



# Alcohol & Drug Use: Roadmap to Certification

Daniel Danczyk, MD, MPH

Civil Aviation Medical Association Annual Meeting, Anchorage  
September 28, 2018

# Disclosure Information

- Salaried, staff physician, private academic medical center
- My perspective  $\neq$  FAA
- Financial: Prior consulting for JetBlue (2013)
- No off-label med use and/or investigational

# Agenda

- Historical perspective
- Conceptualization
- ‘Classic’
- ‘Not so simple’
- Drug paraphernalia
- Judgmental error
- Alcohol-induced pancreatitis?

# Objectives

- Define FAA regulations regarding addiction
- Differentiate the nuances in medical certification for an airman with addiction history / concerns
- Understand the basic model of HIMS addiction protocol specifications



Occupational  
Alcohol Addiction  
Treatment  
Program (1970s)



Drugs of Abuse

4 SSRIs (2010)



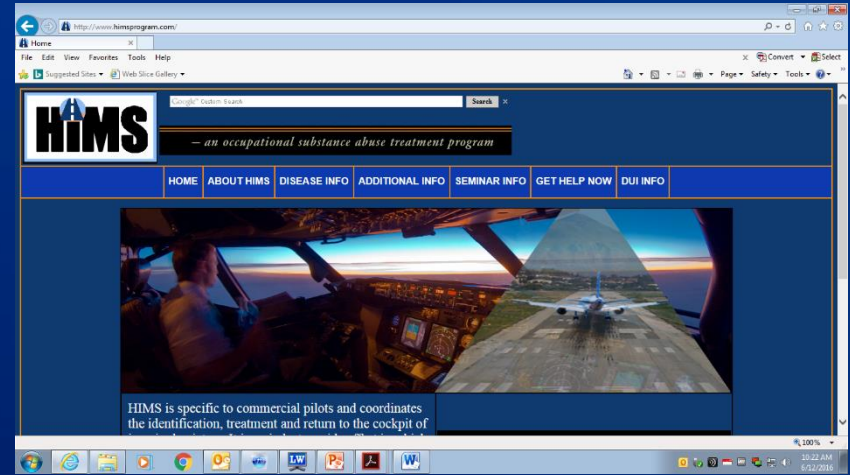
HIMS today (2016)



Alcohol / Drug Monitoring



SSRI Protocol



Himsprogram.com

# Conceptualization

- Medications
- Condition / Diagnosis
- ★ • Cognitive defects:  
DQ'ing

# What is disqualifying?

- Specifically disqualifying **All Classes:**  
**14 CFR 67.107(a)(b), 67.207(a)(b),  
and 67.307(a)(b)**
  - Substance dependence (a)
  - Substance abuse (b)



[www.brandsoftheworld.com](http://www.brandsoftheworld.com)

# Alcohol dependence in SR

- 64 y/o male 737 captain AA domestic
  - Transfer of HIMS case 2015
  - Hx 2 relapses, most recent 2010
  - Saw for 12 mo return
- Documentation – onerous for a reason!
- Motivation for sobriety??
  - Oversight / checks & balances



# HIMS Protocol Specifications

- FAA will require additional documentation:
  - Personal statement
  - State driving record x 10 years
  - Court records / arrest reports
- HIMS Evaluation
  - Psychiatric evaluation
    - Addiction psychiatrist OR HIMS-trained
  - Neuropsychological evaluation
    - HIMS-trained Neuropsychologist

# SUMMARY – FAA CERTIFICATION AID DRUG / ETOH RE-CERT

- HIMS AME
- Lab testing
- Psychiatry History Report
- Aftercare
- Chief Pilot
- Peer Pilot
- Additional providers



[www.himsprogram.com](http://www.himsprogram.com)

## FAA CERTIFICATION AID – Drug and Alcohol Monitoring Recertification

(Updated 5/25/2016)

ician/provider who may be unfamiliar with FAA medical certification requirements. It lists the ABSOLUTE MINIMUM requirements. You should strongly consider taking a **copy to each evaluator so they understand what specific information is needed** to avoid a delay in the processing of your medical certification until that information is submitted. Additional information such as (submitted within the last 90 days) for FAA purposes.

## HIMS AME Checklist - Drug and Alcohol Monitoring Recertification

(Updated 5/25/16)

Airman Name \_\_\_\_\_

PI# \_\_\_\_\_

**Instructions to the HIMS AME:**

- Address the following items based on your in-office exam and documentation review;
- **Submit this Checklist** (it must be signed and dated by the HIMS AME); **AND**
- **Include supporting documentation reviewed to complete this checklist** (including your HIMS AME report) **within 14 days to:**

Federal Aviation Administration  
Aerospace Medical Certification Division AAM-300  
PO Box 26080, Oklahoma City, OK 73125-9914

I reviewed the airman's HIMS Authorization Letter dated: \_\_\_\_\_  
(date of Authorization letter)

**1. HIMS AME FACE-TO-FACE, IN OFFICE EVALUATION: Required EVERY 6 months for ALL CLASSES**

Any concerns that the airman is not successfully engaged in a continued abstinence-based recovery program or is not working a good program based on your clinical interview/evaluation and review of reports? .....

- Interval evaluations (every 3 months or as required by Authorization Letter) were unfavorable?.....
- Any evidence or concern the airman has not remained abstinent? .....
- Any positive drug or alcohol tests since last HIMS evaluation? .....
- Any evidence of noncompliance or concern the airman is not working a good recovery program? ....
- Any NEW condition(s) that would require Special Issuance? (Do not include any new CACI qualified condition) .....

