient.

PHYSICIAN		
Signature		
Hospital Name		
Phone No.	Address	
Date of medical certificate issued	Expiration date of the medical certificate	

\* If no expiration date is indicated on the medical certificate, a medical certificate issued within 14 days including the boarding date will be accepted as a valid medical certificate.

\* Our cabin crew members are trained only in FIRST AID and are NOT PERMITTED to administer any injection, or to give medication, or to operate Medical Oxygen cylinders. Additionally, they are not authorized to provide personal care services to particular passengers, to the detriment of their service to other passengers and cabin safety.