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Francisco Rios Tejada AESA Chief Medical Officer AESA Medical Assesors: F. Torrero, A. Rodríguez, D. Perez-Chao, P. Guillén

Disclaimer

Disclaimer Information

- 6th European Congress of Aerospace Medicine.
- I have no financial relationships to disclose.
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- This presentation are intended for information purposes only, and should not necessarily reflect the opinion of AESA nor EASA.



Introduction

- EASA establishes standarization inspections annual or multianual in order to take into account emerging risks stemming from its continous monitoring activities.
- National Authorities must maintain and update, the information collected from the comprehensive and focus inspections for the purpose of adequate monitoring, provide corrective actions and evidence of implementation of the agreed corrective actions.



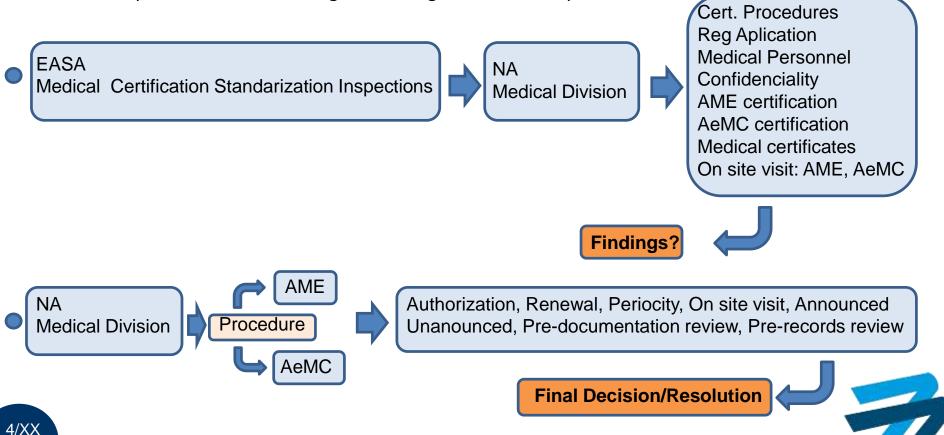


Introduction

OVERSIGHT

This approach entails four major components:

- Collect information
- Analyse and prioritise
- Act as appropiate and
- Follow up and closure of findings stemming from these inspections.



Introduction

05/07/2018

Most of EASA Member States already developed comercial or selfmade computarized systems to handle the process of issuing or denied medical certificates.

NESA Attentions

Aplicaciones de acceso restripcido (sillo calectivos autorizados) >

Sede Electrónica da AESA Castellano »

Physic principal.

Sede Electronica (Oficina virtual)



List

Close



AVESOs Precedimiento e seguir en casa de comunicación, pur parte de un Cuntralador de Tránsita Aéreo, de dieminución de su capacidad finica a prispica. Según lo establecido en el pueto II.4 de la Disposición Adicional Segunda, del Real Decreto Ley 13/2010, de 3 de diciembre, de actuaciones en el ámbito fiscal

Record management/corrections

License consult

Statistics

AME Management

AME authorization

Documents

Documents

Tech support



Objectives



Analyze the two main roles of National Authorities (NA):

- Need of systems to be able to analyze the Oversight of AME's and AeMC's - collection of data bases, provided by AME's, AeMC's.
 - To establish the adequate interface with the corresponding Aeromedical Authorities.
- Management of medical exams.

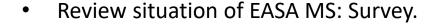
Purpose of analysis → seek two main objectives:

- 1. Evaluation of the health status of the aviation community.
- 2. To assess the number of established deviations of physical results once the mean and threshold baseline has been determined.



