ICAO Aviation Medicine

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Introduction to ICAO

 An independent organization (specialized agency) of the United Nations

- Development of Standards, Recommended Practices and guidance material
- Head office in Montreal and 8 regional offices



192 Contracting States



Needs Analysis / Validation

UNITING AVIATION

SARPs & PANS

Global Plans

SARPs, guidance material & implementation support

Assess & Measure

Compliance & Verification

RAIOs

FPPs

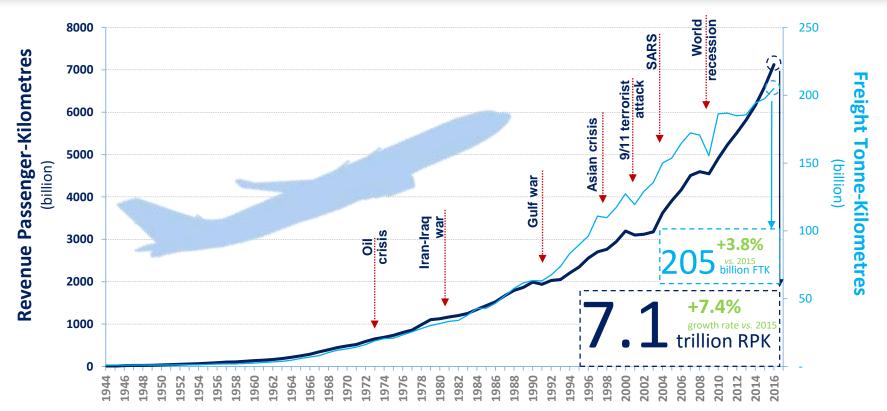


Implementation Planning

IMPLEMENTATION KITS (iKITs)

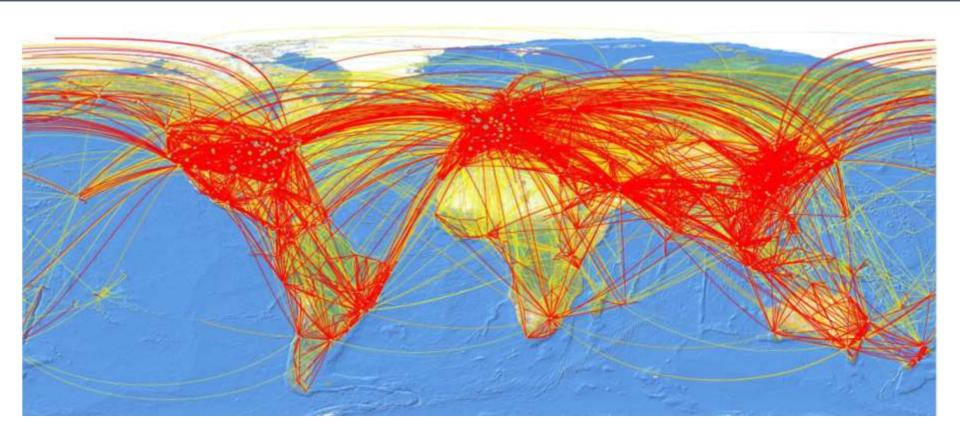
Why we need standards





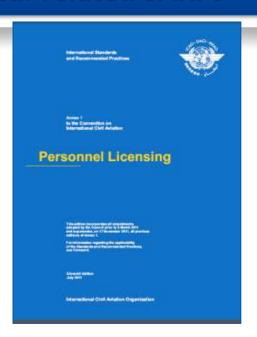


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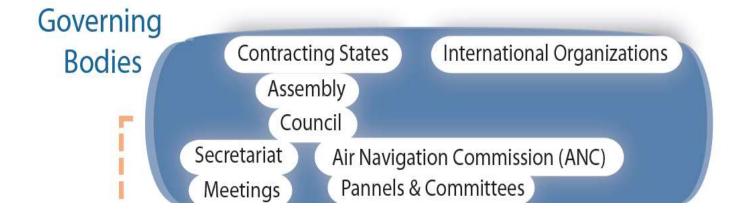


