



**U.S. Department
of Transportation**
Federal Aviation
Administration

Advisory Circular

Subject: Alternative Pilot Physical
Examination and Education
Requirements

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Change:

This advisory circular (AC) describes how pilots can exercise student, recreational, and private pilot privileges in certain small aircraft without holding a current medical certificate. It outlines the required medical education course, medical requirements, and aircraft and operating restrictions that pilots must meet to act as pilot in command (PIC) for most Title 14 of the Code of Federal Regulations (14 CFR) part 91 operations. This AC is intended to be used as a resource for pilots exercising the privileges described in section 2307 of the FAA Extension, Safety, and Security Act of 2016. It is also intended to be a resource for state-licensed physicians who will be providing the required medical examination to those pilots.

A handwritten signature in black ink, appearing to read "John S. Duncan".

John S. Duncan
Director, Flight Standards Service

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CHAPTER 1. GENERAL

- 1.1 Purpose.** This advisory circular (AC) provides information to pilots and other stakeholders about complying with the medical certificate relief described in section 2307 of the Federal Aviation Administration (FAA) Extension, Safety, and Security Act of 2016 (Public Law (PL) 114-190) (FESSA), enacted by Congress on July 15, 2016.
- 1.2 Audience.** This AC is intended to provide information to pilots who wish to exercise the relief described in FESSA. It is also intended to provide information for nonprofit and not-for-profit general aviation stakeholder groups who wish to offer the required medical course. Lastly, this information may be used by state-licensed physicians who are providing a medical examination to a pilot intending to exercise this relief.
- 1.3 Background.** The FAA Extension, Safety, and Security Act of 2016 (PL 114-190) (FESSA) was enacted on July 15, 2016. Section 2307 of FESSA, Medical Certification of Certain Small Aircraft Pilots, directed the FAA to “issue or revise regulations to ensure that an individual may operate as pilot in command of a covered aircraft” without having to undergo the medical certification process under Title 14 of the Code of Federal Regulations (14 CFR) part 67 if the pilot and aircraft meet certain prescribed conditions as outlined in FESSA.

The FAA refers to the implementation of section 2307 as alternative pilot physical examination and education requirements (BasicMed). This AC provides guidance regarding the regulations the FAA has enacted to conform to this legislation. This AC does not provide, nor is it intended to provide, a legal interpretation of the regulations.

- 1.3.1 Acceptable Means of Compliance (AMC).** This AC uses mandatory terms, such as “must,” only in the sense of ensuring applicability of these particular methods of compliance when using the AMC described herein. This AC is not mandatory and does not constitute a regulation.

This AC does not change, add to, or delete regulatory requirements or authorize deviations from regulatory requirements. It does describe a new qualification for people exercising certain pilot privileges. Pilots may elect to continue to meet the medical certification requirements that existed before BasicMed, or, if eligible, may use the BasicMed qualifications.

- 1.3.2 Part 68 Provisions.** This AC is not intended to cover every provision of 14 CFR parts 61, 68, or 91. Rather, this AC is intended to provide guidance on those provisions of the regulations where additional information may be helpful. The FAA emphasizes, however, that persons subject to those regulations are responsible for complying with every applicable provision, regardless of whether the provision is discussed in this AC.
- 1.4 AC Feedback Form.** For your convenience, the AC Feedback Form is the last page of this AC. Note any deficiencies found, clarifications needed, or suggested improvements regarding the contents of this AC on the Feedback Form.

CHAPTER 2. REFERENCES

2.1 Related Code of Federal Regulations (CFR) Parts. The following regulations and parts can be found at http://www.faa.gov/regulations_policies/faa_regulations/.

- Title 14 CFR Part 1, Definitions and Abbreviations.
- Title 14 CFR Part 61, Certification: Pilots, Flight Instructors, and Ground Instructors.
- Title 14 CFR Part 67, Medical Standards and Certification.
- Title 14 CFR Part 68, Requirements for Operating Certain Small Aircraft Without a Medical Certificate.
- Title 14 CFR Part 91, General Operating and Flight Rules.

2.2 Related Reference Material. The following listed reference materials contain additional information necessary to meet FAA medical certification standards. Interested airmen may consider seeking additional publications to supplement the lists below.

2.2.1 FAA ACs, Notices, and Orders (current editions). You can find the following publications on the FAA websites:

http://www.faa.gov/regulations_policies/advisory_circulars/ and http://www.faa.gov/regulations_policies/orders_notices/.

- AC 68-1, Alternative Pilot Physical Examination and Education Requirements.
- FAA Order 8900.1, Flight Standards Information Management System (FSIMS).

2.2.2 Additional FAA Online Sources.

- FAA website: http://www.faa.gov/licenses_certificates/medical_certification/.

2.2.3 FAA Handbooks, Manuals, and Other Publications. You can find the following handbooks, manuals, and other publications on the FAA website at

http://www.faa.gov/regulations_policies/handbooks_manuals/.

- Guide for Aviation Medical Examiners: https://www.faa.gov/about/office_org/headquarters_offices/avs/offices/aam/ame/guide/.
- Aeronautical Information Manual (AIM): http://www.faa.gov/air_traffic/publications/.

2.3 Definitions. The following defined terms are used throughout this AC:

1. Calendar months. Known also as “unit months,” is defined as beginning on the first of the month and ending on the last day of the month. For example, a certificate issued on July 15, 2016 with a 24 calendar-month duration does not expire until July 31, 2018.
2. Corrective Lenses. Spectacles or contact lenses.

2.4 Abbreviations/Acronyms Used in This AC.

1. AC: Advisory Circular.
2. AME: Aviation Medical Examiner.
3. CFI: Certificated Flight Instructor.
4. CMEC: Comprehensive Medical Examination Checklist
5. ICAO: International Civil Aviation Organization.
6. FAA: Federal Aviation Administration.
7. FESSA: FAA Extension, Safety, and Security Act of 2016 (Public Law (PL) 114-190)
8. MSL: Mean Sea Level.
9. NDR: National Driver Register.
10. PIC: Pilot in Command.
11. U.S.C.: United States Code.

CHAPTER 3. SUMMARY OF BASICMED REQUIREMENTS

3.1 What Do I Need to Fly Under BasicMed?

1. Hold a U.S. driver's license.
2. Hold or have held a medical certificate issued by the FAA at any point after July 15, 2006.
3. Answer the health questions on the Comprehensive Medical Examination Checklist (CMEC).
4. Get your physical examination by any state-licensed physician, and have that physician complete the CMEC (be sure to keep the CMEC).
5. Take the online medical education course and complete the attestations/consent to the National Driver Register (NDR) check. Keep the course completion document.

3.2 What Are My BasicMed Privileges? You can conduct any operation that you would otherwise be able to conduct using your pilot certificate and a third-class medical certificate, except you are limited to:

1. Fly with no more than five passengers.
2. Fly an aircraft under 6,000 lbs maximum certificated takeoff weight.
3. Fly an aircraft that is authorized to carry no more than 6 occupants.
4. Flights within the United States, at an indicated airspeed of 250 knots or less, and at an altitude at or below 18,000 feet mean sea level (MSL).
5. You may not fly for compensation or hire.

3.3 What Do I Need to Maintain My BasicMed Privileges?

1. Be sure you have a CMEC that shows that your most recent physical examination was within the past 48 months.
2. Be sure you are being treated by a physician for medical conditions that can affect the safety of flight.
3. Be sure you have a course completion certificate that was issued by an approved medical training course provider within the past 24 calendar months.

