

**MEDICAL CERTIFICATION UPDATE**  
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Everything on MedXpress mandatory except Social Security Number. Once submitted pilot cannot change. AME can change answers with explanations at time of examination. Once a "Yes," always a "Yes," even if fully recovered from a medical event. Keep copies of prior applications. Obtain and keep copies of all medical records.

Do Not Practice Medicine. Do not self-diagnose. Let medical records and reports speak for themselves. If necessary get clarification from treating doctor or a second opinion from a specialist.

Do not go to an AME sick, or while temporarily taking a possibly disqualifying medication. No penalty if a Medical Certificate expires.

Drug and alcohol legal actions require mandatory reports within 60 days to Aviation Security Division AND on all subsequent MedXpress. Report each and every step; arrest, citation, conviction, suspension, reduction, dismissal (even if drug/alcohol charges are completely expunged), required evaluations and treatment. FAA will consider all as a single event.

Nothing else is mandatory to report between examinations. Ground yourself if a change in health could affect your ability to fly, but no need to notify FAA. FAR 61.53

**SPECIAL ISSUANCE** - Discuss with aeromedical consultant before completing MedXpress and before seeing an AME.

**CACI** - Conditions for which an AME Can Issue without FAA involvement: arthritis, asthma, bladder cancer, breast cancer, chronic renal disease, colitis, colon cancer, glaucoma, hepatitis C, hypertension, hypothyroidism, migraine and chronic headaches, mitral valve repair, prediabetes, prostate cancer, renal cancer, retained renal stones, and testicular cancer.

**AASI - AME ASSISTED SPECIAL ISSUANCE** - AME can renew a Special Issuance on the spot without FAA involvement.

#### **MEDICATIONS**

Is the over-the-counter or prescription medication acceptable? Are side effects present or possible? It's the medical condition not necessarily the medication!

Do not "borrow" or "share" prescription medication

Discard prescription medications after use

Do not use old prescriptions.

No Marijuana - recreational or prescribed.

Stay away from illicit drugs, and drugs users

## APPROVED SEDATIVES

Ambien – 24 hours, 2x/week

Sonata, Lunesta, and Rozerem – 12 hours, 2x/week

Restoril – 72 hours, 2x/week

Benadryl (diphenhydramine) OTC - long half-life, not recommended.

Dalmane – not permitted

## STIMULANTS - Not Approved

Adderall - To help with simulator checkride

Methamphetamine

Strattera

Chantix (smoking cessation)

Viagra (sildenafil citrate): 8 hrs. no fly

Levitra (vardenafil): 8 hrs. no fly

Cialis (tadalafil): 24 hrs. no fly

– If daily, no fly first 7 days and no side effects

## ANTIDEPRESSANTS

Selective Serotonin Reuptake Inhibitors (SSRIs) can be approved after well-documented 6 months stable use.

Prozac, Lexapro, Celexa, Zoloft.

All require HIMS PROGRAM. Recommend seeing HIMS AME early.

## ADMINISTRATIVE DELAYS ARE VERY COSTLY

Not following requirements of Special Issuance authorization.

Not submitting requested or correct information.

– FAA has right to see all medical records

Late submission of required reports.

Submission of inadequate medical reports.

Submissions to FAA lost in mail - Submit all paperwork with tracking.

Submit as single package to correct address - DC or OKC.

FAA processing and decision delays.

Difficult to understand FAA letters.

## IF YOU HAVE A SIGNIFICANT MEDICAL PROBLEM

Obtain the best treatment for your condition, Worry about FAA later. Recover.

When stable and recovered, obtain all your medical records.

Obtain independent aeromedical advice, then complete MedXpress and see AME.

ALCOHOL, DRUGS & MENTAL ISSUES - Get advice and engage HIMS AME early.

Web site - [HIMSProgram.com](http://HIMSProgram.com)

## DOT DRUGS TESTS

Marijuana, Cocaine, Amphetamine, Opiates, Phencyclidine (PCP), Opioids.

DOT Opioids Now Tested (as of January 1, 2018)

Oxycodone (Percodan, Oxycontin, Roxicontin)

Oxymorphone (Opana)

Hydrocodone (Vicodin, Norco, and Hycodan)

Hydromorphone (Dilaudid)