

From: Flight Surgeon,
To: Navy Medicine Operational Training Command Detachment, Naval Aerospace Medical
Institute (Code NA05)
Via: Commanding Officer,

Subj: LOCAL BOARD OF FLIGHT SURGEONS IN CASE OF

Ref: (a) Manual of the Medical Department
(b) Aeromedical Reference Waiver Guide

1. Per references (a) and (b), the following information is submitted on subject member. Member is a
and has a diagnosis code of:

2. Discussion of illness/injury:

a. Duty status:

b. Flight hours:

c. Aircraft type:

d. Treatments:

e. Follow ups:

f. Specialty consults:

3. Member been found stable on this treatment plan and found to be safe for flying duties.

4. Waiver recommended/ not recommended by Local Board of Flight Surgeons.

5. Aeromedical disposition: