

## Most Underutilized 'App' of Our Time Revealed

Hello everyone. I hope that 2010 treated you well, that you had a nice holiday season, and that 2011 is even better than 2010. With that in mind, I would like to spend a few minutes talking about FAAMedXPress (MedXPress).

You may recall that we introduced MedXPress with announcements that it was only available to airmen on the West Coast. In truth, the system was available across the whole country. However, we were trying to limit the number of users so that we could wring out any problems that we might have missed in our beta tests. At that time, I was due my annual Class II examination, so I entered all of my information into the database, and I asked my AME to give it a try.

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It took me a while to convince him that he could use the system because of our East Coast location, but I kept insisting that I knew what I was talking about, and he finally, begrudgingly, agreed to make the attempt.

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*'The next year, when I called to schedule my appointment, his assistant told me that he would not see me for my FAA exam unless I used MedXPress.'*

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From my perspective as an examinee, the process worked quite well, but over the next few weeks, he experienced several technical issues, and he was not bashful about calling me to let me know about them. I assured him I was grateful for the calls because we needed the feedback to help us fix the system.

The next year, when I called to schedule my appointment, his assistant told me that he would not see me for my FAA exam *unless* I used MedXPress.

That was three years ago, and I now consistently get positive feedback from AMEs and pilots who use the system. Pilots can fill out the electronic 8500-8 in the privacy of their own home. Once a pilot has used the system, it populates his or her demographics in successive years, and we are considering changes that will "remember" the rest of the historical information as well.

The reason I am talking to you, our AMEs, about MedXPress is that I am very disappointed by the low utilization of the system. In 2010, only 21 percent of our examinees used MedXPress. We have advertised in safety meetings, in safety publications, and at our AME seminars.

I just returned from the seminar that we held in Jacksonville, Fla. One AME approached me and told me he did not use the system or intend to encourage his pilots to use the system because he only did 30 or 40 exams a year. He said that it would be too much bother to learn how to use a new system for so few exams.

I then proceeded to tell him how misguided he was. That's because with a paper system, someone on his staff has to enter the data from the 8500-8. This takes time and frequently introduces errors. With MedXPress, all he would have to do is take the confirmation number that the pilot gives him, enter it into AMCS, and bring up the exam.

Many doctors walk around with laptops or PDAs as they examine their patients. If an AME wishes, he or she could review the history, perform the exam, enter the exam data, and print the medical certificate—while the pilot is in the exam room. Obviously, the process would not be so simple if the airman had issues that required additional testing or deferral, but time would still be saved and errors reduced by using MedXPress.

If you do not use or encourage the use of MedXPress, please think about doing so. As a pilot, I think it is infinitely better than the paper system. I am convinced that once you start using it and benefit from the efficiencies it provides that you will not go back to the paper system.

Again, I hope 2011 is a great year for you, and thanks again for all you do for the Office of Aerospace Medicine and your pilots.

—Fred