



DW109564-0

No. 2/2006

A brief update from the Civil Aviation Authority Central Medical Unit

16 February 2006

S27C(3): Medical Practitioner obligations

All NZ medical practitioners, not just Medical Examiners, have an obligation to advise CAA concerning any licence holder who has a medical condition that may interfere with aviation safety. This obligation is contained within section 27C(3) of the Civil Aviation Act 1990 and is one example of a statutory reporting requirement that over-rides the medical confidentiality requirements of the Health Information Privacy Code 1994.

CAA has recently written to all DHBs seeking for all their medical staff to be reminded of their obligations, and has been working with various GP organisations in an effort to also heighten GP awareness.

One important aspect of CAA's advice to these medical practitioners has been "If you're uncertain then you should consult someone with more expertise on aviation medical matters". Although many DHBs and private practitioners have been liaising directly with the CAA Central Medical Unit some have been working with local MEs.

In an effort to assist these medical practitioner colleagues the CAA has developed a pair of Medical Information Sheets. MIS002¹, *Medical Practitioner Obligations*, is aimed at medical practitioners while MIS002a², *Your Doctor Must Advise the CAA*, is intended for pilots and air traffic controllers. Both of these MIS documents can now be downloaded, as PDF files, from the medical section of the CAA website.

From the literature: Pilot Longevity

A recent online debate³, concerning the longevity (or otherwise) of professional pilots, has drawn our attention to the 1995 FAA report of a study into retired airline pilot longevity⁴.

The abstract of this report finishes with "The

authors concluded that the question of lowered life expectancy for airline cockpit crews was not supported by the results of this particular data set."

Aircraft Accident Report: CAA 04/3396

The CAA recently published their report into the 23 October 2004 fatal accident of Cessna A188 Agwagon ZK-CSM in the North Canterbury area.

The accident investigation report⁵ concluded that "There were indications that the pilot suffered an incapacitating cardiac event during take-off" and "The pilot held a Class 1 medical certificate, the validity of which may have been compromised by information provided to support the current medical assessment".

For argument's sake

Another of the many fallacious arguments applied in debate is called *poisoning the well*⁶.

At its crudest this fallacy consists of making unpleasant remarks about anyone who might disagree with a chosen position. Such a construction is a setup for any willing victim who steps forward to dispute the well poisoner's position.

Poisoning the well: "Everyone except an idiot knows that medical certification is a waste of time and money and does not contribute to safety in any way."

Poisoning the well is actually a highly specialised version of the *ad hominem* abusive⁷. Instead of insulting the arguer in the hope that the audience will be led to reject his argument, the well poisoner sets up the insult in advance for anyone who might choose to argue.

Dr Pirie's advice is that:

The most attractive feature of *poisoning the well* is that the opposition is discredited before they have uttered a single word.

CAA Medical Help

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¹ MIS002 <u>Medical Practitioner Obligations</u>.

² MIS002a <u>Your Doctor Must Advise the CAA</u>.

³ Aeromed-list, internet aviation medicine mailing list. <u>http://aeromedical.org</u> => Mailing Lists.

⁴ FAA aerospace medicine technical report 95/5: Longevity and Survival Analysis for a Cohort of Retired Airline Pilots.

⁵ CAA aircraft accident report: <u>Occurrence number 04/3396</u>, Cessna 188, ZK-CSM, Omihi Station, 23 October 2004.

⁶ Pirie, M. Book of the Fallacy: A Training Manual for Intellectual Subversives. Routledge & Kegan Paul Books Ltd (1985).

⁷ "<u>Update ME</u>" newsletter 3/2005, 15 March 2005.