

# FIT FOR PURPOSE

Dr C J King advises you how to get the most out of your AME and your aviation medical.



Everybody gets anxious about seeing a doctor. It is even worse when your career depends on it.

Aviation is quite rightly heavily regulated from the safety proficiency and medical point of view.

I have been an Aviation Medical Examiner (AME) for 10 years and am now full time in that role. In my previous life I was a full time GP for over thirty

should pass their medical easily and therefore, regularly. But if you are unlucky enough to have a medical problem, it can be picked up much earlier than somebody in the normal population who is not having a regular medical assessment. The problem can often be diagnosed and treated earlier and, hopefully, with a quicker return to flying. Alternatively, just talking through ▶

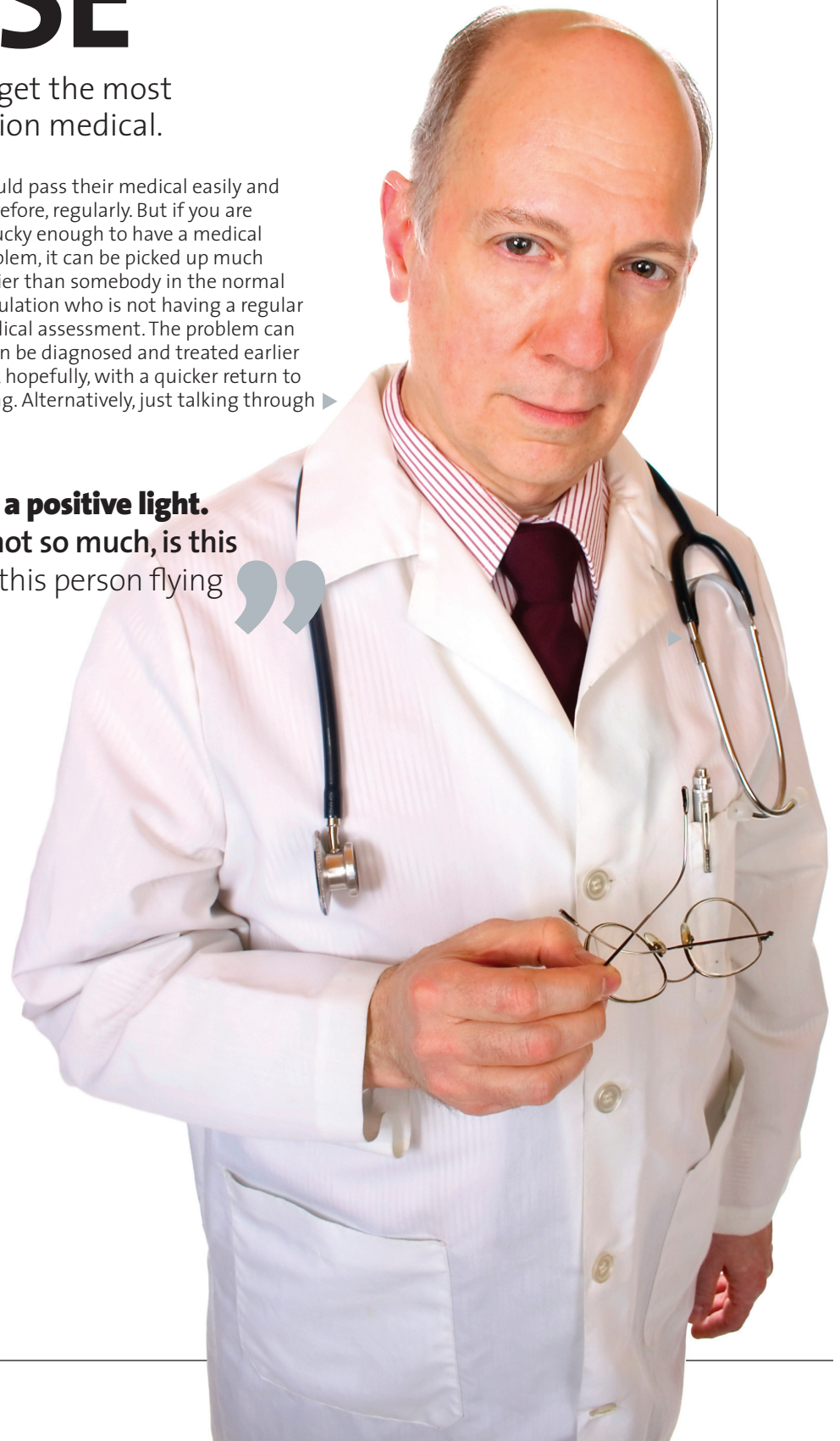
**“Look at having your medical in a positive light. I look at it in the wider context, not so much, is this person fit to fly? More, let’s keep this person flying”**

years. The remarks and opinions in this article are those of myself, not those of any airline or regulatory body.

