Civil Aviation Medical Association
Annual Scientific Meeting

AME Program Update

Stephen Véronneau, MD, MS
Manager, Education Division
RFS International, Military, Federal Region
FAA MISSION:
To provide the safest, most efficient aerospace system in the world
Aerospace Medical Education Division

- AME Programs
- Airman Education Programs
- Aeromedical Library Services
- Aeromedical Publications
- International, Military, and Federal Region
- Aerospace Medicine Resident Education
AME Programs

• AME Designation/ Redesignation

• AME Surveillance
  • 8520.2G Policy FAA Order
  • 8000.95 DMS Order

• AME Education

• AME Supplies
AME Education Programs

• Basic AME Seminars
• Refresher AME Seminars
• Medical Certification Standards and Procedures Tutorial (MCSPT)
• Clinical Aerospace Physiology Review for AMEs (CAPAME)
• Multimedia AME Refresher Course (MAMERC)
That’ll be a short run.
Information for AMEs

Aviation Medical Examiners

Guide for Aviation Medical Examiners
- Recent Updates to the AME Guide

Designee Management System (DMS)

- Letter from the Federal Air Surgeon - BasicMed is Coming! (PDF)
- Mastering the Basics of BasicMed, PDF format (PDF), MS Powerpoint (MS PowerPoint)
- Information about BasicMed
- Section 61.113 and the new Part 68
- Advisory Circular 68-1

http://WWW.FAA.GOV/GO/AME
Desigees are individuals and organizations in the aviation industry authorized to conduct examinations, perform tests, and issue approvals and certificates on behalf of the FAA.

The FAA Designee Program

- What is a designee?
- How are we allowed to delegate?
- Why do we need designees?
- Where do we get designees?
- What types of designees are there?
- What do we delegate?

Learn More About:

- Individual Designees
- Delegated Organizations
- History of the FAA Designee Program
AME Minute

Visit faa.gov/go/ame
and click the email subscription button at the top of the page.
AME Minute

Visit faa.gov/go/ame
and click the email subscription button at the top of the page.

Certification aids help airmen and AMEs get the correct information to the FAA as quickly as possible.
MedXpress: It’s Easy
Oct 1, 2012
MedXpress: The Royal Treatment
FAA TV: OSA Screening Guidance for AMEs
FAA TV: DMS Overview for Prospective Designee Aviation Medical Examiners

https://www.faa.gov/tv/?mediaId=1180
AIRMAN EDUCATION PROGRAMS

- Aviation Physiology Courses
- Global Survival Courses
- Multimedia Aviation Physiology Course
- Multimedia Global Survival Course
- PROTE

- ALL programs are free to those over 18 and interested in aviation
HUMAN FACTORS COURSE (in development)

- Fatigue
- Vision
- Spatial Disorientation (Visual)
- Spatial Disorientation (Vestibular)
- Pilot Fitness
- Pilot Self-Imposed Stress
Aeromedical Library Services

Librarian:

• Roni Anderson

Phone: (405) 954-4398
Aeromedical Publications

• Aviation Brochures
• Technical Reports and Manuscripts:
• Quarterly Federal Air Surgeon’s Bulletin
OPIOID EPIDEMIC and AVIATION
The Civil Aerospace Medical Institute

PILOT VISION

Alcohol & Flying
A DEADLY COMBINATION
YOU ARE THE LINK BETWEEN THE FAA AND AIRMAN
Aviation Medical Examiner Population (2741 as of May 30, 2018)

- Domestic: 82%
- International: 12%
- Military: 5%
- Federal: 1%
- Official: 0%

(Includes Guam, Marshall Islands, Saipan, Pacific Island Trust Territories, Puerto Rico and Virgin Islands)

90 countries
Distribution of AMEs by Region

- Eastern 11%
- Southern 19%
- Great Lakes 13%
- Central 5%
- Western Pacific 8%
- NW Mountain 10%
- Alaska 2%
- International 12%
- Military/Fed 6%
- Official 0%
- Southwest 11%
- New England 3%
Distribution of AMEs by Region
AMEs/Senior AMEs

