

Welcome to a further ME update.

### **Prepayment of the CAA medical fee**

The prepayment process is working well. Please ensure that you sight a receipt (number) when the applicant attends your rooms.

### **Sending Assessment(s) to CAA**

When the assessment has been completed, it must be sent to CAA within five working days. We are currently conducting an audit in this area and find that a number of assessments have probably been completed but not sent. Delays in sending assessments are in breach of delegations and may result in liability for both ME and CAA.

### **ECGs**

By now you should be well acquainted with the requirement to request a specialist interpretation for any ECG that is not reported as normal by the ECG software. We have started to return ECGs that do not meet this GD legislative requirement.

Recognising that some mild abnormalities may be a variant of normal we are currently working on amending the 'Examination Procedures GD' to reflect this. For the time being, section 3 of the '[Examination Procedures](#)' GD applies as currently published.

### **Inquiries to CAA and Medical Manual**

We receive a number of inquiries regarding processes. In most cases the answer to your question can be found in the [Medical Manual Part 2](#) available on the CAA website. We suggest that you first check this document. If the relevant information you are after is not there, you are then most welcome to contact one of the CAA Medical Officers.

Under [Part 5 of the Medical Manual](#) you will also find a number of protocols that you can give to the applicant when requesting specialised testing. Currently there are protocols for Stress ECG, Stress Echocardiography, Stress Perfusion Scan, Spirometry and Psychiatrist referrals. You will also find Medical Information sheets on a variety of conditions. These are aimed mainly at pilots and ATC but you may find them useful to better

appreciate the CAA current views on the conditions

### **Medical Manual – Ophthalmology chapter**

We are currently working on producing the first chapter of the Medical Manual Part 3, dealing with clinical matters. We plan to structure the manual in a way that should assist you in deciding if a condition is of aeromedical significance or not, i.e. whether a condition meets the Part 67 Medical Standards. Our intention is to have this part promulgated in the next few months, following a period of consultation with Medical Examiners.

### **CAA Education session and AMSNZ conference**

A CAA education session will coincide with the AMSNZ conference of 28 and 29 September 2013 in Wellington. We encourage you to attend the whole combined meeting. The CAA session will be on the Saturday afternoon and is free of charge. It is important to book accommodation early as it will also be the World of Wearable Art weekend. We are looking forward to seeing you there.

### **E-mail Communication with CMU**

When e-mailing we recommend that you use the following e-mail address: [med@caa.govt.nz](mailto:med@caa.govt.nz). This address has a tracking system and allows for your inquiry to be directed to the Medical Officer who is available at the time.

### **ALAC guidelines on safe alcohol use**

As of 1 July 2012, all of ALAC's functions, along with functions from the Health Sponsorship Council and some programmes previously delivered by the Ministry of Health, are now being carried out by the [Health Promotion Agency](#).

New more conservative guidelines have been promulgated for what is considered to be safe alcohol use. Alcohol abuse remains a common problem identified by the CMU. We ask you to be vigilant in assessing pilot for harmful and thus possibly unsafe use of alcohol.

*With kind regards from the CMU team.*