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MEDICAL MARINE CONCLAVE REPORT

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LR – Capt. Nitin Mukesh, Capt. Ak AZAD, Shri Shyam Jagannathan (IAS) , Dr. VZ Belani, DR. Jacob Mathew

INTRODUCTION

The Marine Medical Examiners Conclave 2025, held on 29th April 2025 at Hotel Novotel, Mumbai, was a landmark gathering that brought together India's maritime medical community, policy makers, and key industry stakeholders. The event served as a dynamic platform for dialogue, aimed at standardizing medical practices and introducing the forthcoming medical rules and modules in alignment with evolving maritime regulations. Through carefully curated sessions, expert-led panel discussions, and focused interactions, the conclave successfully contributed to strengthening the framework governing the medical fitness and overall well-being of Indian and international seafarers.

ABOUT THE CONCLAVE

The Marine Medical Examiners Conclave 2025 is a national-level conference organized to address critical aspects of marine medical governance in India, in light of proposed reforms under the new Medical Examination Rules 2025. The event, curated and managed by Marex Media Pvt. Ltd., is supported by leading maritime organizations such as FOSMA, MASSA, and the Directorate General of Shipping. It is designed as a high-value forum to engage maritime medical professionals, seafarer employers, regulators, mental health specialists, and AYUSH practitioners in structured discussions to elevate the quality and integrity of marine medical services.

The core of the conclave revolves around three key themes, addressed through expert-led panel discussions:

- Optimizing Maritime Medical Examiner Services: Approval, Renewal, and Best Practices

 This session delved into the operational challenges and gaps in the current examiner framework, offering solutions to streamline approval and renewal processes while ensuring competence, transparency, and standardization.
- 2. Medical Facilities, Inspections, and Laboratory Quality Assurance Given the crucial role of diagnostic support in seafarer assessments, this theme explored inspection protocols, equipment standards, and quality control mechanisms to raise the bar for medical facility performance and regulatory compliance.
- 3. Medical Guidelines for Examiners and Suitability of AYUSH Doctors As India moves toward more inclusive and integrated healthcare systems, this discussion will evaluate the role of AYUSH practitioners in the maritime sector, and clarify how existing medical guidelines can be updated to reflect modern practices and diverse medical expertise.

Beyond panel discussions, the conclave also introduced the Medical Management Module and offer insights into the proposed Marine Medical Examination Rules 2025, giving stakeholders a firsthand look at upcoming regulatory changes. Delegates benefited from expert presentations, networking opportunities, and engagement with top maritime medical and administrative leaders. The conclave promised to be not only an informative event but also a decisive step toward modernizing and strengthening India's maritime health infrastructure.

STRATEGIC FOCUS AREAS

Promote
 Standardizatio
 n of Marine
 Medical
 Examinations

Discussing Proposed Medical Rules 2025 • Explore role of Suitability of Ayush Doctors

Enhance Collaboration with Stakeholders

Improve Quality Assurance and Inspections

 Promote Best Practices in Maritime Medical Services Streamline the Approval and Renewal Process for Marine Medical Examiners

Enhance
Laboratory
Accreditation
and Oversight

INAUGRATION, WELCOME ADDRESS AND CONCLAVE OBJECTIVES



WELCOME ADDRESS BY DR. JACOB MATHEW, MD (SEA BIRD MEDICARE CENTER)



In his welcome address at the Marine Medical Examiners Conclave 2025, Dr. Jacob Mathew, Managing Director of Seabird Medicare Center, extended a warm greeting to all attendees and expressed his pleasure at witnessing the first-ever conclave of this kind, organized under the aegis of the Directorate General of Shipping. He highlighted the pressing issues faced by the marine medical community and emphasized the need for collaborative deliberation to ensure the health and fitness of mariners both at sea and ashore. Dr. Mathew acknowledged the presence of distinguished dignitaries including the Director General of Shipping and other senior officials, appreciating their time and commitment. He also thanked MASSA, MUI, and other stakeholders for their support and contributions. Expressing gratitude towards the speakers and moderators, he underlined the significance of the event's panel discussions and presentations, urging participants to actively engage and make the most of this unique learning opportunity.

CONCLAVE OBJECTIVES BY DR. YZ BELANI (FOUNDER & MEDICAL DIRECTOR, DR BELANIS BLUE SHIELD MEDICALCLINIC LLP)



Dr. V. Z. Bellani eloquently outlined the objectives of the Marine Medical Examiners Conclave 2025, emphasizing its critical role in strengthening maritime safety and operational integrity. He stressed that the health and well-being of seafarers are foundational to the safety, efficiency, and resilience of the global maritime industry. The conclave aims to thoroughly review recent regulatory changes and directives issued by the Directorate General of Shipping, clarify ambiguities in their interpretation and implementation, and align current medical examination practices with international maritime health standards. Dr. Bellani advocated for enhanced consistency, efficiency, and ethical conduct in seafarer medical assessments, while promoting the adoption of best practices and continual professional development through training, workshops, and certification programs. The conclave also aspires to foster stronger collaboration among DGapproved doctors, maritime organizations, and stakeholders, cultivating a spirit of mutual respect and open dialogue. Emphasizing that high standards should be upheld without burdening practitioners with excessive administrative hurdles, he called for a supportive and streamlined framework that enables quality healthcare delivery. Ultimately, the conclave envisions building a robust and dynamic system of maritime medical services that upholds the highest standards of care, maintains international credibility, and prioritizes the physical and mental well-being of every seafarer.

The event commenced with a warm Welcome Address, followed by the ceremonial Lighting of the Lamp, symbolizing the inauguration of the conclave and the collective commitment to enhancing maritime medical standards.





