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**GACAR PART 67 – MEDICAL STANDARDS AND CERTIFICATION**

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**SUBPART A – MEDICAL ASSESSMENTS: GENERAL**

**§ 67.1 Applicability.**

This part prescribes the medical standards and certification procedures for issuing medical certificates for airmen and for remaining eligible for a medical certificate.

**§ 67.3 Application.**

(a) An applicant for Class 1, Class 2, or Class 3 medical certification must—

- (1) Apply on a form and in a manner prescribed by the President.
- (2) Be examined by an aviation medical examiner (AME) designated in accordance with General Authority of Civil Aviation Regulation (GACAR) Part 183. An applicant may obtain a list of AMEs from the General Authority of Civil Aviation (GACA).
- (3) Show proof of age and identity.

(b) The applicant for a medical certificate must provide the AME with a personally certified statement of medical facts concerning personal, familial, and hereditary history. The applicant must be made aware of the necessity of giving a statement that is as complete and accurate as the applicant's knowledge permits.

**§ 67.5 Requirements for Medical Assessments.**

(a) A person who meets the medical standards prescribed in this part, based on medical examination and evaluation of the person's history and condition, may receive an appropriate medical certificate.

(b) The AME must report to the GACA medical assessor any case where, in the AME's judgment, an applicant's failure to meet any requirement, whether numerical or otherwise, is such that exercise of the privileges of the certificate being applied for, or held, is not likely to jeopardize safety.

(c) The level of medical fitness required for the renewal of a medical certificate is the same as that for the initial certificate, except where otherwise specifically stated.

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**§ 67.7 Duration and Validity of Medical Certificates.**

(a) Except as provided in § 67.7 (b), a medical certificates issued by GACA remains valid until its expiration date unless suspended, canceled, revoked by GACA.

(b) At the discretion of the GACA medical assessor, the validity of a medical certificate issued by GACA may be extended up to 45 days.

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**SUBPART B – CLASS 1 MEDICAL CERTIFICATION**

**§ 67.15 Eligibility.**

To be eligible and to remain eligible for a Class 1 medical certificate, a person must meet the requirements of this subpart.

**§ 67.17 Eye.**

(a) Eye standards for Class 1 medical certification are as follows:

(1) Distant visual acuity of 6/6 (20/20) or better in each eye separately, with or without corrective lenses. If corrective lenses (spectacles or contact lenses) are necessary for 6/6 (20/20) vision, the person may be eligible only on the condition that corrective lenses are worn while exercising the privileges of an airman certificate.

(2) Near vision of 6/12 (20/40) or better, Snellen equivalent, at 41 cm (16 in) in each eye separately, with or without corrective lenses. If age 50 or older, near vision of 6/12 (20/40) or better, Snellen equivalent, at both 41 cm (16 in) and 81 cm (32 in) in each eye separately, with or without corrective lenses.

(i) If an applicant requires near-correction, a second pair of corrective lenses must be kept available for immediate use.

(ii) If an applicant requires both distant and near vision correction the applicant must demonstrate that one pair of corrective lenses is sufficient to meet both distant and near visual requirements.

(3) Ability to perceive those colors necessary for the safe performance of airman duties.

(4) Normal fields of vision.

(5) No acute or chronic pathological condition of either eye or adnexa that interferes with the proper function of an eye, that may reasonably be expected to progress to that degree, or that may reasonably be expected to be aggravated by flying.

(6) Bifoveal fixation and vergence-phoria relationship sufficient to prevent a break in fusion under conditions that may reasonably be expected to occur in performing airman duties. Tests

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for the factors named in this paragraph are not required except for persons found to have more than one prism diopter of hyperphoria, six prism diopters of esophoria, or six prism diopters of exophoria. If any of these values are exceeded, the GACA medical assessor may require the person to be examined by a qualified eye specialist to determine whether there is bifoveal fixation and an adequate vergence-phoria relationship. However, if otherwise eligible, the person is issued a medical certificate pending the results of the examination.

(b) Visual acuity tests must be conducted in an environment with a level of illumination that corresponds to ordinary office illumination (30–60 cd/m<sup>2</sup>).

(c) An applicant may use contact lenses to meet the standards set forth in this section, subject to the following provisions:

(1) The contact lenses must be monofocal and non-tinted,

(2) The applicant must tolerate the lenses well, and

(3) The applicant must keep a pair of suitable corrective spectacles readily available during the exercise of privileges.

(d) If an applicant has a large refractive error, he must use contact lenses or high-index spectacle lenses.

