

National Transportation Safety Board

Office of Research and Engineering

Washington, DC 20594



ERA2LA162

MEDICAL

Specialist's Factual Report

December 8, 2022

A. ACCIDENT

Location: Homestead, FL
Date: March 17, 2022
Time: 13:45 Local
Airplane: Czech Sport Aircraft AS Piper Sport; N811PS

B. MEDICAL SPECIALIST

Specialist Michelle Watters, MD, PhD, MPH
National Transportation Safety Board, RE-1
Washington, DC

C. DETAILS OF THE INVESTIGATION

Purpose

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

Methods

The Federal Aviation Administration (FAA) medical certification file and the pilot's pre-event medical records were reviewed. The body of the pilot was not recovered, so there are no autopsy or toxicology reports. Other relevant medical and regulatory issues were reviewed.

D. FACTUAL INFORMATION—PILOT

1.0 FAA Medical Certification File

According to the FAA medical certification file, at the time of the accident, the 68-year-old male pilot was on Basic Med (course date 8/31/17). His most recent FAA medical certification examination was on 5/20/14. At that exam he reported 1,350 total flight hours and was 73 inches tall and weighed 240 pounds. He reported taking aspirin; he reported no medical conditions. The pilot was issued a third class medical certificate with the limitation that he must wear corrective lenses for near and distant vision.

2.0 Autopsy

The remains of the pilot were not found.

3.0 Toxicology

No toxicology was available for the pilot.

4.0 Personal Medical Records

Pre-event medical records were obtained for the three years prior to the accident from the pilot's cardiologist and primary care doctor. The pilot's most recent visit to his cardiologist was on 1/5/22 for a follow-up of his coronary artery disease and leg swelling. Except for swelling in both legs, his other physical exam findings were reported as normal. The pilot had a history of angioplasty and stenting of his left main, left anterior descending, and left circumflex coronary arteries in 2018. An exercise nuclear study on 11/9/21 was abnormal; his ejection fraction (a measure of how well the heart pumps blood) was 43% and he had a reduced systolic function. While there was evidence of a past medium infarct in the apical wall of the heart, there was currently no significant ischemia. The pilot had high lipid levels treated with Repatha (evolocumab) injections and rosuvastatin. He was prescribed furosemide, spironolactone, and metolazone to reduce fluid retention. He was also taking losartan for high blood pressure and aspirin to prevent blood clots.

The pilot's most recent visit to his primary care doctor was on 12/6/21. The pilot weighed 255 pounds, was 6 feet tall, and had a body mass index (BMI) of 35 (a BMI of 30 or greater is considered obese). Other than obesity, there were no significant physical exam findings. The pilot was being treated for his diabetes with exenatide injections and empagliflozin. In addition to the cardiovascular issues that were under the care of his cardiologist, the pilot's medical history included cirrhosis and gastric reflux disease, the latter was treated with pantoprazole and rifaximin.

The pilot was to follow-up with his cardiologist and primary care doctor when he returned from Florida.

E. SUMMARY OF MEDICAL FACTS

The 68-year-old male pilot was on BasicMed (8/31/17). His most recent FAA medical certification examination was on 5/20/14, he reported taking aspirin and having no medical conditions. The remains of the pilot were not found; no autopsy report or toxicology testing results were available.

Pre-event medical records show that the pilot had a history of coronary artery disease and had angioplasty and stenting of his left main, left anterior descending, and left circumflex coronary arteries in 2018. His exercise nuclear study on 11/9/21 was abnormal with a reduced ejection fraction and systolic function. While there was no current ischemia, there was evidence of a past infarct. He currently had swelling of both legs and was being treated for fluid retention and high blood pressure. He was

also being treated for high lipid levels, diabetes, and gastric reflux disease. The pilot had a body mass index of 35. There were no other significant physical exam findings.

Submitted by:

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