

Aeromed.

Case report:

FAA vs EASA

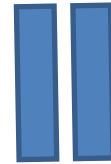
Marin Kamenjašević
HR.AME.26
FAA AME

55 YO German entrepreneur,
has license for multi-engine,
commercial, instrument rating flying

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- FAA 2nd Class medical examination

(A 2nd Class medical is required when flight operations require a Commercial Pilot certificate)



EASA; CPL - Class 1 medical

Medical history

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- Loss of hearing in the right ear- **diving accident**
- 23. 4. 2015. **traffic accident**
- Crashed in a streetlamp with a bicycle
- Emergency transfer to a hospital - GCS 11

Because of the fracture of the transfer processes at the cervical spine with a partial involvement of the intervertebral foramina CT angiography of the neck and the head were added in order to exclude a vertebral artery dissection. A vascular pathology could be excluded. The T8 fracture described in the diagnosis also concerned the posterior margin, which is why in view of the patient's young age surgery was indicated in the form of a possibly temporary fusion of T7 to T9 in order to avoid kyphosis of the thoracic spine in this area by sintering the fracture. The surgery was carried out on 28 April 2015.

Postoperatively Dr. [REDACTED] was transferred to the neurosurgical normal ward thanks to the uneventful course of the surgery. For a further evaluation of the left-sided amaurosis the involved ophthalmologists diagnosed a posttraumatic amaurosis, probably due to a diffuse axonal injury of the left optical nerve in the course of the accident. A probatory intravenous administration of Decortin did not show an essential success. A postoperative CT control showed a regular material layer of the used extraneous material on the level of T9. A supplemented cranial MRI showed bihemispheric lesions of the semioval center with an emphasis on the frontal left (DAI grade I).

Medical history

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- continuous recovery

On 26 May 2015 [REDACTED] was transferred to a further treatment in rehabilitation center (Fachklinik Bad Heilbrunn, Wörnerweg 30, 83670 Bad Heilbrunn) and released on June 10, 2015 as in-patient. The release was originally scheduled until June 26th, 2015. Dr. [REDACTED] was dismissed ahead of time due to fast healing progress.

After neurological rehabilitation Dr. [REDACTED] consulted Prof. Kinner (Robert-Bosch-Hospital, Stuttgart, Germany Head of Orthopedics and trauma surgery) for second opinion regard healing process of fractures and spine state of condition. He recommended further conservative treatment and return to sport activities not before 3 month after accident date.

In June 2015 Dr. [REDACTED] resumed his work as CEO of [REDACTED] on part-time basis. In July 2015 Dr. [REDACTED] went on holiday with his family to Italy and return to full-time work in August 3rd, 2015. On July 24th, Dr. [REDACTED] was found eligible to drive passenger car according to German regulations. Since that date Dr. [REDACTED] is continuously operating as driver of his own company car without any difficulty and adverse events.

Medical history

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Current state:

Dr. [REDACTED] consulted me regarding FAA requirement for current medical state with focus on neurological evaluation.

As mentioned above I have known Dr. [REDACTED] from his early state after his accident as responsible consultant in neuropsychology.

Early tests results in May 2015 demonstrated normal or above normal levels of attention and even high percentage ranks. The results of memory and problem solving tests were also within normal range.

As a consequence, it is not surprising that his cognitive ability today does not limit any activity in his daily personal and professional life, acting as responsible CEO of 25 employees in an innovative automotive development company. Meanwhile Dr. [REDACTED] also has prepared additional patent applications in automotive technology and traveled internationally.

The only remaining symptom of the accident of April 23rd, 2015 consists in posttraumatic left-sided amaurosis.

The EEG of Dec 2nd, 2015 shows normal electric activity without any hints for paroxysmal discharges. There have never been signs or symptoms of epileptic seizures.

The above mentioned cranial MRI was not found necessary to be repeated due to predictable lack of consequences.

