

GENERAL INFORMATION

This section provides input to assist an Aviation Medical Examiners (AME), otherwise known as an Examiner, in performing his or her duties in an efficient and effective manner. It also describes Examiner responsibilities as the Federal Aviation Administration's (FAA) representative in medical certification matters and as the link between airmen and the FAA.

1. Legal Responsibilities of Designated Aviation Medical Examiners

Title 49, United States Code (U.S.C.) (Transportation), sections 109(9), 40113(a), 44701-44703, and 44709 (1994) formerly codified in the Federal Aviation Act of 1958, as amended, authorizes the FAA Administrator to delegate to qualified private persons; i.e. designated Examiners, matters related to the examination, testing, and inspection necessary to issue a certificate under the U.S.C. and to issue the certificate. Designated Examiners are delegated the Administrator's authority to examine applicants for airman medical certificates and to issue or deny issuance of certificates.

Approximately 450,000 applications for airman medical certification are received and processed each year. The vast majority of medical examinations conducted in connection with these applications are performed by physicians in private practice who have been designated to represent the FAA for this purpose. An Examiner is a designated representative of the FAA Administrator with important duties and responsibilities. It is essential that Examiners recognize the responsibility associated with their appointment.

At times, an applicant may not have an established treating physician and the Examiner may elect to fulfill this role. You must consider your responsibilities in your capacity as an Examiner as well as the potential conflicts that may arise when performing in this dual capacity.

The consequences of a negligent or wrongful certification, which would permit an unqualified person to take the controls of an aircraft, can be serious for the public, for the Government, and for the Examiner. If the examination is cursory and the Examiner fails to find a disqualifying defect that should have been discovered in the course of a thorough and careful examination, a safety hazard may be created and the Examiner may bear the responsibility for the results of such action.

Of equal concern is the situation in which an Examiner deliberately fails to report a disqualifying condition either observed in the course of the examination or otherwise known to exist. In this situation, both the applicant and the Examiner in completing the application and medical report form, may be found to have committed a violation of Federal criminal law which provides that:

"Whoever in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully 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" (Title 18 U.S. Code. Secs. 1001; 3571).

Cases of falsification may be subject to criminal prosecution by the Department of Justice. This is true whether the false statement is made by the applicant, the Examiner, or both. In view of the pressures sometimes placed on Examiners by their regular patients to ignore a disqualifying physical defect that the physician knows to exist, it is important that all Examiners be aware of possible consequences of such conduct.

In addition, when an airman has been issued a medical certificate that should not have been issued, it is frequently necessary for the FAA to begin a legal revocation or suspension action to recover the certificate. This procedure is time consuming and costly. Furthermore, until the legal process is completed, the airman may continue to exercise the privileges of the certificate, thereby compromising aviation safety.

2. Authority of Aviation Medical Examiners

The Examiner is delegated authority to:

- Examine applicants for, and holders of, airman medical certificates to determine whether or not they meet the medical standards for the issuance of an airman medical certificate.
- Issue or deny airman medical certificates to applicants or holders of such certificates based upon whether or not they meet the applicable medical standards. The medical standards are found in Title 14 of the Code of Federal Regulations, part 67.

A medical certificate issued by an Examiner is considered to be affirmed as issued unless, within 60 days after date of issuance (date of examination), it is reversed by the Federal Air Surgeon, a RFS, or the Manager, AMCD. However, if the FAA requests additional information from the applicant within 60 days after the issuance, the above-named officials have 60 days after receipt of the additional information to reverse the issuance.

3. Equipment Requirements

For the conduct of the medical examination, Examiner's shall have adequate facilities for performing the required examinations and possess or agree to obtain the following equipment prior to conducting any FAA examinations. History or current findings may indicate a need for special evaluations.

1. Standard Snellen Test. Types for visual acuity (both near and distant) and appropriate eye lane. FAA Form 8500-1, Near Vision Acuity Test Card may be used for near and intermediate vision testing. Metal, opaque plastic or cardboard occluder.
2. Eye Muscle Test-Light. May be a spot of light 0.5cm in diameter, a regular muscle-test light, or an ophthalmoscope.

3. Maddox Rod. May be hand type.
4. Horizontal Prism Bar. Risley, Hughes, or hand prism are acceptable alternatives.
5. Color Vision Test Apparatus. Pseudoisochromatic plates, (American Optical Company (AOC), 1965 edition; AOC-HRR, 2nd edition); Dvorine, 2nd edition; Ishihara, Concise 14 -, 24 -; or 38-plate editions; or Richmond (1983 edition, 15-plates). Acceptable substitutes are: Farnsworth Lantern; Keystone Orthoscope; Keystone Telebinocular; LKC Technologies, Inc., Apt-5 Color Vision Tester; OPTEC 2000 Vision Tester (Models 2000PAME, and 2000OPI); Titmus Vision Tester; Titmus II Vision Tester (Model Nos. TII and TIIS); and Titmus 2 Vision Tester (Models T2A and T2S).
6. A Wall Target consisting of a 50-inch square surface with a matte finish (may be black felt or dull finish paper) and a 2-mm white test object (may be a pin) in a suitable handle of the same color as the background.
7. Other vision test equipment that is acceptable as a replacement for 1 through 4 above includes the American Optical Company Site-Screener, Bausch and Lomb Orthorator, Keystone Orthoscope or Telebinocular, Titmus Vision Tester, or Stereo Optical Co. OPTEC 2000 VISION TESTER.
8. Standard physician diagnostic instruments and aids including those necessary to perform urinalysis.
9. Electrocardiographic equipment. Senior Examiners must have access to digital electrocardiographic equipment with electronic transmission capability.
10. Audiometric equipment. All Examiners must have access to audiometric equipment or a capability of referring applicants to other medical facilities for audiometric testing.

4. Medical Certification Decision Making

The format of the Guide establishes aerospace medical dispositions, protocols, and AME Assisted Special Issuances (AASI) identified in Items 21–58 of the FAA Form 8500. This guidance references specific medical tests or procedure(s) the results of which are needed by the FAA to determine the eligibility of the applicant to be medically certificated. The request for this medical information must not be misconstrued as the FAA ordering or mandating that the applicant undergo testing, where clinically inappropriate or contraindicated. The risk of the study based upon the disease state and test conditions must be balanced by the applicants desire for certification and determined by the applicant and their healthcare provider(s).

After reviewing the medical history and completing the examination, Examiners must:

- Issue a medical certificate,
- Deny the application, or

- Defer the action to the Manager, AMCD, AAM-300, or the appropriate RFS

Examiners **may issue** a medical certificate *only* if the applicant meets all medical standards, including those pertaining to medical history unless otherwise authorized by the FAA.

Examiners **may not issue** a medical certificate if the applicant fails to meet specified minimum standards or demonstrates any of the findings or diagnoses described in this Guide as "disqualifying" unless the condition is unchanged or improved and the applicant presents written documentation that the FAA has evaluated the condition, found the applicant eligible for certification, and authorized Examiners to issue certificates.

The following medical conditions are specifically disqualifying under 14 CFR part 67. However, the FAA may exercise discretionary authority under the provisions of Authorization of Special Issuance, to issue an airman medical certificate. See **Special Issuances** section for additional guidance where applicable.

- Angina pectoris;
- Bipolar disorder;
- Cardiac valve replacement;
- Coronary heart disease that has required treatment or, if untreated, that has been symptomatic or clinically significant;
- Diabetes mellitus requiring insulin or other hypoglycemic medication;
- Disturbance of consciousness without satisfactory medical explanation of the cause;
- Epilepsy;
- Heart replacement;
- Myocardial infarction;
- Permanent cardiac pacemaker;
- Personality disorder that is severe enough to have repeatedly manifested itself by overt acts;
- Psychosis;

- Substance abuse and dependence;
- Transient loss of control of nervous system function(s) without satisfactory medical explanation of cause.

An airman who is medically disqualified for any reason may be considered by the FAA for an Authorization for Special Issuance of a Medical Certificate (Authorization). For medical defects, which are static or nonprogressive in nature, a Statement of Demonstrated Ability (SODA) may be granted in lieu of an Authorization.

