

ERA09LA229  
MEDICAL RECORDS INFORMATION

The following medical information was extracted by Dr. Mitchell A. Garber, NTSB Medical Officer, from medical records maintained on the pilot by the FAA Aerospace Medical Certification Division:

6/27/1991 – an internal FAA memorandum noted, in part, “The following medical record ID is forwarded to you for your action as deemed appropriate. An Enforcement Investigative Report (EIR) has been forwarded to the Assistant Chief Counsel’s Office for legal enforcement action. ... The following is a description of the violation(s) pertaining to this FAA certified airman: ... DWI – Liquor ... 12/08/89 ... MA.”

10/22/1991 – An Order of Suspension and Revocation noted, in part, “... it has been determined that you violated the Federal Aviation Regulations ... On or about December 8, 1989, you were convicted ... for driving under the influence of liquor ... . On or about February 5, 1991, ... in response to Item 21. v., or in the alternative Item 21. w., Medical History - Have you ever had, or have you now any of the following: ‘Record of Traffic Convictions,’ or ‘Record of Other Convictions,’ you answered ‘No.’ ... a fraudulent or intentionally false statement entered on an application for a medical certificate is a basis for suspension or revocation ... It is ordered that ... your Second Class Medical Certificate be revoked and your Private Pilot Certificate ... be suspended, effective October 10 1991, the date of surrender. Such suspension to continue in force for a period of 60 days until December 8, 1991.”

12/29/1992 – An application for 2<sup>nd</sup> class Airman Medical Certificate indicated “Yes” in response to “Has Your FAA Airman Medical Certificate Ever Been Denied, Suspended, or Revoked?” The application noted “No” to all items under “Medical History,” including specifically “Alcohol dependence or abuse.” The application noted “Yes” to “History of ... conviction(s) involving driving while intoxicated ....” There is no indication that the FAA obtained records of the pilot’s arrest or conviction or required any further evaluation of the pilot.

1/6/1997 – an internal FAA memorandum noted, in part, “The following medical record ID is forwarded to you for your action as deemed appropriate. An Enforcement Investigative Report (EIR) has been forwarded to the Assistant Chief Counsel’s Office for legal enforcement action. ... Susp/Chem Test Refusal ... 7/12/95 ... MA.”

3/13/1997 – A letter from the Acting Manager of the FAA Aeromedical Certification Division noted, in part, “Review of your application/physical examination of March 6, 1996 ... gave a Positive answer to Item 18-V (CONVICTION AND/OR ADMINISTRATIVE ACTION HISTORY) on the application ‘as previously reported.’ However, information received from other

sources reveals that you have a record of one other alcohol related traffic offenses on July 12, 1995. Since a history of alcohol-or-drug-related offenses may indicate a diagnosis of alcoholism or drug dependence, we ask that you provide the following:

1. Copies of all records associated with the offenses, or associated with any care or treatment for alcohol or drug abuse, or related disorders.
2. Description of your alcohol/or drug use, and of the circumstances surrounding the offenses.
3. Please provide a copy of your current driving record from the Department of Motor Vehicles from any state that you have held a drivers license.
4. We also ask that you submit a current evaluation from a Substance Abuse Specialist, or Addictologist in accordance with enclosed guidelines.

Following receipt and review of the above data, we will notify you whether additional information is necessary....”

3/26/1997 – A letter to the FAA from a Certified Addiction Professional noted, in part, that the pilot “... reports drinking at social occasions, parties and going out to dinner, but rarely drinks at home and never drinks alone. He denies any loss of control, blackouts, change in tolerance, withdrawal symptoms, suicidal attempts, physical problems as a result of drinking or prior hospitalizations or counseling pertaining to his drinking. There is no history of alcoholism or drug abuse in his family. ... [The pilot] was experiencing much anxiety at the time he was arrested for driving under the influence of alcohol, having had an operation for prostate cancer. He understands the seriousness of this arrest, which was an error in judgment on his part--an error he has no intention of repeating. [The pilot’s] cancer is in remission and he now has a positive outlook for his future. There are no apparent signs or symptoms of alcohol abuse or dependence in this case and I have no reason to disbelieve the information given to me by [the pilot]. ...” There is no indication that the pilot informed the Certified Addiction Professional regarding his 1989 DUI conviction.

3/31/1997 – A letter from the pilot to the FAA noted, in part, “Per our telephone conversation of 20 March 1997, I am enclosing a) Driving record for State of Florida, b) Evaluation done at ... Center for Behavioral Health. If you need anything further, please do not hesitate to contact me ...” There is no indication that the pilot provided or the FAA further requested driving records for the State of Massachusetts or any records of the 1995 offense.

4/10/1997 – A letter from the Acting Manager of the FAA Aeromedical Certification Division noted, in its entirety, “This will acknowledge receipt of requested data. We have reviewed this data and your March 6, 1997 [sic], application for medical certification and have determined that you are eligible for the third-class certificate which you now hold. It is valid until the normal date of expiration. You are cautioned that further alcohol related offenses, or evidence of alcohol abuse may require re-evaluation of your medical certification.”