Methods

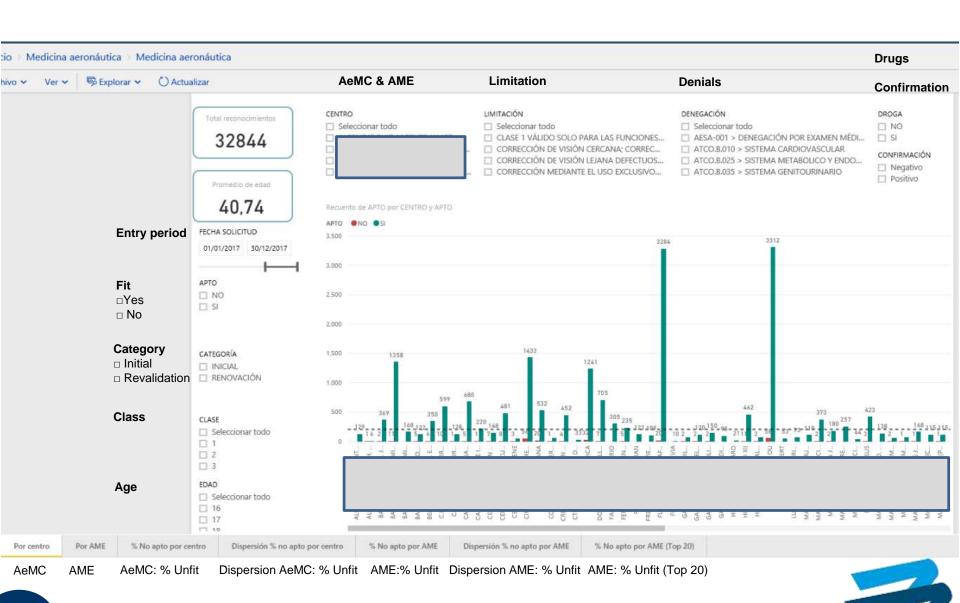
- AESA data base collection of physicals provided by AeMC's and AME's during 2017.
- Analysis by a system so called "Control Panel".







Methods: Control Panel



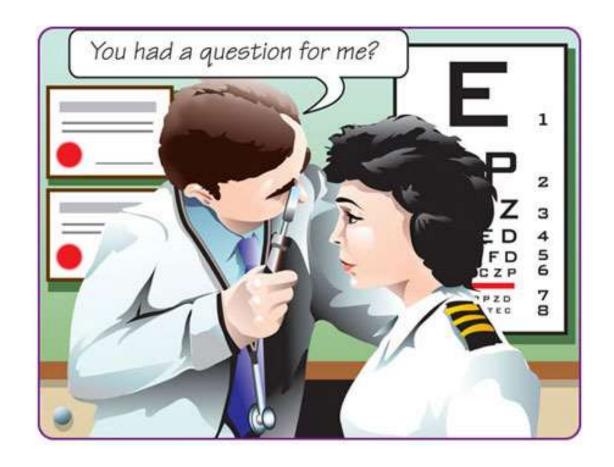
Survey to all EASA MS

- Computer based
- Share data base with AME
- Tech Support
- Documents
- Management of not National Records
- SOLI
- AME performance
- AME referals
- AME list of Referals



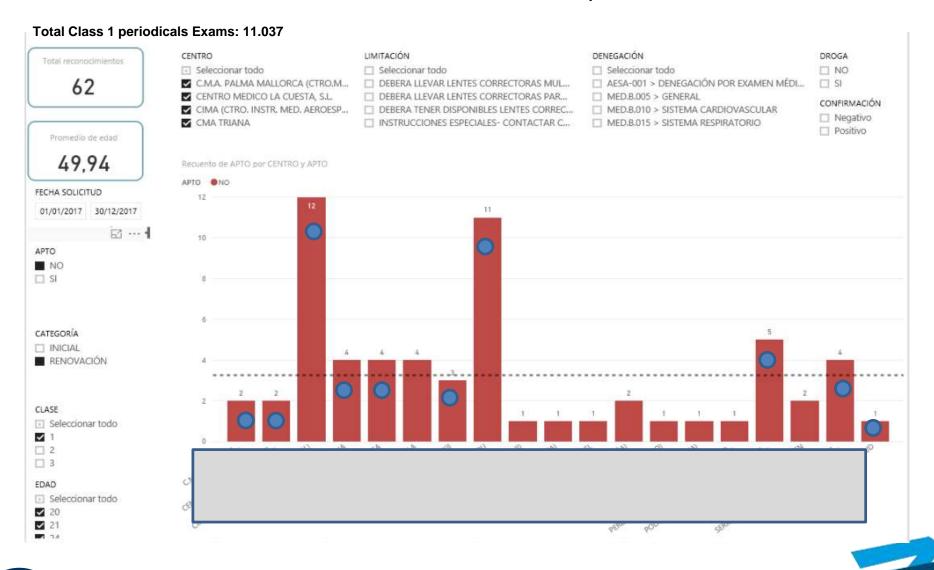


AME: Aeromedical Disposition





Total number of denials: Class 1 periodicals



Results: Cardiovascular

C-V: Not fit to fly, periodical exams





Metabolic & Endocrine System: Not fit to fly, periodical exams.