The Examiner **always may defer** the application to the FAA for action. In the interests of the applicant and of a responsive certification system, however, deferral is appropriate only if the standards are not met; if there is an unresolved question about the history, the findings, the standards, or agency policy; if the examination is incomplete; if further evaluation is necessary; or if directed by the FAA.

The Examiner **may deny** certification *only* when the applicant clearly does not meet the standards.

5. Authorization for Special Issuance and AME Assisted Special Issuance (AASI)

A. Authorization for Special Issuance of a Medical Certificate (Authorization).

At the discretion of the Federal Air Surgeon, an Authorization for Special Issuance of a Medical Certificate (Authorization), valid for a specified period, may be granted to a person who does not meet the established medical standards if the person shows to the satisfaction of the Federal Air Surgeon that the duties authorized by the class of medical certificate applied for can be performed without endangering public safety during the period in which the Authorization would be in force. The Federal Air Surgeon may authorize a special medical flight test, practical test, or medical evaluation for this purpose. A medical certificate of the appropriate class may be issued to a person who fails to meet one or more of the established medical standards if that person possesses a valid agency issued Authorization and is otherwise eligible. An airman medical certificate issued in accordance with the special issuance section of part 67 (14 CFR § 67.401), shall expire no later than the end of the validity period or upon the withdrawal of the Authorization upon which it is based. An airman must again show to the satisfaction of the Federal Air Surgeon that the duties authorized by the class of medical certificate applied for can be performed without endangering public safety in order to obtain a new medical certificate and/or a Re-Authorization.

In granting an Authorization, the Federal Air Surgeon may consider the person's operational experience and any medical facts that may affect the ability of the person to perform airman duties including:

- The factors leading to and surrounding the episode

- The combined effect on the person of failing to meet one or more than one requirement of part 67; and
- The prognosis derived from professional consideration of all available information regarding the person

In granting an Authorization, the Federal Air Surgeon specifies the class of medical certificate authorized to be issued and may do any or all of the following:

- Limit the duration of an Authorization;
- Condition the granting of a new Authorization on the results of subsequent medical tests, examinations, or evaluations;
- State on the Authorization, and any medical certificate based upon it, any operational limitation needed for safety; or
- Condition the continued effect of an Authorization, and any second- or third-class medical certificate based upon it, on compliance with a statement of functional limitations issued to the person in coordination with the Director of Flight Standards or the Director's designee
- In determining whether an Authorization should be granted to an applicant for a third-class medical certificate, the Federal Air Surgeon considers the freedom of an airman, exercising the privileges of a private pilot certificate, to accept reasonable risks to his or her person and property that are not acceptable in the exercise of commercial or airline transport pilot privileges, and, at the same time, considers the need to protect the safety of persons and property in other aircraft and on the ground

An Authorization granted to a person who does not meet the applicable medical standards of part 67 may be withdrawn, at the discretion of the Federal Air Surgeon, at any time if:

- There is adverse change in the holder's medical condition;
- The holder fails to comply with a statement of functional limitations or operational limitations issued as a condition of certification under the special issuance section of part 67 (14 CFR 67.401);
- Public safety would be endangered by the holder's exercise of airman privileges;
- The holder fails to provide medical information reasonably needed by the Federal Air Surgeon for certification under the special issuance section of part 67 (14 CFR 67.401); or

- The holder makes or causes to be made a statement or entry that is the basis for withdrawal of an Authorization under the falsification section of part 67 (14 CFR 67.403)

A person who has been granted an Authorization under the special issuance section of part 67 (14 CFR 67.401), based on a special medical flight or practical test, need not take the test again during later medical examinations unless the Federal Air Surgeon determines or has reason to believe that the physical deficiency has or may have degraded to a degree to require another special medical flight test or practical test.

The authority of the Federal Air Surgeon under the special issuance section of part 67 (14 CFR 67.401) is also exercised by the Manager, AMCD, and each RFS.

