

## **PHARMACEUTICALS**

# PHARMACEUTICAL MEDICATIONS

As an Examiner you are required to be aware of the regulations and Agency policy and have a responsibility to inform airmen of the potential adverse effects of medications and to counsel airmen regarding their use. There are numerous conditions that require the chronic use of medications that do not compromise aviation safety and, therefore, are permissible. Airmen who develop short-term, self-limited illnesses are best advised to avoid performing aviation duties while medications are used.

Aeromedical decision-making includes an analysis of the underlying disease or condition and treatment. The underlying disease has an equal and often greater influence upon the determination of aeromedical certification. It is unlikely that a source document could be developed and understood by airmen when considering the underlying medical condition(s), drug interactions, medication dosages, and the sheer volume of medications that need to be considered. A list may encourage or facilitate an airmen's self-determination of the risks posed by various medical conditions especially when combination therapy is used. A list is subject to misuse if used as the sole factor to determine certification eligibility or compliance with 14 CFR part **61.53**, Prohibition of Operations During Medical Deficiencies. Maintaining a published a list of "acceptable" medications is labor intensive and in the final analysis only partially answers the certification question and does not contribute to aviation safety.

Therefore, the list of medications referenced below provides aeromedical guidance about specific medications or classes of pharmaceutical preparations and is applied by using sound aeromedical clinical judgment. This list is not meant to be totally inclusive or comprehensive. No independent interpretation of the FAA's position with respect to a medication included or excluded from the following should be assumed.

**ANTACIDS**

**ANTICOAGULANTS**

**ANTIDEPRESSANTS**

**ANTI-HISTAMINIC**

**ANTI-HYPERTENSIVE**

**DESENSITIZATION INJECTIONS**

**DIABETES – TYPE II  
MEDICATION CONTROLLED**

**INSULIN-TREATED**

**SEDATIVES**

**See SUBSTANCES OF  
DEPENDENCE/ABUSE Section**

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## ANTACIDS

### I. CODE OF FEDERAL REGULATIONS

**First-Class Airman Medical Certificate: 67.113(b)(c)**

**Second-Class Airman Medical Certificate: 67.213(b)(c)**

**Third-Class Airman Medical Certificate: 67.313(b)(c)**

**II. MEDICAL HISTORY:** **Item 18.i.**, page 31, Stomach, liver, or intestinal trouble.

The applicant should provide history and treatment, pertinent medical records, current status report, and medication. If a surgical procedure was done, the applicant must provide operative and pathology reports.

**III. AEROMEDICAL DECISION CONSIDERATIONS:** See **Item 38**, page 77, Abdomen and Viscera, Aerospace Medical Disposition table.

**IV. PROTOCOL - N/A**

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## ANTICOAGULANTS

### I. CODE OF FEDERAL REGULATIONS

**First-Class Airman Medical Certificate: 67.113(b)(c)**

**Second-Class Airman Medical Certificate: 67.213(b)(c)**

**Third-Class Airman Medical Certificate: 67.313(b)(c)**

### II. MEDICAL HISTORY: Item **Item 18.g.**, page 31, Heart or vascular trouble.

The applicant should describe the condition to include, dates, symptoms, and treatment, and provide medical reports to assist in the certification decision-making process.

These reports should include: operative reports of coronary intervention to include the original cardiac catheterization report, stress tests, worksheets, and original tracings (or a legible copy). When stress tests are provided, forward the reports, worksheets and original tracings (or a legible copy) to the FAA. Part 67 provides that, for all classes of medical certificates, an established medical history or clinical diagnosis of myocardial infarction, angina pectoris, cardiac valve replacement, permanent cardiac pacemaker implantation, heart replacement, or coronary heart disease that has required treatment or, if untreated, that has been symptomatic or clinically significant, is cause for denial.

**III. AEROMEDICAL DECISION CONSIDERATIONS:** See **Item 36**, page 63  
Heart, Aerospace Medical Disposition table.

### IV. PROTOCOL: Defer to AMCD

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## ANTIDEPRESSANTS

### I. CODE OF FEDERAL REGULATIONS

**First-Class Airman Medical Certificate: 67.107**

**Second-Class Airman Medical Certificate: 67.207**

**Third-Class Airman Medical Certificate: 67.307**

### II. MEDICAL HISTORY and CONVICTIONS OR ADMINISTRATIVE ACTIONS.

Medical History: **Item 18.n.**, page 32, Substance dependence; or failed a drug test ever; or substance abuse or use of illegal substance in the last 2 years.