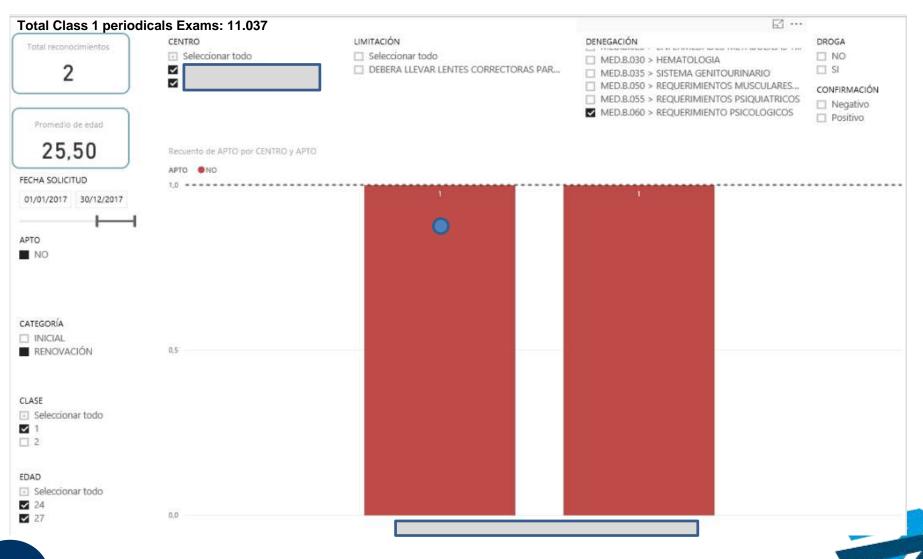
Results: Psychiatry

Psychiatry Not fit to fly, periodical exams.

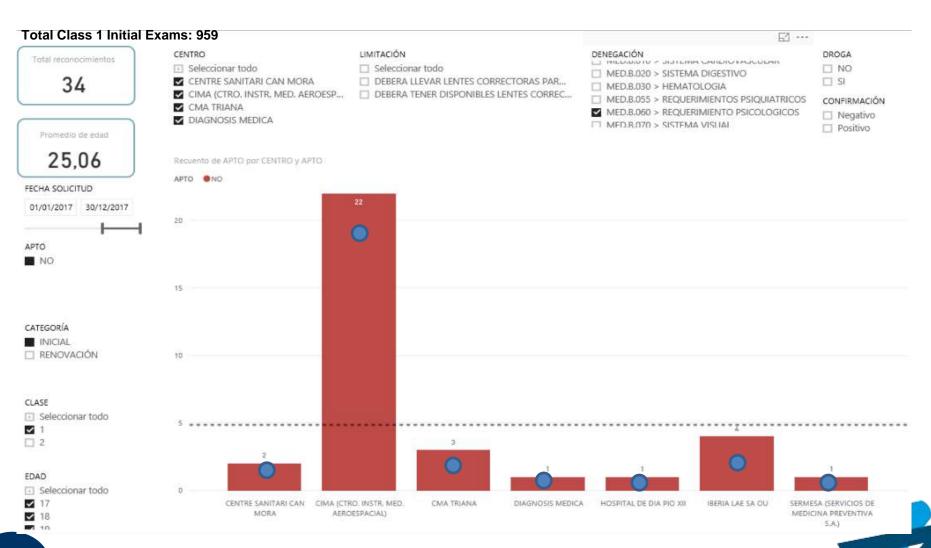




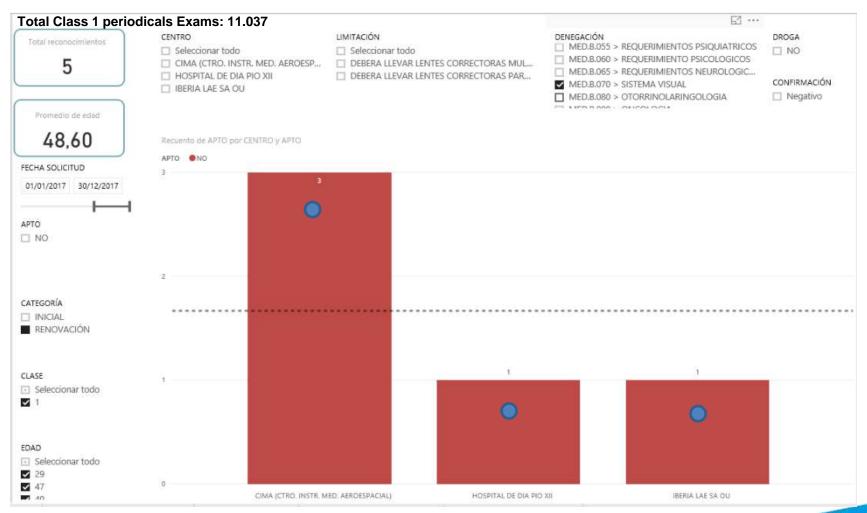
Psychology Not fit to fly, **Periodical exams**.



Psychology Not fit to fly, Initial exams.



Visual System Not fit to fly, **Periodical exams**.

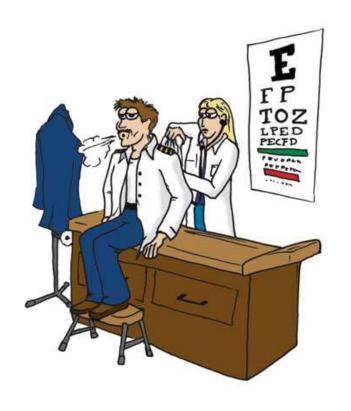


Results: ENT

ENT Not fit to fly, periodical exams.



AME/AeMC: Performance

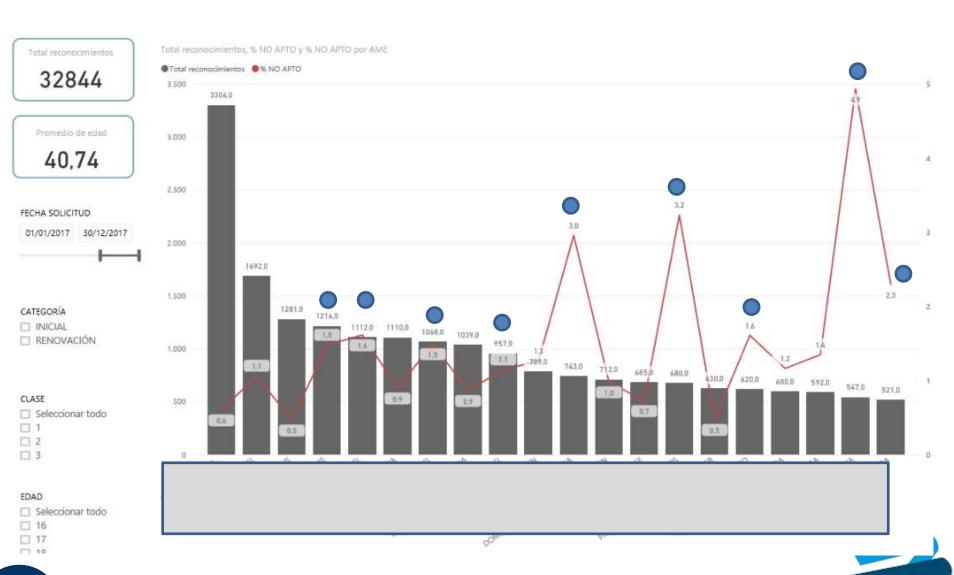




AME AeMC



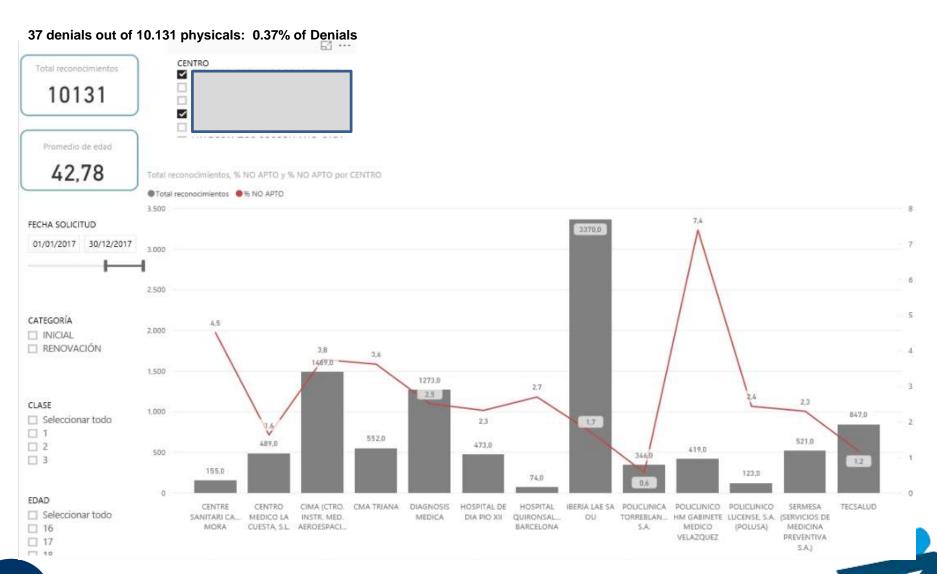
Top 20 by number of physicals: number of physicals against denials



