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SENT BY MAIL & BY FAX

ARM

May, 6, 2009 – AMENDED & FINAL

Proposed Rulemaking: To amend FAA's 3rd Class medical (limited to private pilot, non-commercial, not-for-hire) to include the following: *"A valid driver's license is required to pilot any aircraft,"* and *"A 3rd Class Medical is only required for operation of aircraft heavier than (an automobile) 6,000 lbs max gross weight."*

Dear Sir,

The Administration is trying to clear up unnecessary regulations. I am escalating above the agency *as certain aspects of the task may no longer be necessary, so I anticipate some resistance within the agency to the proposed change.*

I own Potomac Airfield, a small airfield near Washington DC. Some time ago a pilot said to me *"...while he was medically approved by the Department of Defense to drive a 65,000lb, 18-wheel truck loaded with hazmat and nuclear weapons, by FAA medical standards he was not allowed to fly his small (3,000 lb) Cessna."*

I briefly reviewed DOT requirements for a Commercial Driver's License (CDL). Although the pilot may or may not have been *exactly* correct, another pilot recently had a similar experience; medically *cleared by the USAF, but denied by FAA.*

These inequities stir me from my slumber.

Flying small private aircraft with modern technology is simply not that difficult anymore, little more complex than driving the family car. Unlike years ago, flying no longer requires *'nerves of steel'* or *'eyes of a hawk,'* anyone can do it, *even the elderly.*

Onboard GPS navigation makes it unlikely a pilot will ever become lost. Commonly available XM weather in the cockpit makes a pilot less likely to fly into a thunderstorm than be in an auto accident. In truth, pilot chest-beating aside, the spatial challenge of landing a small aircraft is not significantly more complicated than parallel parking an automobile. While aircraft operate most of their time thousands of feet away from any other person or object, automobiles are always passing at relatively high speed in close proximity to nearby pedestrians and other vehicles. People are in *more* danger from passing vehicles on the road, than small aircraft passing overhead. Comparing liability insurance premiums for small

private aircraft vs automobiles attests unemotionally and non-politically that the losses, the premiums charged for those losses, and therefore the actual risks, are comparable, if not *favoring* the small private aircraft.

Continuing to impose more restrictive medical standards on piloting a small private aircraft, than driving an automobile, may be little more than trying to address a *perception* of greater risk that simply does not exist.

FAA's current medical requirements for operating a small private aircraft *are comparable to DOT's requirements for commercially operating a 65,000 lb truck.* Although clearly prudent for commercial flight operations, and larger aircraft (whose demands on the operator are significantly higher, and which pose much greater risk to others than any automobile), imposing commercial medical standards onto pilots of a small private family airplanes seems unnecessarily burdensome and needlessly restrictive.

FAA has already recognized a basic driver's license for meeting the medical requirements for operating "Light Sport Aircraft" (LSA). *Let us just take that insight one-step further.*

FAA's *medical* exemption is currently <u>exclusive</u> *to LSA aircraft,* artificially creating an unfair, unnecessary, and <u>exclusive</u> market concession for a few LSA manufacturers. FAA *Medical* standards are literally being exploited by industry to *force* thousands of older pilots to *stop* using their *certified* aircraft; so they must either buy a new LSA *or quit flying.*

Does that really make sense? Is that really equitable to the pilots?

LSA extremely low weight standards may in fact be hazardously low, as they are the major contributing factor to LSA accidents. LSA weight standards appear to have been arbitrarily set by the LSA manufacturers <u>to preclude competition</u> from lower-cost certificated aircraft, including many thousands of much lower-cost used aircraft. Is a small Cessna any more difficult to operate than an LSA aircraft? *Not really. To claim otherwise is self-serving.*

I propose the medical standards for Light Sport Aircraft should be expanded to include private-pilots of aircraft whose weight and complexity are comparable to automobiles. (AOPA and FAA have evolved the distinction of 6,000 lbs for other applications). If a pilot is safe to drive an automobile, they are probably safe to fly a <u>small</u> airplane. When legitimate medical reasons force a pilot to stop driving, they will lose their driver's license, and for the same legitimate reasons they will be stopped from flying. If a pilot is truly dangerous in a small airplane, they are probably *more* dangerous in an automobile; but in that arena our society has taken a more balanced view. *I say we expand the common-sense medical standards of LSA more equitably across the board.*

All pilots dutifully 'hang up their spurs' sooner or later; as with driving; they are not suicidal, nor do they have any desire to endanger their passengers or anyone else.

A good friend and flight surgeon raised the legitimate issue of the predictable loss of balance that comes with age. I counter that even today's medical standards fail to address such issues. Furthermore, pilots' ongoing *competency* will continue to be *assured* by existing *bi-annual flight reviews*, *Instrument Competency Checks*, and other more specific, and more effective FAA measures.

I encourage this debate to be engaged by all interested parties. Should a change be enacted, there would be no reduction in safety, *and a significant increase in the utility and economy of General Aviation for personal transportation*; *which is in the common interest of all.*

Thank you,

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