

# **Aviation Investigation Final Report**

Location: RENTON, Washington Accident Number: SEA96FA071

Date & Time: March 20, 1996, 13:39 Local Registration: N1460M

Aircraft: Cessna U206E Aircraft Damage: Substantial

**Defining Event:** 1 Minor, 1 None

Flight Conducted Under: Part 91: General aviation - Personal

### **Analysis**

The pilot became incapacitated in flight, requiring his non-pilot passenger to take the controls. The passenger contacted the air traffic control tower at Renton, Washington and requested assistance. A Renton tower controller, who was also a certificated flight instructor, then 'talked the passenger down' to a landing at Renton. The passenger landed the floatplane hard on the airport's paved runway, substantially damaging the aircraft. The pilot was pronounced dead at the scene. An FAA second-class medical certificate, dated November 21, 1994, was found in the pilot's personal effects at the scene. An autopsy attributed the pilot's death to 'severe arteriosclerotic cardiovascular disease' and classified the manner of his death as natural. The pilot indicated on his application for his medical certificate, dated November 18, 1994, that he had no history of heart or vascular trouble. However, medical records on file at two Seattlearea hospitals documented that the pilot had been admitted to those hospitals in 1991 with diagnoses of myocardial infarction and coronary artery disease, both disqualifying conditions for a second-class medical certificate per Federal Aviation Regulations.

## **Probable Cause and Findings**

The National Transportation Safety Board determines the probable cause(s) of this accident to be: the pilot's initiation of a flight with a known disqualifying heart condition, and his subsequent inflight incapacitation from a heart attack. A factor relating to the accident was: the inability of the non-rated passenger (unqualified person) to attain a successful landing.

### **Findings**

Occurrence #1: MISCELLANEOUS/OTHER

Phase of Operation: CRUISE

#### **Findings**

1. (C) PROCEDURES/DIRECTIVES - NOT FOLLOWED - PILOT IN COMMAND

2. (C) INCAPACITATION(CARDIOVASCULAR) - PILOT IN COMMAND

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Occurrence #2: HARD LANDING

Phase of Operation: EMERGENCY LANDING

#### Findings

3. (F) FLARE - NOT ATTAINED - UNQUALIFIED PERSON

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### **Factual Information**

#### HISTORY OF FLIGHT

On March 20, 1996, approximately 1315 Pacific standard time, the commercial pilot/owner of a Cessna U206E floatplane, N1460M, became incapacitated while on a local personal 14 CFR 91 flight out of Renton, Washington. The non-pilot-rated passenger took the controls of the aircraft and, at 1324, contacted the Renton air traffic control tower (ATCT) for assistance. A Renton ATCT air traffic controller who was also a certificated flight instructor (CFI) subsequently "talked the passenger down" to a landing at Renton. At approximately 1339, during the passenger's landing attempt, the floatplane landed hard on the asphalt/concrete surface of Renton runway 15 and was substantially damaged. The passenger received a minor injury. The 46-year-old pilot was pronounced dead at the scene. Visual meteorological conditions prevailed and there was no record of a flight plan having been filed.

#### PERSONNEL INFORMATION

A second-class FAA medical certificate, dated November 21, 1994, was found in the pilot's personal effects at the accident scene. According to an FAA-certified copy of the pilot's application (FAA Form 8500-8) for the medical certificate, signed by the pilot and dated November 18, 1994, the pilot checked "No" on item 18-g of the "medical history" section of the application, indicating that he had no history of "heart or vascular trouble." The application and certificate indicated that the pilot was 71.5 inches tall and weighed 209 pounds.

#### **WRECKAGE**

The airplane wreckage was examined at the accident site on March 20, 1996. The examination of the wreckage revealed a set of two parallel, curved ground scrapes, spaced approximately the distance between the floats apart, starting at a point about 321 feet beyond the approach end of runway 15 and continuing to the aircraft. A series of 12 slash marks in the runway pavement, oriented approximately perpendicular to the ground scrapes, was located along the path of the scrapes with the first slash about 28 feet past the initiation point of the ground scrapes. The pavement scrapes exited the right edge of the runway at approximately the intersection of the runway and the far edge of taxiway H. At this point, the ground scrapes continued in the grass along an arc from the pavement scrapes' point of pavement exit to the aircraft, which was headed approximately southwest. The aircraft had come to rest on the east edge of the west parallel taxiway, just beyond taxiway H. The total distance along the runway from the start of the ground scrapes to the point on the runway abeam the aircraft, as measured by Renton police, was 566 feet. The airplane's floats were collapsed, with the right float being collapsed up against the fuselage. The right wing tip was in contact with the ground and the right wing was buckled upward at about mid-span. All three

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propeller blade tips were curled. No evidence of airframe or engine malfunction occurring prior to the event was observed.