(e) If an applicant has uncorrected distant visual acuity in either eye worse than 6/60 (20/120), he must provide a full ophthalmic report prior to initial assessment and every 5 years thereafter.

### **§ 67.19 Ear, Nose, Throat, and Equilibrium.**

Ear, nose, throat, and equilibrium standards for Class 1 medical certification are as follows:

(a) The person must demonstrate acceptable hearing by at least one of the following tests:

(1) Demonstrate an ability to hear an average conversational voice in a quiet room, using both ears, at a distance of 2 m (6 ft) from the AME, with the back turned to the AME.

(2) Demonstrate an acceptable understanding of speech as determined by audiometric speech discrimination testing to a score of at least 70 percent obtained in one ear or in a sound field environment.

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(3) Provide acceptable results of pure tone audiometric testing of unaided hearing acuity according to the following table of worst acceptable thresholds, using the calibration standards of the American National Standards Institute (ANSI), 1969 (11 West 42nd Street, New York, NY 10036, United States of America):

<b>Frequency (Hz)</b>	<b>500</b>	<b>1000</b>	<b>2000</b>	<b>3000</b>
<b>Better ear (dB)</b>	35	30	30	40
<b>Poorer ear (dB)</b>	35	35	35	50

(4) An applicant with hearing loss greater than the standards listed above may be declared fit provided that the applicant has normal hearing performance against a background noise that reproduces or simulates the masking properties of flightdeck noise upon speech and beacon signals.

(5) Alternatively, a practical hearing test conducted in flight in the flightdeck of an aircraft of the type for which the applicant's certificate and ratings are valid may be used.

(b) No disease or condition of the middle or internal ear, nose, oral cavity, pharynx, or larynx that—

(1) Interferes with, or is aggravated by, flying or may reasonably be expected to do so or

(2) Interferes with, or may reasonably be expected to interfere with, clear and effective speech communication.

(c) No disease or condition manifested by, or that may reasonably be expected to be manifested by, vertigo or a disturbance of equilibrium.

### § 67.21 Mental.

Mental standards for Class 1 medical certification are as follows:

(a) No established medical history or clinical diagnosis of any of the following:

(1) A personality or behavioral disorder severe enough to have repeatedly manifested itself by overt acts.

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- (2) A psychosis. As used in this section, “psychosis” refers to a mental disorder in which:
- (i) The individual has manifested delusions, hallucinations, grossly bizarre or disorganized behavior, or other commonly accepted symptoms of this condition; or
  - (ii) The individual may reasonably be expected to manifest delusions, hallucinations, grossly bizarre or disorganized behavior, or other commonly accepted symptoms of this condition.
- (3) A bipolar disorder.
- (4) A mood (affective) disorder, including clinical depression.
- (5) A neurotic, stress-related, or somatoform disorder.
- (6) Mental retardation.
- (7) A behavioral syndrome associated with physiological disturbances or physical factors.
- (8) A disorder of psychological development.
- (9) Psychoactive substance dependence, except where there is established clinical evidence, satisfactory to the GACA medical assessor, of recovery, including sustained total abstinence from the psychoactive substance(s) for not less than the preceding 2 years. As used in this section—
- (i) “Psychoactive substance dependence” means a condition in which a person is dependent on a psychoactive substance, as evidenced by—
    - (A) Increased tolerance;
    - (B) Manifestation of withdrawal symptoms;
    - (C) Impaired control of use; or
    - (D) Continued use notwithstanding damage to physical health or impairment of social, personal, or occupational functioning.



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(b) No psychoactive substance abuse within the preceding 2 years is defined as—

(1) Use of a psychoactive substance in a situation in which that use was physically hazardous, if there has been at any other time an instance of the use of a substance also in a situation in which that use was physically hazardous;

(2) A verified positive psychoactive substance test result, or a refusal to submit to a psychoactive substance test required by the GACA; or

(3) Misuse of a substance that the GACA medical assessor, based on case history and appropriate, qualified medical judgment relating to the psychoactive substance involved, finds—

(i) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held; or

(ii) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.

(c) No other personality disorder, neurosis, or other mental condition that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the condition involved, finds—

(1) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held; or

(2) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.

**§ 67.23 Neurologic.**

Neurologic standards for Class 1 medical certification are as follows:

(a) No established medical history or clinical diagnosis of any of the following:

(1) Epilepsy,

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(2) A disturbance of consciousness without satisfactory medical explanation of the cause, or

(3) A transient loss of control of nervous system function(s) without satisfactory medical explanation of the cause.

