



**COMMENT RESPONSE DOCUMENT (CRD)  
TO NOTICE OF PROPOSED AMENDMENT (NPA) 2008-17c**

**AND**

**TO NOTICE OF PROPOSED AMENDMENT (NPA) 2009-02e**

**for an Agency Opinion on a Commission Regulation establishing the Implementing  
Rules for  
the medical certification of pilots and medical fitness of cabin crew**

**and**

**a draft Decision of the Executive Director of the European Aviation Safety Agency on  
Acceptable Means of Compliance and Guidance Material on the medical certification  
of pilots and medical fitness of cabin crew**

*“Implementing Rules for Medical Fitness”*

**CRD b.2 – Part-MED**

The changes as compared to the text proposed in the NPA are shown as follows:

- deleted text is shown with a strike through: ~~deleted~~
- new text is shown in bold: **bold**

**I Draft Opinion Part-Medical****Annex IV to the Implementing Regulation  
PART-MEDICAL****SUBPART A  
GENERAL REQUIREMENTS****Section 1  
General****MED.A.001 Competent authority**

For the purpose of this Part, the competent authority shall be ~~the authority designated by the Member State where the aeromedical centre (AeMC), the aeromedical examiner (AME) or the general medical practitioner (GMP) to whom a person applies for the issue of a medical certificate have their principal place of business.:~~

- (a) **for AeMCs:**
  - (1) **where the AeMC is located outside the territory of the Member States, the Agency;**
  - (2) **where the AeMC is located inside the territory of the Member States, the authority designated by the Member State where the aero-medical centre (AeMC) have their principal place of business.**
- (b) **for AMEs:**
  - (1) **where the AME practice is located outside the territory of the Member States, the authority designated by the Member State to which it applies for the issue of the certificate;**
  - (2) **where the AME practice is located inside the territory of the Member States, the authority designated by the Member State where the aero-medical examiner (AME) has its principal place of business.**
- (c) **for GMPs, the authority designated by the Member State to which the GMP declares its activity.**

**MED.A.005 Scope**

This Part establishes the requirements for:

- (a) the issuance, validity, revalidation and renewal of the medical certificate required for exercising the privileges of a pilot licence or of a student pilot;
- (b) the certification of AMEs;
- (c) the qualification of general medical practitioners; **and**
- (d) **the medical fitness of applicants for, or holders of a cabin crew attestation.**

**MED.A.010 Definitions**

For the purposes of this Part, the following definitions apply:

- 'Colour safe' means the ability of an applicant to readily distinguish the colours used in air navigation and correctly identify aviation coloured lights.
- 'Eye specialist' means an ophthalmologist or a vision care specialist qualified in optometry and trained to recognise pathological conditions.
- 'Investigation' means the assessment of a suspected pathological condition of an applicant by means of examinations and tests in order to verify the presence or absence of a medical condition.
- 'Limitation' means a condition placed on the medical certificate or licence that shall be complied with whilst exercising the privileges of the licence.
- 'Refractive error' means the deviation from emmetropia measured in dioptres in the most ametropic meridian, measured by standard methods.
- **'Accredited medical conclusion' means the conclusion reached by one or more medical experts acceptable to the licensing authority, on the basis of objective and non-discriminatory criteria, for the purposes of the case concerned, in consultation with flight operations or other experts as necessary.**
- 'Licensing authority' means the competent authority of the Member State that issued the ~~pilot licence~~, or **to which a person applies** ~~where the pilot applicant has applied for the issue of a licence in accordance with Part-FCL~~, or, when **a person** ~~pilot~~ has not yet applied for the issue of a licence, the competent authority in accordance with this Part.

**MED.A.015 Medical confidentiality**

All persons involved in medical examination, assessment and certification shall ensure that medical confidentiality is respected at all times.

**MED.A.020 Medical certification**

- (a) A student pilot shall not fly solo unless that student pilot holds a ~~valid~~ medical certificate, as required for the relevant licence.
- (b) Applicants for and holders of a ~~leisure-light aircraft~~ pilot licence (LAPL) shall hold **at least** a ~~valid~~-LAPL medical certificate.
- (c) Applicants for and holders of a private pilot licence (PPL), **a sailplane pilot licence (SPL), or a balloon pilot licence (BPL)** shall hold **at least** a ~~valid~~-class 2 medical certificate.
- (d) Applicants for and holders of a **sailplane pilot licence (SPL) or a balloon pilot licence (BPL)** involved in commercial **sailplane or balloon flights** ~~ballooning~~ shall hold **at least** a ~~valid~~-class 2 medical certificate.
- (e) If a night ~~flying-qualification~~ **rating** is added to a PPL or LAPL, the ~~pilot licence holder~~ shall be colour safe.
- (f) Applicants for and holders of a commercial pilot licence (CPL), a multi-crew pilot licence (MPL), or an airline transport pilot licence (ATPL) shall hold a ~~valid~~-class 1 medical certificate.
- (g) If an instrument rating is added to a PPL, the ~~pilot licence holder~~ shall undertake pure tone audiometry examinations **in accordance with** ~~to~~ the periodicity and the standard required for class 1 medical certificate holders.
- (h) A **licence holder** ~~pilot~~ shall not **at any time** hold more than one ~~valid Part-FCL~~ medical certificate **issued in accordance with this Part** ~~at any time~~.

**MED.A.025 Decrease in medical fitness of licence holders**

- ~~(a) Pilots~~ **Licence holders** shall not exercise the privileges of their licence and related ratings or certificates at any time when:
- (a) they are aware of any decrease in their medical fitness which might render them unable to safely exercise those privileges;
  - (b) ~~they Licence holders~~ ~~Pilots shall not~~ take or use any ~~medication~~ prescribed or non-prescribed **medication** which is likely to interfere with the safe exercise of the privileges of the applicable licence;
  - (c) ~~Licence holders~~ ~~Pilots shall not exercise the privileges of their licence and related ratings or certificates whilst receiving~~ **receiving** any medical, surgical or other treatment that is likely to interfere with flight safety.

**Section 2****Issuance, revalidation and renewal of medical certificates****MED.A.030 Competence for the issue, revalidation and renewal of medical certificates**

- (a) A medical certificate shall only be issued, revalidated or renewed once the required medical examinations have been completed and a fit assessment is made.
- (b) *Initial issue*
  - (1) Class 1 medical certificates shall be issued by an AeMC.
  - (2) Class 2 medical certificates shall be issued by an AeMC or an AME.
  - (3) **LAPL** medical certificates shall be issued by an AeMC, an AME or, if permitted under **the national law of the licensing authority**, by a general medical practitioner (GMP).
- (c) *Revalidation and renewal*
  - (1) Class 1 and class 2 medical certificates shall be revalidated or renewed by an AeMC or an AME.
  - (2) **LAPL** medical certificates shall be revalidated or renewed by an AeMC, an AME or, if permitted under **the national law of the licensing authority**, by a GMP.
- (d) Notwithstanding (b) and (c) **above**, ~~in the cases of referral~~ the licensing authority may issue the medical certificate **when** :
  - ~~(1) a case is referred. The licensing authority may also re-issue the medical certificate when it has identified any administrative incorrection.~~
  - ~~(2) the medical certificate has been issued incorrectly.~~

**MED.A.035 Application for a medical certificate**

- (a) Applications for a medical certificate shall be made in a format established by the competent authority.
- (b) Applicants for a medical certificate shall provide the AeMC, AME or GMP as applicable, with:

- (1) proof of their identity;
- (2) a **signed written** declaration:
  - (i) -of medical facts concerning personal and family history;
  - ~~(3)~~(ii) ~~a written declaration~~ as to whether they have previously undergone an examination for a medical certificate and, if so, by whom and with what result;
  - ~~(4)~~(iii) ~~a declaration~~ as to whether they have ever been assessed as unfit or had a medical certificate suspended or revoked.
- (c) When applying for a revalidation or renewal of the medical certificate, applicants shall present it to the AeMC, AME or GMP prior to the relevant examinations.