<table>
<thead>
<tr>
<th>Region</th>
<th>AMEs</th>
<th>Senior AMEs</th>
</tr>
</thead>
<tbody>
<tr>
<td>AK</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CE</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>EA</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>GL</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>NE</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>NM</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SO</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>SW</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>WP</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Mil</td>
<td>0 %</td>
<td>0 %</td>
</tr>
<tr>
<td>Intl</td>
<td>0 %</td>
<td>100 %</td>
</tr>
<tr>
<td>Fed</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Off</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

65% Senior AMEs
## Distribution of AMEs by Medical Specialty

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Practice / General Practice</td>
<td>48.2%</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>17.8%</td>
</tr>
<tr>
<td>Aerospace Medicine</td>
<td>8.8%</td>
</tr>
<tr>
<td>Occupational / Industrial Med</td>
<td>6.5%</td>
</tr>
<tr>
<td>General Surgery</td>
<td>2.4%</td>
</tr>
<tr>
<td>Ophthalmology</td>
<td>2.0%</td>
</tr>
<tr>
<td>Emergency Medicine</td>
<td>2.3%</td>
</tr>
<tr>
<td>Otorhinolaryngology, Orthopedic Surgery, OB/GYN, Cardiology</td>
<td>4.0%</td>
</tr>
<tr>
<td>All others</td>
<td>&lt;1% (ea)</td>
</tr>
</tbody>
</table>

Updated 11/9/17
Trends

Average Age

Updated 1/30/17
DEMographicS

• AME respondents: n=1,810
• Average Yrs. worked: 20
• Senior AMEs: 71%
• AME-related practice (median): 6%
• Applicants seen (median): 50
## Overall Approval 2014 and 2016

<table>
<thead>
<tr>
<th>SERVICES</th>
<th>2014 (%)</th>
<th>2016 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deferrals, Standards, and Guidelines</td>
<td>72</td>
<td>74</td>
</tr>
<tr>
<td>Aerospace Medical Certification Division</td>
<td>91</td>
<td>92</td>
</tr>
<tr>
<td>Aerospace Medical Education Division</td>
<td>93</td>
<td>93</td>
</tr>
<tr>
<td>Aerospace Medical Certification System</td>
<td>95</td>
<td>93</td>
</tr>
<tr>
<td>Regional Flight Surgeon Office</td>
<td>92</td>
<td>91</td>
</tr>
<tr>
<td>Office of Aerospace Medicine Website</td>
<td>89</td>
<td>92</td>
</tr>
<tr>
<td>Designee Management System</td>
<td>---</td>
<td>80</td>
</tr>
<tr>
<td>Designee Registration System</td>
<td>---</td>
<td>80</td>
</tr>
</tbody>
</table>
RECOMMENDATIONS FOR IMPROVEMENT

AMEs suggested improvement for FAA services by ranking multiple choice options on a 5-point scale from Not a Priority to Top Priority.

- Regional Seminars on CACI: 55.3%
- Regional Seminars: 48.2%
- Monthly Webinars: 15.3%

- Ability to attach supporting documents in AMCS: 64.4%
- Offer an advanced AME course in Oklahoma City: 28.3%

• More accessibility to RFS
  – Answer phones
  – Better email communication
  – Respond in a timely manner

• Understaffing seems to contribute to the responses for RFS

• Appoint RFS to the NE region

- Provide feedback on inappropriate deferrals: 64.6
- Electronic notification to AME of changes in deferral status: 64.5
- Electronic notification to applicant of changes in deferral status: 62.4

Ability in the AMCS Internet application to attach supporting documents: 67.4

Ability for applicants to attach supporting documents in MedXPress for the AME: 62.6

Ability for applicants to electronically check the status of their medical certificate: 59.8
Aeromedical Certification Requests

Average 1392 applications per 7 day
Average 31943 applications per month
Most common causes for problems with issued certificates Jan. to June 2012 compared to prior period

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>17</td>
<td>Unacceptable Medication</td>
<td>12</td>
<td>3</td>
<td>14</td>
</tr>
<tr>
<td>58</td>
<td>ECG</td>
<td>9</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>18h</td>
<td>High or low Blood Pressure</td>
<td>9</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>18V</td>
<td>DUI</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>18a</td>
<td>Headache</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18M</td>
<td>Mental/Depression</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18U</td>
<td>Rheumatoid Arthritis</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18L</td>
<td>Neurological disorder, Parkinsonism</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>18J</td>
<td>Kidney stone</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18u</td>
<td>Admission to Hospital</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18x</td>
<td>Prostate cancer surgery, parathyroidectomy, cataract surgery</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18D</td>
<td>Retinopathy /Optic Neuritis</td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>18X</td>
<td>Sleep Apnea</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>52</td>
<td>Fail color vision</td>
<td></td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>
Improving the Certification Process

- Limit unnecessary deferrals
- Call for help
- Review and Interpret
- Comment on airman history and findings
  - Ensure airman history is complete.
- Login to AMCS frequently for updates
- Read the Federal Air Surgeon’s Medical Bulletin
- Emphasize MedXpress
Improving the Certification Process

• Transmit ALL EXAMS within 14 days of visit
Verbal Authorizations

• Verbal authorizations
  • AME call to any AAM certifying doc, discussion of the case details that would otherwise lead to deferral
  **Example:** FEV1 less than the 80% on the Asthma CACI
  AAM docs can give verbal authorizations to issue

• AME actions
  • Follow the directions given verbally, document in Block 60
  • The AAM doc will make a DIWS note with the required info
  • The note and the AME actions will be compared

Excellent time saver when used correctly
AME Comment Appropriate block 60

• Verbal authorizations allow an expedited handling of an otherwise mandatory deferral

• AME actions
  • Put down the name of the AAM physician you spoke with in Block 60
  • Send in the supporting data

• Limitations
  • Not for complicated cases
  • There must be an exam already in the DIWS System of Records for the AAM physician to be able to make a note
Verbal Authorizations

Block 60 Example

a/m with hx of RA previously on MTX and 10 mg prednisone daily. Treating doc added Humira 8 weeks ago so no longer CACI qualified. Good strength, ROM and function of joints. No concerns with operation of controls. a/m’s doc notes him to be stable with good prognosis. I spoke with Dr. xxxx at AMCD/RFS and he/she authorized a time limited 1 year certificate. I will send these documents to the FAA to review.
SITE VISIT

- Done every 5 years
- SPA reviews AME completed exams
  - Not the only time this occurs
- In person or virtual
- If complaints, may do spot visit
- Facility inspection to include all AME equipment as appropriate
JUDGMENT ERRORS
ERROR LETTERS

• Critical Error ("Rv" Error)
  – AME issued certificate when should have deferred
  – AME deferred when should have issued
  – Letter Sent to AME and RFS

• Less Critical Error ("Hx" Error)
  – Not enough information to support AME issuing
  – "Tic Mark", Not Letter
  – Part of annual AME performance report
ERROR LETTERS

• **CACI Errors ("C" Error)**
  – AME issues but deviates from the CACI worksheet
  – AME sent in CACI worksheet and supporting information (Guide states do not send). Note: please remember that this only applies to the CACI condition(s) there might be other information that does need to be submitted for AASI
  – AME deferred when should have issued using CACI
  – AME does not use the correct verbiage in Block 60
DESIGNEE MANAGEMENT SYSTEM
PERFORMANCE SUMMARY REPORT
Information for AMEs

Aviation Medical Examiners

Guide for Aviation Medical Examiners

- Recent Updates to the AME Guide

Designee Management System (DMS)

Notice about AME Minute

Join thousands of subscribers by signing up for Aerospace Medical Education's newest feature for AME education: AME Minute!

Every month we deliver a microlearning topic based on FAA best practices and other subjects AMEs want to know right now. Each installment will take about a minute of your time.