King County Medical Examiner's (KCME) investigators at the scene informed the NTSB investigator-in-charge (IIC) that an unlabeled bottle of pills had been found on the pilot's person. In a subsequent telephone conversation with the KCME pathologist assigned to the case, the pathologist expressed the opinion to the NTSB IIC that the pills visually resembled nitroglycerin tablets.

#### MEDICAL AND PATHOLOGICAL INFORMATION

The King County Medical Examiner's Office, Seattle, Washington, performed an autopsy on the pilot on March 21, 1996. The autopsy indicated pathological diagnoses of "severe arteriosclerotic cardiovascular disease with severe atherosclerosis involving the three main coronary arteries" as well as "medical therapy includ[ing] intravascular catheters." The only external evidence of injury noted in the report was "two 1 1/2 inch in greatest dimension...contusions" on the left upper arm. The autopsy report stated: "Death is attributed to severe arteriosclerotic cardiovascular disease. In view of the scene and circumstances surrounding the death, the manner of death is classified as natural."

Toxicology testing was performed by the FAA Civil Aeromedical Institute (CAMI), Oklahoma City, Oklahoma. The CAMI toxicology tests detected nitroglycerin in a tablet submitted with the toxicology specimens.

Medical records on file at St. Francis Community Hospital, Federal Way, Washington, indicated that the pilot received emergency treatment there on July 31, 1991 and was admitted to the hospital's coronary care unit at that time with a final diagnosis of "coronary disease manifested by inferior wall myocardial infarction." The records indicated that the pilot was scheduled for cardiac catheterization on August 2nd but then became "very anxious and upset with poor insight" and left the hospital against medical advice on August 3, 1991 without the procedure being performed. Prescriptions for Lopressor and sublingual nitroglycerin were then relayed to the pilot's wife by telephone.

Medical records on file at Providence Hospital/Seattle Medical Center, Seattle, Washington, indicated that the pilot went to the emergency room there on August 5, 1991, two days after leaving St. Francis, experiencing chest pain. The records indicated that the pilot was admitted to Providence at that time, stating the following:

The patient was status post inferior wall myocardial infarction. He was treated with anti-anginal medications. He was a young man with his first presentation of coronary artery disease. Cardiac catheterization was performed. This showed...mild inferior hypokinesis....In the circumflex there was a 50-70% stenosis....The right coronary artery was occluded. The PDA filled through collaterals during injections of the left system....

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The Providence records indicated that the pilot was discharged on August 8, 1991 and would, in the words of the attending physician, "return to my office for long-term management." This physician, a Seattle cardiologist, was a different physician than the FAA aviation medical examiner who issued the pilot's medical certificate in 1994.

According to 14 CFR 67.15(e)(1), an established history of myocardial infarction, angina pectoris, or "coronary heart disease that has required treatment, or, if untreated, that has been symptomatic or clinically significant" is a disqualifying condition for issuance of an FAA second-class medical certificate. However, 14 CFR 67.15 does not require applicants for a second-class medical certificate to undergo an electrocardiographic examination. 14 CFR 67.20(a)(1) prohibits individuals from making "any fraudulent or intentionally false statement on any application for a medical certificate under this part."

#### ADDITIONAL INFORMATION

For the purposes of the NTSB report, the pilot's injury level was classified as "none" since his death was ruled by authorities as natural and not as a result of the accident.

The airplane wreckage was verbally released to Mr. Jim Stiger of Barrus & Stiger, Bellevue, Washington, on March 20, 1996. Mr. Stiger is the insurance adjuster for the aircraft owner's estate.

#### **Pilot Information**

Certificate:	Commercial	Age:	46,Male
Airplane Rating(s):	Single-engine land; Single-engine sea	Seat Occupied:	Left
Other Aircraft Rating(s):	None	Restraint Used:	
Instrument Rating(s):	None	Second Pilot Present:	No
Instructor Rating(s):	None	Toxicology Performed:	Yes
Medical Certification:	Class 2 Valid Medicalw/ waivers/lim	Last FAA Medical Exam:	November 18, 1994
Occupational Pilot:	No	Last Flight Review or Equivalent:	
Flight Time:	2200 hours (Total, all aircraft)		

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## **Aircraft and Owner/Operator Information**

Aircraft Make:	Cessna	Registration:	N1460M
Model/Series:	U206E U206E	Aircraft Category:	Airplane
Year of Manufacture:		Amateur Built:	
Airworthiness Certificate:	Normal	Serial Number:	U20601460
Landing Gear Type:	Float	Seats:	6
Date/Type of Last Inspection:	April 14, 1995 Annual	Certified Max Gross Wt.:	3600 lbs
Time Since Last Inspection:		Engines:	1 Reciprocating
Airframe Total Time:		Engine Manufacturer:	Continental
ELT:	Installed, activated, did not aid in locating accident	Engine Model/Series:	IO-520
Registered Owner:	IHRKE, RAYMOND D.	Rated Power:	
Operator:		Operating Certificate(s) Held:	None
Operator Does Business As:		Operator Designator Code:	

## **Meteorological Information and Flight Plan**

meteorological informati	<u> </u>		
Conditions at Accident Site:	Visual (VMC)	Condition of Light:	Day
Observation Facility, Elevation:	RNT ,29 ft msl	Distance from Accident Site:	
Observation Time:	13:29 Local	Direction from Accident Site:	
<b>Lowest Cloud Condition:</b>	Unknown	Visibility	25 miles
Lowest Ceiling:	Broken / 3400 ft AGL	Visibility (RVR):	
Wind Speed/Gusts:	12 knots /	Turbulence Type Forecast/Actual:	/
Wind Direction:	180°	Turbulence Severity Forecast/Actual:	/
Altimeter Setting:	30 inches Hg	Temperature/Dew Point:	13°C / 4°C
Precipitation and Obscuration:	No Obscuration; No Precipit	ation	
Departure Point:	(RNT)	Type of Flight Plan Filed:	None
Destination:		Type of Clearance:	VFR
Departure Time:	13:08 Local	Type of Airspace:	Class D

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## **Airport Information**

Airport:	RENTON MUNI RNT	Runway Surface Type:	Asphalt
Airport Elevation:	29 ft msl	<b>Runway Surface Condition:</b>	Dry
Runway Used:	15	IFR Approach:	None
Runway Length/Width:	5379 ft / 200 ft	VFR Approach/Landing:	Full stop

## Wreckage and Impact Information

Crew Injuries:	1 None	Aircraft Damage:	Substantial
Passenger Injuries:	1 Minor	Aircraft Fire:	None
Ground Injuries:	N/A	Aircraft Explosion:	None
Total Injuries:	1 Minor, 1 None	Latitude, Longitude:	47.46046,-122.210685(est)

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#### **Administrative Information**

Investigator In Charge (IIC):	Nesemeier, Gregg	
Additional Participating Persons:	CANDY CARRERA; RENTON , WA	
Original Publish Date:	February 28, 1997	
Last Revision Date:		
Investigation Class:	<u>Class</u>	
Note:		
Investigation Docket:	https://data.ntsb.gov/Docket?ProjectID=42273	

The National Transportation Safety Board (NTSB) is an independent federal agency charged by Congress with investigating every civil aviation accident in the United States and significant events in other modes of transportation—railroad, transit, highway, marine, pipeline, and commercial space. We determine the probable causes of the accidents and events we investigate, and issue safety recommendations aimed at preventing future occurrences. In addition, we conduct transportation safety research studies and offer information and other assistance to family members and survivors for each accident or event we investigate. We also serve as the appellate authority for enforcement actions involving aviation and mariner certificates issued by the Federal Aviation Administration (FAA) and US Coast Guard, and we adjudicate appeals of civil penalty actions taken by the FAA.

The NTSB does not assign fault or blame for an accident or incident; rather, as specified by NTSB regulation, "accident/incident investigations are fact-finding proceedings with no formal issues and no adverse parties ... and are not conducted for the purpose of determining the rights or liabilities of any person" (Title 49 Code of Federal Regulations section 831.4). Assignment of fault or legal liability is not relevant to the NTSB's statutory mission to improve transportation safety by investigating accidents and incidents and issuing safety recommendations. In addition, statutory language prohibits the admission into evidence or use of any part of an NTSB report related to an accident in a civil action for damages resulting from a matter mentioned in the report (Title 49 United States Code section 1154(b)). A factual report that may be admissible under 49 United States Code section 1154(b) is available here.

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