Medical-related SARPs

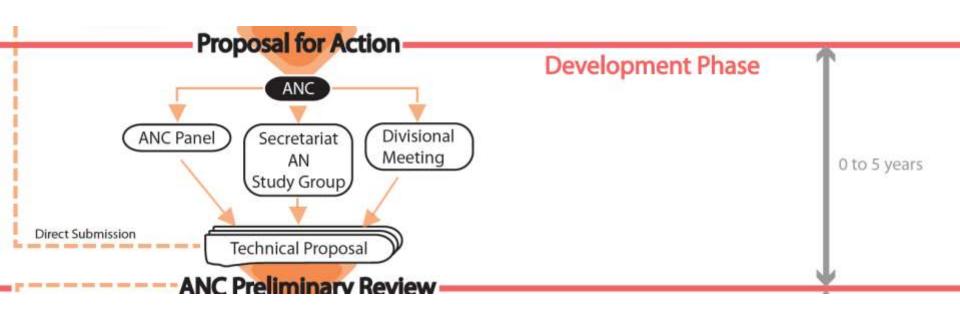
- Annex 1, Personnel Licensing
- Annex 2, Rules of the Air
- Annex 6, Operation of Aircraft
- Annex 9, Facilitation
- Annex 11, Air Traffic Services
- Annex 13, Accident and Incident Investigation
- Annex 14, Aerodromes
- Annex 18, Safe transport of dangerous goods
- Annex 19, Safety Management
- PANS-ATM, Doc 4444, Procedures for Air Navigation Services Air Traffic Management



Regulatory process: proposal origin



Regulatory process: proposal development



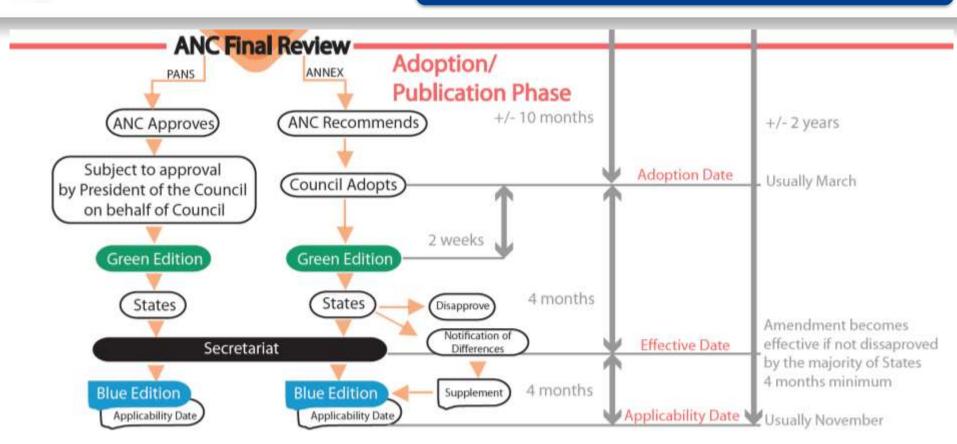
Regulatory process: Preliminary review





UNITING AVIATION Re

Regulatory process: final review & publication



- Standard
 - States will conform/mandatory/necessary
 - Differences are notifiable
- Recommended practice
 - States will endeavour to conform/ desirable
 - Differences not notifiable under convention, but urged to do so by Assembly
- Definitions, tables, figures and appendices in Annexes
 - seen as part to SARPs
 - Thus filing of differences
- Guidance material
 - assist States with implementation, but it is not a requirement for a State to implement

Types of differences

- Category A: A Contracting State's requirement is more exacting or exceeds the SARP
- Category B: A Contracting State's requirement is different in character or other means of compliance
- Category C: A Contracting State's requirement is less protective or partially implemented/not implemented

- Article 1 of the Chicago Convention:
 - every State has complete and exclusive sovereignty over the airspace above its territory
- Article 38 of the Chicago Convention :
 - Any State which finds it impracticable to comply in all respects..., shall give immediate notification to the International Civil Aviation Organization of the differences between its own practice and thatstandard.
 - In the case of amendment..., any State... shall give notice within 60 days... the action which it proposes to take. ... Council shall make immediate notification to all other states of the difference....
- In case a more stringent regulation is adopted, notification to ICAO is compulsory when such regulation is applied also on foreign licence holders and aircraft

Medical SARPs

Rationale for SARPs

- Safety
- Preservation of life/ health
- Operational efficiency & economical sustainability
- Reputation



Intrinsic nature of Aviation Medicine is complex

- Combination of regulatory, clinical & occupational medicine
- Individual crew vs public health & safety
- Combination of technical, environmental & human elements
- Multiple hazards physiological, physical disease, psychological, chemical, environmental, behavioural
- Measurable objective assessment vs subjective assessments