Signing up is simple; click on the envelope with the plus sign on the top right of this page, and then provide your email address. Other subscription opportunities are presented, but you are automatically subscribed to AME Minute. Sign up today!

www.faa.gov/GO/AME/
Aviation Medical Examiner (AME) Designee Information

Designee Management System (DMS)

In response to a U.S. Government Accountability Office audit, AVS has implemented an integrated, improved designee management solution for all FAA designee types. The Designee Management System (DMS) was developed to support this policy. Volume 53-2 of the Federal Air Surgeon’s Medical Bulletin (FASMB) (PDF) contains additional information about the DMS transition.

As part of the transition to DMS, you are assigned a unique nine-digit identification number known as the designee number; this new designee number replaces your current designee number (known as your AME number) and is used to identify your work and certifications as authorized by the Administrator.

After the transition is complete, you will receive a new authorization known as a Certificate Letter of Authority (CLOA). This CLOA contains the same or similar authorizations as your current authorization. Once transitioned, requests for delegation, oversight activities, expansion, summary activity reports, renewal requests, etc. are processed through DMS.

A system-generated notification will be sent to the email address we have on file for you as of the migration date. The email notification includes your login credentials used to access DMS. If we do not have a current email at the time your data was migrated, you will need to retrieve your credentials by calling the FAA MyIT Service Center at 1-844-322-6948 or via email at helpdesk@FAA.gov.

DMS Job Aids

- DMS Overview for Prospective Designee Aviation Medical Examiners (6:10 minutes)
- Registration & Application Process (PDF)
- Change/Expand Authority (PDF)
- Voluntary Surrender Request (PDF)
- Suspend Designation (PDF)

DMS Contacts

MyIT Service Center - Contact for issues with the online DMS system, such as password resets, lockouts, system not functioning, etc. Do not contact the MyIT Service Center for questions concerning policy, qualifications, etc.

Phone: 1-844-FAA-MyIT (1-844-322-6948) or via email at helpdesk@FAA.gov.

DMS Support Mailbox: 9-AVS-DesigneeManagementSystemAME@faa.gov - Use this mailbox for any non-IT system questions/requests your managing specialist is unable to answer.

We appreciate your continued support and look forward to working with you throughout the DMS deployment.

http://www.faa.gov/other_visit/aviation_industry/designees_delegations/designee_types/ame/dms/
Welcome Nelson, Shawn

### Designation Information

<table>
<thead>
<tr>
<th>Designation</th>
<th>AME</th>
</tr>
</thead>
<tbody>
<tr>
<td>Designation Status</td>
<td>Active</td>
</tr>
<tr>
<td>Effective Date</td>
<td>07/28/2015</td>
</tr>
<tr>
<td>Expiration Date</td>
<td>07/31/2018</td>
</tr>
<tr>
<td>Managing Specialist</td>
<td>Nelson, Roxanne</td>
</tr>
<tr>
<td>Next Training Due Date</td>
<td></td>
</tr>
<tr>
<td>Next Seminar Due Date</td>
<td></td>
</tr>
</tbody>
</table>

### Activity Links

- AME Report Card
- Voluntary Surrender Request
- Change / Expand Authority
2. TRANSMISSION DELAYS: NUMBER OF EXAMS FOR RANGES OF DELAY

<table>
<thead>
<tr>
<th>Total Exams Transmitted:</th>
<th>Under 15 Days</th>
<th>15-30 Days</th>
<th>31-60 Days</th>
<th>60+ Days</th>
<th>% Over 60 Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>145</td>
<td>140</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>3.6</td>
</tr>
</tbody>
</table>

NOTE: Delayed exams may have been performed earlier than this report period, so total numbers in para 4 may differ.

3. EXAMINATION INFORMATION (BASED ON EXAMINATION TYPE REQUESTED BY THE AIRMAN)

<table>
<thead>
<tr>
<th>1ST</th>
<th>2ND</th>
<th>3RD</th>
<th>Total Exams</th>
<th>Deferred</th>
<th>Denied</th>
<th>% Deferred/Denied</th>
</tr>
</thead>
<tbody>
<tr>
<td>55</td>
<td>54</td>
<td>36</td>
<td>145</td>
<td>4</td>
<td>0</td>
<td>18.1</td>
</tr>
</tbody>
</table>

4. INFORMATION REGARDING EXAMS WITH 'Rv' AND 'Hx' ERRORS

NOTE: An Rv error is assigned when an AME issued a certificate when it should have been deferred or denied, requiring reversal by AMCD. An Hx error is assigned when the medical history was judged to be inadequate.

