

Virtual Flight Surgeons® Inc.

“Our Physicians...Your Solution”

Quarterly Aeromedical Newsletter

14707 E. 2nd Ave., Suite 210
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FAA Aeromedical Certification- Policy Update



Season's
Greetings

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1-866-AEROMED



New AME Guidance for DUI – The FAA recently updated its guidance to Aviation Medical Examiners on how to handle airmen reporting of a first alcohol related motor vehicle offense. In the past, the first offense could be cleared by the AME as long as there was no overt evidence of alcohol dependence or ongoing abuse. Now, those airmen who had a breath alcohol level of 0.15 or greater OR anyone who refuses to test during arrest will have their medical applications deferred to the FAA for further review. See “President’s Corner” for more information.

Bariatric Surgery Updates – The FAA recently clarified that any bariatric or “weight loss” surgery including simple procedures such as lap banding do require a 60 day observation and recovery period followed by request for Special Issuance or waiver. In the past most airmen simply reported lap banding at the time of the next medical examination. Those seeking waiver will need a current status report and laboratory studies at a minimum. Our physicians will be happy to assist in seeking the waiver.



Implantable collamer lenses (ICLs) – The FAA recently confirmed that these devices sometimes referred to as implantable contact lenses are allowed for ATCSs and Airmen. There is a mandatory 3 month observation period required before return to aviation duties as long as there are no complications and vision meets FAA standards.

Parkinson’s Medication – In our last issue, we noted the withdrawal of Eldpryl as an allowed treatment. As of the publication of this newsletter, Azilect is still under review and no new waivers are being issued with that medication.

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President's Corner



Holiday Cheers, Beers and Tears!

Quay Snyder, MD, MSPH

The holidays are often wonderful times of celebrating with family and friends. Many times, these celebrations include alcoholic beverages of all types such as spiked eggnog and champagne. Beers for watching bowl games and gift wrapped bottles of fine wine or liquor are part of our holiday traditions (and non holiday times as well).

We encourage everyone to celebrate the holidays in a safe and responsible manner while sharing the joys of the times with significant people in your lives. As pilots, we have some additional reasons to exercise caution when celebrating and drinking. The FAA has announced a new policy regarding issuing of pilot medical certificates following an alcohol related motor vehicle offense. This may result in some holiday tears for the careless or unaware pilot.



The most recent issue of the Federal Air Surgeon's Medical Bulletin provided to Aviation Medical Examiners outlines this new policy. For any pilot reporting an alcohol related motor vehicle action on the medical application, the AME must obtain police and/or court documents and question the pilot regarding the event. Previously, pilots with first time DUI-type offenses were able to be issued a medical certificate at the time of the exam and provide information to the FAA if asked. (Source: http://www.faa.gov/about/office_org/headquarters_offices/avs/offices/aam/fasmb/).

The new policy directs AMEs to DEFER medical certificates to the FAA for review for any pilot reporting an arrest, administrative action such as temporary suspension of a driver's license, or conviction for an alcohol related motor vehicle action if:

- 1) the breath/blood alcohol concentration > 0.1499
- 2) refusal to provide a sample for police

The FAA will require a pilot to obtain a Substance Abuse Evaluation and submit for review before determining the pilot's eligibility for medical certification. This process may take several weeks to months during which the pilot may not be able to fly.

Our experience reveals that most AMEs will also not issue a medical certificate if this is a second offense (no time limit) consistent with the current FAA policies. Some AME's have taken a more aggressive approach and defer medical certificates to the FAA even the first alcohol related motor vehicle action, although this is not required by FAA policy. Nevertheless, for the airman caught in this dilemma, the period of grounding while awaiting FAA review is extremely frustrating.

The FAA Office of Aerospace Medicine generally requires the pilots to provide the following documents for pilots meeting the criteria listed above.

- Copies of police and court records related to the offense
- Copies of DMV records for every state the pilot has held a driver's license
- A personal statement about the circumstances surrounding the event and a personal drinking history
- A substance abuse evaluation by a qualified examiner

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President's Corner (Continued)



Additional more detailed evaluations may be required after review of the preliminary evaluation. All of this takes time and money, frequently while the pilot does not have a medical certificate.