In summary the course of healing process was very positive regarding the fact that the main diagnosis was traumatic head injury in form of a diffuse axonal injury grade I according to Graham and Gennarelli criteria (only supratentorial lesions without corpus callosum).

There are no persisting signs of change of personality. The only persisting damage remains in a slightly limited view field due to left-sided amaurosis and compensated spatial perception.

Test results

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Patient:
Datum rođenja: **04.07.1968**
Dob: **55**

Datum pregleda: **20.11.2023**
Program: **Piloti (korisnički prilagođeno)**
Napomena:

Results: "Visual acuity" [Numbers (not masked)]

D	L	Bin	Udaljenost
Pomagalo za vid: Naočale za vid na daljinu Nagib: 0° (D) 0.80 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ⇒ 1.00 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 1.25 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Pomagalo za vid: Naočale za vid na daljinu Nagib: 0° (D) 0.50 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 0.63 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 0.70 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Pomagalo za vid: Naočale za vid na daljinu Nagib: 0° (D) 0.80 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ⇒ 1.00 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 1.25 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	5 m
Pomagalo za vid: Naočale za vid na daljinu Nagib: 0° (D) 0.80 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ⇒ 1.00 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 1.25 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Pomagalo za vid: Naočale za vid na daljinu Nagib: 0° (D) 0.50 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 0.63 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 0.70 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Pomagalo za vid: Naočale za vid na daljinu Nagib: 0° (D) 0.80 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ⇒ 1.00 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 1.25 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	1 m
Pomagalo za vid: bez pomagala za vid Nagib: 0° (D) 0.80 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ⇒ 1.00 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 1.25 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Pomagalo za vid: bez pomagala za vid Nagib: 0° (D) 0.70 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 0.80 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 1.00 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Pomagalo za vid: bez pomagala za vid Nagib: 0° (D) 0.80 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> ⇒ 1.00 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> 1.25 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	40 cm

nije ispitano

viđeno

Nije vidio

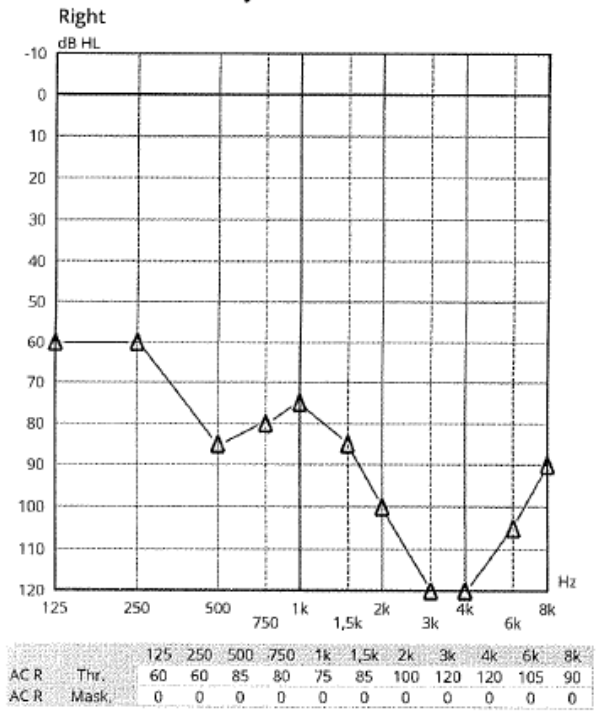
⇒ Result

Test results

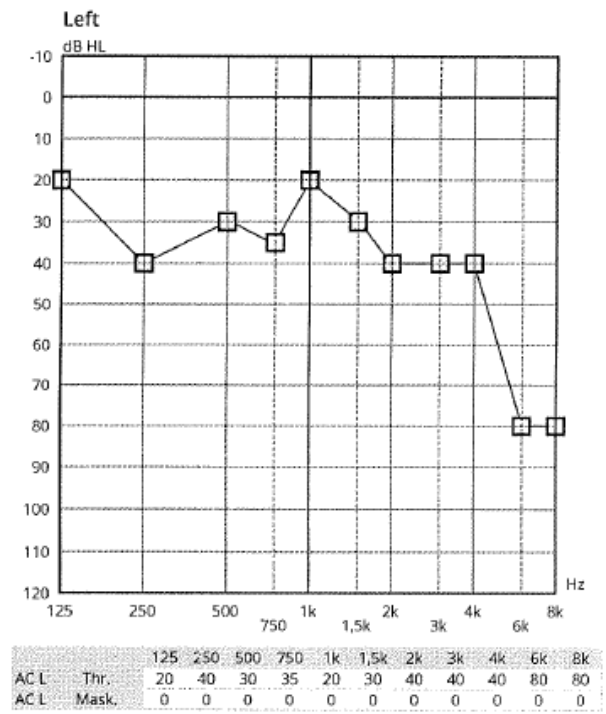


PATIENT: 4.7.1968. (55 years)

1: Pure tone audiometry - 20.11.2023. 11:22 - mr



	R	L	BIL
AC	O	X	⊗
AC Mask	Δ	□	△
UCL	U	U	
BC	<	>	
BC Mask	[]	
FF	⊠	⊡	⊢
FF Mask	⊣	⊤	⊥
FF Aided	A	A	A



Exams Device SN. Extra info
 1 INVENTIS BELL PLUS AU1DB20225085 Device calibration date: 30.3.2023.; AC transducer: DD45

Test results

MEDICINSKO-BIOKEMIJSKI LABORATORIJ

Helena Tanodi, mag. med. biochem.

ZAGREB, Kruga 44, tel. 6062 - 410

e-pošta: mbl.helena.tanodi@gmail.com

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Vrijeme prijema: 20. 11. 2023. 11:35

Vrijeme uzorkovanja: 11:40

Mjesto uzorkovanja:

Vrijeme izdavanja: 20. 11. 2023. 13:04

Vrijeme ispisaa: 20. 11. 2023. 13:26

Liječnik:

KAMENJAŠEVIĆ MARIN

Broj protokola

192

2023112000192

Stranica 1/1

Matični broj: 265788443

Datum rođenja: 4. 9. 1968.

Spol: M

MKB:

Doz: 55/2

Napomena:

Laboratorijska hematologija

Pretraga	Rezultat	Jedinica	Referentni interval
(K) SE	3	mm ³ / 6 Ks	3 - 23
(K) Lkc	8.7	10e9/L	3.4 - 9.7
(K) DKS			
NEU	64.1	%	44.0 - 72.0
LYM	27.6	%	20.0 - 46.0
MONO	5.2	%	2.0 - 12.0
EOS	2.8	%	0.0 - 7.0
BASO	0.3	%	0.0 - 1.0
Stanice :			
(K) Erc	4.59	10e12/L	4.34 - 5.72
(K) Hb	156	g/L	138 - 175
(K) Htc	0.449	L/L	0.415 - 0.530
MCV	98.0	fL	83.0 - 97.2
MCH	33.9	pg	27.4 - 33.9
MCHC	347	g/L	318 - 350
RDW	11.8	%	9.0 - 15.0
Morf.pr.		makro	
(K) MPV	9.6	fL	6.8 - 10.4
(K) Trc	240	10e9/L	158 - 424

Medicinska biokemija

Pretraga	Rezultat	Jedinica	Referentni interval
(S) Glukoza	6.8	mmol/L	4.4 - 6.4
(S) HDL kolesterol	1.28	mmol/L	> 1.00
(S) LDL kolesterol	4.2	mmol/L	< 3.0
(S) Kolesterol	6.3	mmol/L	prepor. < 5.0
(S) Trigliceridi	1.9	mmol/L	prepor. < 1.7
(S) GGT	62	U/L	11 - 55