ADDRESS BY GUEST OF HONOUR - CAPT. SI ABUL KALAM AZAD (NAUTICAL ADVISER-CUM-ADDL DG (NAUTICAL)(I/C), DIRECTORATE GENERAL OF SHIPPING)

Capt. S. I. Azad, commended the initiative of organizing the Marine Medical Examiners Conclave 2025 and highlighted its significance in enhancing medical standards for Indian seafarers. He acknowledged the Directorate General of Shipping's ongoing efforts in reforming the Indian medical examination system and stressed the need for DG-approved doctors to work in close coordination with the Administration. Capt. Azad emphasized that transparency and standardization in medical assessments are crucial to maintaining the credibility and competence of India's seafarer certification process on the global stage.

Capt. Azad urged medical examiners to uphold the dignity of their profession by conducting assessments with honesty, empathy, and consistency. Drawing attention to the ethical responsibility doctors carry, he noted that the health of a seafarer not only affects the individual but also impacts the safety of the entire crew and vessel. Capt. Azad encouraged the adoption of

uniform examination protocols and better integration of medical and administrative procedures, which would help in eliminating discrepancies and ensure fairness in assessments.

Recognizing the challenges faced by maritime medical professionals, Capt. Azad reiterated the Administration's commitment to offering support and guidance in streamlining processes and addressing ambiguities in implementation. Capt. Azad encouraged doctors to view their role not merely as assessors, but as key stakeholders in safeguarding the maritime workforce. Concluding his address, Capt. Azad called for collaborative engagement and proactive communication between medical practitioners and maritime authorities to build a resilient and future-ready maritime medical system for India.



ADDRESS BY CHIEF GUEST MR. SHYAM JAGANNATHAN (IAS) (DIRECTORATE GENERAL OF SHIPPING, GOVERNMENT OF INDIA)

Shri Sham Jagannathan (IAS), Director General of Shipping, Government of India, delivered an insightful and thought-provoking address during the Marine Medical Examiners Conclave 2025. Sir began by acknowledging the critical role of medical professionals in the maritime sector, emphasizing that their work not only saves lives but also gives life, underscoring the profound responsibility carried by those in the medical profession. Sir praised the dedication of all involved in maritime healthcare, highlighting the essential role of medical professionals in ensuring the health and well-being of seafarers. As the administrative head of the Directorate General of Shipping (DGS), Shri Jagannathan emphasized the government's commitment to advancing India's maritime interests, particularly in bolstering the nation's position as a major contributor to global seafaring.

Sir, outlined four key focus areas that the Directorate General of Shipping is prioritizing to enhance seafarer welfare and maritime healthcare. First, he addressed the recruitment and induction process

for seafarers, stressing the importance of ensuring that individuals entering the profession are fully equipped to handle its demanding nature. Seafaring, with its long contracts, isolation, and separation from families, requires individuals with specific psychological and emotional resilience. Sir called for a more robust approach to assessing the psychological fitness of seafarers, suggesting the potential inclusion of psychometric benchmarks or psychoanalysis to better understand candidates' suitability for this challenging career. This would serve as an additional layer of safeguarding, ensuring that those embarking on a seafaring career are mentally prepared for the unique stresses of the profession.

The second aspect highlighted by Shri Jagannathan was the modernization and standardization of medical attendance rules for seafarers. With a focus on ensuring the highest standards of medical fitness, Sir emphasized the importance of diagnostic laboratories adhering to internationally recognized standards such as NABH or NABL or ISO certifications. Sir also discussed the need to clearly define the scope of medical testing to ensure that seafarers are fit for their duties at sea. Additionally, Sir stressed the importance of maintaining a strong regulatory interface between the DGS and medical professionals, particularly in terms of the enrollment and retention of medical officials, as well as the management of records over time. Sir underscored the importance of continued dialogue to refine regulatory processes and ensure that seafarers' medical fitness is thoroughly assessed and certified.

The third and perhaps most forward-thinking area of focus that Sir addressed was the promotion of wellness among seafarers through the initiative of Sagar May Yog a comprehensive wellness program encompassing 10 components of seafarer well-being. He outlined that wellness should not be limited to physical health but must also address mental, social, and lifestyle factors. The program will focus on nutrition, fitness, communication skills, financial literacy, and other essential aspects that contribute to a seafarer's overall well-being. He emphasized that these wellness programs will be integrated into the curriculum of maritime training institutes, helping to create a more holistic approach to preparing seafarers for the challenges they face at sea and during their time on shore. The wellness initiative aims to provide seafarers with the skills and knowledge necessary to thrive not only during their service but also in their personal lives.

Finally, Sir acknowledged that the collaboration between the government and maritime professionals is key to driving positive change in the sector. Sir recognized that while there may

be perceptions of slow governmental response, he assured the audience of the government's dedication to facilitating a smooth and efficient regulatory interface. Sir called for continuous guidance and support from medical professionals, reiterating the importance of working together to achieve the goals of enhancing seafarer welfare, improving medical fitness standards, and promoting overall wellness at sea. With this in mind, he expressed his gratitude for the opportunity to engage in this consultative platform and reaffirmed the commitment of the Directorate General of Shipping to furthering the progress of India's maritime sector.

In conclusion, Sir's address highlighted a vision for a more integrated, efficient, and wellness-oriented approach to maritime healthcare. By focusing on the psychological suitability of seafarers, modernizing medical fitness standards, and promoting a comprehensive wellness program, the Directorate General of Shipping is taking significant steps toward enhancing the quality of life for seafarers and ensuring their well-being both at sea and on land. His call for continuous collaboration and open dialogue underscores the importance of collective effort in achieving these goals, and his leadership is pivotal in shaping a more resilient and healthier maritime workforce.

