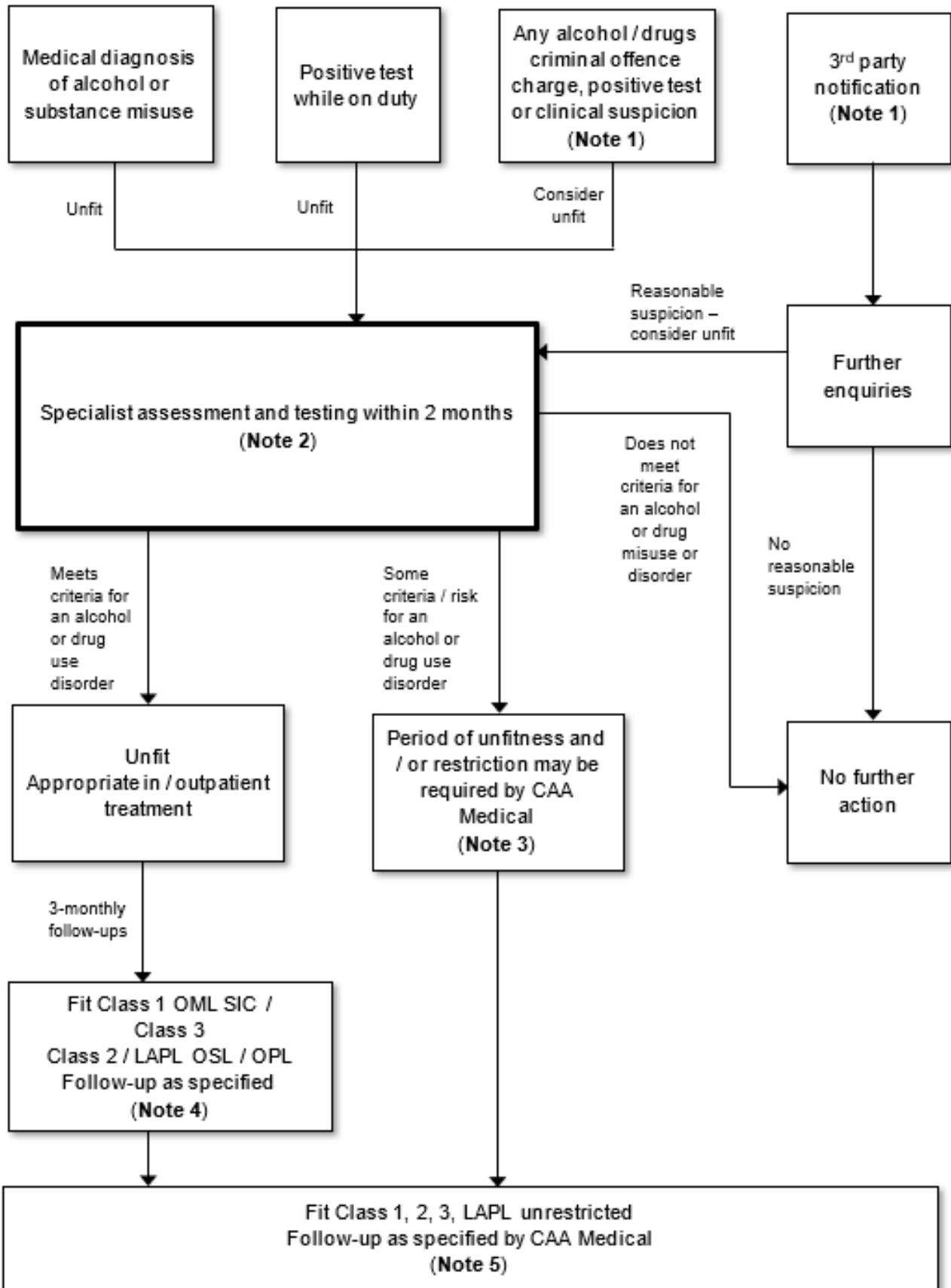


# UK CAA Guidance Material on Alcohol / Substance Misuse Assessment Process



## Notes to alcohol / substance misuse assessment flow chart

This flow chart outlines the procedure to be followed for medical certification following diagnosis or suspicion of an alcohol or drug misuse or disorder.

### Note 1

If diagnosis, use or misuse is uncertain, for example, first drink-driving conviction and has had a clinical review by an aeromedical examiner (AME), fitness may be maintained after discussion with a Civil Aviation Authority (CAA) medical assessor. A 3<sup>rd</sup> party notification or allegation should be investigated and discussion with the individual / informer / AME / GP may help to verify. The applicant should be reviewed by a specialist if reasonable suspicion or allegation can be reasonably substantiated.

### Note 2

Class 1 and 3 applicants / holders must attend a CAA specialist clinic for assessment and testing within 2 months (a local addictions specialist within 2 months for Class 2 / LAPL and clinical testing which is UKAS accredited, ISO/IEC 17025 standard and chain of custody collection). Failure to attend when specified and / or provide adequate sample(s) for testing will normally be managed as if it were a positive test and the applicant will be made unfit.

Testing for alcohol includes blood for full blood count (FBC) to include mean corpuscular volume (MCV), liver function tests (LFTs) including gamma-glutamyl transferase (GGT), % axis carbohydrate-deficient transferrin (CDT) and phosphatidylethanol (PEth).

Testing for drugs should include cannabis, amphetamines, metamphetamines, cocaine, opiates and benzodiazepines for substance misuse. Other tests may be indicated.

### Note 3

Depending on the individual case, and at the discretion of a CAA medical assessor (Class 1, 3) or AME in consultation with a CAA medical assessor (Class 2 / LAPL), the applicant may be assessed as fit, +/- operational multipilot limitation (OML), subject to ongoing periodic assessment and testing.

### Note 4

A fit assessment may be considered after a period of two years documented sobriety or freedom from alcohol or substance misuse. At revalidation or renewal, a fit assessment may be considered earlier with an OML (Class 1) or with a safety pilot (OSL) / passenger (OPL) restriction (Class 2 / LAPL). For Class 1, SIC – specific regular medical examination(s) - should also be added to the medical certificate and removal will be determined by a CAA medical assessor. Three-monthly blood and / or hair testing is mandatory to demonstrate abstinence.

### Note 5

Periodic review and testing shall be required to demonstrate absence of use / misuse. All cases of diagnosis of misuse disorders shall require long term follow-up at least annually. Applicants with non-diagnostic risk criteria will be followed on a case-by-case basis. Once returned to flying consideration of removal of any restriction may be made after at least 1 year of satisfactory follow-up and compliance. If relapse occurs, a further period of grounding will be required, pending further assessment / treatment. More than one episode of relapse is disqualifying.

Please print this document and take to your specialist advisor.