(b) No other seizure disorder, disturbance of consciousness, or neurologic condition that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the condition involved, finds—

(1) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held or

(2) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.

### § 67.25 Cardiovascular.

Cardiovascular standards for Class 1 medical certification are as follows:

(a) No established medical history or clinical diagnosis of any of the following:

(1) Myocardial infarction;

(2) Angina pectoris;

(3) Coronary heart disease that has required treatment or, if untreated, that has been symptomatic or clinically significant;

(4) Cardiac valve replacement;

(5) Permanent cardiac pacemaker implantation; or

(6) Heart replacement.

(b) A person applying for Class 1 medical certification must demonstrate an absence of myocardial infarction and other clinically significant abnormality on electrocardiographic examination as follows:

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- (1) At the first application and
- (2) Annually after reaching the 40th birthday.

(c) An electrocardiogram must satisfy a requirement of paragraph (b) of this section if it is dated no earlier than 60 days before the date of the application it is to accompany and was performed and transmitted according to acceptable standards and techniques.

### **§ 67.27 General Medical Condition.**

The general medical standards for Class 1 medical certification are as follows:

- (a) No established medical history or clinical diagnosis of diabetes mellitus that requires insulin or any other hypoglycemic drug for control.
- (b) No other organic, functional, or structural disease, defect, or limitation that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the condition involved, finds—
  - (1) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held or
  - (2) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.
- (c) No medication or other treatment that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the medication or other treatment involved, finds—
  - (1) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held or
  - (2) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.
- (d) A person applying for Class 1 medical certification must receive chest radiography during the initial examination.

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**§ 67.29 Discretionary Issuance.**

A person who does not meet the provisions of GACAR §§ 67.17 through 67.27 may apply for the discretionary issuance of a certificate under GACAR § 67.87.

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**SUBPART C – CLASS 2 MEDICAL CERTIFICATION**

**§ 67.39 Eligibility.**

To be eligible or to remain eligible for Class 2 medical certification, a person must meet the requirements of this subpart.

**§ 67.41 Eye.**

(a) Eye standards for Class 2 medical certification are as follows:

(1) Distant visual acuity of 6/12 (20/40) or better in each eye separately and binocular visual acuity of 6/9 (20/30) or better, with or without corrective lenses. If corrective lenses (spectacles or contact lenses) are necessary for 6/12 (20/40) vision, the person may be eligible only on the condition that corrective lenses are worn while exercising the privileges of an airman certificate.

(2) Near vision of 6/12 (20/40) or better, Snellen equivalent, at 41 cm (16 in) in each eye separately, with or without corrective lenses. If age 50 or older, near vision of 6/12 (20/40) or better, Snellen equivalent, at both 41 cm (16 in) and 81 cm (32 in) in each eye separately, with or without corrective lenses.

(i) If an applicant requires near-correction, a second pair of corrective lenses must be kept available for immediate use.

(ii) If an applicant requires both distant and near vision correction the applicant must demonstrate that one pair of corrective lenses is sufficient to meet both distant and near visual requirements.

(3) Ability to perceive those colors necessary for the safe performance of airman duties. An applicant failing to obtain a satisfactory result in such a test may receive Class 3 certification, but with the following restriction: Valid daytime only.

(4) Normal fields of vision.

(5) No acute or chronic pathological condition of either eye or adnexa that interferes with the proper function of an eye, that may reasonably be expected to progress to that degree, or that may reasonably be expected to be aggravated by flying.

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(6) Bifoveal fixation and vergence-phoria relationship sufficient to prevent a break in fusion under conditions that may reasonably be expected to occur in performing airman duties. Tests for the factors named in this paragraph are not required except for persons found to have more than one prism diopter of hyperphoria, six prism diopters of esophoria, or six prism diopters of exophoria. If any of these values are exceeded, the GACA medical assessor may require the person to be examined by a qualified eye specialist to determine whether there is bifoveal fixation and an adequate vergence-phoria relationship. However, if otherwise eligible, the person is issued a medical certificate pending the results of the examination.

(b) Visual acuity tests must be conducted in an environment with a level of illumination that corresponds to ordinary office illumination (30–60 cd/m<sup>2</sup>).

(c) An applicant may use contact lenses to meet the standards set forth in this section, subject to the following provisions:

(1) The contact lenses must be monofocal and non-tinted,

(2) The applicant must tolerate the lenses well, and

(3) The applicant must keep a pair of suitable corrective spectacles readily available during the exercise of privileges.

(d) If an applicant has a large refractive error, he must use contact lenses or high-index spectacle lenses.

