



NATIONAL TRANSPORTATION SAFETY BOARD

Office of Research and Engineering
Washington, DC

Medical Factual Report

October 23, 2018

Mary Pat McKay, MD, MPH
Chief Medical Officer

A. ACCIDENT: ANC18FA012; Molokai, HI

On December 10, 2017, about 1105 Hawaiian standard time, a wheel-equipped Textron Aviation (formerly Cessna) U206G airplane, N732DF, impacted remote hills in Maunaloa, Hawaii about 4 miles southwest of the Molokai Airport, Kaunakakai, Hawaii while performing an instrument flight rules (IFR) approach. The instrument-rated private pilot and sole passenger sustained fatal injuries, and the airplane was destroyed. The airplane was registered to and operated by the pilot as a 14 Code of Federal Regulations Part 91 visual flight rules (VFR) personal flight that transitioned to an instrument flight rules (IFR) flight. Instrument meteorological conditions were reported at the Molokai Airport at the time of the accident and no flight plan was filed. The flight originated from the Daniel K. Inouye International Airport, Honolulu, Hawaii, about 1030.

B. GROUP IDENTIFICATION

No group was formed for the medical evaluation in this accident.

C. DETAILS OF INVESTIGATION

1. Purpose

This investigation was performed to evaluate the pilot for medical conditions, the use of medications/illicit drugs, and the presence of toxins.

2. Methods

The FAA medical case review, autopsy reports, toxicology findings, and the investigator's reports were reviewed.

FAA Medical Case Review

According to the FAA medical case review, the 79 year old male pilot had reported 2,697 total hours of flight experience as of his last aviation medical exam, dated 3/06/2015. At that time, he was 72 inches tall and weighed 150 pounds. He had reported having a total hip replacement in

2010, removal of several superficial skin cancers, and a superficial venous thrombosis in 2014. No significant physical abnormalities were identified, and he was issued a third class medical certificate limited by a requirement for corrective lenses. This certificate expired 3/31/2017. The pilot had not filed paperwork with the FAA for the BasicMed program but the family provided a copy of the BasicMed attestation by a private physician that he had obtained.

Autopsy

According to the autopsy performed by Pacific Pathologists, LLC, the cause of death was multiple blunt trauma and the manner was accident. The examination of the brain was limited by the severity of injury, but no underlying disease was identified. There was severe coronary atherosclerosis with 50-90% stenosis of the left anterior descending coronary artery, 50% stenosis of the circumflex and 50-80% stenosis of the right coronary artery with evidence of previous ischemia demonstrated by fibrosis of the posterior papillary muscle. The leg veins previously diagnosed with venous thrombus could not be evaluated due to the extent of injury but there was no evidence of pulmonary thromboemboli.

Toxicology

Toxicology testing performed by the FAA's Bioaeronautical Sciences Research Laboratory did not identify any tested-for substances.

D. SUMMARY OF MEDICAL FINDINGS

The 79 year old male pilot had reported having a total hip replacement in 2010, removal of several superficial skin cancers, and a superficial venous thrombosis in 2014 to the FAA. His last medical certificate expired 3/31/2017. He had not filed paperwork with the FAA for the BasicMed program but the family provided a copy of the BasicMed attestation by a private physician he had obtained.

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