<table>
<thead>
<tr>
<th>MID</th>
<th>Applicant Name</th>
<th>Exam Date</th>
<th>Error Code</th>
<th>Code Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>200007267448</td>
<td>name</td>
<td>04/12/2016</td>
<td>Other</td>
<td>Other</td>
</tr>
<tr>
<td>200007118275</td>
<td>name</td>
<td>12/22/2015</td>
<td>Rv</td>
<td>REVERSAL</td>
</tr>
<tr>
<td>200006969115</td>
<td>name</td>
<td>07/20/2015</td>
<td>Hx</td>
<td>INADEQUATE HISTORY</td>
</tr>
<tr>
<td>200006809733</td>
<td>name</td>
<td>03/16/2015</td>
<td>Other</td>
<td>Other</td>
</tr>
</tbody>
</table>
All completed applications and medical examinations, unless directed by the FAA, **must** be transmitted electronically via AMCS within 14 days after completion to the AMCD.

AME records must be retained by the Examiner as their file copy for at least 3 years unless exceeded by state law requirements …. (scanned copies are equivalent to file copies)
STUDENT PILOT

- No longer issued by the AME as of April 1, 2016
EXAMINATION SUBMISSION DELAYS

• No Record in System to Support Issued Certificate
  – Hassle With Ramp Checks
  – Could Result in Assessment of Flying Without License If Crash and Burn Accident
SUBMISSION DELAY > 60 DAYS

- **Percent**

- **3/31/12**: 0.2
- **6/30/12**: 0.5
- **9/30/12**: 0.4
- **12/31/12**: 0.2
- **3/31/13**: 0.2
- **6/30/13**: 0.1
- **9/30/13**: 0.1
- **12/31/13**: 0.1
- **3/31/14**: 0.2
- **6/30/14**: 0.1
- **9/30/14**: 0.1
- **12/31/14**: 0.1
- **3/31/15**: 0.1
- **6/30/15**: 0.1

- **All**
- **Domestic Only**
AME PERFORMANCE REPORTING DEFERRAL RATES

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>4.8</td>
<td>4.7</td>
<td>5.0</td>
<td>4.7</td>
<td>4.5</td>
<td>4.5</td>
<td>4.8</td>
<td>4.8</td>
<td>4.8</td>
<td>4.5</td>
<td>4.4</td>
<td>4.4</td>
<td>4.4</td>
<td>4.4</td>
<td>4.4</td>
<td>4.2</td>
<td>4.1</td>
<td>4.1</td>
<td>4.0</td>
<td>3.6</td>
<td>3.6</td>
<td>3.9</td>
</tr>
</tbody>
</table>
TRAINING REQUIREMENTS

Training is REQUIRED Every 3 Years

- As an option, may alternate Multimedia Aviation Medical Examiner Refresher Course (MAMERC) in lieu of attending an FAA seminar
- Under no circumstances
  - should more than 6 years (72 months) elapse between AME seminar attendance or
  - more than 3 years (36 months) pass between seminar attendance and MAMERC completion.
MAMERC 3.0
RENEWAL OF DESIGNATION
DESIGNEE MANAGEMENT POLICY
ORDER 8000.95 CHG 2
PUBLISHED 6 MARCH 2016

– Duration of designation 3 years
– 10 exams per year to maintain proficiency
– NO exams on immediate family
– No appeal for loss of credential, failure to train or lack of FAA need for your designation
– All FAA exams must be conducted in English
SUSPENSION OF DESIGNATION
OVERVIEW OF DESIGNEE LIFECYCLE

• Suspension
  – **Input:** Trigger for suspension and termination are identified in FAA Order 8000.95
  – Suspension for not meeting current requirements
    • The designee is afforded an opportunity to correct the issue within a specific time frame
    • If not corrected, the designee may be terminated
TERMINATION OF DESIGNATION
OVERVIEW OF DESIGNEE LIFECYCLE