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Challenges in risk assessment & decision making

Individual (Pilot & AME)	Medical system	Aviation system
Individual variability	BasicMed/ GP examination	Operational variability
Unpredictability & life stress	Driver's licence acceptability	UAV/ RPAS/ Drones
	Self-certification	Space
Competency based performance assessments		

Construction and to develop and the development of the second of the sec

Scarce expertise - need to develop new expertise use

New technology













ICAO Med Work Groups



1: Mental Health 2. Alcohol and Substance abuse

3. Colour vision

4. Air Ambulances

5 Human Factors (Age, fatigue, taxonomy)

6. RPAS and UAVs

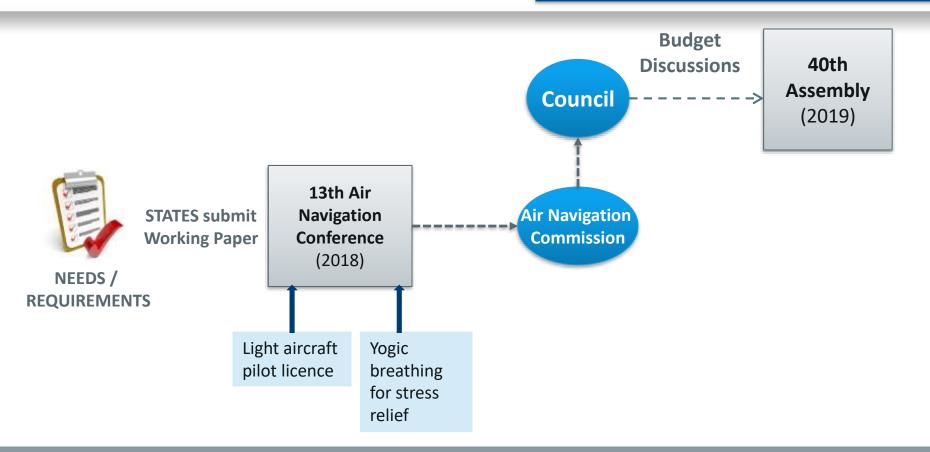
7. CAPSCA/ WHO/ Infectious diseases

Subject Matter Experts Evidence based Geographical representation of States, international organizations and industry participation

Reporting to MPSG



Air Navigation Conference



24 January 2019 17



- Amendment 137 to annex 1
- **Applicable November 2018**
- Data analysis and health promotion
- Guidance material in manual
- Supplemented by the Aviation Medicine website, which will serve as a repository for updated medical information and sharing of best practices - practical examples, tools and supporting material
- Supplemented by book published by ICAO in collaboration with IATA & IFALPA



Aviation Medicine Taxonomy

Current situation

- Lack of standardized aviation medical taxonomy & standardized reporting
- Inadequate accident and incident reporting differentiating medical, physiological, psychological and human performance factors
- Medical confidentiality issues

Desired situation

- Standardized data collection and reporting
- Sharing of data and research internationally

Application of standardized reporting

- Data analysis of medical incapacity and loss of licence
- Health promotion purposes
- Regulatory amendments
- Global harmonization





International Clvil Aviation Organization Organisation de l'avietion civile Internationale

Organizacion de Avisción Civil (réernacional

организнация

+1 514-954-6088

AN 5/22-18/83

Subject: State support for the designated disclosure of specific and limited medical confidential information

Action required: Submit the medical confidentiality survey to ICAO by 20 November 2018

PART B. Accident and incident investigation

Annex 13 to the Chicago Convention concerns aircraft accident and incident investigation. Standard 5.4 therein indicates that an investigation shall normally include a) the gathering, recording and analysis of all relevant information on that accident or incident.

In some States the investigation authority has full access to medical information concerning the flight crew involved in an accident or incident. In contrast, in other States they have no access at all due to medical confidentiality restrictions.

PART A. Reporting of aircrew and other aviation-related personnel with medical conditions or psychiatric conditions that could be hazardous to aviation or public safety

Some States have implemented legal provisions that mandate medical service providers in that State to report flight crew, whom they believe might pose a threat to the safety of themselves or others. Other States have general obligations to report any person whom they believe might pose a threat to the safety of themselves or others. In contrast, there are also States in which medical professionals don't have any such obligation. The following questions aim to get a view on how this is regulated in your State.