Our recommendations:

- Don't drink and drive...ever.
- Don't refuse a police officer's request for testing (legal advice may differ)
- Report all alcohol related offenses on your FAA medical application Form 8500-8
- Comply with FAR 61.15 by reporting any conviction or administrative action for alcohol related motor vehicle actions to the FAA Securities Division within 60 days of the occurrence. Failure to do so will result in action against your PILOT certificate, not just your MEDICAL certificate.
- Contact our physician staff immediately after any alcohol related event for specific advice. Doing so will allow pilots to potentially avoid unnecessary groundings or adverse administrative consequences.



Wishing all of our Pilots and Controllers a Safe, Healthy, and Happy Holiday Season and a Wonderful New Year!

Quay Snyder



VFS Announces NBAA Aeromedical Discount



VFS is proud to announce its recent partnership with the National Business Aviation Association (NBAA). Through a mutual desire to focus on pilot career preservation, pilot advocacy and aviation safety, VFS has teamed up with NBAA to offer an annual 10% discount on aeromedical services to NBAA Member Companies in good standing who elect to enroll in the Complete Aeromedical Services Program (CASP). Current CASP clients will receive a 10% discount on their next contract renewal.

The CASP provides complete coverage for aeromedical advice and FAA medical certification assistance. The program provides access to comprehensive tools and services to ensure your medical certificate is protected, including confidential e-mail and phone consultations

with a VFS board certified Aerospace Medicine physician. The program includes FAA waiver advocacy and case preparation, for both initial reporting and renewal submissions. The program also provides dedicated tracking and follow-up notification for cases that have been submitted to the FAA, as well as reminder notices for future submissions.

Interested Member Companies should contact the VFS Chief Operating Officer, Catherine Cazorla, at 1-866-AEROMED or by sending an email to doctors@aviationmedicine.com with the name of the company and the number of pilots to be covered. Ms. Cazorla will provide a service proposal and assist with a service agreement for Member Companies who wish to enroll.

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Ask the Doc

Question: What are the implications on my ability to perform ATC duties with a diagnosis of sleep apnea.

Answer: Sleep apnea is a medical condition that may adversely affect an individual's quality of life and health. The negative effects of sleep apnea range from annoying to life threatening. For controllers, sleep apnea may also compromise safety and may result in loss of FAA medical qualification.

Under current policy any degree of sleep apnea is temporarily incapacitating medical qualification.

Fortunately, the condition is treatable. Most people treated for sleep apnea quickly notice a significant improvement in their quality of life. More importantly, treatment minimizes risk factors for negative health effects. Upon documentation of successful treatment, the FAA will consider reinstatement of a controller's medical qualification.

Sleep apnea must be distinguished from simple snoring and other causes of sleep disturbances. These causes include insufficient sleep, circadian rhythm disturbance, narcolepsy and periodic limb movements/restless legs syndrome. Conditions that may also present with excess daytime sleepiness include depression, anxiety, and use of medications and abuse of stimulants, sedatives and alcohol.

Persons with risk factors for or symptoms of sleep apnea should be evaluated with polysomnography (PSG) also known as a sleep study. Several treatments are available in individuals for whom the diagnosis is confirmed. These include Continuous Positive Airway Pressure (CPAP), oral appliances and surgery. The success of the treatment should be evaluated both using a repeat PSG or Maintenance of Wakefulness Test (MWT). With successful treatment of sleep apnea, FAA medical certification is likely.

Medical records will need to be provided to the Regional Flight Surgeon's (RFS) office for review and Special Consideration.

If a controller has been returned to duty with Special Consideration for sleep apnea controlled with CPAP, they are typically required to provide an annual clinical update from their treating provider that the controller remains compliant with CPAP use and doesn't experience any excessive daytime fatigue. The Federal Air Surgeon confirmed that neither quarterly assessments nor electronic compliance monitoring is a normal requirement. RFS offices may vary in their follow-up requirements. ATCSs being required to provide such information should contact VFS for assistance in clarifying their requirements.

Question: Why so much interest in sleep apnea?