If an Authorization is withdrawn at any time, the following procedures apply:

- The holder of the Authorization will be served a letter of withdrawal, stating the reason for the action;
- By not later than 60 days after the service of the letter of withdrawal, the holder of the Authorization may request, in writing, that the Federal Air Surgeon provide for review of the decision to withdraw. The request for review may be accompanied by supporting medical evidence;
- Within 60 days of receipt of a request for review, a written final decision either affirming or reversing the decision to withdraw will be issued; and
- A medical certificate rendered invalid pursuant to a withdrawal, in accordance with the special issuance section of part 67 (14 CFR 67.401) shall be surrendered to the Administrator upon request

B. AME Assisted Special Issuance (AASI).

AME Assisted Special Issuance (AASI) is a process that provides Examiners the ability to re-issue an airman medical certificate under the provisions of an Authorization to an applicant who has a medical condition that is disqualifying under 14 CFR part 67.

An FAA physician provides the initial certification decision and grants the Authorization in accordance with 14 CFR § 67.401. The Authorization letter is accompanied by attachments that specify the information that treating physician(s) must provide for the re-issuance determination. Examiners may re-issue an airman medical certificate under the provisions of an Authorization, if the applicant provides the requisite medical information required for determination. Examiners may not issue initial Authorizations. An Examiner's decision or determination is subject to review by the FAA.

6. Privacy of Medical Information

A. Within the FAA, access to an individual's medical information is strictly on a "need-to-know" basis. The safeguards of the Privacy Act apply to the application for airman medical certification and to other medical files in the FAA's possession. The FAA does not release medical information without an order from a court of competent jurisdiction, written permission from the individual to whom it applies, or, with the individual's knowledge, during litigation of matters related to certification. The FAA does, however, on request, disclose the fact that an individual holds an airman medical certificate and its class, and it may provide medical information regarding a pilot involved in an accident to the National Transportation Safety Board (NTSB) (or to a physician of the appropriate medical discipline who is retained by the NTSB for use in aircraft accident investigation.)

The Examiner, as a representative of the FAA, should treat the applicant's medical certification information in accordance with the requirements of the Privacy Act. Therefore, information should not be released without the written consent of the applicant or an order from a court of competent jurisdiction. In order to ensure that release of information is proper, whenever a court order or subpoena is received by the Examiner, the appropriate RFS, or the AMCD, should be contacted. Similarly, unless the applicant's written consent for release is of a routine nature; e.g., accompanying a standard insurance company request, advice should be sought from the FAA before releasing any information. In all cases, copies of all released information should be retained.

B. Health Insurance Portability and Accountability Act of 1996 (HIPAA) and Examiner's activities for the FAA. This Act provides specific patient protections and depending upon an Examiner's activation and practice patterns, you may have to comply with additional requirements.

7. Release of Information

Except in compliance with an order of a court of competent jurisdiction, or upon an applicant's written request, Examiners will not divulge or release copies of any reports prepared in connection with the examination to anyone other than the applicant or the FAA. A copy of the examination may be released to the applicant upon request. Upon receipt of a court subpoena or order, the Examiner shall notify the appropriate RFS. Other requests for information will be referred to:

MANAGER
AEROSPACE MEDICAL CERTIFICATION DIVISION, AAM-331
CIVIL AEROMEDICAL INSTITUTE
FEDERAL AVIATION ADMINISTRATION
POST OFFICE BOX 26200
OKLAHOMA CITY, OK 73125-0080

8. No "Alternate" Examiners Designated

The Examiner is to conduct all medical examinations at their designated address only. An Examiner *is not permitted* to conduct examinations at a temporary address and is not permitted to name an alternate Examiner. During an Examiner's absence from the permanent office, applicants for airman medical certification shall be referred to another Examiner in the area.

9. Who May Be Certified

a. Age Requirements

There is no age restriction or aviation experience requirements for medical certification. Any applicant who qualifies medically may be issued a Medical Certificate, FAA Form 8500-9 (white), regardless of age. Examiners also have been delegated authority to issue the combined Medical Certificate and Student Pilot Certificate, FAA Form 8420-2 (yellow), which is age restricted because it is an airman medical and student pilot certificate (student license and medical certificate). For issuance of the combined certificate, the applicant must have reached his or her 16th birthday.