CHAPTER 4. PILOT REQUIREMENTS

- 4.1 Applicability.** The BasicMed privileges apply to persons exercising student, recreational, and private pilot privileges. It also applies to persons exercising flight instructor privileges when acting as pilot in command (PIC). You cannot use BasicMed privileges to fly as a safety pilot, except when that pilot is acting as PIC.¹
- 4.1.1** Pilots exercising BasicMed privileges may act as PIC² of an operation conducted under the conditions and limitations set forth in part 61, § 61.113 (i.e., charitable, nonprofit, or community event flights, search and location flights). Persons exercising privileges of a student pilot or recreational pilot certificate must comply with the limitations in §§ 61.89 and 61.101, as applicable, when those limitations conflict with § 61.113(i).
- 4.1.2** BasicMed does not apply to persons exercising privileges of a Commercial Pilot Certificate or an Airline Transport Pilot (ATP) Certificate. Persons exercising the privileges of a Commercial Pilot or ATP Certificate must hold a first or second-class medical certificate in accordance with § 61.23(a)(1) and (2).
- 4.1.3** Persons exercising pilot privileges in a balloon or glider can operate without any medical certification. Similarly, persons exercising sport pilot privileges can operate by merely holding a driver's license. While the FAA encourages pilots to obtain qualifications and certificates above those necessary for their operation, sport pilots and pilots operating balloons or gliders may not exercise relief under BasicMed. However, the BasicMed online course can be used by any airman for educational purposes.
- 4.2 Valid Driver's License.** In accordance with §§ 61.23(c)(3) and 61.113(i), pilots exercising BasicMed must hold a current and valid U.S. driver's license and comply with all medical requirements or restrictions associated with that license. Each state determines what, if any, medical requirements or restrictions are necessary and associated with each driver's license issued. While an official passport may serve as a valid form of photo identification under § 61.3(a)(2), it may not be used in lieu of a driver's license as required in § 61.23(c)(3) to operate under BasicMed. An international driver's license or any driver's license issued by a country or territory other than the United States does not suffice to meet this requirement.

Individuals who hold or have held a medical certificate issued by the FAA that was valid at any point after July 15, 2006 but whose driver's license has been revoked or rescinded for any reason are not eligible to use BasicMed unless and until the driver's license is reinstated. Any restrictions on a driver's license (e.g., corrective lenses, prosthetic aids required, daylight driving only, etc.) also apply under BasicMed. Similar to the pilot certificate, when using a driver's license in lieu of a medical certificate, the driver's license needs to be in the pilot's personal possession when they are operating under BasicMed.

¹ The plain language of FESSA explicitly applies only to the PIC (“...the FAA shall issue or revise regulations to ensure that an individual may operate as pilot in command of a covered aircraft...”).

² §§ 61.3 and 61.23

4.3 Medical Certificate Issued by the FAA.

4.3.1 General Requirements. In accordance with § 61.23(c)(3)(i)(B), persons exercising BasicMed privileges must hold or have held a valid medical certificate issued under part 67 at any point after July 14, 2006. This medical may have been a first, second, or third-class medical certificate, including any FAA medical certificate issued under an authorization for special issuance (“special issuance medical certificate”).

4.3.1.1 A person who has not held a medical certificate at any point after July 14, 2006 must obtain a medical certificate issued under part 67. The person may choose to use BasicMed even while holding an unexpired medical certificate. After that medical certificate expires, that pilot may use or continue to use BasicMed, provided that person meets the other conditions and limitations.

4.3.1.2 A person should use the expiration date of his or her most recent medical certificate to determine whether it meets the July 15, 2006 requirement. Special issuance medical certificates are always time-limited and will explicitly state the date when the certificate expires or is no longer valid. Therefore, any special issuance medical certificate with an expiration date on or after July 15, 2006 would meet the 10-year period preceding the date of enactment of FESSA.

4.3.1.3 Unrestricted (“regular issuance”) medical certificates do not list a specific expiration date. Therefore, persons with an unrestricted FAA medical certificate should refer to the “Date of Examination” displayed on the certificate, and then use the table³ below to determine if you meet the look-back requirement. The expiration date is based on a pilot’s age on the date of the examination as calculated from his or her date of birth (i.e., “under age 40” vs. “age 40 and over”). For example, a person born on January 2, 1963 would be “under age 40” if the date of examination was January 1, 2003, but would be “age 40 and over” if the examination occurred one day later on January 2, 2003.

4.3.1.4 Persons age 40 or older on the date of their examination would meet the 10 year period described in the Act if their examination was on or after July 1, 2004. Pilots under age 40 on the date of their examination would meet the 10 year period described in the Act if their examination was on or after July 1, 2003.

³ The duration of FAA medical certificates was changed in a final rule issued on July 24, 2008. This rule extended the duration of a third-class medical certificate from 36 calendar-months to 60 calendar-months for persons under age 40. This table incorporates those changes. See “Modification of Certain Medical Standards and Procedures and Duration of Certain Medical Certificates” (73 FR 43059 July 24, 2008)

Determining if your Unrestricted Medical Certificate Meets the 10-Year Look-Back Requirement

1. Determine certificate date of issuance.
2. Determine your age on date of issuance.
3. Determine validity: If you were under age 40 on the date of issuance and your medical certificate was issued after June 30, 2003, you are eligible; if you were age 40 or older on the date of issuance and your medical certificate was issued after June 30, 2004, you are eligible for BasicMed.

4.3.2 Medical Certificate Requirements. There are a few requirements in § 61.23(c)(3) that apply to the medical certificate the individual is using to meet BasicMed. The most recently issued medical certificate can have been a special issuance medical certificate and can be expired. However, it may not have been suspended or revoked, or in the case of a special issuance medical certificate, it may not have been withdrawn. Medical certificates can be suspended or revoked if the certificate holder does not meet the medical standards of part 67, or as the result of noncompliance with other regulatory requirements. The FAA may also suspend or revoke a medical certificate on the basis of a reexamination of that certificate under Title 49 of the United States Code (49 U.S.C.) § 44709.

4.3.2.1 If a person's last medical certificate was under suspension at any point in time, that medical certificate does not qualify for BasicMed. Further, if the pilot's medical certificate expired while under suspension, the pilot must apply for and be issued a new medical certificate to qualify for BasicMed. Under § 61.23(c)(3)(iv), the most recent application for an airman medical certificate submitted to the FAA by the individual cannot have been completed and denied. The FAA considers the application to be in process once the AME accesses the individual's application in FAA MedXPress. If the individual's application is completed and denied, the FAA considers the applicant to no longer hold a valid medical certificate, even if the applicant is appealing the denial. In this circumstance, the applicant is unable to use BasicMed.

4.3.2.2 If a person held a medical certificate that was valid after July 14, 2006, but subsequently applied for a new medical certificate, that pilot could not revert to the previous medical certificate that meets the 10-year look-back requirement if his or her application for a new medical certificate was completed and denied. That pilot would need to obtain a new medical certificate to qualify for BasicMed.

4.3.2.3 People exercising BasicMed do not need to maintain or provide documentation that proves their compliance with this medical certificate requirement.

- 4.4 Completion of Medical Education Course.** Pilots flying as PIC under BasicMed must complete a medical education course during the 24 calendar months⁴ before acting as PIC of a covered aircraft and must demonstrate proof of completion of the course. The medical education course requirements are listed in part 68, § 68.3 and discussed in Chapter 6.
- 4.5 Care and Treatment by a Physician.** Pilots flying as PIC under BasicMed must be under the care and treatment of a physician⁵ if the pilot has been diagnosed with any medical condition that may impact their ability to fly.
- 4.6 Receipt of Medical Exam During the Previous 48 Months.** Pilots flying as PIC under BasicMed must undergo a comprehensive medical examination⁶ from a state-licensed physician during the previous 48 months. The requirements of the exam are listed in § 68.7 and discussed in Chapter 7.

⁴ § 61.23(c)(3)(i)(C)

⁵ § 61.23(c)(3)(i)(E)

⁶ § 61.23(c)(3)(i)(D)

CHAPTER 5. COVERED AIRCRAFT AND OPERATING REQUIREMENTS

5.1 Covered Aircraft Requirements.

- 5.1.1 General.** The aircraft must be authorized by the FAA to carry not more than six occupants⁷. Additionally, the maximum certificated takeoff weight, which is determined as part of the certification process, must be no more than 6,000 pounds.