9/30/1997 – An Order of Suspension and Revocation noted, in part, “... On or about July 12, 1995, your driving privilege was suspended by the State of Massachusetts, Registry of Motor Vehicles, for a Chemical Test Refusal. ... On or about March 6, 1996 ..., in response to item 18.v., Medical History – Have you ever had or have you now any of the following: ‘History of (1) any conviction(s) involving driving while intoxicated by, while impaired by, or while under the influence of alcohol or a drug; or (2) history of any conviction(s) or administrative actions(s) involving an offense(s) which resulted in the denial, suspension, cancellation, or revocation of driving privileges, or which resulted in attendance at an educational or rehabilitation program,’ your answer did not include the suspension ... you violated the ... Federal Aviation Regulations in that you made or caused to be made a fraudulent or intentionally false statement on an application for an airman medical certificate ... IT IS ORDERED ... that any and all airman medical certificates held by you including your Third Class Medical Certificate, be and hereby are revoked. We acknowledge that such certificate has been surrendered to the undersigned on September 16, 1997. ... IT IS ORDERED ... that any and all airman pilot certificates held by you ... be and hereby are, suspended for thirty (30) days effective August 15, 1997, the date on which you surrendered your certificate. That suspension will terminate at midnight September 13, 1997, after which time you may again exercise the privileges of your certificate if you are otherwise qualified. ...”

12/2/1997 – An application for 3<sup>rd</sup> class Airman Medical Certificate indicated “Yes” in response to “Has Your FAA Airman Medical Certificate Ever Been Denied, Suspended, or Revoked?” The application noted “Yes” to “Rejection for life or health insurance,” “Admission to hospital,” and “Other illness disability, or surgery,” and “No” to all other items under “Medical History,” including specifically “Alcohol dependence or abuse.” The application noted “Yes” to “History of ... conviction(s) involving driving while intoxicated ....” Under “Explanations” was noted “As previously reported DUI – 12/89 Hingham, MA and on or about 6/25/95 DUI Hingham MA, Prostate operation previously reported 5/9/94.” The application noted that the pilot “Has been issued” a medical certificate.

3/8/2006 – The pilot’s most recent application for 3<sup>rd</sup> class Airman Medical Certificate had marks in the box for “Yes” and in the box for “No” in response to “Has Your FAA Airman Medical Certificate Ever Been Denied, Suspended, or Revoked?” In the version of the application electronically submitted to the FAA, only the box for “No” was marked in response to that inquiry. The application noted “No” to all other items under “Medical History,” including specifically “Alcohol dependence or abuse.” The application noted “Yes” to “History of ... conviction(s) involving driving while intoxicated ....” Under “Explanations” was noted “As previously reported DUI Hingham 12/89 DUI Hingham 6/95 ... Prostate operation 5/9/94.” “Total Pilot Time” was noted as 2800 hours “To date” and 45 hours in the “Past 6 months.”

The following medical information was extracted by Dr. Mitchell A. Garber, NTSB Medical Officer, from the report of autopsy performed on the pilot at the Office of the District Twelve Medical Examiner, Sarasota, Florida.

Under “Summary of Autopsy Findings” was noted, in part, “...Metastatic Neuroendocrine Tumor (Carcinoid) ... Metastatic to liver and lymph nodes ...”

Under “Toxicology” was noted, “Blood Alcohol: Ethanol Positive 0.093 gm/dL; Urine Drug Screen: Ethanol Positive 0.084 gm/dL.”

Under “Cause of Death” was noted, “Fractures of Spine due to Blunt Impact to Neck and Torso.”

Under “Internal Examination” was noted, in part:

... Liver, Gallbladder, and Pancreas: The liver weighs 1510 grams. The capsule is thin. The cut surfaces are red-tan and congested, and have no gross evidence of cirrhosis. Sectioning reveals multiple white-tan firm nodules measuring up to 1.5 cm in diameter throughout the cut surfaces. The gallbladder contains orange liquid bile. The pancreas has firm, tan, lobulated parenchyma.

Hemic and Lymphatic: The spleen weighs 100 grams. The capsule is thin. The cut surfaces are dark red and soft. The lymph nodes are not enlarged except as described. Multiple mesenteric lymph nodes are enlarged and have firm, white-tan cut surfaces. The vertebral marrow is dark red. The thymus is replaced by fat. ...

Under “Microscopic Findings” was noted, in part:

... Liver: Mild steatosis with fatty vacuoles occupying 5% of the cross-sectional area. The nodule is characterized by nests and cords of uniform small cells with scant pink granular cytoplasm and round-oval stippled nuclei.

Lymph node: The section shows a rim of lymphoid tissue surrounding a nodule composed of similar trabeculae of small carcinoid-type cells.