(e) If an applicant has uncorrected distant visual acuity in either eye worse than 6/60 (20/120), he must provide a full ophthalmic report prior to initial assessment and every 5 years thereafter.

### **§ 67.43 Ear, Nose, Throat, and Equilibrium.**

Ear, nose, throat, and equilibrium standards for Class 2 medical certification are as follows:

(a) The person must demonstrate acceptable hearing by at least one of the following tests:

(1) Demonstrate an ability to hear an average conversational voice in a quiet room, using both ears, at a distance of 2 m (6 ft) from the AME, with the back turned to the AME.

(2) Demonstrate an acceptable understanding of speech as determined by audiometric speech discrimination testing to a score of at least 70 percent obtained in one ear or in a sound field

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environment.

(3) Provide acceptable results of pure tone audiometric testing of unaided hearing acuity according to the following table of worst acceptable thresholds, using the calibration standards of the ANSI, 1969:

<b>Frequency (Hz)</b>	<b>500</b>	<b>1000</b>	<b>2000</b>	<b>3000</b>
<b>Better ear (dB)</b>	35	30	30	40
<b>Poorer ear (dB)</b>	35	35	35	50

(b) No disease or condition of the middle or internal ear, nose, oral cavity, pharynx, or larynx that—

- (1) Interferes with, or is aggravated by, flying or may reasonably be expected to do so or
- (2) Interferes with clear and effective speech communication.

(c) No disease or condition manifested by, or that may reasonably be expected to be manifested by, vertigo or a disturbance of equilibrium.

### § 67.45 Mental.

Mental standards for Class 2 medical certification are—

(a) No established medical history or clinical diagnosis of any of the following:

- (1) A personality disorder severe enough to have repeatedly manifested itself by overt acts.
- (2) A psychosis. As used in this section, “psychosis” refers to a mental disorder in which—
  - (i) The individual has manifested delusions, hallucinations, grossly bizarre or disorganized behavior, or other commonly accepted symptoms of this condition; or
  - (ii) The individual may reasonably be expected to manifest delusions, hallucinations, grossly bizarre or disorganized behavior, or other commonly accepted symptoms of this condition.

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- (3) A bipolar disorder.
- (4) A mood (affective) disorder, including clinical depression.
- (5) A neurotic, stress-related, or somatoform disorder.
- (6) Mental retardation.
- (7) A behavioral syndrome associated with physiological disturbances or physical factors.
- (8) A disorder of psychological development.
- (9) Psychoactive substance dependence, except where there is established clinical evidence, satisfactory to the GACA medical assessor, of recovery, including sustained total abstinence from the psychoactive substance(s) for not less than the preceding 2 years. As used in this section—

(i) “Psychoactive substance dependence” means a condition in which a person is dependent on a psychoactive substance, as evidenced by—

- (A) Increased tolerance;
- (B) Manifestation of withdrawal symptoms;
- (C) Impaired control of use; or
- (D) Continued use notwithstanding damage to physical health or impairment of social, personal, or occupational functioning.

(b) No psychoactive substance abuse within the preceding 2 years defined as—

- (1) Use of a psychoactive substance in a situation in which that use was physically hazardous, if there has been at any other time an instance of the use of a substance also in a situation in which that use was physically hazardous;
- (2) A verified positive psychoactive drug test result, or a refusal to submit to a psychoactive drug test required by the GACA; or



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(3) Misuse of a substance that the GACA medical assessor, based on case history and appropriate, qualified medical judgment relating to the psychoactive substance involved, finds—

(i) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held; or

(ii) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.

(c) No other personality disorder, neurosis, or other mental condition that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the condition involved, finds—

(1) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held or

(2) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.

### § 67.47 Neurologic.

Neurologic standards for Class 2 medical certification are as follows:

(a) No established medical history or clinical diagnosis of any of the following:

(1) Epilepsy,

(2) A disturbance of consciousness without satisfactory medical explanation of the cause, or

(3) A transient loss of control of nervous system function(s) without satisfactory medical explanation of the cause.

(b) No other seizure disorder, disturbance of consciousness, or neurologic condition that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the condition involved, finds—

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(1) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held or

(2) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.

### **§ 67.49 Cardiovascular.**

Cardiovascular standards for Class 2 medical certification are as follows:

(a) No established medical history or clinical diagnosis of any of the following:

(1) Myocardial infarction;

(2) Angina pectoris;

(3) Coronary heart disease that has required treatment or, if untreated, that has been symptomatic or clinically significant;

(4) Cardiac valve replacement;

(5) Permanent cardiac pacemaker implantation; or

(6) Heart replacement.