Minimum age requirements for the various airman certificates (i.e., pilot license certificates) are defined in 14 CFR part 61, Certification: Pilots and Flight Instructors, and Ground Inspectors as follows:

- (1) *Airline transport pilot (ATP) certificate*: 23 years
- (2) *Commercial pilot certificate*: 18 years
- (3) *Private pilot certificate*: powered aircraft - 17 years;
gliders and balloons - 16 years
- (4) *Student pilot certificate*: powered aircraft - 16 years;
gliders and balloons - 14 years

b. Language Requirements

An applicant for an Airman Medical and Student Pilot Certificate must be able to read, speak, write, and understand the English language.

If the Examiner believes that an applicant applying for a Medical Certificate and Student Pilot Certificate, FAA Form 8420-2 (yellow), cannot read, speak, write, and understand the English language, the applicant shall be referred to the nearest Flight Standards District Office (FSDO) for a determination of eligibility for the Student Pilot Certificate.

Under these circumstances, the Examiner may issue only a Medical Certificate, FAA Form 8500-9 (white), and the applicant must present that certificate to the FSDO when applying for a Student Pilot Certificate.

10. Classes of Medical Certificates

An applicant may apply and be granted any class of airman medical certificate as long as the applicant meets the required medical standards for that class of medical certificate. However, an applicant must have the appropriate class of medical certificate for the flying duties the airman intends to exercise. For example, an applicant who exercises the privileges of an airline transport pilot (ATP) certificate must hold a first-class medical certificate. That same pilot when holding only a third-class medical certificate may only exercise flying activities of a private pilot certificate. Finally, an applicant need not hold an ATP airman certificate to be eligible for a first-class medical certificate.

Listed below are the three classes of airman medical certificates, identifying the categories of airmen (i.e., pilot) certificates applicable to each class.

First-Class - Airline Transport Pilot

Second-Class - Commercial Pilot; Flight Engineer; Flight Navigator; or Air Traffic Control Tower Operator. (Note: This category of air traffic controller does not include FAA employee air traffic control specialists)

Third-Class - Private Pilot, Recreational Pilot, or Student Pilot

11. Operations Not Requiring a Medical Certificate

Glider and Free Balloon Pilots are not required to hold a medical certificate of any class. To be issued Glider or Free Balloon Airman Certificates, applicants must certify that they do not know, or have reason to know, of any medical condition that would make them unable to operate a glider or free balloon in a safe manner. This certification is made at the local FAA FSDO.

“Sport” pilots are required to hold either a valid airman medical certificate or a current and valid U.S. driver’s license. When using a current and valid U.S. driver’s license to qualify, sport pilots must comply with each restriction and limitation on their U.S. driver’s license and any judicial or administrative order applying to the operation of a motor vehicle.

To exercise sport pilot privileges using a current and valid U.S. driver’s license as evidence of qualification sport pilots must:

- not have been denied the issuance of at least a third-class airman medical certificate (if they have applied for an airman medical certificate)
- not have had their most recent airman medical certificate revoked or suspended (if they have held an airman medical certificate); and

- not have had an Authorization withdrawn (if they have ever been granted an Authorization)

Sport pilots may not use a current and valid U.S. driver's license in lieu of a valid airman medical certificate if they know or have reason to know of any medical condition that would make them unable to operate a light-sport aircraft in a safe manner.

Sport pilot medical provisions are found under 14 CFR §§ 61.3, 61.23, 61.53, and 61.303).

For more information about the sport pilot final rule, see the Certification of Aircraft and Airmen for the Operation of Light-Sport Aircraft; Final Rule.

12. Validity of Medical Certificates

A. First-Class Medical Certificate: A first-class medical certificate is valid for the remainder of the month of issue; plus

6-calendar months for activities requiring a first-class medical certificate, or plus

12-calendar months for activities requiring a second-class medical certificate, or plus

24-calendar months for activities requiring a third-class medical certificate, or plus

36-calendar months for activities requiring a third-class medical certificate if the airman has not reached his or her 40th birthday on or before the date of examination.*

B. Second-Class Medical Certificate: A second-class medical certificate is valid for the remainder of the month of issue; plus

12-calendar months for activities requiring a second-class medical certificate, or plus

24-calendar months for activities requiring a third-class medical certificate, or plus

36-calendar months for activities requiring a third-class medical certificate if the airman has not reached his or her 40th birthday on or before the date of examination.*

C. Third-Class Medical Certificate: A third-class medical certificate is valid for the remainder of the month of issue; plus

24-calendar months for activities requiring a third-class medical certificate, or plus

36-calendar months for activities requiring a third-class medical certificate if the airman has not reached his or her 40th birthday on or before the date of examination.*

Each medical certificate must bear the same date as the date of medical examination regardless of the date the certificate is actually issued.