"Substance" includes alcohol and other drugs (e.g., PCP, sedatives and hypnotics, anxiolytics, marijuana, cocaine, opioids, amphetamines, hallucinogens, and other psychoactive drugs or chemicals). For a "yes" answer to Item 18.n., the Examiner should obtain a detailed description of the history. A history of substance dependence or abuse is disqualifying. The Examiner must defer issuance of a certificate if there is doubt concerning an applicant's substance use.

Convictions or Administrative Actions: **Item 18.v.**, page 33, Conviction and/or Administrative Action History

The events to be reported are specifically identified in Item 18.v. of FAA Form 8500-8. If "yes" is checked, the applicant must describe the conviction(s) and/or administrative action(s) in the EXPLANATIONS box. The description must include:

- The alcohol or drug offense for which the applicant was convicted or the type of administrative action involved (e.g., attendance at an educational or rehabilitation 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 and/or administrative action

If there have been no new convictions or administrative actions since the last application, the applicant may enter "PREVIOUSLY REPORTED, NO CHANGE." Convictions and/or administrative actions affecting driving privileges may raise questions about the applicant's fitness for certification and may be cause for disqualification.

A single driving while intoxicated (DWI) conviction or administrative action usually is not cause for denial if there are no other instances or indications of substance dependence or abuse. The Examiner should inquire regarding the applicant's alcohol use history, the circumstances surrounding the incident, and document those findings in **Item 60**, page 153.

**NOTE:** The Examiner should advise the applicant that the reporting of alcohol or drug offenses (i.e., motor vehicle violation) on the history part of the medical application does not relieve the airman of responsibility to report each motor vehicle action to the FAA within 60 days of the occurrence to the Civil Aviation Security Division, AAC-700; P.O. Box 25810; Oklahoma City, OK 73125-0810.

**III. AEROMEDICAL DECISION CONSIDERATIONS:** See **Item 47**, page 115  
Psychiatric, Aerospace Medical Disposition table.

**IV. PROTOCOL:** See Substances of Dependence/Abuse Protocol

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## ANTI-HISTAMINIC

### I. CODE OF FEDERAL REGULATIONS

**First-Class Airman Medical Certificate: 67.105(b)(c)**

**Second-Class Airman Medical Certificate: 67.205(b)(c)**

**Third-Class Airman Medical Certificate: 67.305(b)(c)**

### II. MEDICAL HISTORY: Item 18.e., page 31, Hay fever or allergy.

The applicant should report frequency and duration of symptoms, and whether they have been incapacitating by the condition. Mention should also be made of treatment and side effects. The Examiner should inquire whether the applicant has ever experienced any “ear block”, barotitis, or any other symptoms that could interfere with aviation safety? Barosinusitis is of concern and should also be ruled out.

**III. AEROMEDICAL DECISION CONSIDERATIONS:** See Item 26, page 42, Nose, Aerospace Medical Disposition table.

**IV. PROTOCOL:** See Antihistamines Protocol

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## ANTIHYPERTENSIVE

### I. CODE OF FEDERAL REGULATIONS

**First-Class Airman Medical Certificate: 67.113(b)(c)**

**Second-Class Airman Medical Certificate: 67.213(b)(c)**

**Third-Class Airman Medical Certificate: 67.313(b)(c)**

### II. MEDICAL HISTORY: Item 18.h., page 31, High or low blood pressure.

The applicant should provide history and treatment. Issuance of a medical certificate to an applicant with high blood pressure may depend on the current blood pressure levels and whether the applicant is taking anti-hypertensive medication. The Examiner should also determine if the applicant has a history of complications, adverse reactions to therapy, hospitalization, etc.

**III. AEROMEDICAL DECISION CONSIDERATIONS:** See **Item 36.**, page 63, Heart and **Item 55.**, page 146, Blood Pressure

**IV. PROTOCOL:** See Hypertension Protocol

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## **DESENSITIZATION INJECTIONS**

### **I. CODE OF FEDERAL REGULATIONS**

**First-Class Airman Medical Certificate: 67.105(b)(c)**

**Second-Class Airman Medical Certificate: 67.205(b)(c)**

**Third-Class Airman Medical Certificate: 67.305(b)(c)**

### **II. MEDICAL HISTORY: Item 18.e., page 31, Hay fever or allergy.**

The applicant should report frequency and duration of symptoms, and whether they have been incapacitating by the condition. Mention should also be made of treatment and side effects. The Examiner should inquire whether the applicant has ever experienced any “ear block”, barotitis, or any other symptoms that could interfere with aviation safety? Barosinusitis is of concern and should also be ruled out.

