



Update for MEs

No. 3/2021

A brief update from the Civil Aviation Authority
Aviation Medicine Team

November 2021

Dear Colleague,

Welcome to this newsletter which contains important information.

We hope you are all safe and well in these challenging times. Here are some updates you may find useful.

Covid-19

An Emergency Directive – Spirometry deferral gives relief from the Timing of Examination GD requirement to undertake spirometry if this examination cannot be undertaken for safety reasons relating to the Covid situation - [Link](#).

Covid Infection may result in lasting symptoms and increased risk of physical or cognitive impairment or incapacitation.

For these reasons, any one suffering from a Covid infection should only return to flying following a review of their fitness to exercise their licence privileges.

In the absence of a CAA-NZ policy on that matter, MEs can rely on the CASA policy available at:

[COVID-19 | Civil Aviation Safety Authority \(casa.gov.au\)](https://www.casa.gov.au/covid-19)

General Directions - Timing of Examinations

The Timing of Examinations GD Notice has been updated and gazetted following the consultation process. We are grateful for the comments received.

This GD Notice becomes effective *on 03 December 2021*

Please take time to familiarise yourself with its content. The major changes have been outlined on page 2 of the GD and are summarised here:

ECGs frequency has been slightly reduced under the age of 50 for Class 1 applicants. They have been reduced for Class 2 and Class 3 applicants.

The cardiovascular risk assessment is now required mostly on a five-year schedule except for older applicants. However, MEs are expected to consider the latest CV risk estimate at each application to ensure that no investigation is required at the time of the assessment, i.e. repeat ETT when the previous CV risk had reached 10% or above.

Audiometry is required at reduced frequency except for older pilots and Air Traffic Controllers as a well conducted clinical GME should detect aeromedically

significant hearing loss that requires further characterisation, ideally with pure tone and speech discrimination audiometry.

An ME may decide to require, under section 27B(5) of the Act, more frequent audiometry (i.e. every two years) if there is a concern with a known or a newly clinically detected hearing loss.

Spirometry is no longer routinely required for Class 2 and Class 3 initial applicants. However, that investigation may be required under section 27B(5) when clinically justified, for instance in the case of a history of asthma or other pulmonary condition.

Special eye reports are now required at regular intervals for Class 1 and Class 3 applicants from age 60, given the frequency of occult eye conditions with aging. This is similar to a number of overseas authorities requirements, including CASA.

CAA – CME meeting

The CAA Aviation Medicine Team hope to deliver another virtual CME around March 2022. Suggestions for topics and questions will be appreciated.

Medical Unit Christmas/New Year closure

CAA office will close on Friday 24 December around midday and reopen on Monday 10 January 2022.

Please note that **Section 13 of the Legislation Act 2019** defines a **working day** as a day of a week other than –

- Saturday, a Sunday, Waitangi Day, Good Friday, Easter Monday, Anzac Day, the Sovereign's birthday, and Labour Day; and
- a day in the period commencing with 25 December in a year and ending with 2 January in the following year;** and
- if 1 January falls on a Friday, the following Monday; and
- if 1 January falls on a Saturday or a Sunday, the following Monday and Tuesday;

With best regards from

The Aviation Medicine Team