



NATIONAL TRANSPORTATION SAFETY BOARD

Office of Research and Engineering
Washington, DC

Medical Factual Report

February 5, 2021

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Medical Officer

A. ACCIDENT: WPR20FA031; Jackpot, Nevada

On November 22, 2019, about 1834 Pacific standard time, a Grumman AA-5B Tiger airplane, N310PD, impacted terrain near Jackpot, Nevada. The commercial pilot and passenger were fatally injured and the airplane was destroyed. The airplane was registered to and operated by the pilot under the provisions of Title 14 Code of Federal Regulation Part 91. Visual meteorological conditions prevailed and a flight plan was not filed for the cross-country flight, which originated at 1834 and was destined for Rexburg, Idaho.

B. GROUP IDENTIFICATION

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

C. DETAILS OF 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 case review and the pilot's autopsy report, personal medical records, and FAA Forensic Sciences laboratory toxicology report were reviewed.¹ I also reviewed relevant medical information.

FAA Medical Case Review

According to the FAA medical case review, the 78-year old male pilot had an expired third class medical certificate that had the limitation that he must have available glasses for near vision. The pilot had not applied for BasicMed. At his most recent medical certificate exam (1/29/13), the pilot reported 2,700 total flight hours and was 69 inches tall and weighed 185 pounds. He reported taking telmisartan for high blood pressure and atorvastatin for high cholesterol. No other medical concerns or issues were identified.

¹ See <https://jag.cami.jccbi.gov/toxicology/> for a complete list of tested-for substances.

Autopsy

According to the Regional Medical Examiner's Office, Washoe County, Nevada autopsy report, the cause of the pilot's death was multiple blunt force injuries due to airplane crash and the manner of death was accident. The medical examiner reported a metal stent in the right coronary artery, severe atherosclerosis in the left anterior descending coronary artery (90%), mild to moderate aortic atherosclerosis, and a rust-colored area of a past infarct in the brain; there were no thromboses identified in the heart.

Personal Medical Records

Medical records were obtained from the pilot's primary care provider for the two year period between October 2016 and November 2018. At his primary care visit on 11/9/18, his physician reported the pilot's medical history of stroke (1/29/17), gastric reflux disease, and high cholesterol. The pilot weighed 163 pounds. Physical exam and an electrocardiogram revealed atrial fibrillation. The pilot was advised to "avoid flying until evaluated by cardiology." The pilot was prescribed the anticoagulant medication Eliquis [apixaban], Lipitor [lansoprazole] for reflux, and the high cholesterol medication Lipitor [atorvastatin]. The pilot had a nuclear stress test on 11/27/18 that found an area of infarct and ischemia around the right coronary artery.

Toxicology

Toxicology testing performed by the FAA Forensic Sciences Laboratory detected the high cholesterol medication atorvastatin in the pilot's liver and blood. This medication is not impairing.²

D. SUMMARY OF MEDICAL FINDINGS

The 78-year old male pilot had an expired third class medical certificate that had the limitation that he must have available glasses for near vision. The pilot had not applied for BasicMed. At his most recent medical certificate exam (1/29/13), the pilot reported having high blood pressure and high cholesterol.

According to the Regional Medical Examiner's Office, Washoe County, Nevada autopsy report, the cause of the pilot's death was multiple blunt force injuries due to airplane crash and the manner of death was accident. The medical examiner reported a metal stent in the right coronary artery, severe atherosclerosis in the left anterior descending coronary artery (90%), mild to moderate aortic atherosclerosis, and a rust-colored area of a past infarct in the brain.

Medical records obtained from the pilot's primary care doctor in November 2018 reported that the pilot had a history of stroke (January 2017), gastric reflux disease, and high cholesterol. The pilot weighed 163 pounds. He was diagnosed with atrial fibrillation and prescribed apixaban, an anticoagulant medication. A subsequent nuclear stress test revealed an area of infarct and ischemia around the right coronary artery.

Toxicological testing by the FAA Forensic Sciences Laboratory detected the non-impairing high cholesterol medication atorvastatin in the pilot's liver and blood.

² FAA. Updated 1/16/19. Forensic Toxicology's WebDrugs. Atorvastatin.
<https://jag.cami.jcabi.gov/toxicology/DrugDetail.asp?did=312>