(b) A person applying for Class 2 medical certification must demonstrate an absence of myocardial infarction and other clinically significant abnormality on electrocardiographic examination as follows:

(1) At the first application after reaching the 40th birthday and

(2) Annually after reaching the 50th birthday.

(c) An electrocardiogram must satisfy a requirement of paragraph (b) of this section if it is dated no earlier than 60 days before the date of the application it is to accompany and was performed and transmitted according to acceptable standards and techniques.

### **§ 67.51 General Medical Condition.**

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The general medical standards for Class 2 medical certification are as follows:

- (a) No established medical history or clinical diagnosis of diabetes mellitus that requires insulin or any other hypoglycemic drug for control.
- (b) No other organic, functional, or structural disease, defect, or limitation that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the condition involved, finds—
  - (1) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held or
  - (2) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.
- (c) No medication or other treatment that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the medication or other treatment involved, finds—
  - (1) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held; or
  - (2) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.
- (d) A person applying for Class 2 medical certification must receive chest radiography during the initial examination.

### **§ 67.53 Discretionary Issuance.**

A person who does not meet the provisions of GACAR §§ 67.41 through 67.51 may apply for the discretionary issuance of a certificate under GACAR § 67.87.

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**SUBPART D – CLASS 3 MEDICAL CERTIFICATION**

**§ 67.63 Eligibility.**

To be eligible or to remain eligible for Class 3 medical certification, a person must meet the requirements of this subpart.

**§ 67.65 Eye.**

(a) Eye standards for Class 3 medical certification are as follows:

(1) Distant visual acuity of 6/9 (20/30) or better in each eye separately, with or without corrective lenses, and binocular visual acuity of 6/6 (20/20) or better;

(2) Near vision of 6/12 (20/40) or better, Snellen equivalent, at 30 cm (12 in) to 50 cm (19 in) in each eye separately, with or without corrective lenses;

(i) If an applicant requires near-correction, a second pair of corrective lenses must be kept available for immediate use.

(ii) If an applicant requires both distant and near vision correction the applicant must demonstrate that one pair of corrective lenses is sufficient to meet both distant and near visual requirements.

(3) Where this standard of visual acuity can be obtained only with correcting lenses, the applicant may be assessed as fit provided that—

(i) Such corrective lenses are worn during the exercise of the privileges of the certificate or rating applied for or held and

(ii) A pair of suitable corrective lenses is kept available during the exercise of the privileges of the applicant's certificate.

(4) Ability to perceive those colors necessary for the safe performance of duties;

(5) Normal fields of vision; and

(6) Normal binocular function.

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- (b) Visual acuity tests must be conducted in an environment with a level of illumination that corresponds to ordinary office illumination (30–60 cd/m<sup>2</sup>).
- (c) An applicant may use contact lenses to meet the standards set forth in this section, subject to the following provisions:
- (1) The contact lenses must be monofocal and non-tinted,
  - (2) The applicant must tolerate the lenses well, and
  - (3) The applicant must keep a pair of suitable corrective spectacles readily available during the exercise of privileges.
- (d) If an applicant has a large refractive error, he must use contact lenses or high-index spectacle lenses.
- (e) If an applicant has uncorrected distant visual acuity in either eye worse than 6/60 (20/120), he must provide a full ophthalmic report prior to initial assessment and every 5 years thereafter.

**§ 67.67 Ear, Nose, Throat, and Equilibrium.**

Ear, nose, throat, and equilibrium standards for Class 3 medical certification are as follows:

- (a) The person must demonstrate acceptable hearing by at least one of the following tests:
- (1) Provide acceptable results of pure tone audiometric testing of unaided hearing acuity according to the following table of worst acceptable thresholds, using the calibration standards of the ANSI, 1969:

<b>Frequency (Hz)</b>	<b>500</b>	<b>1000</b>	<b>2000</b>	<b>3000</b>
<b>Better ear (dB)</b>	35	30	30	40
<b>Poorer ear (dB)</b>	35	35	35	50

- (2) Alternatively, an applicant with hearing loss greater than the above may be declared fit provided the applicant has normal hearing performance—

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(i) Against a background noise that reproduces or simulates that experienced in a typical air traffic control (ATC) working environment.

(ii) In a practical hearing test conducted in an ATC environment representative of the one for which the applicant's certificate and ratings are valid may be used.

(b) No disease or condition of the middle or internal ear, nose, oral cavity, pharynx, or larynx that interferes with clear and effective speech communication.