**III. AEROMEDICAL DECISION CONSIDERATIONS:** See **Item 26.**, page 42, Nose, Aerospace Medical Disposition table.

### **IV. PROTOCOL - N/A**

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## DIABETES MELLITUS – TYPE II MEDICATION CONTROLLED

### I. CODE OF FEDERAL REGULATIONS

**First-Class Airman Medical Certificate: 67.113 (a)(b)(c)**

**Second-Class Airman Medical Certificate: 67.213(a)(b)(c)**

**Third-Class Airman Medical Certificate: 67.313(a)(b)(c)**

### II. MEDICAL HISTORY: Item 18.k., page 31, Diabetes.

The applicant should describe the condition to include symptoms and treatment. Comment on the presence or absence of hyperglycemic and/or hypoglycemic episodes. A medical history or clinical diagnosis of diabetes mellitus requiring insulin or other hypoglycemic drugs for control are disqualifying. The Examiner can help expedite the FAA review by assisting the applicant in gathering medical records and submitting a current specialty report.

**III. AEROMEDICAL DECISION CONSIDERATIONS:** See Item 48., page 123, General Systemic, Aerospace Medical Disposition table.

**IV. PROTOCOL:** See Diabetes Mellitus-Type II, Medication Controlled

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## INSULIN

### I. CODE OF FEDERAL REGULATIONS

**First-Class Airman Medical Certificate: 67.113(a)(b)(c)**

**Second-Class Airman Medical Certificate: 67.213(a)(b)(c)**

**Third-Class Airman Medical Certificate: 67.313(a)(b)(c)**

### II. MEDICAL HISTORY: Item 18.k., page 31, Diabetes.

The applicant should describe the condition to include, symptoms and treatment. Comment on the presence or absence of hyperglycemic and/or hypoglycemic episodes. A medical history or clinical diagnosis of diabetes mellitus requiring insulin or other hypoglycemic drugs for control are disqualifying. The Examiner can help expedite the FAA review by assisting the applicant in gathering medical records and submitting a current specialty report.

**III. AEROMEDICAL DECISION CONSIDERATIONS:** See Item 48., page 123, General Systemic Aerospace Medical Disposition table.

**IV. PROTOCOL:** See Diabetes Mellitus - Type I or Type II, Insulin Treated Protocol

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## SEDATIVES

### I. CODE OF FEDERAL REGULATIONS

**First-Class Airman Medical Certificate: 67.107**

**Second-Class Airman Medical Certificate: 67.207**

**Third-Class Airman Medical Certificate: 67.307**

### II. MEDICAL HISTORY and CONVICTIONS OR ADMINISTRATIVE ACTIONS.

Medical History: **Item 18.n.**, page 32, Substance dependence; or failed a drug test ever; or substance abuse or use of illegal substance in the last 2 years.

"Substance" includes alcohol and other drugs (e.g., PCP, sedatives and hypnotics, anxiolytics, marijuana, cocaine, opioids, amphetamines, hallucinogens, and other psychoactive drugs or chemicals). For a "yes" answer to Item 18.n., the Examiner should obtain a detailed description of the history. A history of substance dependence or abuse is disqualifying. The Examiner must defer issuance of a certificate if there is doubt concerning an applicant's substance use.

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- The name of the state or other jurisdiction involved; and
- The date of the conviction and/or administrative action

If there have been no new convictions or administrative actions since the last application, the applicant may enter "PREVIOUSLY REPORTED, NO CHANGE."

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**NOTE:** The Examiner should advise the applicant that the reporting of alcohol or drug offenses (i.e., motor vehicle violation) on the history part of the medical application does not relieve the airman of responsibility to report each motor vehicle action to the FAA within 60 days of the occurrence to the Civil Aviation Security Division, AAC-700; P.O. Box 25810; Oklahoma City, OK 73125-0810.

**III. AEROMEDICAL DECISION CONSIDERATIONS:** See **Item 47.**, page 115, Psychiatric, Aerospace Medical Disposition table.

**IV. PROTOCOL:** See Substances of Dependence/Abuse Protocol