Analiza mokraće

Pretraga	Rezultat	Jedinica	Referentni interval
(U) URIN			
Izgled	bistar		bistar
Boja	svijetlo žuta		svijetlo žuta
Glukoza	0	mmol/L	< 0.8
Bi irubin	0	umol/L	0
Acet. tvari	0	mmol/L	< 0.5
Spec. tež	1.010	kg/L	1.005 - 1.030
Eritrociti/Hb	0	Erekt.	< 10
Reakcija	5.0	pH Jed.	5.0 - 9.0
Proteini	0	g/L	< 0.2
Urobilinog.	norm	umol/L	< 17
Nizati	0		0
Leukocitna esteraza	0	LeuifL	< 10
Askorbinska kis.	0	mmol/L	< 3.4
(U) SEDIMENT			
Leukociti	0	brčest./v.p.	0-2 (x400)
Eritrociti	0	brčest./v.p.	0-2 (x400)
Stanice ploč. epitela	0	brčest./v.p.	0-1 (x400)
Male epitelne stanice	0	brčest./v.p.	0-1 (x400)
Bakterije	rijetko	brčest./v.p.	0/neg (x400)
H jalini cilindri	0	brčest./v.p.	0-1 (x400)
Sluz	rijetko	brčest./v.p.	0/neg (x400)

Kvalitetu kontrolira: 1. HKMB – kroz stručni nadzor

2. HOMBLM – CRODALM vanjska procjena kvalitete.
3. EIO-RAD - EQAS međunarodna kontrola kvalitete

EASA:

(b) Visual acuity

(1) For a class 1 medical certificate:

- (i) Distant visual acuity, with or without correction, shall be 6/9 (0,7) or better in each eye separately and visual acuity with both eyes shall be 6/6 (1,0) or better.
- (ii) At the initial examination, applicants with substandard vision in one eye shall be assessed as unfit.

(e) Visual fields

Applicants for a class 1 medical certificate shall be assessed as unfit, where they do not have normal fields of vision and that medical condition is likely to jeopardise the safe exercise of the privileges of the license, taking account of any appropriate corrective measures where relevant.

FAA:

Medical Certificate Pilot Type	First-Class Airline Transport Pilot	Second-Class Commercial Pilot	Third-Class Private Pilot
Distant Vision	20/20 or better in each eye separately, with or without correction.		20/40 or better in each eye separately, with or without correction.
Near Vision	20/40 or better in each eye separately (Snellen equivalent), with or without correction, as measured at 16 inches.		
Intermediate Vision	20/40 or better in each eye separately (Snellen equivalent), with or without correction at age 50 and over, as measured at 32 inches.		No requirement.

EASA:



- (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.

FAA:

Sound Levels:

Ear Condition	500 Hz	1,000 Hz	2,000 Hz	3,000 Hz
Better Ear	35 dB	30 dB	30 dB	40 dB
Worst Ear	35 dB	50 dB	50 dB	60 dB

Conclusion?

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- EASA: unknown if he had class 1 medical, after 8 years (2015-2023), **initial examination** required – **unfit**
 - FAA: potential epilepsy was a problem;
 - D. Any applicant eligible for a medical certificate through special issuance under these guidelines must pass a MFT, which may be arranged through the appropriate agency medical authority.
 - B. An applicant who does not meet the vision standards or has an ocular muscle balance problem will require either a SODA or Special Issuance (SI) to cover the extent of the visual acuity defect.
 - 1. Special Issuance of Medical Certificates. Applicants who do not meet the auditory standards may be found eligible for a [SODA](#). An applicant seeking a SODA must make the request in writing to the Aerospace Medicine Certification Division, AAM-300. A determination of qualifications will be made on the basis of a special medical examination by an ENT consultant, a MFT, or operational experience.
- Medical flight test**
- **deferred** to FAA, unofficially: **issuance** is certain