

**GUIDELINES FOR INITIAL ASSESSMENT OF AIRMEN
WITH HISTORY OF MISUSE OF DRUGS OR ALCOHOL**

When the presence of a drug or alcohol problem is in question in an applicant for airman medical certification, it is the responsibility of the Office of Aviation Medicine to determine whether a history of substance abuse or dependence does exist; and if it does, whether there is satisfactory evidence of recovery.

If it is determined that a problem does exist, the Federal Aviation Administration requires that the applicant submit an evaluation by a professional who has had special training in diagnosis and/or treatment of addiction. This would include certified substance abuse counselors, psychologists or psychiatrists, other physicians with special training in addictive disorders, and members of ASAM (American Society of Addiction Medicine).

The report should contain adequate information to determine whether a problem exists, including significant negatives. This should include, though not necessarily be restricted to the following information that may be related to substance misuse.

PERSONAL:

- Anxiety, depression, insomnia
- Suicidal thoughts or attempts
- Personality changes (argumentative, combative)
- Loss of self esteem
- Isolation

SOCIAL:

- Family problems
- Separation
- Divorce
- Irresponsibility
- Abuse, Child/spousal

LEGAL:

- Alcohol-related traffic offenses
- Public intoxication
- Assault and battery

OCCUPATIONAL:

- Absenteeism or tardiness at work
- Reduced productivity
- Demotions
- Frequent job changes
- Loss of job

MEDICAL:

Blackouts
Memory problems
Stomach, liver or cardiovascular problems
Sexual dysfunction

ECONOMIC:

Frequent financial crises
Bankruptcy
Loss of home
Lack of credit

INTERPERSONAL ADVERSE AFFECTS:

Separation from family, friends, associates, etc.

ADDITIONAL FACTORS:

Tolerance
Withdrawal
Loss of control
Preoccupation with use
Continued use despite consequences

*Please address each of the
DSM-IV criteria for alcohol
abuse/dependence individually*

When appropriate, specific information about the quality of recovery should be provided, including the period of total abstinence. Summary, appraisal, etc., with final diagnoses in accordance with standard nomenclature is of particular significance.

Further information may be required, including treatment and traffic records, psychological testing, as well as other medical and laboratory records (random drug testing, liver profile, etc.). It may be appropriate for the evaluator to interview or contact a significant other in the process of this evaluation.