



Mast and Tower Safety Group

promoting safety and best practice

Guidance Note

GN-005

Medical Requirements for Climbing Masts & Towers



MATS Group Guidance Note

Medical Requirements for Climbing Masts & Towers

1 Purpose

The purpose of this guidance is to set out commonly used elements of a medical for those who work on masts and towers in the broadcast and communications industry. Medicals are needed to:

- Highlight medical problems early
- Minimise the risk of sudden incapacity and need of rescue
- Encourage employees to seek medical support to compensate for relevant medical conditions
- Provide consistency in assessment.

2 Scope

This guidance will cover the content of a climber medical, when the medical should be carried out, who should undertake the medical and how frequently it should be repeated.

It also explains what type of medical is required for different classifications of climber and what conditions may indicate a high risk climber.

3 New climbers

New employees should be identified as climbers at the stage of recruitment. A medical should be undertaken prior to any climber training or activities to ensure fitness to climb. If there is a lengthy period of illness/injury or non-climbing then a medical should be conducted prior to any climbing.

4 Medical Content

The contents of medicals will be determined by the medical professional undertaking the examination but, in general, is likely to include the following measures:

- Completion of health questionnaire
- Height
- Weight
- Blood pressure & pulse
- Vision test - near/far/colour/peripheral
- Hearing test – hearing screen only
- Peak flow lung function test
- Urinalysis for blood sugar and protein
- Musculo-skeletal movement
- Smoking & alcohol consumption
- Waist and shoulder measurements
- Chester step test or other equivalent test
- Cholesterol tests (for those over age 50)

The medical should be undertaken by a medical professional such as a General Practitioner who has knowledge of the activities being undertaken, and an understanding of the physical demands of climbing masts and towers. An occupational health provider could also provide this service where available.

5 Frequency of Medicals

Medicals should be repeated regularly at an interval based on age to ensure that there is a continuing assessment of health and fitness to climb. The usual approach is as follows:

- Under 40 – every 5 years plus a surveillance questionnaire in intervening years
- Between 40-49 – every 2 years plus a surveillance questionnaire in intervening years
- 50 or over - annually

6 Climber Health Questionnaires

A health questionnaire can be used in intervening years where a face-to-face medical is not carried out to assess the medical suitability to continue to climb. This should be reviewed by a medical professional with knowledge of the activities being undertaken or an occupational health professional. An example of an appropriate questionnaire is given in Appendix A.

7 High Risk Conditions

Certain medical conditions would be considered as high risk for those climbing masts and towers.

Climbers, who have conditions such as diabetes and asthma, when controlled, should still be eligible to climb. An assessment of the condition should be undertaken by a medical professional via the medical to determine the type of condition and whether the condition is suitably controlled, so that its existence does not increase risk when climbing.

Epilepsy would be considered as a high risk condition where climbing activities should not be undertaken. All other conditions should be assessed via the medical.

8 High Risk Activities

Risk assessments should be conducted for all activities which may present a risk to the climber. The risk assessment will determine whether a climber medical is needed. Activities to consider which may need a medical are:

- Climbing masts and towers
- Access to confined spaces on the structure (e.g. antenna work in broadcast industry)
- Confined space access on rooftops
- Rigging activities e.g. use of winch where hearing and visual fitness may be crucial

9 Climber Responsibilities

It is important that the climber undertakes a self-assessment prior to every climb. Any climber who feels unwell or is under the influence of alcohol or drugs should not climb. Prescription medication which on consumption may result in dizziness or other conditions not compatible with climbing should also be considered and climbing not undertaken where there is a risk of these.

10 Related Documents

- MATS Group Guidance Note GN-001 – Work at Height Training
- MATS Group Guidance Note GN-006 – Principles for Access to Radio Sites
- MATS Group Guidance Note GN-007 – Lifting Equipment onto Roof Tops
- MATS Group Guidance Note GN-008 – Mast and Tower Rescue – Guidance for Radio and Rigging Teams working on Radio Structures
- MATS Group Guidance Note GN-009 – First Aid Guidance

The information in this document does not absolve contractors or suppliers from their responsibility to identify and comply with all relevant legislation, regulations and legal standards nor does it take precedence over laws, regulations and external standards.

Appendix A – Example Climber Medical Questionnaire

Mr / Ms / Miss / Mrs	Date:
Surname:	Company:
Forenames:	Job title:
Date of birth:	Family doctor:
Address:	Address:
Post code:	Post code:
Telephone:	Telephone:
e-mail:	e-mail:

Please answer as applicable:

How often do you climb?	times per month	times per year
When did you last undertake climbing activities	weeks ago	months ago

Do you have any current restrictions at work which may affect your climbing ability or have you had any restriction within the last 3 months? If yes, please provide details.	
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Number of years climbing	
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Provide details regarding **times, investigations, treatment, impairment**; use the comment space at the end if required

Do you have or have you had the following -				
	No	Yes, more than 3 months ago	Yes, within the last 3 months	Details
Heart attack				
Angina of the heart				
Heart rhythm problems				
Other heart problems				
High blood pressure				
Breathing problems				

	No	Yes, more than 3 months ago	Yes, within the last 3 months	Details
Fainting or blackouts				
Epilepsy				
Brain surgery				
Balance problems				
Panic attacks				
Claustrophobia				
Fear of heights				
Problems with concentration				
Pain				
A sleep disorder causing day time sleepiness				
Hearing problems				
Vision problems				
Diabetes mellitus				
Raised cholesterol				
Limited movement in the arms and hands				
Limited movement in the legs and feet				
Limited movement in the back				
Problems gripping properly				
Problems with strength in your legs				
Instability of joints				
Have you increased your weight since the last medical?				
Have you been experiencing any health problems when climbing?				
Smoking (number a day)				
Alcohol in a week (in units)				
Illicit drugs				

	No	Yes, more than 3 months ago	Yes, within the last 3 months	Details
Regular medication taken				
Have you been ill since the last medical?				

Has your father, mother, sister or brother suffered from the following:			
	No	Yes	Details
Stroke or TIA			
Heart attack or angina			
Other heart problems			

	No	Yes	Details – type of exercise with length and frequency
Do you undertake any exercise/sport?			

Any other comment you might find relevant:
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Signature

Name (Block capitals)

Date