No	Yes

**2. TREATING PSYCHIATRIST REPORT or HIMS PSYCHIATRIST REPORT: Required EVERY 12 months for ALL CLASSES unless a different time interval is specifically stated in the Authorization Letter**

- Report(s) is/are favorable (no anticipated or interim treatment changes).....
- The psychiatrist recommends no additional treatment or monitoring.....

Yes	No

**Items 3 - 5: The AME should review. Do not submit these items (3-5) to the FAA unless concerns are noted.**

3. **AFTERCARE COUNSELOR REPORTS:** For 1<sup>st</sup> and 2<sup>nd</sup> class: Required every 3 months; 3<sup>rd</sup> class: Per Authorization Letter

- Show continued participation and abstinence-based sobriety? .....

N/A	Yes	No

4. **CHIEF PILOT REPORT(S):** Required monthly for commercial pilots holding first- or second-class certificates (N/A for third-class):

- Report(s) is/are favorable? .....

N/A	Yes	No

5. **PEER PILOT REPORTS:** Required monthly for commercial pilots holding first- or second-class certificates (N/A for third-class):

- Report(s) is/are favorable with continued total abstinence? .....

N/A	Yes	No

6. **ADDITIONAL REPORTS.** Required **ONLY when specified by the Authorization letter**

- HIMS related (AA attendance, therapy reports, etc.) are favorable and meet authorization requirements.....
- Reports required for other **non-HIMS** conditions all meet Authorization requirements.....

N/A	Yes	No

7. I have no other concerns about this airman and recommend re-certification for Special Issuance. ....

Yes	No

\_\_\_\_\_   
 HIMS AME Signature

\_\_\_\_\_   
 Date of Evaluation

If ALL items fall into the clear column, the AME may issue with the time limitation specified in the Authorization letter.

**If ANY SINGLE ITEM falls into the SHADED COLUMN, the AME MUST DEFER or contact the FAA for guidance AND EXPLAIN in the HIMS evaluation report.**

## A not-so-simple case...

- 47 y/o male, married w/ 2 children, student pilot seeking 3<sup>rd</sup> class
  - Hx of 2 SAP, 2001 & 2017
  - Last use Etoh 2012, but...
- Histrionic traits, 6 wks anhedonia 2001
- Opiate abuse SR, Ritalin abuse, ER
- Tobacco use, on 21mg, ↓ 4
- 1 THC brownie Jan 2017

# FAA: “SUBSTANCE” includes...

- Alcohol, PCP, sedatives and hypnotics, anxiolytics, marijuana, cocaine, opioids, amphetamines, hallucinogens, and other psychoactive drugs or chemicals



[www.ohsutp.ca/topics](http://www.ohsutp.ca/topics)

# FAA Def'n of Substance Abuse

- Physically hazardous to situation
- (+) drug test
- Etoh  $\geq$  0.04
- Refusal to submit to DoT Etoh/drug test
- Misuse that the Federal Air Surgeon finds...

# FAA: Definition of Misuse

- Makes person unable to safely perform duties OR exercise airman certificate privileges
- May be reasonably be expected (for duration of med cert) to make person unable to...
- Based on case hx and medical judgment



# Could he get certified?

- Hx substance dependence → Defer! ★
- Follow clinical recs!
- Severity of disease
- Identifiable stressor(s) for relapse??
- Not every condition is DQ'ing

# “Not my [cannabis paraphernalia]”

- 31 y/o single, never married, female student pilot seeking 3<sup>rd</sup> class
- Hx of anxiety, alcohol, and THC
- Red flags
  - Easy to elicit / some NPV
- Insight into disease / stages of change
  - ? ↑ chance for SI

# More cases for discussion


- 33 y/o male private pilot w/ Etoh-related incident
  - FAA letter 3<sup>rd</sup> class still valid
  - License suspension ≠ alcoholism, but...
  - ★ • If in doubt, DEFER!
- What constitutes a motor vehicle action?

# FAA: Motor Vehicle Actions



- DWI / DUI / OWI
- Arrest / conviction / admin action
- Affecting driving privileges
- Involved alcohol or drugs
- Attendance at rehab / educ program
- Any licence actions including test refusal
- Educational safe driving program for multiple speeding convictions

# Reporting of Motor Vehicle Actions

- 8500 history does *not* alleviate airman's reporting req't of
- FAA requires reporting within 60 days of occurrence 
- Airman must report it to:

SECURITY AND INVESTIGATIONS DIVISION  
AMC-700  
P.O. BOX 25810  
OKLAHOMA CITY, OK 73125-0810

- AKA the (Civil Aviation) Security Division 

# More cases for discussion

- 41 y/o male 767 FO hx DUI & pancreatitis (June Flight Physician)
  - BAC 0.184
- Any regulatory components present?

- Tolerance – ? (*must defer  $\geq 0.15$* )
- Withdrawal – not present
- Impaired control of use – not present
- Physical health or impairment –  
**present**
- Personality/neurosis/mental health –  
not present
- Physically hazardous situation –  
**present (DUI 2008)**



# Questions & Discussion

[DANCZYK.DANIEL@MAYO.EDU](mailto:DANCZYK.DANIEL@MAYO.EDU)

Office 507-284-4159

Cell 763-607-4263