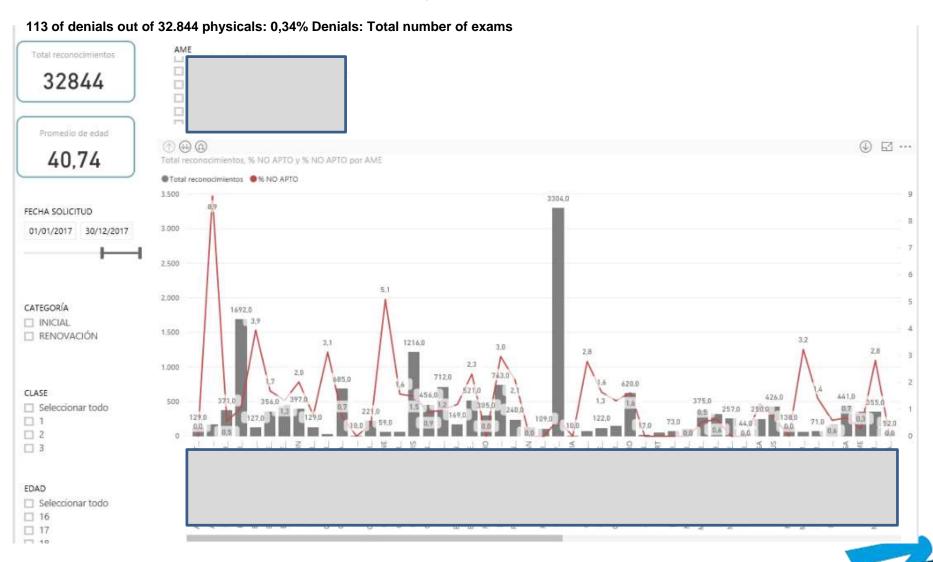
Initial Exams: Fit vs Denials



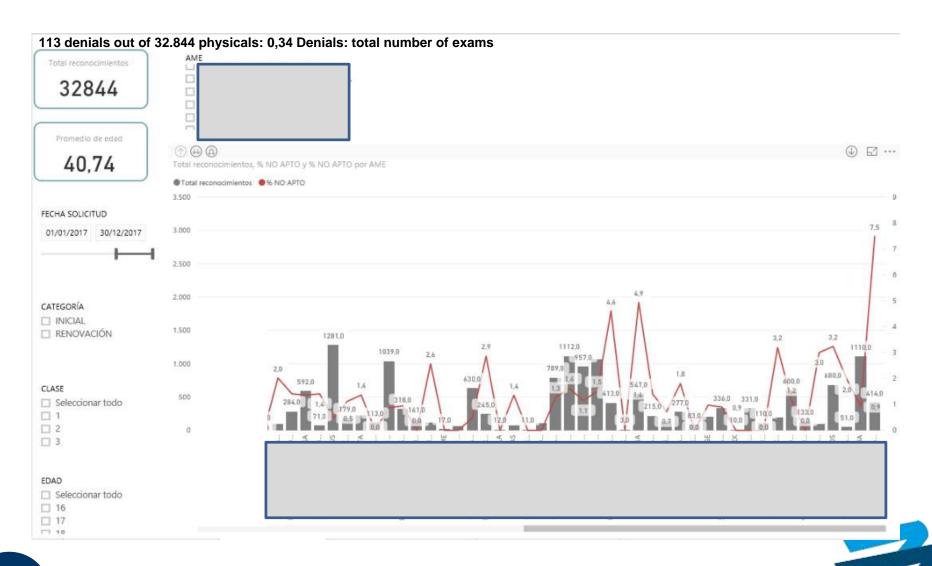
AeMC's: number of physicals vs denials: Class 1