(c) No disease or condition manifested by, or that may reasonably be expected to be manifested by, vertigo or a disturbance of equilibrium.

### **§ 67.69 Mental.**

Mental standards for Class 3 medical certification are as follows:

(a) No established medical history or clinical diagnosis of any of the following:

(1) A personality disorder severe enough to have repeatedly manifested itself by overt acts.

(2) A psychosis. As used in this section, "psychosis" refers to a mental disorder in which—

(i) The individual has manifested delusions, hallucinations, grossly bizarre or disorganized behavior, or other commonly accepted symptoms of this condition; or

(ii) The individual may reasonably be expected to manifest delusions, hallucinations, grossly bizarre or disorganized behavior, or other commonly accepted symptoms of this condition.

(3) A bipolar disorder.

(4) A mood (affective) disorder, including clinical depression.

(5) A neurotic, stress-related, or somatoform disorder.

(6) Mental retardation.

(7) A behavioral syndrome associated with physiological disturbances or physical factors.

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(8) A disorder of psychological development.

(9) Psychoactive substance dependence, except where there is established clinical evidence, satisfactory to the GACA medical assessor, of recovery, including sustained total abstinence from the psychoactive substance(s) for not less than the preceding 2 years. As used in this section—

(i) “Psychoactive substance dependence” means a condition in which a person is dependent on a psychoactive substance, as evidenced by—

(A) Increased tolerance,

(B) Manifestation of withdrawal symptoms,

(C) Impaired control of use, or

(D) Continued use notwithstanding damage to physical health or impairment of social, personal, or occupational functioning.

(b) No psychoactive substance abuse within the preceding 2 years defined as follows:

(1) Use of a psychoactive substance in a situation in which that use was physically hazardous, if there has been at any other time an instance of the use of a substance also in a situation in which that use was physically hazardous;

(2) A verified positive psychoactive drug test result, or a refusal to submit to a psychoactive drug test required by the GACA; or

(3) Misuse of a psychoactive substance that the GACA medical assessor, based on case history and appropriate, qualified medical judgment relating to the substance involved, finds—

(i) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held or

(ii) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.

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(c) No other personality disorder, neurosis, or other mental condition that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the condition involved, finds—

(1) Makes the person unable to safely perform the duties or exercise the privileges of the airman certificate applied for or held or

(2) May reasonably be expected, for the maximum duration of the airman medical certificate applied for or held, to make the person unable to perform those duties or exercise those privileges.

### § 67.71 Neurologic.

Neurologic standards for Class 3 medical certification are as follows:

(a) No established medical history or clinical diagnosis of any of the following:

(1) Epilepsy,

(2) A disturbance of consciousness without satisfactory medical explanation of the cause, or

(3) A transient loss of control of nervous system function(s) without satisfactory medical explanation of the cause.

(b) No other seizure disorder, disturbance of consciousness, or neurologic condition that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the condition involved, finds would likely interfere with the safe exercise of the applicant's certificate and rating privileges.

### § 67.73 Cardiovascular.

Cardiovascular standards for Class 3 medical certification are as follows:

(a) No established medical history or clinical diagnosis of any of the following:

(1) Myocardial infarction;

(2) Angina pectoris;

(3) Coronary heart disease that has required treatment or, if untreated, that has been



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symptomatic or clinically significant;

(4) Cardiac valve replacement;

(5) Permanent cardiac pacemaker implantation; or

(6) Heart replacement.

(b) A person applying for Class 3 medical certification must demonstrate an absence of myocardial infarction and other clinically significant abnormality on electrocardiographic examination as follows:

(1) At the first Medical Assessment and

(2) At least every 2 years after reaching the 50th birthday.

(c) An electrocardiogram must satisfy a requirement of paragraph (b) of this section if it is dated no earlier than 60 days before the date of the application it is to accompany and was performed and transmitted according to acceptable standards and techniques.

### **§ 67.75 General Medical Condition.**

The general medical standards for Class 3 medical certification are as follows:

(a) No established medical history or clinical diagnosis of diabetes mellitus that requires insulin or any other hypoglycemic drug for control;

(b) No other organic, functional, or structural disease, defect, or limitation that the GACA medical assessor, based on the case history and appropriate, qualified medical judgment relating to the condition involved, finds would likely interfere with the safe exercise of the applicant's certificate and rating privileges; and

(c) No medication or other treatment that the GACA medical assessor based on the case history and appropriate, qualified medical judgment relating to the medication or other treatment involved, finds would likely interfere with the safe exercise of the applicant's certificate and rating privileges.

