



Federal Air Surgeon's Medical Bulletin

Aviation Safety Through Aerospace Medicine

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For FAA Aviation Medical Examiners, Office of Aerospace Medicine Personnel,
Flight Standards Inspectors, and Other Aviation Professionals.



U.S. Department of Transportation
Federal Aviation Administration

Moving Away From Paper

HAPPY NEW YEAR, EVERYONE, I hope that 2012 is a great year for you.

I am pleased to announce that the Office of Aerospace Medicine is taking a big step toward becoming paperless. Effective October 1, 2012, pilots must use FAA MedXPress to complete an electronic application for an Airman Medical Certificate or Airman Medical and Student Pilot Certificate, FAA Form 8500-8.

When I originally announced MedXPress back in the spring of 2007, I explained that it was our intention to eventually make the entire process paperless, but we wanted to offer a transition time to give pilots the opportunity to get accustomed to automating the process.

While MedXPress has proven to be an excellent tool, we need to significantly increase its use. Beginning October 1, everyone will be required to use the MedXPress system.

The Federal Air Surgeon's Column



By Fred Tilton, MD

While some individuals will say, "The paper system works just fine, and I do not wish to change," it is important to understand why this change is so important for all of us.

In short, the paper system allows for too many errors, leads to storage problems and creates security risks. The paper form was the only way for pilots to provide us with their history in the "non-electronic" age, but it was far from perfect. Poor handwriting, spelling errors, and items left blank gave us incomplete records and massive storage and retrieval issues. We corrected some of these problems when we introduced our first electronic system in 1992, but that system was voluntary for AMEs who were designated before its introduction, and we still had to contend with large amounts of paper records.

Our next step toward "paperless" took place in 1999 when we introduced the Document, Imaging, and Workflow System (DIWS), and the Aerospace Medical Certification Subsystem (AMCS). These two systems virtually eliminated our problems with storage and poor penmanship, but we still had to contend with the other problems associated with the paper 8500-8. The AMEs still had to deal with the handwriting and spelling problems and had to dedicate resources to transfer the histories from paper to electronic form.

In this era of belt-tightening, the paper 8500-8 also costs more than \$150,000 a year to print, store, distribute, and mail. On occasion, the paper forms have been lost in the mail, and we are concerned that this poses unnecessary risks that the documents could be used inappropriately.

This list just scratches the surface of our challenges with the paper 8500-8. We are confident that MedXPress eliminates all of these issues and also allows us to enhance the certification process. We cannot make these changes if we are still using a paper system.

We need your help.

One of the planned enhancements would establish a tracking program so that pilots and AMEs can query the system and electronically determine the status of applications. We also want to make the process easier on applicants by developing a feature that automatically transfers information that does not change so that the applicant is not required to re-enter information at subsequent examinations. We can only make these changes and other important enhancements if we move to an electronic system.

As many of you know, the Federal Government is taking steps across the board to become more efficient and reduce costs, and our move to electronic records is consistent with those initiatives. They include the "Government Paperwork Elimination Act" of 1998, and Executive Order 13589, "Promoting Efficient Spending," which President Obama signed last November.

I hope I have convinced you that this is the time to take the critical next step toward electronic records. It markedly reduces or eliminates most of the problems associated with a paper system,

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it reduces costs, and I believe many pilots will find it easier to submit their applications.

In addition to this editorial, we will be announcing this initiative in the Federal Register, at AME seminars, through pilot advocacy organizations, in April at EAA Sun n'Fun, in July at AirVenture, and pilot safety meetings.

Our plan is to also transition air traffic control specialists (ATCSs) to MedXPress in the future, after internal FAA coordination and some modifications to the ATCS certification system.

Thanks for "listening," and thanks again for all you do for the FAA and our airmen.

—Fred

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Inaugurating Year 52 of Newsletter Publishing

Name Changed but Mission Remains the Same

THE GRANDPARENT OF the *Federal Air Surgeon's Medical Bulletin* was first given life by the Bureau of Aviation Medicine in April 1960, but the newborn newsletter was christened the *Medical Newsletter* (see reproduction below).

The Federal Air Surgeon was then known as the *Civil Air Surgeon* (Dr. James L. Goddard at the time); "FAA" stood for *Federal Aviation Agency*, and the "Bureau" eventually became the *Office of Aerospace Medicine*. Physicians designated as pilot medical examiners were then called *aviation medical examiners*—oddly enough, the title as appropriate today as it was in 1960.

In 1960, the stated purpose of the newsletter was to "bring to your attention any medical news of interest pertinent to the well-being and safety of airmen and the public" and was intended "to keep you informed of progress made in this

field, our plans for the future, and any problems that may arise."

Initially, the plan was to publish the newsletter monthly, but this optimistic scheme was soon discontinued and was replaced by the current, more realistic quarterly timetable.

Thus the newsletter celebrates its fifty-second year, with the same mission in life—to proclaim news of interest pertinent to the well-being and safety of airmen and the public.

As Dr. Goddard said in 1960, "We invite your comments on these matters," so please send them (no cards and letters, please) via e-mail to:

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Look for an e-mail message on April 30, 2012, announcing the delivery of your next online edition of the *Federal Air Surgeon's Medical Bulletin*.

—Ed.