PRESENTING OF MEDICAL RULES 2025 & MEDICAL MANAGEMENT MODULE



MEDICAL RULES PRESENTATION BY CAPT. NITIN MUKESH

Capt. Nitin Mukesh, Deputy Nautical Adviser and Senior Deputy Director General of Shipping (Technical), presented the key highlights of the Merchant Shipping (Medical Examination) Rules, 2025, which supersede the 2000 rules to better reflect modern medical standards and international norms. The revised rules aim to ensure that seafarers meet high standards of physical and mental fitness, with clear alignment to the STCW Code (A-I/9 & B-I/9). Notably, electronic health record-keeping, mandatory for five years, and a standardized compliance and appeal mechanism have been introduced to improve transparency and accountability.

In his presentation, Capt. Mukesh outlined the comprehensive structure of the proposed rules, detailing provisions ranging from the appointment and conduct of medical examiners to the specifics of medical examinations, testing protocols, and certification. The rules mandate rigorous diagnostic procedures including blood work, ECGs, drug screenings, and cancer markers. A revised approval process for medical examiners now includes a compulsory Familiarization Course, infrastructure standards, and periodic renewal. Importantly, the rules also incorporate

provisions for case-by-case assessment of transgender seafarers, marking a progressive step toward inclusivity.

Capt. Mukesh also shared case studies highlighting serious lapses in medical certification that led to the tragic deaths of seafarers. These cases involved misdiagnosis, use of non-accredited labs, and even forged medical documentation, emphasizing the dire consequences of non-compliance. These incidents underline the urgent need for rigorous enforcement, enhanced training, and robust monitoring systems to prevent future tragedies.

In closing, Capt. Mukesh stressed that the updated rules are not just regulatory improvements but a moral and operational necessity to protect lives at sea. The new framework represents a significant leap toward strengthening maritime health standards, ensuring credibility in medical assessments, and upholding the dignity and safety of every seafarer. The presentation concluded with a call for strict adherence, collaborative oversight, and unwavering ethical conduct within the maritime medical community.

MS. YRUSHALI JOSHI (BUSINESS ANALYST AT CMS COMPUTERS)



Ms. Vrushali, introduced the Medical Practitioner Module integrated within the *e-Samudra* platform of the Directorate General of Shipping. She explained that the module is a key component in digitizing critical maritime health processes, specifically focusing on the registration, approval, and monitoring of medical practitioners who assess seafarers' fitness. Doctors registered with the Medical Council of India, holding valid licenses and having completed the mandated Familiarization Course, can register to become DG Shipping-approved medical examiners. The module manages issuance of medical and eyesight certificates in strict compliance with the new *Merchant Shipping (Medical Examination) Rules, 2025*, ensuring transparency, standardization, and accountability throughout the approval and renewal cycles.

She elaborated on the step-by-step processes, such as registration, document submission, fee payments, verification by DGS officials, and issuance of digital certificates. The system incorporates two-factor authentication and allows doctors to digitally handle seafarer medical examinations, upload test results, and issue fitness certificates. A surprise audit feature enables DGS to inspect medical establishments, and there is provision for address/contact change requests and audit-based suspensions or approvals. The platform brings benefits like paperless workflows, centralized document storage, better accountability, and soon-to-be-launched mobile app support. Ms. Vrushali concluded by highlighting that this initiative aims not to burden doctors, but to support them in delivering high-standard maritime healthcare.

The inaugural ceremony concluded on a gracious note with the felicitation of the esteemed dignitaries. Each guest was honored for their valuable contributions, marking a dignified end to the session.

HIGHLIGHTS OF THE INAUGURAL SESSION



















PANEL DISCUSSION 1 – OPTIMIZING MARITIME MEDICAL EXAMINER SERVICES: APPROVAL, RENEWAL AND BEST PRACTICES



LR- Capt. Nitin Mukesh, Capt. MP Bhasin, Capt. Anshul Rajvanshi, Dr. KRS Kanwar, Dr. Jacob Mathew, Capt. Rajesh Tandon, Capt. Shiv M Halbe

Moderator - Capt. Rajesh Tandon (CEO, FOSMA)

Captain Rajesh Tandon, opened the panel by highlighting the growing global responsibilities of India as a leading supplier of skilled seafarers. He emphasized the urgent need to standardize preengagement medical examination services in India to align with international expectations of ship owners, insurers, and flag administrations. While appreciating the efforts made in drafting the 2025 medical guidelines, he urged the administration to ensure that the new rules supersede all previous circulars to eliminate ambiguity. He further recommended that the guidelines explicitly reference their alignment with WHO, IMHA, and ILO standards to enhance international acceptance. Stressing the importance of maintaining minimum yet realistic medical standards, he cautioned against making the norms overly stringent. He also pointed out the need to consider occupational safety and well-being in the broader medical framework. Addressing Capt. Nitin Mukesh, he raised

a significant concern regarding the approval of AYUSH doctors under national rules and whether a gap analysis has been conducted to assess their competence in line with international standards.

Question to Capt. Nitin Mukesh (Panelist No.1)

Has a gap analysis been conducted to evaluate whether AYUSH doctors meet the competency standards of WHO, IMHA, and ILO for conducting seafarer medical examinations? Furthermore, what steps can be taken to ensure Indian seafarers are not disadvantaged in international placements due to perceived gaps in medical fitness evaluations?

