

Maintenance Error Decision Aid (MEDA) Results Form

Section I—General Information

| | |
|--|--|
| Reference #: _____ | Interviewer's Name: _____ |
| Airline: _____ | Interviewer's Telephone #: _____ |
| Station of Maintenance System Failure: _____ | Date of Investigation: ____/____/____ |
| Aircraft Type: _____ | Date of Event: ____/____/____ |
| Engine Type: _____ | Time of Event: __:__ am pm |
| Reg. #: _____ | Shift of Failure: _____ |
| Fleet Number: _____ | Type of Maintenance (Mx) (circle one): |
| ATA #: _____ | 1. Line -- If Line, what type? _____ |
| Aircraft Zone: _____ | 2. Base --If Base, what type? _____ |
| Ref. # of previous related event: _____ | Date Changes Implemented: ____/____/____ |

Section II—Event

Please select the event (check all that apply)

- | | |
|---|--|
| 1. Operations Process Event | <input type="checkbox"/> 3. Personal Injury Event |
| <input type="checkbox"/> a. Flight Delay _ days__ hrs.__ min. | <input type="checkbox"/> 4. Rework (e.g., did not pass Ops check/inspection) |
| <input type="checkbox"/> b. Flight Cancellation | <input type="checkbox"/> 5. Airworthiness Control |
| <input type="checkbox"/> c. Gate Return | <input type="checkbox"/> 6. Found during Maintenance |
| <input type="checkbox"/> d. In-Flight Shut Down | <input type="checkbox"/> 7. Found during Flight |
| <input type="checkbox"/> e. Air Turn-Back | <input type="checkbox"/> 8. Other Event (explain below) |
| <input type="checkbox"/> f. Diversion | |
| <input type="checkbox"/> g. Smoke/fumes/odor event | |
| <input type="checkbox"/> h. Other (explain below) | |
| <input type="checkbox"/> 2. Aircraft Damage Event | |

Describe the incident/degradation/failure (e.g., could not pressurize) that caused the event.

Section III—Maintenance System Failure

Please select the maintenance system failure(s) that caused the event:

- | | | |
|--|--|--|
| 1. Installation Failure | <input type="checkbox"/> b. Unapproved | 7. Personal Injury |
| <input type="checkbox"/> a. Equipment/part not installed | <input type="checkbox"/> c. Incomplete | <input type="checkbox"/> a. Slip/trip/fall |
| <input type="checkbox"/> b. Wrong equipment/part installed | <input type="checkbox"/> d. Other (explain below) | <input type="checkbox"/> b. Caught in/on/between |
| <input type="checkbox"/> c. Wrong orientation | | <input type="checkbox"/> c. Struck by/against |
| <input type="checkbox"/> d. Improper location | 4. Fault Isolation/Test/Inspection failure | <input type="checkbox"/> d. Hazard contacted (e.g., electricity, hot or cold surfaces, and sharp surfaces) |
| <input type="checkbox"/> e. Incomplete installation | <input type="checkbox"/> a. Did not detect fault | <input type="checkbox"/> e. Hazardous substance exposure (e.g., toxic or noxious substances) |
| <input type="checkbox"/> f. Extra parts installed | <input type="checkbox"/> b. Not found by fault isolation | <input type="checkbox"/> f. Hazardous thermal environment exposure (heat, cold, or humidity) |
| <input type="checkbox"/> g. Access not closed | <input type="checkbox"/> c. Not found by operational/functional test | <input type="checkbox"/> g. Other (explain below) |
| <input type="checkbox"/> h. System/equipment not reactivated/deactivated | <input type="checkbox"/> d. Not found by task inspection | |
| <input type="checkbox"/> i. Damaged on remove/replace | <input type="checkbox"/> e. Access not closed | 8. Maintenance Control Failure |
| <input type="checkbox"/> j. Cross connection | <input type="checkbox"/> f. System/equipment not deactivated/reactivated | <input type="checkbox"/> a. Scheduled task omitted/late/incorrect |
| <input type="checkbox"/> k. Mis-rigging (controls, doors, etc.) | <input type="checkbox"/> g. Not found by part inspection | <input type="checkbox"/> b. MEL interpretation/application/removal |
| <input type="checkbox"/> l. Consumable not used | <input type="checkbox"/> h. Not found by visual inspection | <input type="checkbox"/> c. CDL interpretation/application/removal |
| <input type="checkbox"/> m. Wrong consumable used | <input type="checkbox"/> i. Technical log oversight | <input type="checkbox"/> d. Incorrectly deferred/controlled defect |
| <input type="checkbox"/> n. Unserviceable part installed | <input type="checkbox"/> j. Other (explain below) | <input type="checkbox"/> e. Airworthiness data interpretation |
| <input type="checkbox"/> o. Other (explain below) | | <input type="checkbox"/> f. Technical log oversight |
| 2. Servicing Failure | 5. Foreign Object Damage/Debris | <input type="checkbox"/> g. Airworthiness Directive overrun |
| <input type="checkbox"/> a. Not enough fluid | <input type="checkbox"/> a. Tooling/equipment left in aircraft/engine | <input type="checkbox"/> h. Modification control |
| <input type="checkbox"/> b. Too much fluid | <input type="checkbox"/> b. Debris on ramp | <input type="checkbox"/> i. Configuration control |
| <input type="checkbox"/> c. Wrong fluid type | <input type="checkbox"/> c. Debris falling into open systems | <input type="checkbox"/> j. Records control |
| <input type="checkbox"/> d. Required servicing not performed | <input type="checkbox"/> d. Other (explain below) | <input type="checkbox"/> k. Component robbery control |
| <input type="checkbox"/> e. Access not closed | | <input type="checkbox"/> l. Mx information system (entry or update) |
| <input type="checkbox"/> f. System/equipment not deactivated/reactivated | 6. Airplane/Equipment Damage | <input type="checkbox"/> m. Time expired part on board aircraft |
| <input type="checkbox"/> g. Other (explain below) | <input type="checkbox"/> a. Tools/equipment used improperly | <input type="checkbox"/> n. Tooling control |
| 3. Repair Failure (e.g., component or structural repair) | <input type="checkbox"/> b. Defective tools/equipment used | <input type="checkbox"/> o. Mx task not correctly documented |
| <input type="checkbox"/> a. Incorrect | <input type="checkbox"/> c. Struck by/against | <input type="checkbox"/> p. Not authorized/qualified/certified to do task |
| | <input type="checkbox"/> d. Pulled/pushed/drove into | <input type="checkbox"/> q. Other (explain below) |
| | <input type="checkbox"/> e. Fire/smoke | |
| | <input type="checkbox"/> f. Other (explain below) | <input type="checkbox"/> 9. Other (explain below) |

Did the Maintenance System Failure "fly" on the aircraft? Yes No

Describe the specific maintenance failure (e.g., auto pressure controller installed in wrong location).

IV. Chronological Summary of the Event, including how some Contributing Factors lead to additional Contributing Factors

V. Summary of Recommendations

Section VI—Contributing Factors Checklist

N/A ___

A. Information (e.g., work cards, maintenance manuals, service bulletins, maintenance tips, non-routines, illustrated parts catalogs, etc.)

- | | | |
|--|---|--|
| <input type="checkbox"/> 1. Not understandable | <input type="checkbox"/> 4. Too much/conflicting information | <input type="checkbox"/> 7. Information not used |
| <input type="checkbox"/> 2. Unavailable/inaccessible | <input type="checkbox"/> 5. Update process is too long/complicated | <input type="checkbox"/> 8. Inadequate |
| <input type="checkbox"/> 3. Incorrect | <input type="checkbox"/> 6. Incorrectly modified manufacturer's MM/SB | <input type="checkbox"/> 9. Uncontrolled |
| | | <input type="checkbox"/> 10. Other (explain below) |

Describe specifically how the selected information factor(s) contributed to the system failure.