#### **MED.A.040 Requirements for the issue, revalidation and renewal of medical certificates**

The AeMC, AME or GMP shall only issue, revalidate or renew a medical certificate when:

- (a) the ~~pilot~~**applicant** has provided them with a complete medical history and, if required by the AeMC, AME or GMP, results of medical examinations and tests conducted by the applicant's doctor or any medical specialists;
- (b) they have conducted all the relevant medical examinations and assessments to verify that the ~~pilot~~**applicant** complies with the requirements for the relevant medical certificate.

#### **MED.A.045 Limitations to medical certificates**

##### *(a) Limitations to class 1 and class 2 medical certificates*

- (1) When, in accordance with the aero-medical examinations and assessments, the applicant does not fully comply with the requirements for the relevant class of medical certificate but is considered to be not likely to jeopardise flight safety the AeMC or AME shall:
  - (i) in the case of applicants for a class 1 medical certificate, refer the decision on fitness of the applicant to the licensing authority as indicated in Subpart B;~~;~~ ~~except those requiring a limitation related only to the use of corrective lenses;~~
  - (ii) in cases where a referral to the licensing authority is not indicated in Subpart B, evaluate whether the applicant is able to perform their duties safely when complying with one or more limitations endorsed on the medical certificate, and issue the medical certificate with limitation(s) as necessary;**
  - (iii) in the case of applicants for a class 2 medical certificate, evaluate whether the applicant is able to perform their duties safely when complying with one or more limitations endorsed on the medical certificate, and issue the medical certificate with limitation(s) as necessary **in consultation with the licensing authority;**
  - (iv) notwithstanding (i) and (ii), the AeMC or AME may revalidate or renew a medical certificate with the same limitation without referring the applicant to the licensing authority.**

##### *(b) Limitations to LAPL medical certificates*

- (1) When a GMP, after due consideration of the applicant's medical history **concludes that** the applicant does not fully meet the requirements for medical fitness, the GMP shall refer the applicant to an AeMC or AME, **except those requiring a limitation related only to the use of corrective lenses** ~~which shall comply with the requirements established in (a) for class 2 medical certificates.~~

- (2) When an applicant for a LAPL medical certificate has been referred, the AeMC or AME shall give due consideration to MED.B.090, evaluate whether the applicant is able to perform their duties safely when complying with one or more limitations endorsed on the medical certificate and issue the medical certificate with limitation(s) as necessary. The AeMC or AME shall always consider the need to restrict the pilot from carrying passengers (OPL).
- (3) Notwithstanding (2) above, the GMP may revalidate or renew a medical certificate with the same limitation without referring the applicant to an AeMC or AME.

~~(4) An OPL limitation shall always be considered in borderline cases.~~

(c)

~~(2)~~ When assessing whether a limitation is necessary, particular consideration shall be given to:

- (1) whether accredited medical ~~opinion~~ **conclusion** indicates that in special circumstances the applicant's failure to meet any requirement, whether numerical or otherwise, is such that exercise of the privileges of the licence applied for is not likely to jeopardise flight safety;
- (2~~ii~~) the applicant's ability, skill and experience relevant to the operation to be performed.

~~(de)~~ *Limitation codes*

(1) Operational multi-pilot limitation (OML – **Class 1 only**)

(i)~~(ii)~~ When the holder of a CPL, ~~or an ATPL or MPL~~ **does not fully meet the requirements for a class 1 medical certificate and** has been referred to the licensing authority, it shall assess whether the medical certificate may be issued with a ~~an OML~~ limitation **'OML to be used only in the context of a multi-pilot environment. ~~valid only as or with qualified co-pilot~~'**.

(ii)~~(i)~~ The holder of a medical certificate with an OML limitation shall only operate an aircraft in multi-pilot operations, when the other pilot is fully qualified on the relevant type of aircraft, is not subject to an OML and ~~is not more than 60 years of age~~ **has not attained the age of 60 years**.

(iii) The OML for class 1 medical certificates shall only be imposed and removed by the licensing authority.

(2) Operational Safety Pilot Limitation (OSL – **Class 2, LAPL only**).

(i) The holder of a medical certificate with an OSL limitation shall only operate an aircraft when another pilot fully qualified to act as pilot-in-command on the relevant class or type of aircraft is carried on board, the aircraft is fitted with dual controls and the other pilot occupies a seat at the controls.

(ii) **The OSL for class 2 medical certificates may be imposed or removed by an AeMC or AME in consultation with the licensing authority only.**

~~(4e)~~ Any other limitation may be imposed on the holder of a medical certificate if required to ensure flight safety.

~~(ef)~~ Any limitation imposed on the holder of a medical certificate shall be specified therein.

#### **MED.A.050 Obligations of AeMC, AME and GMP**

(a) When conducting medical examinations and assessments, AeMC, AMEs and GMP shall:

- (1) ensure that communication with the applicant can be established without language barriers;

- (2) make the applicant aware of the consequences of providing incomplete, inaccurate or false statements on their medical history.
- (b) After completion of the aero-medical examinations and assessment, **the AeMCs, AMEs and GMPs** shall:
- (1) advise the applicant whether fit, unfit or referred to the licensing authority, **AeMC or AME as applicable**;
  - (2) inform the applicant of any limitation that may restrict flight training or the privileges of the licence, if applicable;
  - (3) if the applicant has been assessed as unfit, inform them of their right of appeal to the licensing authority;
  - (4) submit without delay a signed **full** report to include the assessment result and a copy of the medical certificate to the licensing authority.
- (c) When the ~~pilot~~ **applicant** has to be referred to the licensing authority in accordance with MED.A.045, the AeMC, AME or GMP shall transfer the relevant medical documentation to the licensing authority.
- (d) AeMCs, AMEs and GMPs shall maintain records with details of medical examinations and assessments performed for the issue, renewal or revalidation of medical certificates and their results, in accordance with national legislation.
- When the AME undertakes aero-medical examinations at an AeMC, the records shall be kept in accordance with the applicable national legislation and the AeMC's procedures.
- (e) **When required for oversight activities** ~~Upon request by the competent authority,~~ AeMCs, AMEs and GMPs shall submit to the ~~competent~~ **medical assessor of the competent authority upon request** all aero-medical records and reports, and any other **relevant** information, ~~as required for oversight activities.~~