Response by Capt. Nitin Mukesh (Representative of the Administration):

Responding to the query regarding international compatibility and the role of AYUSH doctors, Capt. Nitin Mukesh assured the panel that the framing of the MS Medical Examination Rules 2025 was done in adherence to international standards, including consultations with ILO, WHO, and other relevant conventions. He emphasized that medical certification for Indian seafarers strictly follows the STCW Code, particularly Tables A-I/9 and B-I/9, ensuring global compliance. To maintain consistency and up-to-date knowledge, the administration has mandated familiarization and refresher training for all medical examiners. This ensures that both the seafarers and the examining doctors remain aligned with the latest international medical trends. Further, the process has been made transparent, with a structured appeal mechanism and uniform infrastructure requirements, and medical records are accessible to employers and P&I clubs upon due process. He strongly affirmed that Indian medical standards not only meet but often exceed international benchmarks, ensuring that Indian seafarers remain globally competitive.

Question to Capt. Nitin Mukesh:

In light of the varying medical fitness standards prescribed by different flag administrations for instance, the Norwegian flag having its own specific requirements how does the Directorate General of Shipping plan to address disputes that may arise due to discrepancies between Indian medical standards and those of foreign flags? Specifically, in cases involving medical unfitness, illness, or injury, how will the Directorate ensure that Indian seafarers are duly protected and receive their rightful entitlements, while also safeguarding employers from being penalized for

adhering to one standard over another? While the straightforward solution may be to comply with the higher standard, your insights on managing such disputes would be valuable.

Response by Capt. Nitin Mukesh:

In cases of disputes arising from differences in medical fitness standards between Indian and foreign flag administrations such as unfitness, injury, or illness the Directorate has established an appeal mechanism to ensure fair resolution. Seafarers or employers may invoke this procedure, and in such instances, the matter can be escalated to the Director General of Shipping (DGS, whose decision is binding on both the seafarer and the employer. This ensures that seafarers are protected in claiming their rightful entitlements while simultaneously safeguarding employers who have acted in good faith under a recognized standard. As stated in the presentation, the DGS serves as the final authority in such matters.

Question to Capt. MP Bhasin (Panelist 2)

What, in your experience, are the major challenges faced when placing Indian seafarers on foreign-flag vessels specifically in relation to medical fitness and certification? Kindly share insights based on existing and past practices, without referring to the upcoming or revised rules, as those are expected to address many of the current concerns.

Response by Capt. MP Bhasin

In addressing the challenges related to placing Indian seafarers on foreign-flag vessels particularly concerning medical fitness and certification, Capt. Bhasin highlighted that the biggest issue faced by employers is the nondisclosure of medical conditions by seafarers themselves. Many seafarers tend to conceal illnesses such as epilepsy, hypertension, or diabetes—sometimes even from their families—making it difficult for doctors to detect underlying issues through routine medical checks. Even after being declared fit, some seafarers fail to continue their medication while onboard, further aggravating health risks. Capt. Bhasin emphasized that this behavioral pattern must be addressed through awareness and education. He also pointed out that obesity and diabetes are now among the leading causes of medical unfitness for Indian seafarers, urging that rules be framed in consultation with employers and doctors. He welcomed recent circulars issued by the

Directorate General of Shipping, especially on the age of doctors, but stressed **the** need for clarity and specificity in such circulars, particularly regarding their applicability to Indian or foreign-flag vessels. He called for a holistic and consultative approach involving employers, doctors, flag states, insurance companies, and authorities like P&I clubs to ensure that seafarers are not inconvenienced and employers and medical practitioners are equally protected and guided.

Question to Capt. Anshul Rajvanshi (Panelist 3)

What are the key challenges faced by employers with respect to medical fitness certificates issued in India for seafarers joining foreign-flag vessels, particularly in cases where health issues arise midway during the contract, leading to concerns or questions from foreign shipowners or authorities? Could you share some experiences or insights on this matter that would be helpful for both employers and medical practitioners?

Response by Capt. Anshul Rajvanshi

In response to the concerns regarding challenges with medical fitness certificates issued in India for foreign-flag vessels, Capt. Rajvanshi highlighted the recurring issue of seafarers being declared medically fit but developing serious health conditions shortly after joining ships such as high blood pressure, gallbladder issues, or even heart attacks often within just 15 to 30 days of embarkation. These instances raise concerns from shipowners and P&I clubs, who question the reliability of prejoining medical assessments. Capt. Rajvanshi acknowledged that while doctors often provide valid explanations, the frequency of such cases necessitates a re-evaluation of existing medical screening protocols. He further emphasized the need for enhanced and category-specific medical testing especially for older seafarers or based on insurance club requirements despite potential cost implications. This, he noted, is essential to uphold safety standards and employer credibility in International shipping.

Question to Dr. Jacob Mathew (Panelist 4)

Given the increasing pressure from foreign flag administrations and P&I clubs to control medical-related costs, how can medical examiners effectively adjust their clinical assessments to better anticipate and mitigate health-related risks among seafarers? In your experience, how

do you strike a balance between maintaining clinical quality and cost-effectiveness, especially in a competitive environment where some practitioners may offer lower-priced services?

Response by Dr. Jacob Mathew:

Dr. Jacob Mathew emphasized that working with quality shipping companies significantly reduces conflicts regarding medical costs and assessments. These companies prioritize the health and safety of seafarers over financial considerations and trust the medical examiner's judgment. He shared that he has never been pressured to declare a seafarer fit or unfit against his clinical discretion. Instead, he is held accountable only if a seafarer returns due to a medical issue, in which case he must justify the decision with proper documentation. Drawing from his extensive experience including 20 years at sea, some of which were on submarines, and 27 years in maritime medical assessment, Dr. Mathew highlighted the importance of sound clinical judgment over cost-cutting. He stressed that problems typically arise only when companies cut corners, not when they maintain high standards. Quality, he concluded, always comes at a price, and responsible stakeholders understand and support that.