While a person may operate an aircraft that meets the requirements of § 61.113(i)(1), the FAA notes that this provision does not relieve an aircraft from the requirement to be operated in accordance with its operating limitations. If an aircraft being operated under BasicMed has any operating limitations that conflict with § 61.113(i)(1), that aircraft must comply with its operating limitations.

- 5.1.2 Type Certificated Aircraft.** For type certificated aircraft, the aircraft's design approval would authorize the number of occupants the aircraft may carry and would contain the maximum certificated takeoff weight. The aircraft's design approval may be a type certificate (TC), a supplemental type certificate (STC), or an amended TC. The FAA recognizes that changes could be made to an aircraft's type design. For example, an aircraft type certificated to carry more than six occupants may be altered to carry six or fewer occupants. In order to make such a change, that aircraft would have to obtain a new design approval, such as an STC or an amended TC. So long as an aircraft's design approval (i.e., TC, STC, or amended TC) authorizes the aircraft to carry no more than six occupants, that aircraft would meet the requirements of § 61.113(i)(1). Additionally, if an aircraft with a maximum certificated takeoff weight of more than 6,000 pounds is altered to have a maximum certificated takeoff weight of less than 6,000 pounds, then that aircraft would likewise meet the requirements of § 61.113(i)(1).

- 5.1.3 Experimental Aircraft.** The provisions of BasicMed apply to all certificated aircraft, including experimental aircraft. Experimental aircraft, which are not type certificated, are issued Special Airworthiness Certificates. The FAA prescribes operating limitations to accompany the Special Airworthiness Certificates. No person may operate an aircraft that has an experimental certificate under BasicMed unless the aircraft is carrying not more than six occupants and has a maximum takeoff weight (MTOW) of no more than 6,000 pounds.

The FAA notes that the MTOW of an experimental aircraft is determined as part of the special airworthiness certification process. Prior to issuing a Special Airworthiness Certificate, the FAA checks the current Weight and Balance (W&B) information for an aircraft, which includes the maximum gross weight established by the operator.

- 5.2 Operating Requirements.** Section 61.113(i)(1) requires that the individual operate in accordance with the following operating requirements:

- 5.2.1 Aircraft Occupancy Limitations.** A covered aircraft may be authorized to carry up to six occupants (including any required flightcrew members) and may be operated with up

⁷ § 61.113(i)(1)

to five passengers on board. For example, a person may operate an aircraft type certificated for one pilot flightcrew member under BasicMed with up to five additional occupants on board. An aircraft type certificated for two pilot flightcrew members may be operated under BasicMed with up to four additional occupants on board. An occupant in the aircraft (other than the pilot operating under BasicMed) may be a passenger, a required pilot flightcrew member (if the aircraft is type certificated for more than one pilot or if the regulations require more than one pilot), or a flight instructor (if the flight is a training operation).

5.2.2 Status of Required Flightcrew Members.

5.2.2.1 If a pilot operating an aircraft under BasicMed carries another pilot on board who is not a required pilot flightcrew member and who is not a flight instructor providing flight instruction, that additional pilot would be considered a passenger under the FAA's regulations. A pilot acting as a safety pilot per part 91, § 91.109(c), however, would be a required pilot flightcrew member by regulation rather than a passenger. Section 91.109(c) provides that no person may operate a civil aircraft in simulated instrument flight unless the other control seat is occupied by a safety pilot who possesses at least a private pilot certificate with category and class ratings appropriate to the aircraft being flown. Because a safety pilot is a required pilot flightcrew member, the safety pilot is required to hold a valid and appropriate medical certificate in accordance with § 61.3(a). BasicMed privileges can only be exercised by a person acting as safety pilot when that person is also acting as PIC. BasicMed privileges do not extend to anyone other than the person acting as PIC.

5.2.2.2 Operations under BasicMed include flight training. A person may receive flight instruction from an FAA-authorized flight instructor while that person is operating under BasicMed. A person receiving flight training may receive flight instruction from a flight instructor while the flight instructor is operating under BasicMed, when the flight instructor is acting as PIC. While flight instruction for compensation is considered "other commercial flying" for flight and duty requirements under 14 CFR parts 121 and 135, "a certificated flight instructor who is acting as PIC or as a required flightcrew member and is receiving compensation for his or her flight instruction is only exercising the privileges of a private pilot."⁸

5.2.3 Operating Under VFR or IFR. Pilots can fly under BasicMed in visual flight rules (VFR) or instrument flight rules (IFR). There is no prohibition against flying in instrument meteorological conditions (IMC)⁹, but BasicMed doesn't change the requirement to hold an instrument rating and be instrument current to act as PIC under IFR. Further, BasicMed does not relieve an aircraft from the requirement to be approved for IFR operations in order to be operated under IFR.

⁸ Pilot, Flight Instructor, Ground Instructor, and Pilot School Certification Rules, 62 FR 16220, 16242 (April 4, 1997).

⁹ Section 2307(a)(8)(B) of FESSA.

5.2.4 Flight Limitations. Section 61.113(i)(2) contains the following limitations:

5.2.4.1 Section 61.113(i)(2)(i) requires that the flight, including each portion of that flight, is not carried out for compensation or hire, including that no passenger or property on the flight is being carried for compensation or hire. In general, pilots exercising private pilot privileges may not operate for compensation or hire. The FAA has long held that operations carrying people or property for compensation or hire require a higher level of safety, such as additional maintenance standards (like aircraft inspections) and higher airman certificate requirements (at least a Commercial Pilot Certificate and a second-class medical certificate) to support that level of safety. The general prohibition against private pilots operating for compensation or hire is in § 61.113(a).

Section 61.113(b) through (h) contains exceptions from the general prohibition for certain operations from which a pilot may receive some form of compensation. These include operations such as flying in furtherance of a business, sharing flight expenses with passengers, demonstrating an airplane for sale, and conducting search and location operations. These exceptions apply to people operating under BasicMed just as they would apply to a person exercising private pilot privileges under a part 67 medical certificate.

5.2.4.2 Section 61.113(i)(2)(ii) requires that the flight, including each portion of that flight, is not carried out at an altitude that is more than 18,000 feet above mean sea level (MSL).

The aircraft must operate at or below 18,000 feet MSL during the entire flight. For pilots operating aircraft capable of flight above 18,000 feet MSL, the pilot's preflight planning must accommodate the altitude limitation. For instance, if weather phenomena like icing or thunderstorms are forecast (or is within reasonable possibility) within the pilot's route of flight that would necessitate climbing above 18,000 feet MSL, the FAA considers initiating such a flight to be contrary to BasicMed.

5.2.4.3 Section 61.113(i)(2)(iii) requires that the flight, including each portion of that flight, is not carried out outside the United States, unless authorized by the country in which the flight is conducted. Title 14 CFR part 1, § 1.1 defines the United States as the States, the District of Columbia, Puerto Rico, and the possessions, including the territorial waters, and the airspace of those areas. Thus, a pilot operating in the United States, as defined in § 1.1, may elect to use BasicMed.

Airmen certificated by the FAA are represented to the International Civil Aviation Organization (ICAO) as compliant with ICAO standards for private pilots, among other requirements. As BasicMed standards divert from ICAO requirements, flights must be geographically limited to operations within the United States, unless specifically authorized by the country in which the flight is conducted.

- 5.2.4.4** Section 61.113(i)(2)(iv) requires that the flight, including each portion of that flight, is not carried out at an indicated air speed exceeding 250 knots. Recognizing that many aircraft have airspeed indicators that read in miles per hour (mph), 250 knots is equivalent to 288 mph. If the aircraft can be safely operated (that is, operated in a manner that is not careless or reckless) at a speed of 250 knots or less, then that aircraft may be operated under BasicMed.
- 5.2.5** Flight Limitation Applicability. A “flight, including each portion of the flight,” means that all of the flight limitations for the operation described above, set forth in § 61.113(i)(2)(i) (iv), apply to the entire flight. Accordingly, if BasicMed is being exercised in any flight, it must be applied for the entire flight (takeoff to full-stop landing) and all the operational restrictions apply for the entire flight. As such, on a flight in which two pilots are present, one holding a medical certificate and the other operating under BasicMed, if the pilot operating under BasicMed is acting as PIC, then no portion of the flight may go beyond the limitations set forth in this section even though the pilot holding the medical certificate may be able to act as PIC during the portion of the flight conducted outside the limitations.

CHAPTER 6. MEDICAL EDUCATION COURSE REQUIREMENTS

- 6.1 Availability of the Medical Education Course.** The FAA's publicly-accessible website contains a list of each medical education course that the FAA has accepted for BasicMed purposes.

Note: Nonprofit or not-for-profit general aviation stakeholder groups interested in being a BasicMed course provider can contact the FAA at 9-AWA-AFS-basicmed@faa.gov.

- 6.2 Course Requirements.** Each online medical course accepted by the FAA will include the following elements, in accordance with § 68.3:

1. Educate pilots on conducting medical self-assessments.
2. Advise pilots on identifying warning signs of potential serious medical conditions.
3. Identify risk mitigation strategies for medical conditions.
4. Increase awareness of the impacts of potentially impairing over-the-counter and prescription drug medications.
5. Encourage regular medical examinations and consultations with primary care physicians.
6. Inform pilots of the regulations pertaining to the prohibition on operations during medical deficiency and medically disqualifying conditions.
7. Provide the checklist developed by the FAA in accordance with § 68.7.

- 6.3 Documents the Course Must Provide to the Individual and Transmit to the FAA.** In accordance with § 68.3(b), upon successful completion of the course, the medical education course must electronically provide to the individual and transmit to the FAA:

1. A certification of completion of the medical education course.
2. A release authorizing single access to the National Driver Register (NDR) through a designated state Department of Motor Vehicles to furnish to the FAA information pertaining to the individual's driving record.
3. A certification by the individual that the individual is under the care and treatment of a physician if the individual has been diagnosed with any medical condition that may impact the ability of the individual to fly.
4. Information provided by the pilot about the physician and the comprehensive medical examination, including:
 - The pilot's name, address, telephone number, and airman certificate number;
 - The name, address, telephone number, and state medical license number of the physician performing the comprehensive medical examination;

- The date of the comprehensive medical examination; and
 - A certification by the individual that the checklist described in § 68.7 was followed and signed by the physician in the comprehensive medical examination.
5. A statement certifying that the individual understands the existing prohibition on operations during medical deficiency. In accordance with § 68.3(b)(5), the person must attest that “I understand that I cannot act as pilot in command, or any other capacity as a required flightcrew member, if I know or have reason to know of any medical condition that would make me unable to operate the aircraft in a safe manner.” This statement shall be electronically provided to the individual and transmitted to the FAA upon successful completion of the course.

CHAPTER 7. COMPREHENSIVE MEDICAL EXAMINATION REQUIREMENTS

- 7.1 General.** In order for an individual to operate under BasicMed, he or she must receive a comprehensive medical examination from a state-licensed physician during the previous 48 months in accordance with § 61.23(c)(3)(i)(D). The physician does not need to be an FAA-designated Aviation Medical Examiner (AME), although AMEs are not prohibited from providing this examination. Section 68.5(a)(1) requires the individual to complete the individual's section of the comprehensive medical examination checklist (CMEC) described in § 68.7(a) and to provide the completed checklist to the physician performing the examination.

Section 68.5(b) requires the physician to conduct the comprehensive medical examination in accordance with the checklist, check each item specified during the examination, and address, as medically appropriate, every medical condition listed and any medications the individual is taking.

- 7.2 Comprehensive Medical Examination Checklist (CMEC).** The CMEC provides an outline of the elements that must be accomplished in order to meet the requirements of BasicMed. The CMEC is completed by the individual and then provided to the physician performing the comprehensive medical examination.

The checklist, which can be found in Appendix A, Comprehensive Medical Examination Checklist, contains three sections: a section for the individual to complete; a section with instructions for the individual to provide the completed checklist to the physician performing the examination; and a section for the physician to complete, which contains instructions for the physician performing the examination. The requirements for each section are described below.

- 7.2.1 Section for the Individual to Complete.** In accordance with § 68.7(a)(1), the portion of the checklist for the individual to complete must include the same questions as boxes 3 through 13 and boxes 16 through 19 of the FAA Form 8500-8, Application for Airman Medical Certificate, dated 3-99. These questions include:

1. Name (Last name, First name, Middle name, Suffix).
2. Social Security Number (or other identifier).
3. Street address (City, State, Zip code, Country).
4. Telephone number.
5. Country of citizenship.
6. Date of birth (mm/dd/yyyy).
7. Hair color.
8. Eye color.
9. Sex (male/female).
10. Type of airman certificate held.

11. Occupation.
12. Employer.
13. Has your FAA airman medical certificate ever been denied, suspended, or revoked? (Yes, No) If yes, give date (mm/dd/yyyy).
14. Date of last FAA medical application (mm/dd/yyyy).
15. Do you currently use any prescription or nonprescription medication? (Yes, No).
16. For each medication prescribed, provide medication name, dosage, dosage unit, frequency, and whether previously reported.
17. Do you ever use near vision contact lens(es) while flying? (Yes, No).
18. Medical History. Have you ever in your life been diagnosed with, had, or do you presently have any of the following? (Yes, No, Comment).
 - a. Frequent or severe headaches.
 - b. Dizziness or fainting spell.
 - c. Unconsciousness for any reason.
 - d. Eye or vision trouble, except glasses.
 - e. Hay fever or allergy.
 - f. Asthma or lung disease.
 - g. Heart or vascular trouble.
 - h. High or low blood pressure.
 - i. Stomach, liver, or intestinal trouble.
 - j. Kidney stone or blood in urine.
 - k. Diabetes.
 - l. Neurological disorders: epilepsy, seizures, stroke, paralysis, etc.
 - m. Mental disorders of any sort: depression, anxiety, etc.
 - n. Substance dependence or failed a drug test ever; or substance abuse or use of illegal substance in the last 2 years.
 - o. Alcohol dependence or abuse.
 - p. Suicide attempt.
 - q. Motion sickness requiring medication.
 - r. Military medical discharge.
 - s. Medical rejection by military service.
 - t. Rejection for life or health insurance.
 - u. Admission to hospital.

- v. History of (1) any conviction(s) involving driving while intoxicated by, while impaired by, or while under the influence of alcohol or a drug; or (2) history of any conviction(s) or administrative action(s) involving an offense(s) which resulted in the denial, suspension, cancellation, or revocation of driving privileges or which resulted in attendance at an educational or a rehabilitation program.
- w. History of nontraffic conviction(s) (misdemeanors or felonies).
- x. Other illness, disability, or surgery.

7.2.1.1 Section 68.7(a)(2) requires this section of the checklist to also contain a signature line for the individual to affirm that:

1. The answers provided by the individual on that checklist, including the individual's answers regarding medical history, are true and complete;
2. The individual understands that he or she is prohibited under FAA regulations from acting as PIC, or any other capacity as a required flightcrew member, if he or she knows or has reason to know of any medical deficiency or medically disqualifying condition that would make the individual unable to operate the aircraft in a safe manner; and
3. The individual is aware of the regulations pertaining to the prohibition on operations during medical deficiency and has no medically disqualifying conditions in accordance with applicable law.

7.2.2 Section for the Physician to Complete with Instructions for the Physician. The third section of the checklist includes a portion for the physician to complete, and instructs the physician to perform a clinical examination¹⁰ of the following:

1. Head, face, neck, and scalp.
2. Nose, sinuses, mouth, and throat.
3. Ears, general (internal and external canals), and eardrums (perforation).
4. Eyes (general), ophthalmoscopic, pupils (equality and reaction), and ocular motility (associated parallel movement, nystagmus).
5. Lungs and chest (not including breast examination).
6. Heart (precordial activity, rhythm, sounds, and murmurs).
7. Vascular system (pulse, amplitude, and character, and arms, legs, and others).
8. Abdomen and viscera (including hernia).

