

UNITED KINGDOM CIVIL AVIATION AUTHORITY

MEDICAL FLIGHT TEST REPORT –
SUBSTANDARD VISION IN ONE EYE

SECTION 1 TO BE COMPLETED BY CANDIDATE

SECTION 3 TO BE COMPLETED BY EXAMINER (CHIEF FLYING INSTRUCTOR OR FLIGHT INSTRUCTOR EXAMINER)

1. CANDIDATE'S PERSONAL PARTICULARS

Name (in full):

CAA Ref No:

Date of Birth: / /

Current Address:

.....

.....

Telephone Number - Home:

Work: Mobile:

2) PURPOSE OF TEST: INFORMATION FOR EXAMINER

Defective vision in one eye precludes stereoscopic vision which, at distances up to about fifty metres, assists with the judgement of distance, (both vertical and horizontal), speed, drift and surface texture. However, there are many other visual cues such as the relative size of objects and speed across the visual field that enable a pilot to compensate, which they usually do very well.

The cause of substandard vision may either be due to loss of central (task-detail related) vision or peripheral visual field (detection of objects outside of central vision). If there is a loss of outer peripheral visual field, the candidate will need to overcome this by increased head movement (in a direction depending on which eye has the problem) in order to maintain an adequate lookout. Experience has shown that the main problems encountered by monocular pilots are speed judgement when taxiing, the assessment of wing tip and rotor blade clearances when manoeuvring in a confined space, and the approach and landing, especially in a cross wind.

The purpose of this medical flight test is to assess the candidate's ability to compensate for their reduced vision. It should normally be performed in conjunction with a licence skills/proficiency test where all aspects of the flying task are tested.

Once content that the candidate has demonstrated a satisfactory safe standard, the examiner should complete and sign this medical flight test report, to confirm that they consider the student has reached as satisfactory standard for solo flying. Training/flight operations can then proceed as normal.

Please direct any queries to the CAA Medical Department on 01293-573700.

3) MEDICAL FLIGHT TEST REPORT (TO BE COMPLETED BY EXAMINER)

Aircraft Type:

Date of Test: / / - Place of Test:

Please comment on the candidate's ability to compensate for their reduced vision

- 1) Completion of flight planning / paperwork, reading of weather reports,
NOTAMs, maps etc.....Yes/No
- 2) Pre-flight checks and reading of cockpit instrumentsYes/No
- 3) Taxiing – speed, safe clearance from other aircraft/objectsYes/No
- 4) Take off and climb-out – judgement of distances/height.....Yes/No
- 5) Look-out – Appropriate visual scan and identification of other aircraft
and ground featuresYes/No
- 6) In-flight reading of instruments, flight plans/logs and mapsYes/No
- 7) Approach and landing – judgement of distances/heightYes/No

Comments

Examiner's Name:..... Licence Number:.....
(Please Print)

Position Held:.....

Signed: Date: / /

Please send completed form to:-
MFT Report
CAA, Medical Department
Aviation House
Gatwick Airport South
West Sussex **RH6 0YR**