Ouestion to Jacob Mathew:

Given the recurring health-related claims observed by P&I clubs particularly in areas like cardiac issues and mental health would you support the integration of anonymous and confidential feedback from these clubs into the training and familiarization of medical examiners? Do you believe such feedback, when systematically analyzed for trends in returning cases, could enhance the quality and consistency of pre-engagement medical examinations and support the Directorate's broader effort to raise medical assessment standards?

Response by Dr. Jacob Mathew

Dr. Jacob Mathew emphasized the critical need for robust and structured training for medical examiners, noting that prior to 2000, no formal familiarization course existed, and even today, the current half-day course is grossly insufficient. Drawing from his experience as the co-author of the original syllabus, he highlighted how the course duration has been consistently reduced over time,

undermining its effectiveness especially when many doctors assessing seafarers have never served onboard ships themselves. To address this gap, Dr. Mathew shared his practice of conducting daily case reviews across his centers to promote continuous learning and quality assurance. He strongly supported the integration of anonymized feedback from P&I clubs on recurring medical issues into training modules and advocated for the reinstatement of a comprehensive 7–10-days course under the administration's guidance. He concluded by endorsing the efforts of the Directorate General of Shipping and Captain Nitin Mukesh to raise medical standards in the maritime sector through initiatives like this first-ever conclave for medical examiners.

Question to Dr. KRS Kanwar (Panelist 5)

Dr. Kanwar, what specific additional training, certification, or exposure would you recommend to help medical examiners more confidently meet international fitness standards for seafarers, especially in light of regional health challenges across India? Given the varying tropical conditions and health profiles in different geographies, particularly in the northern parts of India, do you believe the occupational health training should be tailored accordingly—and should inputs from practicing doctors across regions be integrated into the upcoming circular on training standards?

Response by Dr. Kanwar:

Dr. Kanwar emphasized the need for more comprehensive training for medical examiners in the maritime industry, particularly to handle international fitness expectations. He noted that prior to 2015, there was a lack of structured training, and even after courses were introduced, they were often brief and did not address critical health issues such as hypertension, diabetes, and cardiac conditions adequately. He recommended that training programs be extended to 3 to 6 months, focusing on practical, real-world cases, common health problems, and risk assessment. Dr. Kanwar stressed the importance of maintaining high standards in fitness assessments, ensuring that seafarers are fully fit for service to safeguard both their health and the safety of their colleagues on board. He also called for continuous professional development to stay current with emerging health challenges and emphasized the importance of medical examiners maintaining integrity, even under pressure from companies.

Question Answer Session (Audience Participation)

Q1. What kind of initial training or familiarization should be provided to doctors entering the maritime medical field for the first time? For example, in Germany, doctors are placed on board ships for a month before they are certified. Should India consider adopting a similar hands-on approach, or would a shorter course combined with case-based learning and peer seminars be more effective?

Answer by Jacob Mathew: It was rightly pointed out that doctors newly entering the maritime medical field often undergo only a half-day or one-day familiarization course, which is insufficient for understanding the complexities of seafarers' health. Drawing on the example of Germany, where doctors are required to spend a month onboard before certification, it was emphasized that hands-on experience and in-depth exposure are crucial. While a long training may not be practical for all, the need for a more robust, experience-based familiarization program was acknowledged. It was agreed that this concern would be taken up with the relevant authorities, and that the duration and structure of initial training should be revisited in consultation with medical experts within the group.

Q2. Why are seafarers not included in such seminars despite being the ones directly affected, and considering the rising mental health issues due to long contracts, especially 9-month tenures, shouldn't there be discussions on reducing contract durations to 4–6 months to ensure better mental well-being?

Response by Capt. Rajesh Tandon

In response, it was clarified that issues of harassment are being actively addressed through measures taken by the Directorate General of Shipping and various shipping companies, including awareness, training, counseling, and early risk identification. As for the concern over prolonged contract durations contributing to mental stress, it was emphasized that such durations like the commonly seen 9-month period are often agreed upon by unions such as the ITF (International Transport Workers' Federation). Therefore, if changes to shorter tenures are desired, the initiative should come from the ITF, as many responsible employers have already voluntarily reduced tour lengths.

PANEL DISCUSSION – 2 – MEDICAL FACILITIES, INSPECTION, QUALITY ASSURANCE FOR LABORATORY



Capt. Deepak Gupta (Moderator)

The moderator, representing Eastern Ship Management Limited, began the second session by welcoming the esteemed panelists, guests, and doctors, and urging everyone to take their seats as the panelists were already present. He acknowledged the Directorate General's commendable initiative of consulting stakeholders on new regulations, highlighting the rarity and value of such inclusive engagement. Emphasizing the administration's in-depth attention to practical concerns like seafarers' waiting areas and the overall boarding experience, he expressed optimism that the new regulations would establish a higher standard of welfare. He also recommended expanding the medical practitioner module to keep maritime doctors better informed, particularly those outside metro cities. Citing a doctor's observation that medical examinations are largely based on observation rather than diagnostics, he praised the refresher course update as a step in the right direction. He concluded by emphasizing the importance of collaborative discussions to improve

the system, sharing a striking example of a seafarer onboard without an eyeball to underline the necessity of rigorous medical standards.

Capt. Deepak Gupta Ques to Capt. Deepak Correa (Panelist 1)

The moderator directed a question to Capt. Deepak Correa, asking for his insights as a final user of medically fit seafarers regarding the current situation of medical sign-offs. He inquired about Capt. Mehta's observations on the frequency and reasons behind seafarers being medically signed off shortly after joining, and whether the newly proposed rules by the Directorate General address these concerns effectively. Referencing data from his own company, which manages around 20,000 to 25,000 seafarers annually, the moderator pointed out that approximately 0.3% to 0.4% of them are signed off within just 60 days of joining, a period considered critical for seafarer stability. He sought Capt. Mehta's views on whether the new rules are sufficient in bridging these gaps or if there is still a need for further additions or revisions.

