

at an approved diving medicine course, eg. the Shell-Comex Course at Marseilles in 1982. Ex-Navy diving physicians will be automatically approved.

Such a mechanism of establishing an approval panel of diving practitioners has several advantages.

1. It prevents the “grandfather” problem which so often bedevils the genesis of fledgling professional groups.
2. No new bureaucracy is required.
3. Approval by the HSE is rapid, efficient and without cost.
4. Approval will enable identification of those practitioners with a significant involvement in the commercial diving industry and improve communication between them.
5. The Health and Safety Executive encourage applications from foreign practitioners in the interests of reciprocity and communication.

Committee SF17 has called for comment on this proposed mechanism of certification. Such comment should be forwarded to me to tender to the Committee.

Geoff Macfarlane

NEW ZEALAND MEETING

4 Dodson Avenue
Milford 9 New Zealand

Dear Sir,

You will be pleased to know that in conjunction with the North Shore Medical Association dive we have held the inaugural SPUMS Meeting at the Paihia Autolodge in the Bay of islands. I gathered together sixteen diving doctors, many of whom are members of SPUMS and we had a most enjoyable weekend staying at the Paihia Autolodge and travelling on a 36 foot catamaran dive boat, the Top Cat, to first the Cavalli Islands on Saturday, and Deep Cove on Sunday.

On Saturday night we had a clinical meeting, well lubricated, in true SPUMS style. The speakers were Tony Slark, discussing local facilities available for treatment of diving accident victims; Alan Adair, hypothermia and diving accidents; Rob Stevens, diving as an antidepressant; and Simon Cotton, the diving environment. Rob Stevens discussed and showed pictures of diving at Raoul Island, while Simon Cotton showed pictures of diving with Sir Edmund Hillary in Fiji and diving in the Milford Sound. The clinical element lasted an hour and a half and was followed by our inaugural SPUMS dinner.

The first North Shore Medical Association dive was arranged by Warren Paykel and Rob Stevens two years ago and we had a day trip to the Mokahinau Islands.

On that occasion there was no clinical element, but now we have introduced a clinical element we feel that asking for affiliation with SPUMS to be appropriate. Those doctors taking part were Tony Slark, Rob Stevens, Rex Brown, Robin Hardwick-Smith, John Chapman-Smith, Harold Coup, Alan Adair, Tom Marshall, Roger Peak, Julian Roberts, Simon Cotton, Warren Paykel, Ron Glennie, Bill Baber. It is our plan to make this diving weekend an annual event and would ask for the Society’s blessing.

Alan Sutherland

Found in the Editor’s mailbag:

WHICH ARE YOU?

Are you the *Active Member*,
The kind that would be missed,
Or are you just *contented*
Your name is on the list?
Do *you* attend the *meetings*,
And mingle with the flock,
Or do you stay at home,
And *criticise* and *knock*?
Do you take an *active part*
To help the work along,
Or are you *satisfied* to be
The kind that just belong?
Do you push the *Cause* along,
And make things really tick,
Or leave the work to *just a few*,
And talk about the “*Clique*”?
Think this over, Member,
You know the Right from Wrong ...
Are YOU an Active Member,
Or do you just belong?
... ANON.

SEE YOU AT THE NEXT MEETING. GOOD DIVING ONE AND ALL.

FROM DAN TO DAN AND CDC TO C OF O

Slipped inconspicuously into the pages of the most recent issue of TRIAGE, the newsletter of the National Association of Diver Medical Technicians (NADMT), is the announcement that the Diving Accident Network is now to be called the Diving Alert Network and that the Commercial Diving Centre (CDC) has gone upmarket in title and is now the College of Oceaneering (in Los Angeles). These changes signal the rapid growth in acceptance of the value of the reporting of diving-related problems (DAN) and the spurt in acceptance of the valuable role awaiting diver medical technicians. The CDC was in the forefront of designing and running courses for divers anxious to upgrade their medical skills, in the days when there was social value but little if any cash reward for their graduates. Readers of TRIAGE are now becoming aware of the promise of great things from this newsletter, the Editor (Dick Clarke) having excellent contacts among the ranks of those involved in the medical world of commercial diving; and he knows how to get them to contribute valuable articles.