

easily committed to memory is being distributed by the FAA in the form of a wallet-sized card.

**i. PERSONAL CHECKLIST.** *I'm physically and mentally safe to fly; not being impaired by:*

**I**llness

**M**edication

**S**tress

**A**lcohol

**F**atigue

**E**motion

## 8-1-2. Effects of Altitude

### a. Hypoxia.

1. Hypoxia is a state of oxygen deficiency in the body sufficient to impair functions of the brain and other organs. Hypoxia from exposure to altitude is due only to the reduced barometric pressures encountered at altitude, for the concentration of oxygen in the atmosphere remains about 21 percent from the ground out to space.

2. Although a deterioration in night vision occurs at a cabin pressure altitude as low as 5,000 feet, other significant effects of altitude hypoxia usually do not occur in the normal healthy pilot below 12,000 feet. From 12,000 to 15,000 feet of altitude, judgment, memory, alertness, coordination and ability to make calculations are impaired, and headache, drowsiness, dizziness and either a sense of well-being (euphoria) or belligerence occur. The effects appear following increasingly shorter periods of exposure to increasing altitude. In fact, pilot performance can seriously deteriorate within 15 minutes at 15,000 feet.

3. At cabin pressure altitudes above 15,000 feet, the periphery of the visual field grays out to a point where only central vision remains (tunnel vision). A blue coloration (cyanosis) of the fingernails and lips develops. The ability to take corrective and protective action is lost in 20 to 30 minutes at 18,000 feet and

5 to 12 minutes at 20,000 feet, followed soon thereafter by unconsciousness.

4. The altitude at which significant effects of hypoxia occur can be lowered by a number of factors. Carbon monoxide inhaled in smoking or from exhaust fumes, lowered hemoglobin (anemia), and certain medications can reduce the oxygen-carrying capacity of the blood to the degree that the amount of oxygen provided to body tissues will already be equivalent to the oxygen provided to the tissues when exposed to a cabin pressure altitude of several thousand feet. Small amounts of alcohol and low doses of certain drugs, such as antihistamines, tranquilizers, sedatives and analgesics can, through their depressant action, render the brain much more susceptible to hypoxia. Extreme heat and cold, fever, and anxiety increase the body's demand for oxygen, and hence its susceptibility to hypoxia.

5. The effects of hypoxia are usually quite difficult to recognize, especially when they occur gradually. Since symptoms of hypoxia do not vary in an individual, the ability to recognize hypoxia can be greatly improved by experiencing and witnessing the effects of hypoxia during an altitude chamber "flight." The FAA provides this opportunity through aviation physiology training, which is conducted at the FAA Civil Aeromedical Institute and at many military facilities across the U.S. To attend the Physiological Training Program at the Civil Aeromedical Institute, Mike Monroney Aeronautical Center, Oklahoma City, OK, contact by telephone (405) 954-6212, or by writing Aerospace Medical Education Division, AAM-400, CAMI, Mike Monroney Aeronautical Center, P.O. Box 25082, Oklahoma City, OK 73125.

#### **NOTE-**

*To attend the physiological training program at one of the military installations having the training capability, an application form and a fee must be submitted. Full particulars about location, fees, scheduling procedures, course content, individual requirements, etc., are contained in the Physiological Training Application, Form Number AC 3150-7, which is obtained by contacting the accident prevention specialist or the office forms manager in the nearest FAA office.*

6. Hypoxia is prevented by heeding factors that reduce tolerance to altitude, by enriching the inspired air with oxygen from an appropriate oxygen system, and by maintaining a comfortable, safe cabin pressure altitude. For optimum protection, pilots are encouraged to use supplemental oxygen above