Response by Capt. Deepak Correa

Capt. Deepak Correa responded by acknowledging that the proposed draft by the Directorate General is a welcome and timely initiative, emphasizing that the maritime sector could no longer rely on outdated medical regulations. While supportive of the new draft, he noted that there is certainly room for discussion and refinement of its various modalities. He concurred with the statistics shared by the moderator, stating that similar trends are observed in his organization as well, indicating a broader industry issue. Capt. Correa highlighted a clear gap in the current system, particularly in the quality of medical examinations and the standard of clinics conducting them. He stressed that the focus should not be limited to tests, which primarily cover biochemistry, but should include thorough medical examinations. Drawing from shared industry experiences, he affirmed the need for immediate attention to both the examination procedures and the quality control of medical facilities involved in certifying seafarers.

Question by Capt. Deepak Gupta to Capt. Arun Mehta (Panelist 2)

Capt. Deepak Gupta posed a detailed question to Capt. Arun Mehta, highlighting concerns about the expanded scope of medical examinations proposed in the new draft regulations, which go beyond WHO and ILO standards. He asked about the potential legal challenges such mandates might face, especially considering they will now apply to over 500 companies, not just members of FOSMA and MASSA. He further inquired whether the increased cost of compliance given the added tests and stricter unfitness criteria might trigger industry pushback, or if stakeholders would recognize the intent behind the Directorate's efforts to enhance seafarer health and safety.

Response by Capt. Arun Mehta

Capt. Arun Mehta stated that quality companies and responsible ship owners are unlikely to oppose the new medical standards, as many already conduct medical assessments beyond current requirements to ensure a higher level of seafarer fitness. He mentioned that his organization carries out seven different levels of medical fitness tests and insists on fresh medical examinations before each deployment, regardless of certificate validity. This practice aims to identify and control rising health concerns early. He also stressed that the new regulations would shift some responsibility onto the seafarers to maintain their fitness, as those unable to provide a recent fitness certificate must undergo more extensive testing. From a cost standpoint, he believes such proactive medical investment prevents costly claims and incidents, ultimately benefiting all stakeholders in the maritime industry.

Question by Capt. Deepak Gupta to Dr. Corinne Idnani (Panelist 3)

Capt. Deepak Gupta asked Dr. Corrine Idnani, "What challenges do you see in complying with NABL standards or ISO 15189, and how do you think these standards will impact the broader industry? Could you share your thoughts from the perspective of the entire room?"

Response by Dr. Corrine Idnani

Dr. Idnani suggested that enrolling in NABL (National Accreditation Board for Testing and Calibration Laboratories) may not necessarily reduce the recurrence of crew members' medical issues, as NABL is a different package altogether. However, she emphasized the importance of

analyzing the cases of returning seafarers, particularly those whose medical issues were linked to the PME (Pre-Employment Medical Examination) factor. Dr. Idnani recommended that a study be conducted to assess the causes of these returns, such as whether they were related to specific medical conditions like cardiovascular issues, diabetes, or musculoskeletal problems. This analysis would help improve the new DG standards and add value by identifying areas where improvements are needed.

Capt. Deepak Gupta to Dr. Dushyant Barfiwala (Panelist 4)

Capt. Deepak Gupta raised a concern regarding the responsibility of medical clinics in cases where diseases evolve after the medical examination. He explained that in certain situations, such as when a seafarer develops a fever days after being cleared for duty, it is difficult for the doctor to diagnose the condition at the time of the examination, especially if the illness was in its incubation period. He emphasized that the evolving nature of some diseases and the inability to diagnose them immediately should be considered before placing the onus on the clinic for such cases. He asked Dr. Barfiwala for his thoughts on this issue, particularly regarding how such situations should be handled and the challenges they present.

Response by Dr. Dushyant

Dr. Dushyant Barfiwala highlighted the core challenges PME clinics face in obtaining NABL accreditation, emphasizing that doctors are often held accountable for medical issues that emerge post-examination, such as illnesses during incubation periods, which cannot be detected at the time of screening. He pointed out several practical hurdles: clinics need six months of patient data before applying, which limits new setups; only LLPs or ownership models are eligible, excluding simpler clinic structures; a dedicated staff member is required just to handle the extensive paperwork, including 60+ files per individual; and NABL's stringent requirements often feel excessive, especially when doctors are screening healthy individuals rather than treating the sick. Nonetheless, Dr. Dushyant acknowledged that NABL improves staff competency and operational control and offers DG Shipping approval as a major benefit. He concluded by suggesting that instead of mandating only NABL, DG Shipping could introduce its own parallel quality guidelines

such as mandatory machine calibration—to ensure consistent standards without creating undue burdens.

Question by Dr. Deepak Gupta to Capt. Vikram Singh Manhas (Panelist 5)

Dr. Deepak Gupta raised several concerns about the challenges of achieving NABL accreditation for clinics, particularly the issues around the data requirement, the need for a specific type of business structure, and the extensive paperwork involved. He also discussed the frustrations that come with diagnosing diseases in seafarers who may develop symptoms after their medical exams, highlighting that it can be difficult for doctors to diagnose conditions that evolve over time. Dr. Gupta then asked Capt. Vikram Singh Manhas for his thoughts on these challenges and how such concerns could be addressed in the context of the shipping industry.