¹⁰ § 68.7(c)

9. Anus (not including digital examination).
10. Skin.
11. G–U system (not including pelvic examination).
12. Upper and lower extremities (strength and range of motion).
13. Spine and other musculoskeletal.
14. Identifying body marks, scars, and tattoos (size and location).
15. Lymphatics.
16. Neurologic (tendon reflexes, equilibrium, senses, cranial nerves, and coordination, etc.).
17. Psychiatric (appearance, behavior, mood, communication, and memory).
18. General systemic.
19. Hearing.
20. Vision (distant, near, and intermediate vision, field of vision, color vision, and ocular alignment).
21. Blood pressure and pulse.
22. Anything else the physician, in his or her medical judgment, considers necessary.

7.2.2.1 Section 68.7(c)(2) requires the physician to exercise medical discretion to address, as medically appropriate, any medical conditions identified, and to exercise medical discretion in determining whether any medical tests are warranted as part of the comprehensive medical examination. Section 68.7(c)(3) requires the physician to discuss all prescription and nonprescription drugs the individual reports taking and their potential to interfere with the safe operation of an aircraft or motor vehicle. Provided the physician is satisfied that the applicant does not present any medical evidence that the applicant is not safe for flight, the physician shall sign and date the checklist in accordance with § 68.7(c)(4).

7.3 Physician Qualifications. The FAA relies on the determination of each state (as well as each territory and possession of the United States) as to which persons it will license as physicians. If the person holds a license as a physician issued by any state, territory, or possession, then they meet the requirement as a state-licensed physician. The FAA notes that all states license medical doctors (M.D.) and doctors of osteopathic medicine (D.O.) as physicians; although Federal and some state laws may permit the licensure of other persons, such as doctors of dental surgery (D.D.S.), as physicians. While the FAA expects that these specialists (e.g., D.D.S., dentist, podiatrist, etc.) who do not also hold an M.D. or D.O. would not have the breadth of training for a BasicMed medical examination, the FAA will rely on each state-licensed physician to determine whether he or she is qualified to conduct the medical examination.

CHAPTER 8. SPECIAL BASICMED REQUIREMENTS FOR CERTAIN MEDICAL CONDITIONS

- 8.1 General.** BasicMed contains several provisions that require specific actions for individuals who have mental, cardiac, or neurological health conditions.
- 8.2 Special Issuance Medical Certificates Required.** For certain conditions, a person wishing to exercise BasicMed must complete the process for obtaining an Authorization for special issuance of a medical certificate in accordance with § 68.9. The person is required to obtain only one special issuance medical certificate for each condition, and may subsequently exercise BasicMed. Persons who have, or are newly diagnosed with, a cardiovascular, neurological, or mental health condition described in FESSA, may not use BasicMed until they have been found eligible for special issuance of a medical certificate. Once issued a medical certificate, the person may then use BasicMed if they meet all other requirements of FESSA. These conditions are listed below:
- 8.2.1** A mental health disorder, limited to an established medical history or clinical diagnosis of any of the following:
1. Personality disorder that is severe enough to have repeatedly manifested itself by overt acts.
 2. Psychosis, defined as a case in which an individual:
 - Has manifested delusions, hallucinations, grossly bizarre or disorganized behavior, or other commonly accepted symptoms of psychosis; or
 - May reasonably be expected to manifest delusions, hallucinations, grossly bizarre or disorganized behavior, or other commonly accepted symptoms of psychosis.
 3. Bipolar disorder.
 4. Substance dependence within the previous 2 years, as defined in part 67, § 67.307(a)(4).
- 8.2.2** A neurological disorder, limited to an established medical history or clinical diagnosis of any of the following:
1. Epilepsy.
 2. Disturbance of consciousness without satisfactory medical explanation of the cause.
 3. A transient loss of control of nervous system functions without satisfactory medical explanation of the cause.
- 8.2.3** A cardiovascular condition, limited to a one-time special issuance for each diagnosis of the following:
1. Myocardial infarction.
 2. Coronary heart disease that has required treatment.

3. Cardiac valve replacement.
4. Heart replacement.

8.3 BasicMed Prohibitions for Persons with Mental Health Conditions.

8.3.1 Section 68.9(c)(1)(i) prohibits an individual with a clinically diagnosed mental health condition from exercising BasicMed privileges if, in the judgment of the individual's state-licensed medical specialist, the condition:

1. Renders the individual unable to safely exercise BasicMed privileges; or
2. May reasonably be expected to make the individual unable to exercise BasicMed privileges.

8.3.2 Section 68.9(c)(1)(ii) prohibits a person from exercising BasicMed privileges if the person's driver's license is revoked by the issuing agency as a result of a clinically diagnosed mental health condition.

8.4 BasicMed Prohibitions for Persons with Neurological Health Conditions. Under § 68.9(d)(1), an individual with a clinically diagnosed neurological condition may not exercise BasicMed privileges if the individual's driver's license is revoked by the issuing agency as a result of a clinically diagnosed neurological condition, or if, in the judgment of the individual's state-licensed medical specialist, the condition:

1. Renders the individual unable to safely exercise BasicMed privileges; or
2. May reasonably be expected to make the individual unable to safely exercise BasicMed privileges.

APPENDIX A. COMPREHENSIVE MEDICAL EXAMINATION CHECKLIST**SECTION 1 – Instructions to the Individual and State-Licensed Physician**

This checklist is to be used by individuals seeking to operate certain small aircraft in accordance with Chapter 14 of Code of Federal Regulations (14 CFR), Section 61.113(i). This rule (BasicMed) allows pilots to use this checklist, and other requirements, in lieu of holding third-class FAA Airman Medical Certificate. Under BasicMed, an individual may only act as pilot-in-command of an aircraft that is authorized to carry not more than 6 occupants, and that has a maximum certificated takeoff weight of not more than 6,000 pounds.

1. The individual must complete SECTION 2 of this checklist and provide the checklist in its entirety (including the completed SECTION 2) to the state-licensed physician performing the medical examination.
2. The state-licensed physician must perform a comprehensive medical examination addressing all items in SECTION 3 of this checklist. The physician must complete the "Physician's Signature and Declaration" IF the physician determines that he/she is not aware of any medical condition that, as presently treated, could interfere with the individual's ability to safely operate an aircraft.
3. The completed checklist shall be retained in the individual's logbook (either as a hard copy or electronically) and made available on request.
4. In order to act as a pilot-in-command under BasicMed, an individual must receive a comprehensive medical examination by a state-licensed physician during the previous 48 months in accordance with 14 CFR 61.23(c)(3)(i).

NOTICE: Whoever in any matter within the jurisdiction of any department or agency of the United States knowingly and willingly falsifies, conceals or covers up by any trick, scheme, or device a material fact, or who makes any false, fictitious or fraudulent statements or representations, or entry, may be fined up to \$250,000 or imprisoned not more than 5 years, or both. (18 U.S. Code Secs. 1001; 3571)

Paperwork Reduction Act Statement:

The information collected on this form is necessary to determine applicant eligibility for operating under BasicMed. Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current valid OMB control number. The OMB control number associated with this collection of information is 2120-####. Comments concerning the accuracy of this burden and suggestions for reducing the burden should be directed to the FAA at: 800 Independence Avenue SW, Washington, DC 20591, Attn: Information Collection Clearance Officer, ABA-20.

SECTION 2 – Information to be completed by the Airman

For individuals seeking to operate certain small aircraft in accordance with 14 CFR 61.113(i), you may only use this checklist to comply with 61.113(i) if you:

- Hold or have held a valid first-, second-, or third-class medical certificate issued by the FAA at any time after July 14, 2006; and
- The most recent medical certificate held (including an authorization for a special issuance certificate) must have not been denied, suspended, revoked, or withdrawn.