### **§ 67.77 Discretionary Issuance.**

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A person who does not meet the provisions of GACAR §§ 67.65 through 67.75 may apply for the discretionary issuance of a certificate under GACAR § 67.87.

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**SUBPART E – CERTIFICATION PROCEDURES**

**§ 67.87 Special Issuance of Medical Certificates.**

(a) At the discretion of the GACA medical assessor, an Authorization for Special Issuance of a Medical Certificate (Authorization), valid for a specified period, may be granted to a person who does not meet the provisions of Subparts B, C, or D of this part if the person shows to the satisfaction of the GACA medical assessor that the duties authorized by the class of medical certificate applied for can be performed without endangering public safety during the period in which the Authorization would be in force. The GACA medical assessor may authorize a special medical flight test, practical test, or medical evaluation for this purpose. A medical certificate of the appropriate class may be issued to a person who does not meet the provisions of Subparts B, C, or D of this part if that person possesses a valid Authorization and is otherwise eligible. An airman medical certificate issued in accordance with this section must expire no later than the end of the validity period or upon the withdrawal of the Authorization upon which it is based. At the end of its specified validity period, for grant of a new Authorization, the person must again show to the satisfaction of the GACA medical assessor that the duties authorized by the class of medical certificate applied for can be performed without endangering public safety during the period in which the Authorization would be in force.

(b) At the discretion of the GACA medical assessor, a Statement of Demonstrated Ability (SODA) may be granted, instead of an Authorization, to a person whose disqualifying condition is static or non progressive and who has been found capable of performing airman duties without endangering public safety. A SODA does not expire and authorizes a designated AME to issue a medical certificate of a specified class if the AME finds that the condition described on its face has not adversely changed.

(c) In granting an Authorization or SODA, the GACA medical assessor may consider the person's operational experience and any medical facts that may affect the ability of the person to perform airman duties including—

- (1) The combined effect on the person of failure to meet more than one requirement of this part and
- (2) The prognosis derived from professional consideration of all available information regarding the person.

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(d) In granting an Authorization or SODA under this section, the GACA medical assessor specifies the class of medical certificate authorized to be issued and may do any or all of the following:

- (1) Limit the duration of an Authorization;
- (2) Condition the granting of a new Authorization on the results of subsequent medical tests, examinations, or evaluations;
- (3) State on the Authorization or SODA, and any medical certificate based upon it, any operational limitation needed for safety; or
- (4) Condition the continued effect of an Authorization or SODA, and any Class 2 or Class 3 medical certificate based upon it, on compliance with a statement of functional limitations issued to the person in coordination with the President.

(e) In determining whether to grant an Authorization or SODA to an applicant for a Class 3 medical certificate, the GACA medical assessor considers the freedom of an airman, exercising the privileges of a private pilot certificate, to accept reasonable risks to his person and property that are not acceptable in the exercise of commercial or airline transport pilot privileges, and, at the same time, considers the need to protect the safety of persons and property in other aircraft and on the ground.

(f) An Authorization or SODA granted under the provisions of this section to a person who does not meet the applicable provisions of Subparts B, C, or D of this part may be withdrawn, at the discretion of the GACA medical assessor at any time if—

- (1) There is adverse change in the holder's medical condition,
- (2) The holder fails to comply with a statement of functional limitations or operational limitations issued as a condition of certification under this section,
- (3) Public safety would be endangered by the holder's exercise of airman privileges,
- (4) The holder fails to provide medical information reasonably needed by the GACA medical assessor for certification under this section or
- (5) The holder makes or causes to be made a statement or entry that is the basis for withdrawal

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of an Authorization or SODA under GACAR § 67.89.

(g) A person who has been granted an Authorization or SODA under this section based on a special medical flight or practical test need not take the test again during later physical examinations unless the GACA medical assessor determines or has reason to believe that the physical deficiency has or may have degraded to a degree to require another special medical flight test or practical test.

(h) If an Authorization or SODA is withdrawn under paragraph (f) of this section the following procedures apply:

(1) The holder of the Authorization or SODA must be served a letter of withdrawal, stating the reason for the action.

(2) By no later than 60 days after the service of the letter of withdrawal, the holder of the Authorization or SODA may request, in writing, that the GACA medical assessor provide for review of the decision to withdraw. The request for review may be accompanied by supporting medical evidence.

(3) Within 60 days of receipt of a request for review, a written final decision either affirming or reversing the decision to withdraw must be issued.

