



# Federal Air Surgeon's Medical Bulletin

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For FAA Aviation Medical Examiners, Office of Aerospace Medicine Personnel,  
Flight Standards Inspectors, and Other Aviation Professionals.



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**Federal Aviation Administration**

## Moving Away From Paper

**H**APPY NEW YEAR, EVERYONE, I hope that 2012 is a great year for you.

I am pleased to announce that the Office of Aerospace Medicine is taking a big step toward becoming paperless. **Effective October 1, 2012, pilots must use FAA MedXPress to complete an electronic application for an Airman Medical Certificate or Airman Medical and Student Pilot Certificate, FAA Form 8500-8.**

When I originally announced MedXPress back in the spring of 2007, I explained that it was our intention to eventually make the entire process paperless, but we wanted to offer a transition time to give pilots the opportunity to get accustomed to automating the process.

While MedXPress has proven to be an excellent tool, we need to significantly increase its use. Beginning October 1, everyone will be required to use the MedXPress system.



By Fred Tilton, MD

While some individuals will say, "The paper system works just fine, and I do not wish to change," it is important to understand why this change is so important for all of us.

In short, the paper system allows for too many errors, leads to storage problems and creates security risks. The paper form was the only way for pilots to provide us with their history in the "non-electronic" age, but it was far from perfect. Poor handwriting, spelling errors, and items left blank gave us incomplete records and massive storage and retrieval issues. We corrected some of these problems when we introduced our first electronic system in 1992, but that system was voluntary for AMEs who were designated before its introduction, and we still had to contend with large amounts of paper records.

Our next step toward "paperless" took place in 1999 when we introduced the Document, Imaging, and Workflow System (DIWS), and the Aerospace Medical Certification Subsystem (AMCS). These two systems virtually eliminated our problems with storage and poor penmanship, but we still had to contend with the other problems associated with the paper 8500-8. The AMEs still had to deal with the handwriting and spelling problems and had to dedicate resources to transfer the histories from paper to electronic form.

In this era of belt-tightening, the paper 8500-8 also costs more than \$150,000 a year to print, store, distribute, and mail. On occasion, the paper forms have been lost in the mail, and we are concerned that this poses unnecessary risks that the documents could be used inappropriately.

This list just scratches the surface of our challenges with the paper 8500-8. We are confident that MedXPress eliminates all of these issues and also allows us to enhance the certification process. We cannot make these changes if we are still using a paper system.

We need your help.

One of the planned enhancements would establish a tracking program so that pilots and AMEs can query the system and electronically determine the status of applications. We also want to make the process easier on applicants by developing a feature that automatically transfers information that does not change so that the applicant is not required to re-enter information at subsequent examinations. We can only make these changes and other important enhancements if we move to an electronic system.