• Termination
  – **Input:** Trigger for suspension and termination are identified in FAA Order 8000.95
  – Termination For Cause:
    • “Bad” termination
    • Can be appealed by designee, follows Appeal process
    • Designee cannot re-apply
  – Termination Not For Cause:
    • “Not bad” termination
    • Cannot be appealed
    • Designee CAN re-apply
  – **Output:** Suspended or Terminated designee
REASONS FOR TERMINATION

• No exams in first 12 months
• Less than 10 exams per year
• Not following FAA rules
• Poor reporting of medical examinations
• Failure to train
• Practice in unapproved location
• Unprofessional office
• Unprofessional performance of exams
• Failure to mail in exams
REASONS FOR TERMINATION

- Loss, restriction, or limitation of a license to practice medicine
- Any action that compromises public trust or interferes with the AME’s ability to carry out designated responsibilities
- Arrest, indictment or conviction
- Any other reason the Federal Air Surgeon or RFS deems appropriate
- Exams not conducted in English
WHAT TO DRINK WHEN YOU DRINK.

Enjoy a RESQWATER with every few drinks and one before bed.

BE READY FOR TOMORROW.

No Stimulants ■ Certified Kosher ■ Gluten Free
# VOLUNTARY SEPARATIONS

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death</td>
<td>8</td>
<td>16</td>
<td>1</td>
<td>13</td>
</tr>
<tr>
<td>Resigned</td>
<td>95</td>
<td>86</td>
<td>25</td>
<td>97</td>
</tr>
<tr>
<td>Retired</td>
<td>48</td>
<td>65</td>
<td>12</td>
<td></td>
</tr>
</tbody>
</table>
## INVOLUNTARY SEPARATIONS

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Failure to Train</td>
<td>112</td>
<td>136</td>
<td>57</td>
<td>9</td>
</tr>
<tr>
<td>Low Volume</td>
<td>25</td>
<td>32</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Medical Incapacitation</td>
<td>2</td>
<td>6</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Performance</td>
<td>2</td>
<td>6</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>Unable to Locate</td>
<td>13</td>
<td>19</td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Unapproved Office Location</td>
<td>8</td>
<td>2</td>
<td>1</td>
<td>11</td>
</tr>
<tr>
<td>Transmission Delays</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>8</td>
</tr>
<tr>
<td>Failed Site Visit</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>
APPEAL OF TERMINATION
Provides for an appeal panel of three physicians with a decision returned within 45 days.
CAN NOT APPEAL . . .

- Lack of need
- Separation for failure to train
DESIGNEE MANAGEMENT SYSTEM (DMS)
AVS Delegation Order

• History
  – GAO Audit
  – AVS Delegation Steering Group
  – AVS 1100.2

• Required Drastic Revisions To FAA Order 8520.2F → 8520.2G → 8000.95
  – One benefit to you – 3 year designation!

• Mandates Informing All Designees That Designation Is A Privilege, Not A Right And Giving The Vision And Principles Of Delegation
New in DMS for AMEs

• AMEs will be able to view their information on training and performance

• AMEs will be able to submit updates to their information through DMS

• AMEs will receive and be able to respond to corrective actions through DMS where needed

• AMEs will request renewal of their designation through DMS
FAA TV: DMS Overview for Prospective Designee Aviation Medical Examiners

https://www.faa.gov/tv/?mediald=1180
https://designee.faa.gov
Click a course to see the sections

Home - View Schedules > FAA AAM-400 - AME Education Division

FAA AAM-400 - AME Education Division

- Aviation Medical Examiner Basic Training Course
- Aviation Medical Examiner Refresher Training Course
AMCS and DMS

- AMEs do all their medical certification work in AMCS
- AMEs manage their office staff in AMCS
- AMEs update their information in DMS at least once per year, e-mail
- AMEs use DMS to communicate with their Region and request changes in their status
- AMEs use DRS to register for training seminars
- FAA manages AMEs in DMS instead of AMEIS, a system you never saw
Summary

• AME Role in Safety
• AME Demographics
• Ways to Improve the Process
• Designee Management Past/Present/Future