Recommendations to correct the Contributing Factors listed above.

N/A ___

B. Ground Support Equipment/Tools/Safety Equipment

- | | | |
|--|--|--|
| <input type="checkbox"/> 1. Unsafe | <input type="checkbox"/> 6. Inappropriate for the task | <input type="checkbox"/> 11. Not used |
| <input type="checkbox"/> 2. Unreliable | <input type="checkbox"/> 7. Cannot use in intended environment | <input type="checkbox"/> 12. Incorrectly used |
| <input type="checkbox"/> 3. Layout of controls or displays | <input type="checkbox"/> 8. No instructions | <input type="checkbox"/> 13. Inaccessible |
| <input type="checkbox"/> 4. Out of calibration | <input type="checkbox"/> 9. Too complicated | <input type="checkbox"/> 14. Past expiration date |
| <input type="checkbox"/> 5. Unavailable | <input type="checkbox"/> 10. Incorrectly labeled | <input type="checkbox"/> 15. Other (explain below) |

Describe specifically how selected ground support equipment/tools/safety equipment factor(s) contributed to the system failure.

Recommendations to correct the Contributing Factors listed above.

N/A ___

C. Aircraft Design/Configuration/Parts/Equipment/Consumables

- | | | |
|--|---|--|
| <input type="checkbox"/> 1. Complex | <input type="checkbox"/> 5. Parts/equipment incorrectly labeled | <input type="checkbox"/> 9. Consumable unavailable |
| <input type="checkbox"/> 2. Inaccessible | <input type="checkbox"/> 6. Easy to install incorrectly | <input type="checkbox"/> 10. Wrong consumable used |
| <input type="checkbox"/> 3. Aircraft configuration variability | <input type="checkbox"/> 7. Not used | <input type="checkbox"/> 11. Expired consumable used |
| <input type="checkbox"/> 4. Parts/equipment unavailable | <input type="checkbox"/> 8. Not user friendly | <input type="checkbox"/> 12. Other (explain below) |

Describe specifically how the selected aircraft design/configuration/parts/equipment/consumables factor(s) contributed to system failure.

Recommendations to correct the Contributing Factors listed above.

N/A ___

D. Job/Task

- 1. Repetitive/monotonous
- 2. Complex/confusing
- 3. New task or task change
- 4. Different from other similar tasks
- 5. Other (explain below)

Describe specifically how the selected job/task factor(s) contributed to the system failure.

Recommendations to correct the Contributing Factors listed above.

N/A ___

E. Knowledge/Skills

- 1. Technical skills
- 2. Task knowledge
- 3. Task planning
- 4. Airline process knowledge
- 5. Aircraft system knowledge
- 6. English language proficiency
- 7. Teamwork skills
- 8. Computing skills
- 9. Other (explain below)

Describe specifically how the selected knowledge/skills factor(s) contributed to the system failure.

Recommendations to correct the Contributing Factors listed above.

N/A ___

F. Individual Factors

- 1. Physical health (including hearing and sight)
- 2. Fatigue
- 3. Time pressure
- 4. Peer pressure
- 5. Complacency
- 6. Body size/strength
- 7. Personal event (e.g., family problem, car accident)
- 8. Task distractions/interruptions
- 9. Memory lapse (forgot)
- 10. Visual perception
- 11. Assertiveness
- 12. Stress
- 13. Situation awareness
- 14. Workload/task saturation
- 15. Other (explain below)

Describe specifically how the selected individual factors contributed to the system failure.

Recommendations to correct the Contributing Factors listed above.

N/A ___

J. Communication

- ___ 1. Between departments
- ___ 2. Between mechanics
- ___ 3. Between shifts
- ___ 4. Between maintenance crew and lead
- ___ 5. Between lead and management
- ___ 6. Between flight crew and maintenance
- ___ 7. Other (explain below)

Describe specifically how the selected communication factor(s) contributed to the system failure.

Recommendations to correct the Contributing Factors listed above.