***NOTE:** Flight Outside the Airspace of the United States of America (U.S.A.)--a pilot who is issued a medical certificate under the age of 40 may not exercise the privileges of a private pilot certificate outside the U.S.A. after the 24 months of validity of that medical certificate except as permitted by a foreign country(s) where the flight occurs. The maximum validity of a private pilot medical certificate is 24 months under the standards of the International Civil Aviation Organization.

13. Title 14 CFR § 61.53, Prohibition on Operations During Medical Deficiency

NOTE: 14 CFR § 61.53 was revised on July 27, 2004 by adding subparagraph (c)

(a) Operations that require a medical certificate. Except as provided in paragraph (b) of this section, a person who holds a current medical certificate issued under part 67 of this chapter shall not act as pilot in command, or in any other capacity as a required pilot flight crewmember, while that person:

(1) Knows or has reason to know of any medical condition that would make the person unable to meet the requirements for the medical certificate necessary for the pilot operation; or

(2) Is taking medication or receiving other treatment for a medical condition that results in the person being unable to meet the requirements for the medical certificate necessary for the pilot operation

(b) Operations that do not require a medical certificate. For operations provided for in § 61.23(b) of this part, a person shall not act as pilot in command, or in any other capacity as a required pilot flight crewmember, while that person knows or has reason to know of any medical condition that would make the person unable to operate the aircraft in a safe manner.

(c) Operations requiring a medical certificate or a U.S. driver's license. For operations provided for in Sec. 61.23(c), a person must meet the provisions of--

(1) Paragraph (a) of this section if that person holds a valid medical certificate issued under part 67 of this chapter and does not hold a current and valid U.S. driver's license

(2) Paragraph (b) of this section if that person holds a current and valid U.S. driver's license

14. Reexamination of an Airman

A medical certificate holder may be required to undergo a reexamination at any time if, in the opinion of the Federal Air Surgeon or authorized representative within the FAA, there is a reasonable basis to question the airman's ability to meet the medical standards. An Examiner may **NOT** order such reexamination.

15. Examination Fees

The FAA does not establish fees to be charged by Examiners for the medical examination of persons applying for airman medical certification. It is recommended that the fee be the usual and customary fee established by other physicians in the same general locality for similar services.

16. Replacement of Medical Certificates

Medical certificates that are lost or accidentally destroyed may be replaced upon proper application provided such certificates have not expired. The request should be sent to:

FOIA DESK
AEROSPACE MEDICAL CERTIFICATION DIVISION, AAM-331
FEDERAL AVIATION ADMINISTRATION
CIVIL AEROSPACE MEDICAL INSTITUTE
POST OFFICE BOX 26200
OKLAHOMA CITY, OK 73125-0080

The airman's request for replacement must be accompanied by a remittance of two dollars (\$2) (check or money order) made payable to the FAA. This request must include:

- airman's full name and date of birth;
- class of certificate;
- place and date of examination;

- name of the Examiner; and
- circumstances of the loss or destruction of the original certificate.

The replacement certificate will be prepared in the same manner as the missing certificate and will bear the same date of examination regardless of when it is issued.

*In an emergency, contact your RFS or the Manager, AMCD, AAM-300, at above address or by facsimile at 405-954-4300 for certification verification **only**.*

17. Disposition of Applications and Medical Examinations

All **completed** applications and medical examinations, unless otherwise directed by the FAA, **must** be transmitted electronically within 14 days after completion to the AMCD.

In addition, the FAA/Original Copy **must** be mailed to:

MANAGER
AEROSPACE MEDICAL CERTIFICATION DIVISION, AAM-300
CIVIL AEROSPACE MEDICAL INSTITUTE
FEDERAL AVIATION ADMINISTRATION
POST OFFICE BOX 26080
OKLAHOMA CITY, OK 73125-0080

These may be batch mailed at monthly intervals. All **incomplete** applications and medical examinations **must** be mailed immediately to the above address.

The AME Work Copy **must** be retained by the AME as their file copy for at least 3 years unless exceeded by state law requirements where the AME is licensed and performed the examination.

The Applicant's Copy of the FAA Form 8500-8 (last page) must be given to the applicant along with the information for Applicant and the instruction sheet.

Examiners not required to use the AMCS; e.g., International AME's, **must** forward the typed, completed FAA/Original Copy to the above address.

18. Protection and Destruction of Forms

Examiners are cautioned to provide adequate security for blank medical application and certificate forms to ensure that they do not become available for illegal use. When the FAA issues new or revised medical forms and certificates, the FAA will advise Examiners of the disposition of the old forms and certificates. The serial numbers of FAA Form 8500-8 assigned to each Examiner are recorded at the Civil Aerospace Medical Institute in Oklahoma City. If asked, the Examiner should be prepared to account for the forms. The Examiners are responsible making provisions to return of all

unused FAA forms at such time they leave (resign, retire, terminated, or death) the AME Program:

Manager
Aerospace Medical Education Division, AAM-400
Civil Aerospace Medical Institute
Federal Aviation Administration
P.O. Box 25082
Oklahoma City, OK 73125-0082

NOTE: Forms should not be shared with other Examiners

19. Questions or Requests for Assistance

When an Examiner has a question or needs assistance in carrying out responsibilities, the Examiner should contact one of the following individuals:

a. Regional Flight Surgeon (RFS)

- Questions pertaining to problem medical certification cases in which the RFS has initiated action
- Telephone interpretation of medical standards or policies involving an individual airman whom the Examiner is examining
- Matters regarding designation and redesignation of Examiners and the Aviation Medical Examiner Program
- Attendance at Aviation Medical Examiner Seminars

b. Manager, AMCD, AAM-300

- Inquiries concerning guidance on problem medical certification cases
- Information concerning the overall airman medical certification program
- Matters involving FAA medical certification of military personnel
- Information concerning medical certification of applicants in foreign countries

These inquiries should be made to:

MANAGER
AEROSPACE MEDICAL CERTIFICATION DIVISION, AAM-300
CIVIL AEROSPACE MEDICAL INSTITUTE
FEDERAL AVIATION ADMINISTRATION
POST OFFICE BOX 26080
OKLAHOMA CITY, OK 73125

c. Manager, Aeromedical Education Division, AAM-400

- Matters regarding designation and redesignation of International Examiners, military facilities, and military Examiners
- Requests for medical forms and stationery
- Requests for airman medical educational material

These inquiries should be made to:

MANAGER
AEROSPACE MEDICAL EDUCATION DIVISION, AAM-400
CIVIL AEROSPACE MEDICAL INSTITUTE
FEDERAL AVIATION ADMINISTRATION
POST OFFICE BOX 25082
OKLAHOMA CITY, OK 73125-0082

20. Airman Appeals

a. Request for Reconsideration

An Examiner's denial of a medical certificate is not a final FAA denial. An applicant may ask for reconsideration of an Examiner's denial by submitting a request in writing to:

FEDERAL AIR SURGEON
ATTN: MANAGER,
AEROSPACE MEDICAL CERTIFICATION DIVISION, AAM-331
CIVIL AEROSPACE MEDICAL INSTITUTE
FEDERAL AVIATION ADMINISTRATION
POST OFFICE BOX 26200
OKLAHOMA CITY, OK 73125-0080

The AMCD will provide initial reconsideration. Some cases may be referred to the appropriate RFS for action. If the AMCD, or a RFS finds that the applicant is not qualified, the applicant is denied and advised of further reconsideration and appeal procedures. These may include reconsideration by the Federal Air Surgeon and/or petition for NTSB review.

b. Statement of Demonstrated Ability (SODA)

At the discretion of the Federal Air Surgeon, a Statement of Demonstrated Ability (SODA) may be granted, instead of an Authorization, to a person whose disqualifying condition is static or nonprogressive and who has been found capable of performing airman duties without endangering public safety. A SODA does not expire and

authorizes a designated Examiner to issue a medical certificate of a specified class if the Examiner finds that the condition described on the SODA has not adversely changed.