(4) A medical certificate rendered invalid pursuant to a withdrawal, in accordance with paragraph (a) of this section, must be surrendered to the President upon request.

(i) An Authorization or SODA granted under the provisions of this section to a person who does not meet the applicable provisions of Subparts B, C, or D of this part must be in that person's physical possession or readily accessible in the aircraft.

### **§ 67.89 Applications, Certificates, Logbooks, Reports, and Records: Falsification, Reproduction, or Alteration; Incorrect Statements.**

(a) As prescribed in GACAR Part 3, no person may make or cause to be made—

(1) A fraudulent or intentionally false statement on any application for a medical certificate or on a request for any Authorization or SODA under this part;

(2) A fraudulent or intentionally false entry in any logbook, record, or report that is kept,

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made, or used, to show compliance with any requirement for any medical certificate or for any Authorization or SODA under this part;

(3) A reproduction, for fraudulent purposes, of any medical certificate under this part; or

(4) An alteration of any medical certificate under this part.

(b) The commission by any person of an act prohibited under paragraph (a) of this section is a basis for—

(1) Suspending or revoking all airman, ground instructor, and medical certificates and ratings held by that person;

(2) Withdrawing all Authorizations or SODAs held by that person; and

(3) Denying all applications for medical certification and requests for Authorizations or SODAs.

(c) The following may serve as a basis for suspending or revoking a medical certificate, withdrawing an Authorization or SODA, or denying an application for a medical certificate or request for an authorization or SODA:

(1) An incorrect statement, upon which the GACA relied, made in support of an application for a medical certificate or request for an Authorization or SODA; or

(2) An incorrect entry, upon which the GACA relied, made in any logbook, record, or report that is kept, made, or used to show compliance with any requirement for a medical certificate or an Authorization or SODA.

(d) The AME must report to the President the commission of any act prohibited under paragraph (a) of this section.

### **§ 67.91 Performance of Medical Examinations.**

(a) *Class 1.* Any AME that is specifically designated for the purpose may perform examinations for Class 1 medical certificates.

(b) *Class 2 and Class 3.* Any AME may perform examinations for Class 2 or Class 3 medical certificates.

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**§ 67.93 Denial of Medical Certificate.**

- (a) Any person who is denied a medical certificate by an AME may appeal the decision in accordance with the procedures prescribed in GACAR Part 13.
- (b) The denial of a medical certificate—
- (1) By an AME is not a denial by the President; but
  - (2) By the GACA medical assessor is considered to be a denial by the President.
- (c) If the issue of a medical certificate is wholly or partly reversed by the GACA medical assessor the person holding that certificate must surrender it, upon request of the President.

**§ 67.95 Medical Records.**

- (a) Whenever the President finds that additional medical information or history is necessary to determine whether a holder or applicant meets the medical standards required to hold a medical certificate, the holder or applicant must—
- (1) Furnish that information to the GACA or
  - (2) Authorize any clinic, hospital, physician, or other person to release to the GACA all available information or records concerning that history.
- (b) If the holder or applicant fails to provide the requested medical information or history or to authorize its release, the President may suspend, modify, or revoke the holder's or applicant's medical certificate or, in the case of an applicant, deny the application for a medical certificate.
- (c) If a medical certificate is suspended, modified, or revoked under paragraph (b) of this section, that suspension or modification remains in effect until the holder or applicant provides the requested information, history, or authorization to the President and until the President determines the holder or applicant meets the medical standards set forth in this part.

**§ 67.97 Return of Medical Certificate After Suspension or Revocation.**

The holder of any medical certificate issued under this part that is suspended or revoked must return it to the President upon his request.

**§ 67.99 Replacement of a Lost or Destroyed Medical Certificate.**

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(a) A request for the replacement of a lost or destroyed medical certificate issued under this part must be made:

- (1) By letter to the President, or
- (2) In any other means acceptable to the President.

(b) The request for replacement of a lost or destroyed medical certificate issued under this part must state:

- (1) The person's name;
- (2) The person's permanent mailing address;
- (3) The certificate holder's date and place of birth; and
- (4) Any information regarding the number and date of issuance of the medical certificate and class.

(c) A person who has lost a medical certificate issued under this part may obtain, in a form or manner approved by the President, a document from the GACA conveying temporary authority to exercise certificate privileges, and the:

- (1) Document may be carried as a medical certificate for up to 60 days pending the person's receipt of a duplicate under paragraph (a) of this section, unless the person has been notified that the certificate has been suspended or revoked.
- (2) Request for such a document must include the date on which a duplicate medical certificate was previously requested.