#### **MED.A.055 Validity, revalidation and renewal of medical certificates**

- (a) *Validity*
- (1) Class 1 medical certificates shall be valid for a period of 12 months.
  - (2) Notwithstanding ~~to~~ paragraph (1), the period of validity shall be reduced to 6 months for ~~pilots~~ **licence holders** who:
    - (i) are engaged in single-pilot commercial air transport operations carrying passengers and have reached the age of 40;
    - (ii) have reached the age of 60.
  - (3) Class 2 medical certificates shall be valid for a period of:
    - (i) 60 months until the ~~pilot~~ **licence holder** reaches the age of 40. A medical certificate issued prior to reaching the age of 40 shall cease to be valid after the **licence holder** ~~pilot~~ reaches the age of 42;
    - (ii) 24 months between the age of 40 and 50. A medical certificate issued prior to reaching the age of 50 shall cease to be valid after the **licence holder** ~~pilot~~ reaches the age of 51; and
    - (iii) 12 months after the age of 50.
  - (4) **LAPL** medical certificates shall be valid **for a period of**:
    - (i) **60 months** until the **licence holder reaches the** age of **50. A medical certificate issued prior to reaching the age of 50 shall cease to be valid after the licence holder reaches the age of 52;**

(ii) **24 months between the age of 50 and 70. A medical certificate issued prior to reaching the age of 70 shall cease to be valid after the licence holder reaches the age of 71; and**

(iii) **12 months after the age of 70.**

~~-45;~~

~~(ii) between the age of 45 and 60, for a period of 60 months. A LPL medical certificate issued prior to reaching the age of 60 shall cease to be valid after the **licence holder** pilot reaches the age of 62; and~~

~~(iii) after the age of 60, for a period of 24 months.~~

(5) ~~These periods~~ **The validity period of a medical certificate including any associated examination or special investigation shall be:**

(i) **determined by the age of the applicant at the date when the medical examination takes place; and**

(ii) calculated from the date of the medical examination in the case of initial issue and renewal, and from the expiry date of the previous medical certificate in the case of revalidation.

(b) *Revalidation*

Examinations for the revalidation of a medical certificate may be undertaken up to 45 days prior to the expiry date of the medical certificate.

(c) *Renewal*

(1) If the ~~pilot~~ **holder of a medical certificate** does not comply with paragraph (b), a renewal examination shall be required.

(2) In the case of class 1 and class 2 medical certificates:-

(i) ~~if~~ the medical certificate has expired for more than 2 years, the AeMC or AME shall only conduct the renewal examination after assessment of the aero-medical records of the pilot;-

(ii) ~~if~~ the medical certificate has expired for more than 5 years, the **examination requirements for initial issue shall apply and the assessment shall be based on the revalidation requirements.**

(3) **In the case of LAPL medical certificates, the AeMC, AME or GMP shall assess the medical history of the applicant and perform the aero-medical examination in accordance with MED.B.090.**

### Section 3

#### Suspension and revocation

##### MED.A.060 Suspension of exercise of privileges

(a) Holders of ~~class 1 and class 2a~~ a medical certificate shall not exercise the privileges granted by their licences when they:

(1) have undergone a surgical operation or invasive procedure;

(2) have been admitted to a hospital or medical clinic;

(3) have commenced the regular use of any medication;

(4) first require correcting lenses;



- (5) have suffered any significant personal injury involving incapacity to function as a member of the flight crew;
  - (6) have been suffering from any **significant** illness involving incapacity to function as a member of the flight crew ~~for a period of at least 21 days~~;
  - (7) are pregnant.
- (b) In these cases:
- (1) holders of **class 1 and class 2** medical certificates shall without undue delay seek the advice of an AeMC or AME. The AeMC or AME shall assess the medical fitness of the ~~pilot~~-**licence holder** and decide whether they are fit to resume the exercise of their privileges;
- ~~(c) LAPL medical certificates~~
- (2) holders of LAPL medical certificates shall **without undue delay seek the advice of an AeMC or AME, or the GMP who signed the medical certificate. The AeMC, AME or GMP shall assess the medical fitness of the licence holders and decide whether they are fit to resume the exercise of their privileges.**

#### **MED.A.065 Suspension and revocation of medical certificates**

- (a) The licensing authority shall suspend or revoke a medical certificate when it has identified a safety risk or if it has clear evidence that the ~~person~~-**licence holder** has carried out or has been involved in one or more of the following activities:
- (1) obtaining a medical certificate by falsification of submitted documentary evidence or by providing a false declaration;
  - (2) exercising the privileges of the licence in violation of the provisions of paragraph MED.A.025;
  - (3) violation of the provisions of paragraph MED.A. 060.
- (b) The ~~competent~~-**licensing** authority may suspend the certificate pending investigation of any of the circumstances indicated in (a), when there is a justified concern that allowing the **licence** holder to continue to exercise their privileges during that time may have an adverse effect on safety.
- (c) Upon suspension or revocation, the **licence holder** ~~pilot~~ shall immediately return the medical certificate to the licensing authority.

**Subpart B****REQUIREMENTS FOR MEDICAL CERTIFICATES****Section 1****General****MED.B.001 General**

- (a) Applicants for a medical certificate shall be free from any:
- (1) abnormality, congenital or acquired;
  - (2) active, latent, acute or chronic disease or disability;
  - (3) wound, injury or sequelae from operation;
  - (4) effect or side effect of any prescribed or non-prescribed therapeutic, diagnostic or preventive medication taken;
- that would entail a degree of functional incapacity which is likely to interfere with the safe exercise of the privileges of the applicable licence~~(s)~~ or could render the applicant likely to become suddenly unable to exercise the privileges of the licence~~(s)~~ safely.
- (b) Applicants shall be issued a medical certificate only if they comply with all the requirements of this Subpart applicable to the class of medical certificate they apply for.
- (c) Applicants for a medical certificate shall undergo an aero-medical examination and assessment in accordance with the requirements prescribed in this Subpart.
- (d) The AME or AeMC or, in the case of referral, the licensing authority may require the applicant to undergo additional medical examinations and investigations when clinically indicated.

**Section 2****Specific requirements for class 1 and class 2 medical certificates****MED.B.005 Cardiovascular System**

- (a) *Examination*
- (1) A standard 12-lead resting electrocardiogram (ECG) and report shall be completed on clinical indication, and:
    - (i) for a class 1 medical certificate, at the examination for first issue of a medical certificate, then every 5 years until age 30, every 2 years until age 40, annually until age 50, and at all revalidation or renewal examinations thereafter;
    - (ii) for a class 2 medical certificate, at the first examination after age 40 and then every 2 years after age 50.
  - (2) Extended cardiovascular assessment shall be required when clinically indicated.
  - (3) For a class 1 medical certificate, an extended cardiovascular assessment shall be completed at the first revalidation or renewal examination after age 65 and then every 4 years.

- (4) For a class 1 medical certificate, estimation of serum lipids, including cholesterol, shall be required at the examination for first issue of a medical certificate, and at the first examination after having reached the age of 40.

(b) *Cardiovascular System – General*

- (1) Applicants shall not ~~possess~~ **suffer from** any cardiovascular disorder which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).

- (2) Applicants for a class 1 medical certificate with any of the following conditions **shall be assessed as unfit**:

(i) aneurysm of the thoracic or supra-renal abdominal aorta, before or after surgery;

(ii) significant **functional** abnormality of any of the heart valves;

~~(iii) a cardiovascular condition requiring systemic anticoagulant therapy;~~

~~(iviii)~~ heart or heart/lung transplantation.

~~shall be assessed as unfit.~~

- (3) Applicants for a class 1 medical certificate with an established history or diagnosis of any of the following conditions shall be referred to the licensing authority:

(i) peripheral arterial disease before or after surgery;

(ii) aneurysm of the ~~infra~~renal-abdominal aorta, before or after surgery;

(iii) ~~minor~~ **functionally insignificant** cardiac valvular abnormalities;

(iv) after cardiac valve surgery;

(v) abnormality of the pericardium, myocardium or endocardium;

(vi) congenital abnormality of the heart, before or after corrective surgery;

(vii) recurrent vasovagal syncope;

(viii) arterial or venous thrombosis;

(ix) pulmonary embolism;

**(x) cardiovascular condition requiring systemic anticoagulant therapy.**

- (4) Applicants for a class 2 medical certificate with an established diagnosis of one of the conditions specified in (2) **and (3) above** shall be evaluated by a cardiologist **and in consultation with the licensing authority** before a fit assessment can be considered.

(c) *Blood Pressure*

- (1) The blood pressure shall be recorded at each examination.

- (2) The applicant's blood pressure shall be within normal limits.

- (3) Applicants for a class 1 medical certificate:

(i) with symptomatic hypotension; **or**

(ii) whose blood pressure at examination consistently exceeds 160 mmHg systolic and/or 95 mmHg diastolic, with or without treatment;

shall be assessed as unfit.

- (4) The initiation of medication for the control of blood pressure shall require a period of temporary suspension of the medical certificate to establish the absence of significant side effects.

(d) *Coronary Artery Disease*

- (1) Applicants for a class 1 medical certificate with:

- (i) suspected ~~cardiac~~**myocardial** ischaemia; or
- (ii) asymptomatic minor coronary artery disease requiring no **anti-anginal** treatment;

shall be referred to the licensing authority and undergo cardiological evaluation to exclude ~~cardiac~~**myocardial** ischaemia before a fit assessment can be considered.

- (2) Applicants for a class 2 medical certificate with any of the conditions detailed in (1) shall undergo cardiological evaluation before a fit assessment can be considered.

- (3) Applicants with:

- (i) ~~cardiac~~**myocardial** ischaemia;
- (ii) symptomatic coronary artery disease; or
- (iii) symptoms of coronary artery disease controlled by medication;

shall be assessed as unfit.

- (4) Applicants for the initial issue of a class 1 medical certificate with a history or diagnosis of:

- (i) ~~cardiac~~**myocardial** ischaemia;
- (ii) myocardial infarction; or
- (iii) revascularisation for coronary artery disease;

shall be assessed as unfit.

- (5) Applicants for a class 2 medical certificate who are asymptomatic ~~after~~**following** myocardial infarction or surgery for coronary artery disease shall undergo satisfactory cardiological evaluation before a fit assessment can be considered **in consultation with the licensing authority**. Applicants for the revalidation of a class 1 medical certificate shall be referred to the licensing authority.

(e) *Rhythm/Conduction Disturbances*

- (1) Applicants for a class 1 medical certificate shall be referred to the licensing authority when they have any significant disturbance of cardiac conduction or rhythm, including any of the following:

- (i) disturbance of supraventricular rhythm, including intermittent or established sinoatrial dysfunction, atrial fibrillation and/or flutter and asymptomatic sinus pauses;
- (ii) complete left bundle branch block;
- (iii) Mobitz type 2 atrioventricular block;
- (iv) broad and/or narrow complex tachycardia;
- (v) ventricular pre-excitation; ~~or~~
- (vi) asymptomatic QT prolongation; **or**

**(vii) Brugada pattern on electrocardiography.**

- (2) Applicants for a class 2 medical certificate with any of the conditions detailed in (1) shall be evaluated by a cardiologist before a fit assessment **in consultation with the licensing authority** can be considered.

- (3) Applicants with any of the following:

- (i) incomplete bundle branch block;
- (ii) complete right bundle branch block;
- (iii) stable left axis deviation;

- (iv) asymptomatic sinus bradycardia;
- (v) asymptomatic sinus tachycardia;
- (vi) asymptomatic isolated uniform supra-ventricular or ventricular ectopic complexes;
- (vii) first degree atrioventricular block; or
- (viii) Mobitz type 1 atrioventricular block;

may be assessed as fit in the absence of any other abnormality and subject to satisfactory cardiological evaluation.

(4) Applicants with a history of:

- (i) ablation therapy; or
- (ii) pacemaker implantation;

shall undergo satisfactory cardiovascular evaluation before a fit assessment can be made. Applicants for a class 1 medical certificate shall be referred to the licensing authority. **Applicants for a class 2 medical certificate shall be assessed in consultation with the licensing authority.**

(5) Applicants with:

- (i) symptomatic sinoatrial disease;
- (ii) complete atrioventricular block;
- (iii) symptomatic QT prolongation;
- (iv) an automatic implantable defibrillating system; or
- (v) an anti-tachycardia pacemaker;

shall be assessed as unfit.

### **MED.B.010 Respiratory System**

- (a) Applicants with significant impairment of pulmonary function shall be assessed as unfit. A fit assessment may be considered once pulmonary function has recovered and is satisfactory.
- (b) For a class 1 medical certificate, applicants are required to undertake pulmonary function tests at the initial examination and on clinical indication.
- (c) For a class 2 medical certificate, applicants are required to undertake pulmonary function tests on clinical indication.
- (d) Applicants with a history or established diagnosis of:
  - (1) asthma **requiring medication**;
  - (2) active inflammatory disease of the respiratory system;
  - (3) active sarcoidosis;
  - (4) pneumothorax;
  - (5) sleep apnoea syndrome;
  - (6) major thoracic surgery;
  - (7) pneumonectomy;**

shall undergo respiratory evaluation with a satisfactory result before a fit assessment can be considered. **Applicants with an established diagnosis of the conditions specified in (3) and (5) shall be evaluated by a cardiologist before a fit assessment can be considered.**

**(e) Aero-medical assessment:**

- (1) applicants for a class 1 medical certificate with any of the conditions detailed in (d) above shall be referred to the licensing authority;**
- (2) applicants for a class 2 medical certificate with any of the conditions detailed in (d) above shall be assessed in consultation with the licensing authority.**

(fe) Applicants for a class 1 medical certificate who have undergone a total pneumonectomy shall be assessed as unfit.

**MED.B.015 Digestive System**

- (a) Applicants shall not possess any functional or structural disease of the gastro-intestinal tract or its adnexa which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) Applicants with any sequelae of disease or surgical intervention in any part of the digestive tract or its adnexa likely to cause incapacitation in flight, in particular any obstruction due to stricture or compression shall be assessed as unfit.
- (c) Applicants shall be free from herniae that might give rise to incapacitating symptoms.
- (d) Applicants with disorders of the gastro-intestinal system including:
  - (1) recurrent dyspeptic disorder requiring medication;
  - (2) pancreatitis;
  - (3) symptomatic gallstones;
  - (4) an established diagnosis or history of chronic inflammatory bowel disease; or
  - (5) after surgical operation on the digestive tract or its adnexa, including surgery involving total or partial excision or a diversion of any of these organs;

shall be assessed as unfit. A fit assessment may be considered after successful treatment or full recovery after surgery and subject to satisfactory gastroenterological evaluation.

**(e) Aero-medical assessment:**

- (1) applicants for a class 1 medical certificate with the diagnosis of the conditions specified in (2), (4) and (5) shall be referred to the licensing authority;**
- (2) fitness of class 2 applicants with pancreatitis shall be determined in consultation with the licensing authority.**

**MED.B.020 Metabolic and Endocrine Systems**

- (a) Applicants shall not possess any functional or structural metabolic, nutritional or endocrine disorder which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) Applicants with metabolic, nutritional or endocrine dysfunction may be assessed as fit subject to demonstrated stability of the condition and satisfactory aero-medical evaluation.
- (c) *Diabetes mellitus*
  - (1) Applicants with diabetes **mellitus** requiring insulin shall be assessed as unfit.
  - (2) Applicants with diabetes mellitus not requiring insulin shall be assessed as unfit unless it can be demonstrated that blood sugar control has been achieved.

**(d) Aero-medical assessment:**

- (1) applicants for a class 1 medical certificate requiring medication **for blood sugar control** shall be referred to the licensing authority;
- (2) **fitness of class 2 applicants requiring medication for blood sugar control shall be determined in consultation with the licensing authority.**

**MED.B.025 Haematology**

- (a) Applicants shall not possess any haematological disease which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) For a class 1 medical certificate, haemoglobin shall be tested at each examination for the issue of a medical certificate.
- (c) Applicants with a haematological condition, such as:
  - ~~(1) abnormal haemoglobin, including, but not limited to anaemia, polycythaemia or haemoglobinopathy;~~
  - (1) coagulation, haemorrhagic or thrombotic disorder;
  - ~~(3) significant lymphatic enlargement~~
  - (2) ~~acute or chronic~~ leukaemia;
  - ~~(5) enlargement of the spleen;~~
 may be assessed as fit subject to satisfactory aeromedical evaluation.

**(d) Aero-medical assessment:**

- (1) applicants for a class 1 medical certificate **with one of the conditions specified in (c) above** shall be referred to the licensing authority;
  - (2) **fitness of class 2 applicants with one of the conditions specified in (c) above shall be determined in consultation with the licensing authority.**
- (e) Class 1 applicants with one of the haematological conditions specified below shall be referred to the licensing authority:**
- (1) **abnormal haemoglobin, including, but not limited to anaemia, polycythaemia or haemoglobinopathy;**
  - (2) **significant lymphatic enlargement;**
  - (3) **enlargement of the spleen.**

**MED.B.030 Genitourinary System**

- (a) Applicants shall not possess any functional or structural disease of the renal or genitourinary system or its adnexa which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) Urinalysis shall form part of every aero-medical examination. The urine shall contain no abnormal element considered to be of pathological significance.
- (c) Applicants with any sequela of disease or surgical procedures on the kidneys or the urinary tract likely to cause incapacitation, in particular any obstruction due to stricture or compression shall be assessed as unfit.
- (d) Applicants with a genitourinary disorder, such as:
  - (1) renal disease; or
  - (2) one or more urinary calculi, or a history of renal colic;
 may be assessed as fit subject to satisfactory renal/urological evaluation.

- (e) Applicants who have undergone a major surgical operation in the urinary apparatus involving a total or partial excision or a diversion of its organs shall be assessed as unfit and be re-assessed after full recovery before a fit assessment can be made. In the case of applicants for a class 1 medical certificate, the re-assessment shall be made by the licensing authority. ~~a minimum of three months after the operation.~~

#### MED.B.035 Infectious Disease

- (a) Applicants shall have no established medical history or clinical diagnosis of any infectious disease which is likely to interfere with the safe exercise of the privileges of the applicable licence ~~(s)~~-held.
- (b) Applicants who are HIV positive may be assessed as fit subject to satisfactory aero-medical evaluation. **Applicants for a class 1 medical certificate shall be referred to the licensing authority.**

#### MED.B.040 Obstetrics and Gynaecology

- (a) Applicants shall not possess any functional or structural obstetric or gynaecological condition which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) Applicants who have undergone a major gynaecological operation shall be assessed as unfit ~~for a period of three months or until full recovery.~~
- (c) *Pregnancy*
- (1) In the case of pregnancy, when the AeMC or AME consider that the ~~pilet~~-**licence holder** is fit to exercise their privileges, they shall limit the validity period of the medical certificate to the end of the 26<sup>th</sup> week of gestation. After this point, the certificate shall be suspended. The suspension shall be lifted after full recovery following the end of the pregnancy.
  - (2) Holders of class 1 medical certificates shall only exercise the privileges of their licences until the 26<sup>th</sup> week of gestation with an operational multi-pilot limitation (OML). Notwithstanding MED.A.045 in this case, the OML may be imposed and removed by the AeMC or AME.

#### MED.B.045 Musculoskeletal System

- (a) Applicants shall not possess any abnormality of the bones, joints, muscles or tendons, congenital or acquired which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) An applicant shall have sufficient sitting height, arm and leg length and muscular strength for the safe exercise of the privileges of the applicable licence(s).
- (c) An applicant shall have satisfactory functional use of the musculoskeletal system: **to enable the safe exercise of the privileges of the applicable licence(s). Fitness of the applicants shall be determined in consultation with the licensing authority.**

#### MED.B.050 Psychiatry

- (a) Applicants shall have no established medical history or clinical diagnosis of any psychiatric disease or disability, condition or disorder, acute or chronic, congenital or acquired, which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) Applicants with a mental or behavioural disorder due to alcohol or other substance use shall be assessed as unfit pending recovery and freedom from substance use and subject to satisfactory psychiatric evaluation **after successful treatment**. Applicants for a class



1 medical certificate shall be referred to the licensing authority. **Fitness of class 2 applicants shall be determined in consultation with the licensing authority.**

~~(c) Applicants with an established history or clinical diagnosis of schizophrenia, schizotypal or delusional disorder shall be assessed as unfit.~~

(ec) Applicants with a psychiatric condition such as:

- (1) mood disorder;
- (2) neurotic disorder;
- (3) personality disorder;
- (4) mental or behavioural disorder;

shall undergo satisfactory psychiatric evaluation before a fit assessment can be made.

~~Applicants for a class 1 medical certificate shall be referred to the licensing authority.~~

(ed) Applicants with a history of a single or repeated acts of deliberate self-harm shall be assessed as unfit. Applicants shall undergo satisfactory psychiatric evaluation before a fit assessment can be considered.

~~Applicants for a class 1 medical certificate shall be referred to the licensing authority.~~

(e) **Aero-medical assessment:**

- (1) **applicants for a class 1 medical certificate with one of the conditions detailed in (b), (c) or (d) above shall be referred to the licensing authority;**
- (2) **fitness of class 2 applicants with one of the conditions detailed in (b), (c) or (d) above shall be determined in consultation with the licensing authority.**

(ef) **Applicants with an established history or clinical diagnosis of schizophrenia, schizotypal or delusional disorder shall be assessed as unfit.**

#### **MED.B.055 Psychology**

- (a) Applicants shall have no established psychological deficiencies, which are likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) A psychological evaluation may be required as part of, or complementary to, a specialist psychiatric or neurological examination.

#### **MED.B.060 Neurology**

- (a) Applicants shall have no established medical history or clinical diagnosis of any neurological condition which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) Applicants with an established history or clinical diagnosis of:
  - (1) epilepsy;
  - (2) recurring episodes of disturbance of consciousness of uncertain cause;
 shall be assessed as unfit.
- (c) Applicants with an established history or clinical diagnosis of:
  - (1) epilepsy without recurrence after age 5; ~~and without~~
  - (2) epilepsy without recurrence and off all treatment for more than 10 years;**
  - ~~(3)~~ epileptiform EEG abnormalities and focal slow waves;
  - ~~(4)~~ progressive or non-progressive disease of the nervous system;

- (54) a single episode of disturbance of consciousness of uncertain cause;
- (65) loss of consciousness after head injury;
- (76) penetrating brain injury;
- (87) spinal or peripheral nerve injury;

shall undergo further evaluation before a fit assessment can be considered. Applicants for a class 1 medical certificate shall be referred to the licensing authority. **Fitness of class 2 applicants shall be determined in consultation with the licensing authority.**

#### MED.B.065 Visual System

- (a) Applicants shall not possess any abnormality of the function of the eyes or their adnexa or any active pathological condition, congenital or acquired, acute or chronic, or any sequelae of eye surgery or trauma, which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) *Examination*
  - (1) For a class 1 medical certificate:
    - (i) a comprehensive eye examination shall form part of the initial examination and be undertaken periodically depending on the refraction and the functional performance of the eye; and
    - (ii) a routine eye examination shall form part of all revalidation and renewal examinations.
  - (2) For a class 2 medical certificate:
    - (i) a routine eye examination shall form part of the initial and all revalidation and renewal examinations; and
    - (ii) ~~an extended~~ **comprehensive** eye examination shall be undertaken when clinically indicated.
- (c) Distant visual acuity, with or without correction, shall be:
  - (1) In the case of class 1 medical certificates, 6/9 or better in each eye separately and visual acuity with both eyes shall be 6/6 or better;
  - (2) In the case of class 2 medical certificates, 6/12 or better in each eye separately and visual acuity with both eyes shall be 6/9 or better. An applicant with substandard vision in one eye may be assessed as fit **in consultation with the licensing authority** subject to satisfactory ophthalmic assessment;
  - (3) Applicants for an initial class 1 medical certificate with substandard vision in one eye shall be assessed as unfit. At revalidation, applicants with acquired substandard vision in one eye ~~may~~ **shall be referred to the licensing authority and may** be assessed as fit if it is unlikely to interfere with safe exercise of the licence held.
- (d) An applicant shall be able to read an N5 chart (or equivalent) at 30-50cms and an N14 chart (or equivalent) at 100cms, with correction, if prescribed.
- (e) ~~Applicants~~ Applicants for a class 1 medical certificate shall be required to have normal fields of vision and normal binocular function.
- (f) Applicants who have undergone ~~refractive~~ **eye** surgery may be assessed as fit subject to satisfactory ophthalmic evaluation.
- (g) Applicants ~~for class 1 medical certificate~~ with a clinical diagnosis of keratoconus may be assessed as fit subject to a satisfactory examination by an ophthalmologist. **Applicants for a class 1 medical certificate shall be referred to the licensing authority.**
- (h) Applicants with:

- (1) astigmatism; or
- (2) anisometropia;

may be assessed as fit subject to satisfactory ophthalmic evaluation.

- (i) Applicants with diplopia shall be assessed as unfit.
- (j) *Spectacles and contact lenses.* If satisfactory visual function is achieved only with the use of correction:
  - (1) **(i) for distant vision,** spectacles or contact lenses shall be worn whilst exercising the privileges of the applicable licence(s);
    - (ii) for near vision, a pair of spectacles for near use shall be kept available during the exercise of the privileges of the licence;**
  - (2) a spare set of similarly correcting spectacles shall be readily available for immediate use whilst exercising the privileges of the applicable licence(s);
  - (3) the correction shall provide optimal visual function, be well-tolerated and suitable for aviation purposes;
  - (4) if contact lenses are worn, they shall be for distant vision, monofocal, non-tinted and well tolerated;
  - (5) applicants with a large refractive error shall use contact lenses or high-index spectacle lenses;
  - (6) no more than one pair of spectacles shall be used to meet the visual requirements;
  - (7) ~~Orthokeratologic~~**orthokeratological** lenses shall not be used.

#### **MED.B.070 Colour vision**

- (a) Applicants shall be required to demonstrate the ability to perceive readily the colours that are necessary for the safe performance of duties.
- (b) *Examination*
  - (1) Applicants shall pass the Ishihara test for the initial issue of a medical certificate.
  - (2) Applicants who fail to obtain a satisfactory result in the Ishihara test shall undergo further-colour perception testing to establish whether they are colour safe.
- (c) In the case of class 1 medical certificates, applicants shall have normal perception of colours or be colour safe. Applicants who fail further colour perception testing shall be assessed as unfit. **Applicants for a class 1 medical certificate shall be referred to the licensing authority.**
- (d) In the case of class 2 medical certificates, when the applicant does not have satisfactory perception of colours, their flying privileges shall be limited to daytime only.

#### **MED.B.075 Otorhino-laryngology**

- (a) Applicants shall not possess any abnormality of the function of the ears, nose, sinuses or throat, including oral cavity, teeth and larynx, or any active pathological condition, congenital or acquired, acute or chronic, or any sequelae of surgery or trauma which is likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) Hearing shall be satisfactory for the safe exercise of the privileges of the applicable licence(s).
- (c) *Examination*
  - (1) Hearing shall be tested at all examinations.

- (i) In the case of class 1 medical certificates, and class 2 medical certificates, when an instrument rating is to be added to the licence held, hearing shall be tested with pure tone audiometry at the initial examination and, at subsequent revalidation or renewal examinations, every five years until the age 40 and every two years thereafter.
  - (ii) When tested on a pure-tone audiometer, initial applicants shall not have a hearing loss of more than 35 dB at any of the frequencies 500, 1 000 or 2 000 Hz, or more than 50 dB at 3 000 Hz, in either ear separately. Applicants for revalidation or renewal, with greater hearing loss shall demonstrate satisfactory functional hearing ability.
  - (iii) Applicants with hypoacusis shall demonstrate satisfactory functional hearing ability.
- (2) A comprehensive ear, nose and throat examination shall be undertaken for the initial issue of a class 1 medical certificate and periodically thereafter when clinically indicated.
- (d) Applicants for a class 1 medical certificate with:
- (1) an active pathological process, acute or chronic, of the internal or middle ear;
  - (2) unhealed perforation or dysfunction of the tympanic membrane(s);
  - (3) disturbance of vestibular function;
  - (4) significant restriction of the nasal passages;
  - (5) sinus dysfunction;
  - (6) significant malformation or significant, acute or chronic infection of the oral cavity or upper respiratory tract; or
  - (7) significant disorder of speech or voice;
- shall undergo further medical examination and assessment to establish that the condition does not interfere with the safe exercise of the privileges of the licence held.
- (e) **Aero-medical assessment:**
- (1) **applicants for a class 1 medical certificate with the disturbance of vestibular function shall be referred to the licensing authority;**
  - (2) **fitness of class 2 applicants with the disturbance of vestibular function shall be determined in consultation with the licensing authority.**

#### **MED.B.080 Dermatology**

Applicants shall have no established dermatological condition likely to interfere with the safe exercise of the privileges of the applicable licence(s) held.

#### **MED.B.085 Oncology**

- (a) Applicants shall have no established primary or secondary malignant disease likely to interfere with the safe exercise of the privileges of the applicable licence(s).
- (b) After treatment for malignant disease, applicants shall undergo satisfactory oncological evaluation before a fit assessment can be made. Class 1 applicants shall be referred to the licensing authority. **Fitness of class 2 applicants shall be determined in consultation with the licensing authority.**
- (c) Applicants with an established history or clinical diagnosis of intracerebral malignant tumour shall be assessed as unfit.

### Section 3

#### Specific requirements LPL medical certificates

##### **MED.B.090 Medical examination of applicants for LPL medical certificates**

~~Aeromedical examination and assessment of applicants for a LPL medical certificate shall consist at least of the following:~~

- ~~—— (1) — evaluation of their medical history;~~
- ~~—— (2) — examination of vision;~~
- ~~—— (3) — urine test;~~
- ~~—— (4) — blood pressure test;~~
- ~~—— (5) — whispered voice test;~~
- ~~—— (6) — examination of musculoskeletal system.~~

- (a) An applicant for a LAPL medical certificate shall be assessed based on aero-medical best practice.**
- (b) Special attention shall be given to the applicant's complete medical history.**
- (c) The aero-medical examination shall include at least the following:**
  - (1) clinical examination;**
  - (2) blood pressure;**
  - (3) urine test;**
  - (4) vision;**
  - (5) hearing ability.**
- (d) Notwithstanding (c), after the first issue of a LAPL medical certificate the aero-medical examinations until the age of 50 can be reduced with due regard to the evaluation of the applicant's medical history.**

## Subpart C

### AERO-MEDICAL EXAMINERS (AMEs)

#### MED.C.001 Privileges

- (a) The privileges of an AME are to issue, revalidate and renew class 2 medical certificates and LAPL medical certificates, and **to** conduct the relevant medical examinations and assessments.
- (b) Holders of an AME certificate may apply for an extension of their privileges to include medical examinations ~~(i)——~~for the revalidation and renewal of class 1 medical certificates, when they comply with the requirements in paragraph MED.C.015. ~~and~~  
~~(ii)——~~
- (c) The scope of the privileges of the AME, and any condition thereof, shall be specified in the certificate.
- (d) Holders of a certificate as an AME shall not undertake aero-medical examinations and assessments in a Member State other than the Member State that issued their certificate as an AME, unless they have:**
  - (1) been granted access by the host Member State to exercise their professional activities as a specialised doctor;**
  - (2) informed the competent authority of the host Member State of their intention to conduct aero-medical examinations and assessments and to issue medical certificates within the scope of their privileges as AME; and**
  - (3) received a briefing from the competent authority of the host Member State.**

#### MED.C.005 Application

- (a) Application for a certificate as an AME shall be made in a form and manner specified by the competent authority.
- (b) Applicants for an AME certificate shall provide the competent authority with:
  - (1) personal details and professional address;
  - (2) documentation demonstrating that they comply with the requirements established in MED.C.010, including a certificate of completion of the training course in aviation medicine appropriate to the privileges they apply for;
  - (3) a written declaration that the AME will issue medical certificates on the basis of the requirements of this Part and associated Acceptable Means of Compliance (AMC) adopted by the European Aviation Safety Agency (the Agency). ~~If the AME chooses to comply with alternative means of compliance, details shall be submitted with the declaration. The detailed information shall include a safety assessment demonstrating that the alternative means of compliance will achieve the objective set out in the implementing rules and the same level of safety as specified in the AMC adopted by the Agency.~~
- (c) When the AME undertakes aero-medical examinations in more than one location, they shall provide the competent authority with relevant information regarding all practice locations.

#### MED.C.010 Requirements for the issue of an AME certificate

Applicants for an AME certificate **with the privileges for the initial issue, revalidation and renewal of class 2 medical certificates** shall:

- (a) be fully qualified and licensed for the practice of medicine and hold a ~~qualification in general practice or other medical speciality relevant to aeromedical practice;~~ **Certificate of Completion of specialist training;**
- (b) have undertaken a **basic** training course in aviation medicine;
- (c) demonstrate to the competent authority that they:
  - (1) have adequate facilities, **procedures, documentation** and functioning equipment suitable for aero-medical examinations; and
  - (2) have in place the necessary procedures and conditions to ensure medical confidentiality. ~~according to the applicable national legislation.~~

#### **MED.C.015 Requirements for the extension of privileges**

Applicants for **an AME certificate** ~~the extension of~~ **extending** their privileges to **the issue, medical examinations for the revalidation and renewal of class 1 medical certificates shall hold a valid certificate as an AME and** have:

- (a) conducted at least 30 examinations for the issue, revalidation or renewal of class 2 medical certificates **over a period of no more than 5 years preceding the application;**
- (b) undertaken an ~~additional~~ **advanced** training course in aviation medicine; and
- (~~c~~) undergone practical training at an AeMC.

#### **MED.C.020 Training courses in aviation medicine**

- (a) Training courses in aviation medicine shall be approved by the competent authority of the Member State where the organisation providing it has its principal place of business. The organisation providing the course shall demonstrate that the course syllabus is adequate and that the persons in charge of providing the training have adequate knowledge and experience.
- (b) Except in the case of refresher training, the courses shall be concluded by a written examination on the subjects included in the course content.
- (c) The organisation providing the course shall issue a certificate of completion to applicants when they have obtained a pass in the examination.

#### **MED.C.025 Changes to the AME certificate**

- (a) AMEs shall notify the competent authority of the following changes which could affect their certificate:
  - (1) the AME is subject to disciplinary proceedings or investigation by a medical regulatory body;
  - (2) there are any changes to the conditions on which the certificate was granted, including the content of the statements provided with the application;
  - (3) the requirements for the issue are no longer met;
  - (4) there is a change of aero-medical examiner's practice location(s) or correspondence address.
- (b) Failure to inform the competent authority shall result in the suspension or revocation of the privileges of the authorisation.

#### **MED.C.030 Validity of AME certificates**

An AME certificate shall be issued for ~~an unlimited duration~~ **a period not exceeding 3 years.** It shall ~~remain valid~~ **be revalidated** subject to the holder:

- (a) continuing to fulfil the general conditions required for medical practice and maintaining registration as a medical practitioner according to national law;
- (b) undertaking a refresher training course in aviation medicine within the last 3 years;
- (c) having performed at least 10 medical examinations every year;
- (d) remaining in compliance with the terms of their authorisation; and
- (e) exercising their privileges in accordance with this Part.



**Subpart D**  
**GENERAL MEDICAL PRACTITIONERS (GMPs)**

**MED.D.001 Requirements for general medical practitioners**

- (a) **GMPs shall act as AMEs for issuing LAPL medical certificates only if exercising their activity in a Member State where the GMP has appropriate access to the full medical records of pilots.**
- (b) In order to issue LAPL medical certificates, general medical practitioners (GMP) shall be fully qualified and licensed for the practice of medicine in accordance with applicable national rules, and
- (a1) have completed postgraduate training in general medical practice; ~~or any speciality relevant to aeromedical practice; or~~ **and**
- (b2) have completed ~~a~~ **acquired knowledge** ~~a~~ training course in aviation medicine; ~~and have either~~ **or**:
- ~~1i) 1 year full-time, or part-time equivalent, experience in practicing a medical speciality relevant to aeromedical practice; or~~
- ~~—(23ii)~~ hold, or have held a pilot's licence for any kind of ~~light~~ aircraft.
- (ce) **GMPs acting as AMEs shall** declare their activity to the competent authority

**SUBPART E<sup>1</sup>****REQUIREMENTS FOR MEDICAL FITNESS OF CABIN CREW****SECTION 1****GENERAL REQUIREMENTS****MED.E.001 General requirements**

Cabin crew members shall only perform the duties and responsibilities required by aviation safety rules on an aircraft when they have been assessed medically fit in accordance with the requirements specified in this Subpart as applicable to the type of operations they are assigned to.

**MED.E.005 Aero-medical examinations and assessments**

- (a) Cabin crew members shall undergo aero-medical examinations and assessments to verify that they are free from any physical or mental illness which might lead to an inability to perform their assigned duties and responsibilities.
- (b) The aero-medical examinations and assessments referred to in (a) shall be conducted according to the medical requirements specified in Section 2 and shall take place before a cabin crew member is first assigned to duties on an aircraft and thereafter at the following intervals:
  - (1) every 60 months until the age of 40;
  - (2) every 24 months between the age of 40 and the age of 50; and
  - (3) every 12 months after the age of 50.
- (c) Aero-medical examinations and assessments shall be conducted:
  - (1) by an AME qualified for the issuance of class 2 medical certificates, or an AeMC; or
  - (2) if the relevant national occupational health system can ensure compliance with (b) by an occupational medical practitioner provided that he/she:
    - (i) is licensed in the practice of medicine and qualified in occupational health in accordance with national law; and
    - (ii) has acquired knowledge in aviation medicine and in the specific training and duties required from cabin crew by aviation safety rules and their operating environment.

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<sup>1</sup> Subpart E is presented here as the clean version of the resulting text (without tracked changes). Tracked changes to the NPA 2009-02e text can be seen in Column A of the related Comment Response Summary Table in CRD 2009-02e (CRD c.4).

**MED.E.010 Suspension of the exercise of duties**

- (a) Cabin crew members shall not perform duties on an aircraft when they have been assessed unfit according to the requirements of this Subpart, and in any of the following situations:
- (1) after a surgical operation or invasive procedure;
  - (2) after any significant personal injury involving incapacity to function as a cabin crew member;
  - (3) after any significant illness involving incapacity to function as a cabin crew member;
  - (4) if prescribed to commence the regular use of medication;
  - (5) if pregnant; or
  - (6) if they are aware of any decrease in their medical fitness which might render them unable to perform their duties and responsibilities.
- (b) In the cases listed (1) to (6), cabin crew members shall without undue delay seek the advice of an AME, or AeMC, or occupational medical practitioner. The AME, AeMC or occupational medical practitioner shall assess the medical fitness of the cabin crew members and decide whether they are fit to resume the exercise of their duties.

**MED.E.015 Additional requirements for applicants for, and holders of, a cabin crew attestation in commercial air transport operations**

- (a) After completion of each aero-medical examination and assessment, applicants for, and holders of, a cabin crew attestation:
- (1) shall be provided by the AME, the AeMC or the occupational medical practitioner with a medical attestation; and
  - (2) shall provide a copy of the medical attestation, or the related information, to the operator(s) employing their services.
- (b) *Medical attestation*
- A medical attestation shall indicate the outcome of the assessment of the cabin crew member, the date of the next required aero-medical examination and assessment, and any limitation(s) if applicable.
- (c) *Limitations*
- (1) If holders of a cabin crew attestation do not fully comply with the medical requirements specified in Section 2, the AME, AeMC or occupational health practitioner shall consider whether they may be able to perform cabin crew duties safely if complying with one or more limitations.
  - (2) Any limitation(s) to the exercise of the privileges granted by the cabin crew attestation shall be specified on the medical attestation and shall only be removed by an AME or AeMC, or by an occupational medical practitioner in consultation with an AME.
  - (3) Holders of a cabin crew attestation shall only perform duties on an aircraft in accordance with such limitation(s).

- (d) In case of an unfit assessment, holders of a cabin crew attestation shall be informed by the AME, AeMC, or the occupational health practitioner in consultation with an AME, of their right of appeal and that the case shall be referred to the competent authority in accordance with the procedures established for the suspension or revocation of the cabin crew attestation as applicable. In such cases, additional examinations and investigations may be required by the competent authority.

**SECTION 2****SPECIFIC REQUIREMENTS FOR MEDICAL ASSESSMENT OF CABIN CREW****MED.E.020 General requirements**

Cabin crew members shall be free from any:

- (a) abnormality, congenital or acquired;
- (b) active, latent, acute or chronic disease or disability;
- (c) wound, injury or sequelae from operation; and
- (d) effect or side effect of any prescribed or non-prescribed therapeutic, diagnostic or preventive medication taken

that would entail a degree of functional incapacity which might lead to an inability to perform their duties and responsibilities safely.

**MED.E.025 Content of aero-medical examinations and assessments**

- (a) The initial aero-medical examination and assessment shall include at least the following:
  - (1) an evaluation of the applicant's complete medical history;
  - (2) a full clinical examination of the following:
    - (i) Cardiovascular System;
    - (ii) Respiratory System;
    - (iii) Musculoskeletal System;
    - (iv) Otorhino-laryngology;
    - (v) Visual System; and
    - (vi) Colour vision;
  - (3) a clinical assessment of the following:
    - (i) Digestive System;
    - (ii) Metabolic and Endocrine Systems;
    - (iii) Haematology;
    - (iv) Genitourinary System;
    - (v) Infectious Disease;
    - (vi) Obstetrics and Gynaecology;
    - (vii) Psychiatry;
    - (viii) Psychology;
    - (ix) Neurology;
    - (x) Dermatology; and

- (xi) Oncology.
- (b) Each subsequent aero-medical examination and assessment shall include at least the following:
  - (1) an evaluation of medical history;
  - (2) a clinical examination; and
  - (3) in case of any doubt or whenever clinically indicated, any additional medical examinations or investigations considered necessary by the AME, AeMC, or occupational medical practitioner.