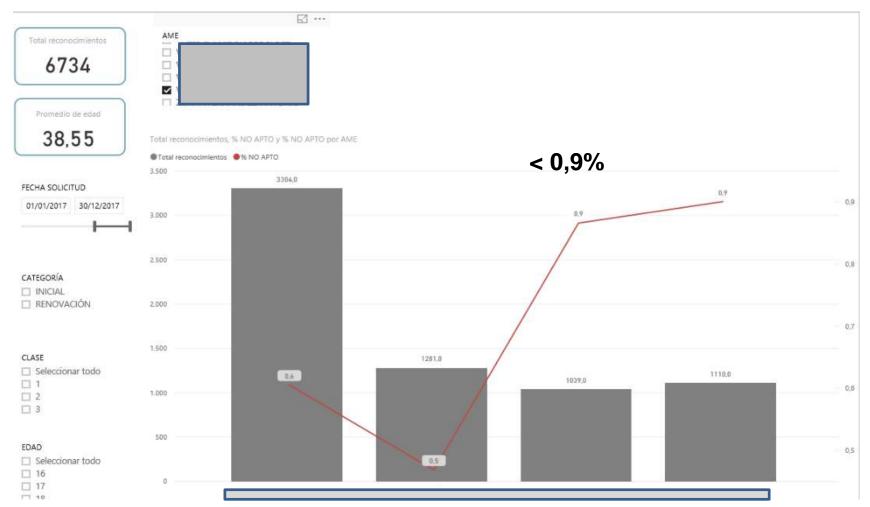
Number of physicals vs denials 1



Number of physicals vs denials 2

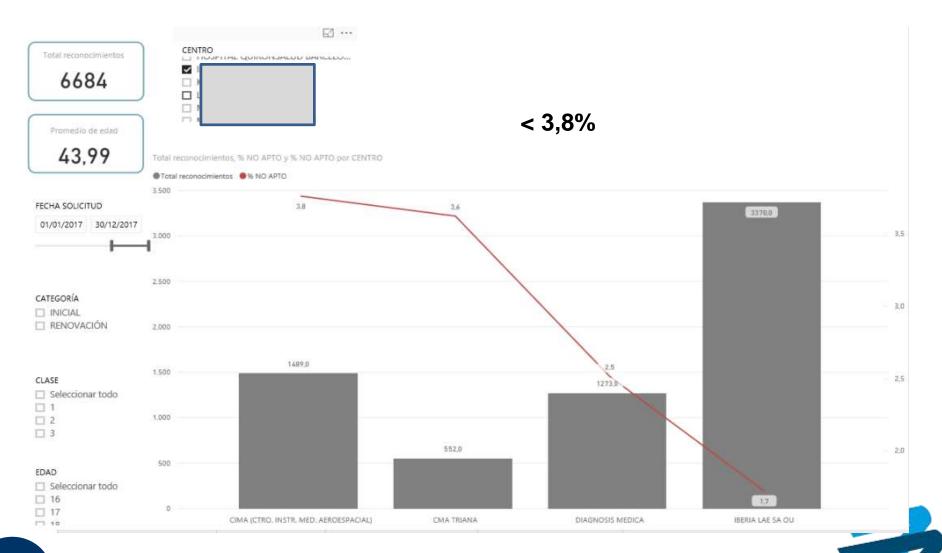


Individual AME performance: Number of physicals vs denials, threshold deviation.





Single AeMC performance: Number of physicals vs denials, threshold deviation.



EASA Member States Aeromedical Management System

Survey distributed to all MS

- 18 answers
- Computer based: 13 (1 set but not working yet)
- Type:
 - Customized: 6
 - EMPIC-MED: 7
- Documents:
 - Application Form + Med. Exam: 13
 - Especialist Report: 11
 - Suspension Form: 8
 - Denied Form: 11
 - Medical Certificate: 14
 - PDF files: 13
 - Historic data: 11
 - Automatic date of AME expiration authorization: 5
- Management of Non National Records: 6
- Management of SOLI: 3
- AME Performance: 10
- AME Referals: 8
- AME list of Referals: 5



Conclusions

1.Oversight:

- Complex process.
- Difficult task by traditional "on site" visit due to number of periodical visits.
- 2. Computer applications for oversight purposes it is a useful tool.
- 3. Identification of potential "customer retention".
- 4. Specialist exam might be a factor for clinical findings.
- 5. Clear deviation of denials towards AeMC's against AME's.
- 6. Most MS do have computer systems applications.
- 7. Just a few MS have full capabilities for computer supported oversight.





Thanks for your Attention

farios@seguridadaerea.es