In granting a SODA, the Federal Air Surgeon may consider the person's operational experience and any medical facts that may affect the ability of the person to perform airman duties including:

- The combined effect on the person of failure to meet more than one requirement of part 67; and
- The prognosis derived from professional consideration of all available information regarding the person.

In granting a SODA under the special issuance section of part 67 (14 CFR 67.401), the Federal Air Surgeon specifies the class of medical certificate authorized to be issued and may do any of the following:

- State on the SODA, and on any medical certificate based upon it, any operational limitation needed for safety; or
- Condition the continued effect of a SODA, and any second- or third-class medical certificate based upon it, on compliance with a statement of functional limitations issued to the person in coordination with the Director of Flight Standards or the Director's designee
- In determining whether a SODA should be granted to an applicant for a third-class medical certificate, the Federal Air Surgeon considers the freedom of an airman, exercising the privileges of a private pilot certificate, to accept reasonable risks to his or her person and property that are not acceptable in the exercise of commercial or airline transport pilot privileges, and, at the same time, considers the need to protect the safety of persons and property in other aircraft and on the ground

A SODA granted to a person who does not meet the applicable standards of part 67 may be withdrawn, at the discretion of the Federal Air Surgeon, at any time if:

- There is adverse change in the holder's medical condition;
- The holder fails to comply with a statement of functional limitations or operational limitations issued under the special issuance section of part 67 (14 CFR 67.401);
- Public safety would be endangered by the holder's exercise of airman privileges;
- The holder fails to provide medical information reasonably needed by the Federal Air Surgeon for certification under the special issuance section of part 67 (14 CFR 67.401)

- The holder makes or causes to be made a statement or entry that is the basis for withdrawal of a SODA under the falsification section of part 67 (14 CFR 67.403); or
- A person who has been granted a SODA under the special issuance section of part 67 (14 CFR 67.401), based on a special medical flight or practical test need not take the test again during later medical examinations unless the Federal Air Surgeon determines or has reason to believe that the physical deficiency has or may have degraded to a degree to require another special medical flight test or practical test

The authority of the Federal Air Surgeon under the special issuance section of part 67 (14 CFR 67.401) is also exercised by the Manager, AMCD, and each RFS.

If a SODA is withdrawn at any time, the following procedures apply:

- The holder of the SODA will be served a letter of withdrawal stating the reason for the action;
- By not later than 60 days after the service of the letter of withdrawal, the holder of the SODA may request, in writing, that the Federal Air Surgeon provide for review of the decision to withdraw. The request for review may be accompanied by supporting medical evidence;
- Within 60 days of receipt of a request for review, a written final decision either affirming or reversing the decision to withdraw will be issued; and
- A medical certificate rendered invalid pursuant to a withdrawal, in accordance with the special issuance section of part 67 (14 CFR 67.401 (a)) shall be surrendered to the Administrator upon request

c. National Transportation Safety Board (NTSB)

Within 60 days after a final FAA denial of an unrestricted airman medical certificate, an airman may petition the NTSB for a review of that denial. The NTSB does not have jurisdiction to review the denial of a SODA or special issuance airman medical certificate.

A petition for NTSB review must be submitted in writing to:

NATIONAL TRANSPORTATION SAFETY BOARD
490 L'ENFANT PLAZA, EAST SW
WASHINGTON, DC 20594-0001

The NTSB is an independent agency of the Federal Government that has the authority to review on appeal the suspension, amendment, modification, revocation, or denial of any certificate or license issued by the FAA Administrator.

An Administrative Law Judge for the NTSB may hold a formal hearing at which the FAA will present documentary evidence and testimony by medical specialists supporting the denial decision. The petitioner will also be given an opportunity to present evidence and testimony at the hearing. The Administrative Law Judge's decision is subject to review by the full NTSB.