

Medical Clearance Guidelines

Diagnosis	Assessment by a doctor with aviation medicine experience	Accept	Comments
Cystic Fibrosis	FEV1 < 50% at ground level	No current infection	
Asthma		Currently asymptomatic and no infection	
Cancer	Under active treatment (radio or chemo) Pleural effusion Dyspneic at ground level	Asymptomatic	Major hemoptysis is a contraindication
Bronchiectasis	Hypoxemic at ground level	No current infection	
Neuromuscular disease	Severe extra pulmonary restriction Need home ventilation		
Pulmonary arteriovenous malformations	If severe hypoxemic (SpO2 < 80% at ground level)		
CNS disorders (Central Nervous System)			
TIA	2 days or less	After 2 days and proper investigation	
CVA (Stroke)	4 days or less	5-14 days if stable or improving, with a nurse escort. Passenger travelling in the first 2 weeks post stroke should receive supplementary oxygen	If an uncomplicated recovery has been made, a nurse escort is not required.
Grand mal fit	24 hrs or less	>24 hours if generally well controlled	
Cranial surgery	9 days or less	>10 days, cranium free of air and adequate general condition	
Gastro-intestinal			
GIT Bleed	24 hours or less following a bleed	>10 days	1-9 days can travel if endoscopic or other clear evidence (i.e. Hb has continued to rise to indicate bleeding has ceased) of healing
Major abdominal surgery	9 days or less	>10 days if uncomplicated recovery	e.g. bowel resection, "open" hysterectomy, renal surgery etc.
Appendectomy	4 days or less	25 days if uncomplicated recovery	
Laparoscopic surgery (Keyhole)	4 days or less	>5 days if uncomplicated recovery	e.g. cholecystectomy (gall bladder removal), tubal surgery
Investigative laparoscopy	24 hours or less	>24 hours if gas absorbed	
ENT disorders (Ear, Nose and Throat)			
Otitis media and sinusitis	Acute illness or with loss of Eustachian function	If able to clear ears	
Middle ear surgery	9 days or less	>10 days with medical certificate from treating ENT	Ex: Stapedectomy
Tonsillectomy	10 days or less		Although it may be ok to fly between day 3 and 6, there is a significant risk of bleeding between day 1 and 2 and between day 7 and 10
Wired jaw	Without escort	Escorted (+ cutters) or self quick release wiring	
Psychiatric illness			
Acute psychosis	Episode within 30 days (e.g. mania, schizophrenia, drug induced)		This is for safety reason
Chronic psychiatric disorders	If significant risk of deterioration in flight	If properly controlled by medication and stable (i.e. living out in the community taking care of all own needs including medication)	
Eyes disorders			

Diagnosis	Assessment by a doctor with aviation medicine experience	Accept	Comments
Penetrating eye injury	6 days or less	>7 days	Any gas in globe must be resorbed
Intra-ocular surgery	6 days or less	>7 days	Any gas injected in the globe must be resorbed; for injection of SF6, a minimum of 2 weeks is required and for C3F8, a minimum of 6 weeks is required; written specialist fitness to fly commercially is required.
Cataract surgery	24 hours or less	>24 hours	
Corneal laser surgery	24 hours or less	>24 hours	
Pregnancy			
Single, uncomplicated	Beyond end of 36 th week (Calculated using the Estimated Date of Delivery - EDD)	Clearance not required before end of 36 weeks	
Multiple, uncomplicated	Beyond end of 32 nd week (Calculated using the Estimated Date of Delivery - EDD)	Clearance not required before end of 32	
Complicated pregnancies	On individual basis		
Miscarriage (threatened or complete)	With active bleeding	Once stable, no bleeding and no pain for at least 24 hours	
Neonates			
New born	Less than 48 hours old Incubator +/- ventilator cases	Fit and healthy babies can travel at 48 hrs. but preferably at 7 days	
Trauma			
Full plaster cast (flight more than 2 hrs.)	Less than 48 hours after injury if the cast is not bivalved	>48hrs	Comply also with anemia rules for # femur/pelvis i.e. HB 9.5 gm/dl (5.9 mmol/L)
Burns	If still shocked or with widespread infection	If medically stable and well in other respects	
Ventilators	Seriously ill cases should only be accepted after detailed discussion with airline medical advisor	Long term stable cases requiring only ventilation with air	
Miscellaneous			
Communicable diseases	During contagious stage of illness		
Spinal surgery	Within 7 days of surgery	after 7 days of surgery	Passengers must be able to sit upright for take off and landing. Should be able to tolerate unexpected severe turbulence and vibration associated with flight. Support braces such as a Halo brace may prevent wearing of the lifejacket in the unlikely event of an emergency.
Terminal illness (if prognosis for the flight is poor)	Individual assessment of cases		
Decompression	Untreated and/or symptomatic cases	3 days after treatment for bends only or 7 days after treatment for neurological symptoms	

References:

Fitness to fly for passengers with cardiovascular disease. The report of the working group of the British Cardiovascular Society, Heart 2010;ii1-ii16. doi:10.1136/hrt.2010.203091.

Managing passengers with stable respiratory disease planning air travel: British Thoracic Society recommendations. Thorax, Sept. 2011, Vol 66, Supplement 1.

INCUBATION AND INFECTIVITY

PERIODS OF INFECTIVITY IN CHILDHOOD INFECTIOUS DISEASE	
Chickenpox	5 days before rash – 6 days after last crop
Diphtheria	2-3 weeks (shorter with antibiotic therapy)
Measles	From onset of prodromal symptoms until 4 days after onset of rash
Mumps	3 days before salivary swelling – 7 days after
Rubella	7 days before onset of rash – 4 days after
Scarlet fever	10-21 days after onset of rash (shortened to 1 day by penicillin)
Whooping cough	7 days after exposure – 3 weeks after onset of symptoms (shortened to 7 days by antibiotics)

INCUBATION PERIODS OF IMPORTANT INFECTIONS		
INFECTION	INCUBATION PERIOD	
	Maximum Range	Usual Range
Short incubation periods (less than 7 days)		
Anthrax	2-5 days	
Bacillary dysentery	1-7 days	
Cholera	Hours-5 days	2-3 hours
Diphtheria	2-5 days	
Gonorrhoea	2-5 days	
Meningococacaemis	2-10 days	3-4 days
Scarlet fever	1-3 days	
Intermediate incubation periods (7-21 days)		
Amoebiasis	14-28 days	21 days
Brucellosis	7-21 days	
Chickenpox	14-21 days	
Lassa fever	7-14 days	
Malaria	10-14 days	
Measles	7-14 days	10 days
Mumps	12-21 days	18 days
Whooping cough	7-10 days	7 days
Poliomyelitis	3-21 days	7-10 days
Psittacosis	4-14 days	10 days
Rubella	14-21 days	18 days
Smallpox	7-17 days	11 days
Trypanosoma (rhodesiense infection)	14-21 days	
Typhoid fever	7-21 days	
Typhus fever	7-14 days	12 days
Long incubation periods (more than 21 days)		
Filariasis	3 months +	
Hepatitis A	2-6 weeks	4 weeks
Hepatitis B	6 weeks-16 months	12 weeks
Cutaneous leishmaniosis	1 week-months	
Visceral leishmaniosis	2 weeks-12 years	2-4 months
Leprosy	Months-years	
Rabies	Variable	2-8 weeks
Trypanosoma (gambiense infection)	Weeks-years	