

Guidance for UK GPs on Light Aircraft Pilot's Licence (LAPL) Medical Assessments

NOTES

- 1) If there is, or likely to be, any uncertainty (see note 4 below) regarding fitness or need for application of a limitation (other than for wearing corrective lenses), applicants are advised to seek assessment/examination by an AME or at an Aeromedical Centre (AeMC), with copies of relevant medical reports. If a pilot has been previously assessed by an AME (including the application of one or more limitations), the pilot's UK GP can conduct the routine re-assessment provided there has been no change to the clinical status of the pilot. Limitations shall be maintained by the GP, and can only be removed by an AME or AeMC.
- 2) In the UK, in addition to AeroMedical Examiners (AMEs), the pilot's own UK NHS General Practitioner (GP) is permitted to certify fitness if they have access to the individual's complete medical history. The GP is required to notify the CAA every time they undertake a pilot assessment.
- 3) There should be no language barriers and applicants should be reminded it is an offence to provide inaccurate or false statements. Any previous LAPL certificate should be available. The [application form](#) should be completed by the applicant, and the GP should confirm the pilot's identity. A record of the assessment and result should be kept in the applicant's NHS record.

Review of the application form and known medical history is mandatory for all assessments. For revalidation/renewal applicants under 50yrs, examination is only required on clinical indication. Where examination is required, it shall comprise of a general clinical examination, including pulse, blood pressure, urinalysis, vision (acuity and visual fields) and conversational hearing ability. Colour vision testing is only required for a night rating.

- 4) The EASA LAPL medical standards (AMC1 to MED.B.095) can be accessed on the CAA website ([link](#)). Special consideration should be made of pilots with multiple conditions. **The following conditions will normally require assessment by, or referral to, an AME or AeMC:**

Reduced visual acuity in <u>either</u> eye below 6/9 despite any correction	Sedative medication	Physical disability
Visual field defect	Diabetes requiring medication	Malignant disease
Need for hearing aid(s)	Implanted cardiac device	Heart failure
Angina/coronary disease	Chronic lung disease	Pneumothorax
Cardiac valve replacement	Organ Transplant	Epilepsy
Recurrent fainting	Alcohol/substance misuse	Personality disorders
Cerebral disorders	Psychotic disorder	Learning difficulties
Use of antidepressant medication	Sleep disorder	Endocrine disorder
Major surgery		

- 5) An initial medical certificate can be issued by the GP pending issue of a CAA reference number which will be sent to the applicant by the CAA. The applicant should annotate the certificate with the reference number once issued.
- 6) Applicants who are assessed as unfit or have a limitation applied have a right of appeal to the CAA, in the first instance to an AME.

Any fees associated with assessments and examinations by a GP, AME or AeMC are the pilot's responsibility.

