

from the Federal Air Surgeon's
PERSPECTIVE...

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CACI UPDATE

IN MY FIRST ARTICLE, I told you that a major goal during my tenure as Federal Air Surgeon was to make interfacing with our medical certification system more efficient and airman-friendly. I told you that I would like to increase the ninety percent of airmen that walk out of an aviation medical examiner's office with a new medical certificate and decrease the ten percent of airmen that are presently deferred. I discussed the tools we could use to increase the number of certificates issued by AMEs, and I described how CACI [Conditions AMEs Can Issue] would serve as the first tool that would help us become more efficient.

The CACI protocol program allows AMEs to issue airman medical certificates that previously had to be deferred to the Aerospace Medical Certification Division or the Regional Flight Surgeon's Office for further review. Under the CACI protocol program, AMEs can issue unrestricted airman medical certificates to airmen with common medical conditions when they meet specific requirements. Before CACI, these conditions always required special issuance medical certificates.

CACI was developed so that AMEs could use their clinical experience to identify and issue airman medical certificates with medical conditions that are treated, stable, and not at significant risk for medical incapacitation.

CACI medical certificate issuances have specific requirements. At present, 12 conditions qualify. The on-line *AME Guide* lists criteria for issuing each of the 12 CACI conditions and what to document in Block 60 of the FAA airman medical certificate application. Ten of the 12 conditions have worksheets in the Guide; and criteria for the others (prostate and testicular cancer) are in the dispositions table for each condition. Links to the online *CACI AME Guide* information follow this article.

I am very excited about this program and plan to add more CACI conditions in the future, **but I need your help** as we validate the safety of the CACI process.

A recent quality assurance review revealed a large increase in AME errors. Almost all (95%) of these errors were due to AMEs not following correct CACI protocol, as described by the *AME Guide*.

To understand this better, I asked the CAMI Safety Management System team to review our first three months of CACI certification data, from July to September 2013. They identified some successes, and some opportunities for improvement.

The Safety Management System team asked two questions:

1. When exams were issued by the AME, was CACI appropriately applied and documented?
2. For CACI eligible conditions, was the new process utilized?

For Question 1, we reviewed cases where the airman had at least one of the original nine CACI pathcodes and the AME issued a regular certificate. Of those exams, we determined that:

- 80% of the time AMEs issued correctly
- Only 25% of the properly issued CACI exams had correct notations in Block 60 documenting CACI status.

Adding the CACI protocol does not appear to increase safety concerns; however, AMEs did not adequately document their use of the CACI protocol in Block 60.

What is the proper documentation to use?

Special notations must be used in Block 60 for all CACI-eligible conditions and are found at the bottom of the CACI worksheets. **The correct notation must be typed word for word.** For example, this is for arthritis:

AME MUST NOTE in Block 60 one of the following:

- Airman meets certification criteria for arthritis.
- Airman had a previous Special Issuance for this condition and now meets the regular issuance certification criteria for arthritis.
- Airman does NOT meet certification criteria for arthritis. I have deferred this exam. (Enter the application into the Automated Data System [AMCS] and mail the supporting documents to FAA identifying which criteria were not met.)

For Question 2, we limited the scope of the analysis to exams with the simplest medical histories, involving a single CACI condition. With this limitation, we determined that:

- 39% of the time AMEs inappropriately deferred or inappropriately special-issued a CACI eligible exam
- Only 17% of the CACI-eligible exams were properly issued and had correct notations in Block 60.

We identified missed opportunities for CACI issuance in this latter group—of all the CACI-eligible exams, nearly 40% of the time AMEs could have issued without a time-limited restriction but they did not.

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Our analysis indicates a need for more AME education regarding CACI procedures and documentation.

Actions Requested of AMEs:

1. Whenever you examine an airman with a CACI-application condition, check the *AME Guide* and issue if the criteria are met – don't miss an opportunity to better serve the airman community. If CACI criteria are met, keep the records, and do not mail in any supporting medical documentation. This documentation is for your records and future use.
2. For all CACI conditions, document your actions in Block 60, as required by the CACI procedure.
3. Remember that if an airman does not meet the standard for CACI issuance, enter the information into the electronic data system [AMCS], identifying which CACI criteria were not met on the airman medical certificate application.
4. Use online *AME Guide* resources for current information. CACI worksheets and criteria will change over time.

In summary, CACI is one way that the FAA can leverage the skills of our AMEs to safely improve the efficiency of airman medical certification. Studying our early CACI experience, we have identified the need for your improved familiarity with CACI conditions, protocols, and documentation.

We will add more CACI conditions over time, but it is essential that you stay current and document correctly. As always, we appreciate all the great work you do for the FAA. With your cooperation, we can make CACI a resounding success!

—Jim

CACI conditions, and links in the *AME Guide* (links below are active)

- [Arthritis](#)
- [Asthma](#)
- [Colitis](#)
- [Glaucoma](#)
- [Hepatitis C - Chronic](#)
- [Hypertension](#)
- [Hypothyroidism](#)
- [Migraine and Chronic Headache](#)
- [Pre-Diabetes](#)
- [Renal Cancer](#)

CACIs Without Certification Worksheets

- [Prostate Cancer](#)
- [Testicular Cancer](#)

Documentation requirements:

AME MUST NOTE in Block 60 one of the following:

Airman meets certification criteria for -----.

Airman had a previous Special Issuance for this condition and now meets the regular issuance certification criteria for -----.

Airman does NOT meet certification criteria for -----. I have deferred this exam. (Mail the supporting documents to FAA identifying which criteria were not met.)

RESULTS: 3 MONTHS OF CACI

- * 80% of the time AMEs issued correctly
- * Only 25% of the properly issued CACI exams had correct notations in Block 60 documenting CACI status
- * 39% of the time AMEs inappropriately deferred or inappropriately special-issued a CACI eligible exam
- * Only 17% of the CACI-eligible exams were properly issued and had correct notations in Block 60