CLEARANCE FOR NONAIRCREW PERSONNEL TO PERFORM MISSION ESSENTIAL NON-FLIGHT SAFETY RELATED DUTIES IN USN/USMC AIRCRAFT

THIS FORM SHALL BE PROVIDED BY THE FLIGHT APPROVING AUTHORITY

TO THE APPLICANT -- PLEASE READ CAREFULLY:

You require clearance to fly in military aircraft as non-aircrew mission essential personnel. Prior to flying, you are required to complete Non-aircrew NASTP Training for helicopters and V-22 or comparable aviation physiology and water survival training. This training prepares personnel authorized to fly in naval aircraft by providing training in areas of aeromedical aspects of flight, water survival skills, the proper use of Aviation Life Support Systems, and other general personal mission enhancement and survival procedures and requires a high level of fitness and stamina. As the water survival training is considered High-Risk Training, personnel must have a U.S. Navy 3rd Class swimmer, USMC CWS-1 or better to qualify. Further, your duties are essential to the completion of the missions to which you are assigned.

Consequently, the purpose of this examination is to assess your safety in performing this training and subsequent duties, and to identify conditions, if any exist, which might impair your ability to perform your duties and thus jeopardize completion of the mission. While in these roles, you fall under the NATOPS program which requires you to fully inform your unit medical department representative of ANY medical conditions which currently exist or might develop.

Please fill out the medical questionnaire and have your physician fill out the physical examination section of this form. You must then present this completed form to a Navy Flight Surgeon for endorsement for training and flight if waivers required.

endorsement for training and flight if walvers required.														
Name							Date							
Address							DOD ID Number							
Age			Gender	М	F	Rank/Rate								
YES	NO	, , , , , , , , , , , , , , , , , , , ,												
		Disease of the eyes, ears, sinuses, seasonal allergies, hay fever, difficulty with clearing your ears, or pain in your ears or sinuses from diving or flying?												
		Chest pain, angina, heart attack, heart disease, heart murmur, palpitations, cardiac catherizations, or												
		pacemaker?												
		Hypertension, stroke, blood clots in legs, swelling in feet, or excessive fatigue with mild exertion?												
		Asthma, wheezing, emphysema, chronic cough, tuberculosis, collapsed lung, or shortness of breath with mild exertion?												
		Disease of the bowel, ulcers, rectal bleeding, chronic abdominal pain, hernia, kidney stone, or painful or frequent urination?												
		Arthritis, joint deformity, chronic back pain, or limitation of use of your back or extremities?												
		Paralysis, weakness of muscles, seizures, epilepsy, migraine or other severe headaches, loss of consciousness, or amnesia?												
		Mania, depression, schizophrenia, suicide attempt, alcoholism, panic attacks, fear of flying, fear of heights, fear of enclosed spaces?												
		Anemia, diabetes, cancers, arterial gas embolism, bends, surgery, hospitalization, or other chronic medical conditions not listed?												
		Are you currently pregnant?												
		Are you currently taking any medications? List:												
		Can you jog 15 minutes continuously and swim 100 yards?												
I hereby certify that the above answers are true to the best of my knowledge. I further understand that I														
am required to notify my unit medical representative of any conditions, pre-existing or as they occur, whether I think they affect my ability to perform flight duties or not.														
Signat		ink triey affect my ability to	periorm liight dut	ies o	not.	Date:								
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TO THE EXAMINING PHYSICIAN																		
This Service member is being evaluated for clearance to fly in military aircraft as mission essential non-aircrew personnel. He or she will be required to complete aviation physiology and water survival training. These training programs are designated as High Risk Training and require a high degree of physiologic and psychological stamina. Further, it is critical to identify any conditions which might impact this individual's ability to carry out their duties, as they will be involved in mission critical activities, and their loss would jeopardized mission completion. For more information, consult Aeromedical Reference and Waiver Guide.																		
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Nml	Abnml			Syste	m			Elaboration and Comments										
		HE	ENT															
		١	Valsalva (Eustachian															
	Fundoscopic Exam																	
	Heart (auscultation, pulses)																	
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			Musculoskeletal															
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	Self Balance Test (Romberg) Mental Status																	
Labs/Tests (if indicated): Urinalysis Gluc + / -								ot + /	_	WBCs	+ / -	Other:						
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CxR								EKG		Dillo	Ortical		141111	_	7 (5)			
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Determin	ation.			NASTP	F	it to Part	icinat		D	etermins	ation Pen	dina	Unf	it to	Particin	ate		
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If Not Physically Qualified, Disqualifying Conditions:									•	Waiver Recommended				Waiver Not Recommended				
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2.																		
3.																		
Examining Physician's Signature												Date						
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Concurrence obtained remotely Yes No												Dat	е					
Comman	ding Of	ficer Er	ndorse	ment:					•		•							
Type(s) of Aircraft Approved										Disapproved								
Name:												Unit						
Signature:													Dat					