

Chapter 8. Medical Facts for Pilots

Section 1. Fitness for Flight

8-1-1. Fitness For Flight

a. Medical Certification.

1. All pilots except those flying gliders and free air balloons must possess valid medical certificates in order to exercise the privileges of their airman certificates. The periodic medical examinations required for medical certification are conducted by designated Aviation Medical Examiners, who are physicians with a special interest in aviation safety and training in aviation medicine.

2. The standards for medical certification are contained in 14 CFR Part 67. Pilots who have a history of certain medical conditions described in these standards are mandatorily disqualified from flying. These medical conditions include a personality disorder manifested by overt acts, a psychosis, alcoholism, drug dependence, epilepsy, an unexplained disturbance of consciousness, myocardial infarction, angina pectoris and diabetes requiring medication for its control. Other medical conditions may be temporarily disqualifying, such as acute infections, anemia, and peptic ulcer. Pilots who do not meet medical standards may still be qualified under special issuance provisions or the exemption process. This may require that either additional medical information be provided or practical flight tests be conducted.

3. Student pilots should visit an Aviation Medical Examiner as soon as possible in their flight training in order to avoid unnecessary training expenses should they not meet the medical standards. For the same reason, the student pilot who plans to enter commercial aviation should apply for the highest class of medical certificate that might be necessary in the pilot's career.

CAUTION-

The CFRs prohibit a pilot who possesses a current medical certificate from performing crewmember duties while the pilot has a known medical condition or increase of a known medical condition that would make the pilot unable to meet the standards for the medical certificate.

b. Illness.

1. Even a minor illness suffered in day-to-day living can seriously degrade performance of many piloting tasks vital to safe flight. Illness can produce fever and distracting symptoms that can impair judgment, memory, alertness, and the ability to make calculations. Although symptoms from an illness may be under adequate control with a medication, the medication itself may decrease pilot performance.

2. The safest rule is not to fly while suffering from any illness. If this rule is considered too stringent for a particular illness, the pilot should contact an Aviation Medical Examiner for advice.

c. Medication.

1. Pilot performance can be seriously degraded by both prescribed and over-the-counter medications, as well as by the medical conditions for which they are taken. Many medications, such as tranquilizers, sedatives, strong pain relievers, and cough-suppressant preparations, have primary effects that may impair judgment, memory, alertness, coordination, vision, and the ability to make calculations. Others, such as antihistamines, blood pressure drugs, muscle relaxants, and agents to control diarrhea and motion sickness, have side effects that may impair the same critical functions. Any medication that depresses the nervous system, such as a sedative, tranquilizer or antihistamine, can make a pilot much more susceptible to hypoxia.

2. The CFRs prohibit pilots from performing crewmember duties while using any medication that affects the faculties in any way contrary to safety. The safest rule is not to fly as a crewmember while taking any medication, unless approved to do so by the FAA.

d. Alcohol.

1. Extensive research has provided a number of facts about the hazards of alcohol consumption and flying. As little as one ounce of liquor, one bottle of beer or four ounces of wine can impair flying skills, with the alcohol consumed in these drinks being detectable in the breath and blood for at least 3 hours. Even after the body completely destroys a moderate amount of alcohol, a pilot can still be severely