Response by Capt. Vikram Sing Manhas

Capt. Vikram Singh Manhas explained that the intent behind DG Shipping's push for NABL accreditation is to establish uniformity and quality assurance in laboratory analysis, which is crucial for doctors to make informed decisions. He highlighted that while NABL is a government-recognized accrediting body under the Ministry of Commerce and Industry, its role is to ensure adherence to consistent standards, particularly ISO 15189, to maintain the quality of tests. He further clarified the difference between accreditation and certification, emphasizing that NABL's accreditation provides more comprehensive quality control. Capt. Manhas also addressed the importance of having a government-approved accrediting body to ensure enforceable standards, as non-government bodies might lack the necessary jurisdictional oversight. He acknowledged that NABL accreditation does not guarantee health outcomes but helps establish a minimum standard to reduce operational issues, thereby improving the overall quality and reliability of medical testing in the maritime industry.

PD 3 - MEDICAL GUIDELINES FOR EXAMINERS AND SUITABILITY OF AYUSH DOCTORS



LR-(Dr.) Shashank Jahagirdar, Dr. Kiran D Pandit, Dr. KRS Kanwar, Capt. Mohan Naik, Dr. Diwakar Tiwari, Dr. VZ Belani, Capt. Nitin Mukesh, Captain Halbe

Capt. SM Halbe (Moderator)

Capt. SM Halbe commended the DG Shipping and Marex Media for organizing the event and emphasized the importance of meaningful takeaways. Introducing the panel discussion on "Medical Guidelines for Examiners and Suitability of IS Doctors," he outlined a structured format, allowing each speaker a couple of minutes to present their views, and announced the speaking order, beginning with Dr. Pandit and concluding with Dr. Belani.

Dr. Kiran D Pandit

Dr. Kiran D. Pandit emphasized the importance of evaluating the suitability of AYUSH doctors as maritime medical examiners. He identified four essential criteria for such suitability:

constitutional legitimacy, clinical competence, the ability to interpret diagnostic information, and the relevance of AYUSH systems in the maritime context, He clarified that AYUSH doctors are governed by national statutory bodies such as the National Commission for Indian System of Medicine (NCISM) and the National Council of Homeopathy bodies equivalent in authority to the National Medical Commission (NMC) for allopathic medicine. These councils oversee curriculum standards and ethics, ensuring that AYUSH practitioners are well-qualified. Citing the NCISM Act, 2020, and the 2023 Ethics Regulations, Dr. Pandit affirmed that AYUSH doctors are legally empowered to practice modern medicine to the extent covered in their training. He addressed misconceptions about their competence, asserting that AYUSH graduates are trained in ECG interpretation, blood pressure monitoring, and diagnostic analysis, and follow standardized treatment protocols developed in collaboration with the Ministry of AYUSH, the Ministry of Health, and ICMR. He stressed the growing gap between the increasing number of seafarers rising from 96,000 in 2014 to over 500,000 in 2025 and the limited number of approved medical examiners, only 150 of whom are from AYUSH. Citing DGS Notice 4 of 2015, Dr. Pandit also highlighted the maritime sector's need for preventive and mental healthcare, areas where AYUSH systems have particular strength and will contribute immensely for the seafarer's well-being.

Capt. (Dr.) Shashank Jahagirdar

Capt. (Dr.) Shashank Jahagirdar, emphasized the significant impact of medical sign-offs on ship owners and managers, noting that every such instance incurs substantial costs whether borne by the company or by the P&I club which ultimately affect the ship owner. He welcomed the Directorate General of Shipping's efforts to issue new medical guidelines and circulars, observing that these updates would help clarify decisions in borderline medical cases, such as those involving urinary stones, where certification of a seafarer's fitness often leads to discussions between doctors and the company. On the issue of AYUSH practitioners, Capt. (Dr.) Jahagirdar acknowledged that their inclusion as medical examiners is an evolving matter that will generate healthy discussion, especially since the industry is currently accustomed to allopathic practitioners. He concluded by stating that companies would need to consult with their principals and ship owners as the policy unfolds, and expressed interest in observing how the industry adapts to this shift.

Dr. Diwakar Tiwari

Dr. Diwakar Tiwari, while addressing the esteemed panel, emphasized the importance of aligning the Directorate General of Shipping's Draft Guidelines for Medical Examination 2025 with international standards. He highlighted three key areas for consideration. First, he suggested referencing Appendix E of the ILO 2013 Guidelines (Geneva), which offers a comprehensive and globally accepted tabulated format for decision-making related to medical conditions. Second, he recommended updating the existing references to blood pressure thresholds to reflect current international norms. Third, Dr. Tiwari proposed the inclusion of provisions for hearing aid use, as permitted in international guidelines, and revisiting the eyesight standards for pre-sea medical examinations. He noted that global guidelines now recognize corrected vision with spectacles, with a minimum unaided requirement of 6/60, and that this practice is followed in countries such as the UK, Europe, and the Philippines. Adopting these updates, he suggested, would help bring Indian guidelines in harmony with international best practices.

Capt. Nitin Mukesh

Captain Nitin Mukesh addressed the ongoing debate regarding the inclusion of AYUSH practitioners in the approved list of doctors for seafarers' medical examinations. He shared that significant discussions had taken place involving both MBBS and AYUSH doctors, with differing viewpoints creating challenges in reaching a consensus. In an effort to evaluate their suitability fairly, the Directorate General of Shipping invited AYUSH practitioners particularly from Ayurveda and Homeopathy to present their syllabi and credentials. Only two such practitioners responded. Captain Mukesh emphasized that the Directorate is open to considering AYUSH doctors, provided they meet legal, technical, and stakeholder requirements, and demonstrate their capability to offer medical services on par with MBBS doctors. He assured that the matter remains under active consideration and that the process will be guided by transparency and legal soundness.

Capt. Mohan Naik

Captain Mohan Naik highlighted several critical areas needing attention in the context of medical examination rules for seafarers. Emphasizing the often-overlooked aspect of mental fitness, he pointed out the inadequacies of current entry-level psychological assessments and suggested that more reliable and standardized methods be adopted to evaluate a seafarer's mental readiness, especially for challenging assignments. He also flagged ambiguities in physical fitness assessments such as inconsistencies in handling kidney stones, lack of clarity on BMI standards (especially for muscular individuals and confusion regarding the medical fitness of seafarers with cardiac stents, where interpretations vary widely among doctors. He urged the Directorate General of Shipping to bring standardization and clarity to these medical fitness parameters to ensure fairness, safety, and operational efficiency in the maritime sector.

Dr. VZ Belani

Dr. Belani addressed several key concerns related to the medical fitness of seafarers. He highlighted the limitations of psychometric evaluations, emphasizing that results may not always reflect true mental fitness due to factors like incomplete or careless responses. Regarding kidney stones, he stressed that the guidelines are clear: seafarers must be stone-free, and pain relief, including the use of intravenous injections, should be prioritized on board to avoid emergencies. On cardiovascular conditions, Dr. Belani advocated for a more flexible approach, suggesting that individuals who undergo procedures like angioplasty or bypass surgery should not automatically be deemed unfit for sea duty, but rather re-evaluated after a set recovery period. He also discussed the suitability of Ayurvedic and other alternative medicine doctors, noting that if a local authority approves them, the international community generally does not object, as doctors are primarily facilitators of fitness assessments, not curers.

Question Answer Session (Audience Participation)

Q1. Given that some crew members, especially food handlers and non-technical staff, do not require normal color vision for their job responsibilities, and considering that individuals from hilly or mountainous regions may naturally fall below the standard height and weight limits without any medical issues, should these crew members be automatically declared unfit based solely on these criteria, or should there be more flexibility in evaluating their fitness?

Capt Halbe answered that, if the company is paying for the medical examination, they do have the right to request limiting the validity to one year, particularly for crew members over 40 years of age. This is based on the idea that as a person ages, more frequent monitoring and follow-ups are needed to ensure their health remains suitable for working at sea. However, if the seafarer is personally paying for the examination, they have more say in the matter, and it becomes important to make sure that they are comfortable with any restrictions set. Ultimately, it's about balancing the company's responsibility for the crew's well-being with the seafarer's autonomy.

Q2. Why do some companies provide health insurance only for senior officers (like the master and chief engineer) and not for other crew members, and why is there a lack of pre-boarding medical screening for specialized vessels like gas carriers and chemical tankers, despite it being mentioned in the RPS rules?

Capt. Halbe responded to the question by highlighting that It appears that the lack of pre-boarding medical screening for specific vessels like gas carriers and chemical tankers, despite being mentioned in the RPS rules, is primarily due to a gap in practical implementation by the industry. While the rules specify the need for chemical screening based on the vessel type and the cargo carried, it seems that some companies are not fully adhering to these guidelines. This could be due to varying levels of enforcement or understanding of the rules within different shipping companies. As mentioned, once a seafarer signs off, there is a chemical screening, but there is a need to ensure consistent application of pre-boarding medical checks, particularly for specialized vessels, to enhance safety and compliance with the regulations.

POINTS TO PONDER/KEY TAKEAWAYS

A minimum 3 to 5 days structured course combining theory and case based learnings.

Peer-reviewed seminars where senior maritime doctors present real world complications and lessons learned Simulated shipboard environments or observational stints at ports to offer practical insights without needing a full month at sea.

The inclusion of mental health assessments is a progressive step but requires proper sensitization, standardization, and privacy protection. Grievance Redressal Mechanism Needed: Seafarers currently face difficulties in appealing medical fitness decisions; a structured and accessible grievance process is crucial.

The new rules aim to align closely with ILO and IMO standards, particularly MLC 2006 and STCW, promoting global consistency.

Variability in how different medical examiners interpret and apply standards remains an issue; uniformity and training are needed. Use of Digital Platforms, The adoption of digital tools for record-keeping and verification (such as DG Shipping's e-Governance portal) can streamline processes and reduce fraud.

Clarity is needed on how to handle cases with manageable pre-existing conditions, to avoid unfair disqualifications.

Women Seafarers and Inclusivity: Medical guidelines must account for gender-specific health needs, ensuring that women are neither excluded nor disadvantaged.

Accountability and Oversight: There is a strong push for better monitoring of approved doctors and disciplinary action in cases of misconduct or negligence.

Training and Refresher Courses: Medical examiners must receive periodic updates and training to stay current with global standards and evolving expectations.

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Holistic Vision for Seafarers' Health: The conference emphasized not just regulatory compliance but the overall well-being of seafarers, linking health to safety and efficiency at sea.

Medical Fitness and Employability: A valid medical certificate has a direct impact on a seafarer's ability to work and earn—raising the stakes for fair, accurate, and timely assessments.

Important Social Media Links

Speakers Profile

https://issuu.com/marexmediap vtltd/docs/marine_medical_202 5_booklet

Panel Discussion 1

https://www.youtube.com/watch ?v=pHzqZPMMPas

Conclave pictures

https://drive.google.com/drive/folders/1cToBHpTnAFYs0RhJQOmB5bJcE2AhNB0S?usp=sharinghttps://drive.google.com/drive/folders/1cToBHpTnAFYs0RhJQOmB5bJcE2AhNB0S?usp=sharing

Panel Discussion 2

https://www.youtube.com/watch?v=ABFqaVI59SU

Panel Discussion 3

https://www.youtube.com/watch?v=YXss1WFZscw