INSTRUCTIONS: After completing all mandatory fields in SECTION 2, provide both SECTION 2 and SECTION 3 to the state-licensed physician who will perform your medical examination.

1. **OMITTED:** Leave blank
2. **OMITTED:** Leave blank
3. **FULL NAME:** List current name. List any former name(s) in the “additional comments or explanation” box found in #18 of the checklist form.
4. **SOCIAL SECURITY NUMBER:** Entry is optional.
5. **ADDRESS:** Enter permanent mailing address and country of residence. Include the nine digit ZIP code, if known. (e.g., 20003-3230). Provide your current telephone number, including area code.
6. **DATE OF BIRTH:** List month, day, and year (e.g., 01/31/1960). **COUNTRY OF CITIZENSHIP:** Enter citizenship (e.g., USA).
7. **COLOR OF HAIR:** Specify as black, blond, brown, gray, red, or bald.
8. **COLOR OF EYES:** Specify actual (not contact lenses) eye color as black, blue, brown, green, gray, or hazel.
9. **SEX:** Indicate male or female.
10. **TYPE OF AIRMAN CERTIFICATE(S) YOU HOLD:** Select the checkboxes that apply. If "Other" is selected, write in the name of the type of certificate.
11. **OCCUPATION:** Enter major employment. Entry is optional.
12. **EMPLOYER:** Enter your employer. Entry is optional.
13. **HAS YOUR FAA AIRMAN MEDICAL CERTIFICATE EVER BEEN DENIED, SUSPENDED, REVOKED, OR WITHDRAWN:** Select "Yes" or "No." If "Yes" is selected, list the month and year (e.g., 01/1999) of the action.
14. **OMITTED:** Leave blank
15. **OMITTED:** Leave blank
16. **DATE OF LAST FAA MEDICAL EXAMINATION:** Enter month and year. **If you have no prior application, you cannot use BasicMed.**
17. a. **DO YOU CURRENTLY USE ANY MEDICATION (prescription or non-prescription):** Select "Yes" or "No." If "Yes" is selected, enter the name of the medication(s), dosage, and frequency used.

b. **DO YOU EVER USE NEAR VISION CONTACT LENSES WHILE FLYING:**
Select "Yes" or "No." Example: If you have one contact that is calibrated to give you near vision and one that is calibrated to give you distant vision, check "Yes." If you wear a contact in only one eye to correct for near vision, check "Yes."

18. a – x. MEDICAL HISTORY:

Select "Yes" or "No" for each item listed. For every condition you **have ever been diagnosed with, had, or presently have**, you must answer "Yes." Give the approximate date, description of the condition, its severity, treatment, and any medication(s) you used or continue to use for treatment. You must give an explanation for each item marked "Yes" in the **"additional comments or explanation" box**.

- Do not report common, occasional illnesses such as colds or sore throats.
- "Substances" include alcohol, PCP, marijuana, cocaine, amphetamines, barbiturates, opiates, and other psychoactive chemicals.
- "Substance dependence" is defined by any of the following: increased tolerance, withdrawal symptoms, impaired control of use, or continued use despite damage to health, or impairment of social, personal, or occupational functioning.
- "Substance abuse" is defined as the following: use of an illegal substance, use of a substance or substances in situations in which such use is physically hazardous, or misuse of a substance when such misuse has impaired health or social or occupational functioning.

18. v. CONVICTION, AND/OR ADMINISTRATIVE ACTION HISTORY:

(1) Have you ever been convicted (which may include paying a fine or forfeiting bond or collateral) of an offense involving driving while intoxicated by, while impaired by, or while under the influence of alcohol or a drug;

or

(2) Have you ever been convicted, and/or subject to an administrative action by a state or other jurisdiction for an offense for which your license was denied, suspended, cancelled, or revoked or which resulted in attendance at an educational or rehabilitation program? Individual traffic convictions are not required to be reported if they **did not** involve alcohol/drugs, suspension, revocation, cancellation, or denial of driving privileges, or attendance at an educational or rehabilitation program. If "Yes" is checked, you must give a description of the conviction(s) and/or administrative action(s) in the **"additional comments or explanation" box**. The description must include:

- The alcohol or drug offense for which you were arrested and/or convicted or the type of administrative action involved (e.g., attendance at an alcohol treatment program in lieu of conviction; license denial, suspension, cancellation, or revocation for refusal to be tested; educational safe driving program for multiple speeding convictions, etc.);
- The name of the state or other jurisdiction involved; and
- The date of the conviction(s) and/or administrative action(s). The FAA may check state motor vehicle driving licensing records to verify your responses.

18. w. HISTORY OF NON-TRAFFIC CONVICTIONS(S) (MISDEANORS OR FELONIES): Have you ever had any other (non-traffic) convictions (e.g., assault, battery, public intoxication, robbery, etc.)? If so, name the charge for which you were convicted and the date of conviction in the **"additional comments or explanation" box**.

19. VISITS TO HEALTH PROFESSIONAL WITHIN LAST 3 YEARS:

List all visits in the last 3 years to a physician, physician assistant, nurse practitioner, psychologist, clinical social worker, or substance abuse specialist for treatment, examination, or medical/mental evaluation. List visits for counseling only if it was related to a personal substance abuse or psychiatric condition.

Enter the date of visit as month and year (e.g., 01/1990), name, address, and type of health professional consulted and briefly state reason for consultation. Repeat this process to add all relevant visits to medical professionals in the past 3 years. Multiple visits to one health professional for the same condition may be grouped together on one line. You **do not** need to report:

- Occasional common illnesses such as colds or sore throats that resolved;
- Routine dental, eye, and FAA periodic medical examinations; or
- Consultations with your employer-sponsored employee assistance program (EAP) unless the consultations were for substance abuse or unless the consultations resulted in referral for psychiatric evaluation or treatment.

NOTE: After completing SECTION 2, carefully review and read the affirmation statements under the "Airman's Signature and Declaration." If you agree with the statements, sign and date the document. Once you have completed, signed, and dated SECTION 2, you must provide **ALL sections** (SECTION 1-3) of this checklist to the state-licensed physician who will perform and complete the comprehensive medical examination, as required by Section 2307(a)(7) of FESSA.

BASICMED SECTION 2: INDIVIDUAL INFORMATION
(To be completed by the airman)

1-2	Omitted		
3	Name: Last	First	Middle
			4 SS #
5	Address/street		Telephone () _____ - _____
	City	State/Country	Zip Code:
6.	Date of birth:		Country of Citizenship:
7	Color of hair:	8 Color of eyes:	9 Sex:
10	Type of airman certificate(s) you hold:	<input type="checkbox"/> Airline Transport <input type="checkbox"/> ATC Specialist <input type="checkbox"/> Commercial <input type="checkbox"/> Flight Engineer <input type="checkbox"/> Flight Instructor <input type="checkbox"/> Flight Navigator <input type="checkbox"/> Private <input type="checkbox"/> Recreational <input type="checkbox"/> Student <input type="checkbox"/> None <input type="checkbox"/> Other _____	
11	Occupation:	12	Employer:
13	Has your FAA Airman Medical Certificate ever been denied, suspended, revoked, or withdrawn?	<input type="checkbox"/> No <input type="checkbox"/> Yes If yes, give date ____/____/____ MM/ YYYY	14. Omitted 15. Omitted
16	Date of Last FAA Medical Application	____/____/____ MM/ YYYY or <input type="checkbox"/> No Prior Application (If no prior application, STOP. You cannot use BasicMed.)	
17	Do You Currently Use Any Medication? (Prescription or over-the-counter)	<input type="checkbox"/> No <input type="checkbox"/> Yes (If yes, list medication(s) and dosage used below.) _____ _____ _____ _____ _____ _____	
17b.	Do you ever use near vision contact lens(es) while flying	<input type="checkbox"/> No <input type="checkbox"/> Yes Answer "Yes" if you wear a contact in one eye only to correct for near vision or if you have one contact that adjusts for near vision and one in the other eye that adjusts for distant vision.	
18	Medical History: Mark "Yes" if you have or had any of the following conditions at ANY TIME in your life. Explain when it occurred, the severity, how it was treated, and if you are currently taking any medication or having treatment for the condition or have to see a physician for the condition. Discuss any "Yes" responses with the physician doing this exam.	Additional comments or explanations: (Give details in the space below)	
	a. Frequent or severe headaches:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
	b. Dizziness or fainting spell:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
	c. Unconsciousness for any reason:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
	d. Eye or vision trouble (except for glasses):	<input type="checkbox"/> No <input type="checkbox"/> Yes	
	e. Hay fever or allergy:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
	f. Asthma or lung disease:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
	g. Heart or vascular trouble:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
	h. High or low blood pressure:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
	i. Stomach, liver, or intestinal trouble:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
	j. Kidney stone or blood in urine:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
	k. Diabetes:	<input type="checkbox"/> No <input type="checkbox"/> Yes	

l.	Neurological disorders (epilepsy, seizures, stroke, paralysis, etc.):	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
m.	Mental disorders of any sort (depression, anxiety, etc.):	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
n.	Substance dependence, failed a drug test ever, or substance abuse or use of illegal substance in the last 2 years:	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
o.	Alcohol dependence or abuse:	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
p.	Suicide attempt:	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
q.	Motion sickness requiring medication:	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
r.	Military medical discharge:	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
s.	Medical rejection by military service:	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
t.	Rejection for life or health insurance:	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
u.	Admitted to a hospital:	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
x.	Other illness, disability, or surgery:	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
v.	History of (1) any conviction(s) involving driving while intoxicated by, while impaired by, or while under the influence of alcohol or a drug; or (2) history of any conviction(s) or administrative action(s) involving an offense(s) which resulted in the denial, suspension, cancellation, or revocation of driving privileges or which resulted in attendance at an educational or a rehabilitation program:	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
w.	History of non-traffic conviction(s) (misdemeanors or felonies): (e.g. battery, assault, public intoxication, robbery, etc.)	<input type="checkbox"/> No <input type="checkbox"/> Yes																																													
19.	Any visits to a health professional within the last 3 years? <input type="checkbox"/> No <input type="checkbox"/> Yes If "Yes," list the date, name, address, type of provider and why you saw them. If additional space is needed, check this box <input type="checkbox"/> and list information on an additional sheet of paper	<table border="1"> <thead> <tr> <th>Date</th> <th>Name</th> <th>Address</th> <th>Type of Provider</th> <th>Reason</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Date	Name	Address	Type of Provider	Reason																																								
Date	Name	Address	Type of Provider	Reason																																											

Airman's Signature and Declarations

In accordance with section 2307(b)(2)(A) of the FAA Extension, Safety, and Security Act of 2016 (Public Law 114-190), I affirm that:

- [] the answers provided by me on this checklist, including my answers regarding my medical history, are true and complete;
- [] I understand that I am prohibited under Federal Aviation Administration regulations from acting as pilot in command, or in any other capacity as a required flight crewmember, if I know or have reason to know of any medical deficiency or medically disqualifying condition that would make me unable to operate the aircraft in a safe manner; and
- [] I am aware of the regulations pertaining to the prohibition on operations during medical deficiency and I have no medically disqualifying conditions in accordance with applicable law.

Printed Name _____ Airman Signature _____ Date _____

NOTE: You must provide ALL sections (SECTION 1-3) of this checklist to your State-Licensed physician who will perform and complete the comprehensive medical examination as required by Section 2307(a)(7) of FESSA.

BasicMed SECTION 3: Instructions for State-Licensed Examining Physician

This checklist is being submitted by an individual seeking to operate certain small aircraft in accordance with 14 CFR 61.113(i). This rule (BasicMed) allows pilots to use this checklist, and other requirements, in lieu of holding third-class FAA Airman Medical Certificate. The examination checklist may only be completed by a state-licensed physician. Under BasicMed, an individual may only act as pilot-in-command of an aircraft that is authorized to carry not more than 6 occupants, and that has a maximum certificated takeoff weight of not more than 6,000 pounds.

As the examining physician, you are required to:

1. Review all sections of the checklist, particularly SECTION 2 completed by the airman.
2. Conduct a comprehensive medical examination in accordance with the checklist by:
 - a. Checking each item specified;
 - b. Exercising medical discretion, address, as medically appropriate, any medical conditions identified; and
 - c. Exercising medical discretion, determine whether any medical tests are warranted as part of the comprehensive medical examination.
3. Review and discuss all prescription and non-prescription medication(s) the individual reports taking and any potential to interfere with the safe operation of an aircraft or motor vehicle.
4. Complete the Physician's Signature and Declaration.
5. Complete the Physician's Information.

You should consider consulting available aeromedical resources on the flight hazards associated with medical conditions/ medications, to include:

- [The FAA Guide for Aviation Medical Examiners \(AME Guide\)](http://www.faa.gov/about/office_org/headquarters_offices/avs/offices/aam/ame/guide/pharm/dni_dnf/); and the FAA Pharmaceuticals (Therapeutic Medications) Do Not Issue - Do Not Fly list at http://www.faa.gov/about/office_org/headquarters_offices/avs/offices/aam/ame/guide/pharm/dni_dnf/
- **Chapter 8** of the [FAA's Aeronautical Information Manual](#) (AIM 8-1-1), which addresses medical facts for pilots;
- FAA flight safety websites and the websites of non-profit and not-for-profit general aviation stakeholders.

NOTICE: Whoever in any matter within the jurisdiction of any department or agency of the United States knowingly and willingly falsifies, conceals or covers up by any trick, scheme, or device a material fact, or who makes any false, fictitious or fraudulent statements or representations, or entry, may be fined up to \$250,000 or imprisoned not more than 5 years, or both. (18 U.S. Code Secs. 1001; 3571)

BASICMED SECTION 3: MEDICAL EXAMINATION
(To be performed by state-licensed physician only)

Physician Use Only			
	Patient name: Patient Date of Birth:	Abnormalities	Explain any "YES" answers in space below:
1.	Head, face, neck and scalp:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
2.	Nose, sinuses, mouth, and throat:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
3.	Ears, general: (Internal and external (canals) and eardrums (perforation):	<input type="checkbox"/> No <input type="checkbox"/> Yes	
4.	Eyes (general), ophthalmoscopic, pupils, (equality and reaction), and ocular motility (associated parallel movement, nystagmus):	<input type="checkbox"/> No <input type="checkbox"/> Yes	
5.	Lungs and chest: (Not including breast examination)	<input type="checkbox"/> No <input type="checkbox"/> Yes	
6.	Heart: (precordial activity, rhythm, sounds, and murmurs):	<input type="checkbox"/> No <input type="checkbox"/> Yes	
7.	Vascular system: (pulse, amplitude, and character and arms, legs, and others)	<input type="checkbox"/> No <input type="checkbox"/> Yes	
8.	Abdomen and viscera: (including hernia)	<input type="checkbox"/> No <input type="checkbox"/> Yes	
9.	Anus: (not including digital examination):	<input type="checkbox"/> No <input type="checkbox"/> Yes	
10.	Skin:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
11.	G-U system: (not including pelvic examination)	<input type="checkbox"/> No <input type="checkbox"/> Yes	
12.	Upper and lower extremities: (strength and range of motion)	<input type="checkbox"/> No <input type="checkbox"/> Yes	
13.	Spine and other musculoskeletal:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
14.	Identifying body marks, scars, and tattoos (size and location):	<input type="checkbox"/> No <input type="checkbox"/> Yes	
15.	Lymphatics:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
16.	Neurologic: (tendon reflexes, equilibrium, senses, cranial nerves, coordination, etc.):	<input type="checkbox"/> No <input type="checkbox"/> Yes	
17.	Psychiatric: (appearance, behavior, mood, communication, and memory)	<input type="checkbox"/> No <input type="checkbox"/> Yes	
18.	General systemic:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
19.	Hearing:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
20.	Vision: (distant, near, and intermediate vision, field of vision, color vision, and ocular alignment)	<input type="checkbox"/> No <input type="checkbox"/> Yes	
21.	Blood pressure and pulse:	<input type="checkbox"/> No <input type="checkbox"/> Yes	
22.	Anything else the physician, in his or her medical judgment, considers necessary:	<input type="checkbox"/> No <input type="checkbox"/> Yes	

In accordance with 14 CFR 68.5, the examining physician is instructed to:

- Exercise medical discretion to address, as medically appropriate, any medical conditions identified, and to exercise medical discretion in determining whether any medical tests are warranted as part of the comprehensive medical examination; and
- Discuss all drugs the individual reports taking (prescription and nonprescription) and their potential to interfere with the safe operation of an aircraft or motor vehicle.

Physician's Signature and Declaration

[] In accordance with section 2307(b)(2)(C)(iv), I certify that during the medical examination, I discussed all items on this checklist with the individual whose name and other identifying information appears in Section 2 of this checklist, discussed any medications the individual is taking that could interfere with his or her ability to safely operate an aircraft or motor vehicle, and performed an examination that included all of the items on this checklist. I certify that I am not aware of any medical condition that, as presently treated, could interfere with the individual's ability to safely operate an aircraft.

Patient Name _____ Patient Date of Birth _____

Signature of Physician who performed the exam _____ Date examination completed _____

Physician's Information

1.	Full name of physician who performed the exam:	Last :	First:	Middle Initial:	
2.	State license number:	State	Medical license number		
3.	Telephone number:	() _____ - _____			
4.	Street address:	Address:		Suite:	
		City:		State: Zip Code:	
5.	Date of Examination:	<div style="text-align: center;"> ____ / ____ / ____ MM/ DD/YYYY </div>			

APPENDIX B. FREQUENTLY ASKED QUESTIONS**General**

Q: How did the FAA come up with these BasicMed requirements?

A: The FAA did not develop these requirements. The requirements are from the U.S. Congress, which enacted the FAA Extension, Safety, and Security Act of 2016 (PL 114-190) (FESSA) on July 15, 2016. Section 2307 of FESSA, Medical Certification of Certain Small Aircraft Pilots, directed the FAA to “issue or revise regulations to ensure that an individual may operate as pilot in command of a covered aircraft” if the pilot and aircraft meet certain prescribed conditions as outlined in FESSA.

Q: Is there a grace period for meeting BasicMed?

A: You can operate a covered aircraft either with a medical certificate, or by using BasicMed privileges. If you don’t meet all of the BasicMed requirements, then you must hold an FAA medical certificate.

Q: Does BasicMed affect sport pilots?

A: No. If you are exercising sport pilot privileges in an aircraft that meets the definition of a light-sport aircraft, then you may continue to operate using either a driver’s license or an FAA medical certificate. BasicMed privileges are not intended to be exercised by Sport Pilots.

Q: What documents do I need to carry to exercise BasicMed?

A: Only a valid driver’s license (in addition to the other required documents not identified under BasicMed, such as your pilot certificate and photo ID (which can be your driver’s license)).

Q: What documentation do I need to keep?

A: You only need to keep a copy of your Comprehensive Medical Examination Checklist and your medical education course completion certificate. You can store these in your logbook, or you can store them electronically in any format, as long as you can produce an accurate representation of these documents at the request of the FAA. You don’t have to carry these documents while flying under BasicMed.

Q: Can I exercise my CFI, as PIC, under BasicMed?

A: Yes, as long as you are flying a covered aircraft.

Q: Can I use BasicMed to act as a safety pilot, rather than holding a medical?

A: Only if you’re acting as PIC while performing the duties of safety pilot. BasicMed applies only to people acting as PIC; it cannot be exercised by safety pilots who are not acting as PIC but are required crewmembers.

Q: Do I still have to have a flight review required by § 61.56?

A: Yes. BasicMed does not affect any pilot requirement other than the holding an FAA medical certificate.

Q: I've mislaid my BasicMed course completion certificate. Can I still fly under BasicMed?

A: No. Although they don't need to have them in your personal possession, you must be able to produce the BasicMed course completion certificate and the completed CMEC (or an accurate and legible representation of those documents) while operating under BasicMed. You should contact the provider of the medical course to obtain a replacement course completion certificate.

Q: Can I tow advertising banners or gliders while exercising BasicMed?

A: Yes, as long as you are not receiving any compensation for those flights.

Q: Can I use BasicMed privileges to take an Airline Transport Pilot practical test?

A: Yes. A person taking any FAA practical test is exercising no more than private pilot privileges because the operation is not being conducted for compensation or hire.

Q: I use an electronic pilot logbook. Can I use this to store my BasicMed documentation?

A: You can attach those documents to your electronic logbook, or you may store them in any other fashion as long as an accurate and legible representation of those documents can be made available upon request, the same as for your pilot logbook.

Q: The medical course required that I enter my personal information and the name and license number of the physician who conducted my individual medical examination. Why is the FAA collecting this information?

A: The legislation (FESSA) requires the FAA to collect that information. The pilot's personal information will be used to conduct the NDR check. The FAA will store the information it is required by FESSA to collect in the airman's record.

Hold, or Have Held, a Medical Certificate Since July 15, 2006

Q: I can't remember if my medical certificate was valid after July 15, 2006. How can I find out if I meet the BasicMed requirements?

A: You may contact Federal Aviation Administration, Medical Certification Branch, AAM-331, P.O. Box 26200, Oklahoma City, OK 73125-9914 (phone: 405-954-4821) to ask when your most recent medical certificate expires or to request a copy of your most recent medical certificate.

Q: Can I exercise BasicMed and hold a medical certificate at the same time?

A: Yes. If you are operating under BasicMed, then you must comply with the BasicMed operating limitations (such as flying only within the U.S. and at or less than 250 knots). When operating under BasicMed, you are not exercising the privileges of your medical certificate.

Q: My medical certificate expired in 2011 and I submitted an application for an FAA medical certificate using MedExpress but I never went to an AME for my physical exam. Does this application prevent me from using the previous medical certificate to meet the requirement to hold a medical certificate at any point after July 15, 2006?

A: No. Since an AME never accessed your application, you didn't complete the application process and you may use the previous medical certificate (before you submitted your MedXpress application) to comply with BasicMed.

Q: My most recent medical certificate was suspended by the FAA and then later reinstated. May I operate under BasicMed?

A: No. If your most recent medical certificate was suspended (even if it was later reinstated) you must obtain a new FAA medical certificate of any class before operating under BasicMed.

Comprehensive Medical Examination

Q: How do I find a physician to conduct the BasicMed medical examination?

A: Any physician who is familiar with your complete health history would be a good choice. Also, some AMEs may elect to provide medical examinations under BasicMed.

Q: My state-licensed physician who conducted my medical examination refused to sign the CMEC. What can I do?

A: You should check with your physician to see what the medical reasons were behind his or her decision not to sign the CMEC. You may not operate under BasicMed without a completed CMEC, and the FAA strongly recommends addressing those medical issues before flying under any circumstances.

Advisory Circular Feedback Form

If you find an error in this AC, have recommendations for improving it, or have suggestions for new items/subjects to be added, you may let us know by contacting the General Aviation and Commercial Division (AFS-800) at 9-AFS-800-Correspondence@faa.gov or the Flight Standards Directives Management Officer at 9-AWA-AFS-140-Directives@faa.gov.

Subject: AC 68-1, Alternative Pilot Physical Examination and Education Requirements

Date: _____

Please check all appropriate line items:

An error (procedural or typographical) has been noted in paragraph _____ on page _____.

Recommend paragraph _____ on page _____ be changed as follows:

In a future change to this AC, please cover the following subject:
(Briefly describe what you want added.)

Other comments:

I would like to discuss the above. Please contact me.

Submitted by: _____

Date: _____