Answer: There has been renewed interest in the aviation field on crew fatigue including emphasis on sleep apnea. An article on our website discusses the health implications of this condition and the need for Special Consideration. For those already on a waiver, the FAA requires an annual clinical narrative confirming continued nightly use of either CPAP or oral appliances and confirming the absence of any excessive daytime fatigue. Of note, the assessment of nightly compliance is a clinical determination by the attending provider. We have seen a number of cases where "compliance card data" was submitted instead of the clinical assessment and the card data was inaccurate or incomplete resulting in the waiver being temporarily withdrawn until clinical correlation is provided by the treating provider. The current FAA policy does not require "card data" and we do not recommend submitting that information in lieu of an actual clinical assessment by your treating provider. Please contact a VFS physician for more information as needed.



Flight Safety Foundation's Corporate Advisory Committee, Alexandria, VA. Dr. Snyder participated in the FSF Corporate Advisory Committee Fall workshop in Alexandria VA in October 2009. Former CAC member and current NTSB Vice Chairman, Robert Sunwalt, presented his vision of a comprehensive Safety Management System, while other presentations included Threat and Error Management, Runway Safety Initiatives and recent accident statistics. Dr. Snyder then participated in the joint NBAA/FSF Corporate Aviation Safety Seminar agenda committee that directly followed.

NBAA Annual Convention, Orlando Florida. Dr. Quay Snyder provided a presentation to the

attendees of the Light Business Airplane Conference, "Getting, Keeping and Recovering Your FAA Medical Certificate." This briefing focused on FAA medical certification policies, hot topics and preservation of medical certification.

Aerospace Medical Certification Division (AMCD), Oklahoma City, Oklahoma. Dr. Jon Riccitello and Ms. Brenda Montgomery recently visited AMCD for training. Ms. Montgomery's primary focus was an overview and update of the processing of cases through both the Medical Appeals and General Review branches. Dr. Riccitello spent much of the day training with Dr. Brian Johnson, who manages the Medical Appeals branch.

VFS Holiday Schedule

VFS will be closed from Wednesday, December 23, 2009 through Sunday, December 27, 2009, in observance of the Christmas holiday. We will open again on Monday, December 28, 2009 and operate under normal business hours. We will also be closed from Wednesday, December 30, 2009 at 11:00 a.m. through Sunday, January 3, 2009, in observance of the New Year's holiday.

Change in 2010 Operating Hours

VFS will reopen for business on Monday, January 4, 2010. In order to serve our clients better, our normal operating hours will change to 8:30 a.m. to 4:00 p.m. MST. Any questions about our closures or operating hours should be directed to Lawan Adkins, our Director of Operations, at 1-866-AEROMED or ladkins@aviationmedicine.com.



VFS Annual Adopt-A-Family Event

Each year, VFS strives to give a little back to the local community by participating in the Denver Rescue Mission's Adopt-A-Family program. VFS gathers both company and personal donations to provide Holiday gifts to a family in need.

The delivery group, both staff and family members, are pictured at left getting ready to deliver gifts to our assigned family in Aurora, Colorado.

Happy Holidays!



Happy Holidays!

*From the Staff
of Virtual Flight
Surgeons*

Your VFS Newsletter



Our services are provided to you as a benefit from your company flight department or a membership benefit from your union or aviation association. VFS stands ready as the only board certified Aerospace medicine physician group available to provide you the assistance you

need. Our physicians are always a telephone call or email click away. We can respond to your medical questions and provide advice on any potential impact on your FAA Airman's Medical Certificate for medical conditions you might develop. All client discussions with our staff members are completely confidential and risk-free. VFS is proud to be your one source for

Aeromedical advice and FAA medical certification waiver assistance!

We welcome your comments and suggestions!

Our goal is to make this newsletter useful and informative for all our clients. If you have an idea for a topic you would like covered or have a comment, please contact our Director of Operations, Lawan Adkins via e-mail at ladkins@aviationmedicine.com.

OPT-OUT: If you do not wish to continue receiving the quarterly VFS Aeromedical electronic newsletter, please reply to this e-mail and type "REMOVE" in the subject line. We will remove your e-mail address from our mailing list.

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THE VFS GOAL IS TO KEEP OUR CLIENTS HEALTHY, SAFE & MEDICALLY CERTIFIED!

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