The purpose of this article is to try and allay some of the fears and anxieties associated with having your aviation medical. I hope to give you some tips as to how to get the best out of your AME and medical and how to smooth the process with the CAA, with the help of your AME, should any problems arise.

Look at having your medical in a positive light. In many cases you are getting a medical check-up paid by your company. I look at it in the wider context, not so much, is this person fit to fly? More, let’s keep this person flying. And is there any general medical advice to give at the current medical, or are there any particular issues in relation to flying and the health of the pilot that need to be discussed. Remember that, by and large, the AME is not employed by your company.

These days, most pilots are aware of the fact that they need to remain fit, and keep themselves fit and, therefore,





a problem with your AME can often help and he can give you appropriate advice. The CAA website ([www.caa.co.uk](http://www.caa.co.uk)) has algorithms for the most commonly encountered medical problems which act as a flow diagram to explain the process of sorting out medical problems for certification purpose. These can be downloaded electronically. If you have a medical problem that needs sorting out, and there is an algorithm available, it is worth printing this off from the CAA website and taking it with you to your GP and/or specialist. Doctors outside

Your AME, as well as undertaking your medical assessment, should also be able to help with any medical queries and also liaise with the CAA as necessary. The AME will be well trained in aviation regulatory matters and aware of all the implications of the medical problems and the regulatory process. Use your AME as a resource.

When, or if, you attend a new AME, photo identity will be required. When you register with an AME, it is that person with whom the CAA will copy in communication.

- Hospital or clinic admission of more than 12 hours
- Surgical operation or invasive procedure
- The need for regular use of correcting lenses
- The regular use of medication
- Any significant personal injury involving capacity to the function as a member of a flight crew
- Any illness involving capacity to the function as a member of a flight crew throughout a period of 21 days or more
- Being pregnant



It is your responsibility to inform the CAA of any change in your health. I have had recent experiences where a company told pilots that a medical problem has been notified to the CAA and then told the pilots that they were fit to fly, but the CAA had no knowledge of either. Unless you receive a letter from the CAA saying you are unfit, and another that you are fit again, the CAA has no knowledge of your ill health, and it will only come to light at your next medical. This does not please the CAA.

Be sure to check that your current address with the CAA on your AME's online database is correct when attending your medical. Some details on the database for pilots go back to training days and are hopelessly out of date. If the CAA does not have your current address they cannot communicate with you.

If in doubt, phone your AME to discuss. Reports will be required from specialists for any medical problems you may have. If you see a GP or a specialist with a problem, please warn them that the CAA will require reports. These can be submitted to the CAA as the medical problem evolves.

If you wear glasses or contact lenses, then don't forget about the ophthalmology form. This needs to be submitted to the CAA every 2 years. If going to the optician, take this with you for completion. It may save you money if done at the same time as the consultation with the optician. Likewise, if you wear glasses or think you need glasses a review just before your medical is a good idea. It is most frustrating for the pilot sent away without a medical certificate only to return again after seeing the optician.

Be aware that if you wear glasses or lenses you will need to have your vision tested 'uncorrected' (without wearing lenses or gasses) and 'corrected' at every medical examination. ■

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the aviation industry are often unaware of the JAA regulatory requirements in respect of medical problems.

These algorithms will help to guide you through all the necessary steps in investigation and often give the name of acceptable medications for the treatment of various conditions. Following these algorithms with the provision of the necessary reports to the CAA will ease and expedite the medical regulatory process.

Find an AME you can relate to, who is easily accessible and who is happy to give you advice over the phone.

Remember you can have your medical done 45 days before the expiry date on the medical certificate. See if your AME will send you a reminder for your medical at the appropriate time, the more efficient practices should happily do this for you.

Please read the back of your medical certificate so that you know what to do if there is any change in your medical situation. The summary of JAR-FCL 3.040 states that with any decrease in medical fitness that you should seek advice from the CAA or your AME when becoming aware of the following: