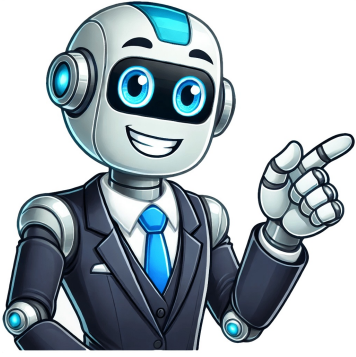


I'm not a bot





Medication usage is not explicitly regulated in FAA policies for pilots holding Class A, B, or C medical certificates. However, FAR 61.53 prohibits individuals from flying if they have a medical condition that would render them unable to meet the requirements for their medical certificate. Additionally, FAR 91.117 restricts the use of certain medications that can impair judgment and decision-making. The FAA does not maintain an official list of prohibited drugs, but rather relies on the potential adverse effects of medications to evaluate flight duties. Even if you're still not cleared under FAR 61.53, having a bad head cold might qualify as a "medical deficiency." The FAA permits inhalers like Proventil, Azmacort, and Vancenase for conditions such as asthma, on a case-by-case basis. Certain antihypertensive and cardiac medications may also be approved, but only after reviewing your medical history. For blood pressure control, there are five categories of accepted medications, including ACE inhibitors, beta blockers, and diuretics. However, some medications like nitrates are not permitted for angina treatment. Narcotic analgesics, stimulants, sedatives, and certain antidepressants are prohibited due to their potential drowsiness or central nervous system effects. Some exceptions apply, such as Ritalin for attention deficit disorder (ADD) and lithium carbonate for depressive disorders. However, these medications often have "off-label" uses, which can be disqualifying. On the other hand, certain SSRI's like Prozac and Zoloft may be considered for special issuance authorization. It's essential to note that taking a medication currently on the disallowed list doesn't necessarily mean it's disallowed under BasicMed. During your physician visit, they'll discuss your medications with you and determine if they pose any flight hazards. Some medications require a reasonable waiting period after use, while others may not be safe for flying altogether. Medications and Flying Regulations Pilots must comply with both BasicMed rules and Federal Aviation Regulations when taking medication. The FAA has established guidelines for pilots on medications that can impair their ability to make sound decisions. AOPA's online medical education course covers medication considerations in evaluating fitness to fly. The AOPA Pilot Information Center maintains a database of medications, verified by the FAA Aerospace Medical Certification Division. For a more detailed review of your medical records, consider enrolling in AOPA's Pilot Protection Services program. The FAA has compiled information on medications from various sources, including the 2014 AME Guide and Federal Air Surgeon Bulletins. Certain medications are subject to restrictions or require clearance from the FAA before issuance of an airman medical certificate. These include medications that can cause drowsiness, impaired cognition, or sedation, such as antineoplastic medications and some antidepressants. Medications That Are Not Allowed for Flight Certain medications have restrictions on their use for flight. The following list includes medications that should not be used by Do-Not-Fly Airmen, and some medications may require a specific wait time after the last dose. ## Medications to Avoid for Flight The list below includes medications that can cause sedation or impair cognitive function: ### Antipsychotics Antipsychotic medications are contraindicated for flight. Examples include Risperdal (Risperidone) and Geodon (Ziprasidone). ### Sedative-Hypnotics and Tranquilizers Sedative-hypnotic medications, such as Ambien (Zolpidem), Lunesta (Eszopiclone), and Sonata (Zaleplon), can cause significant impairment. The wait time for these medications is 24 hours. ### High-Dose Oral Steroids Steroids with doses greater than 20 mg per day are not allowed for flight. Examples include prednisone and prednisone-equivalent steroids. ### Anti-Cancer Medications Chemotherapeutic agents, biologics, and immunosuppressants can impair cognitive function. Wait times vary depending on the medication. ### Beta-Blockers with Sulfonylureas or Insulin Beta-blockers combined with sulfonylureas or insulin are not allowed for flight. Examples include metformin and sulfonylurea combinations. ## Newly Approved Medications New medications approved by the FDA within the past 12 months require at least one year of post-marketing experience before they can be safely used for flight. Contact the AMCD or Regional Flight Surgeon for guidance on specific applicants. ### Additional Medications to Avoid Medications that may cause sedation or impair cognitive function include: ### Sleep Aids - Diphenhydramine (Benadryl): 60-hour wait time - Other prescription sleep aids: vary depending on the medication and individual response ### Allergy Medications - Antihistamines found in nasal formulations and oral medications can cause sedation. Use nonsedating antihistamines if symptoms are controlled without adverse side effects after an adequate initial trial period. ### Contact Information Contact the AMCD or Regional Flight Surgeon for guidance on specific applicants and medication interactions. Airmen are advised not to fly while taking any medication that may cause drowsiness, even if it's been used before without issue. This includes prescription and over-the-counter drugs, as well as dietary supplements like Kava-Kava and Valerian. Narcotic pain relievers, muscle relaxants, and certain pre-medication or pre-procedure drugs are also off-limits for flying. The Federal Aviation Administration (FAA) doesn't publish a comprehensive list of approved medications, but rather focuses on whether the underlying medical condition is compatible with safe flight. Airmen should report medication use on their FAA medical application and consult an AMAS physician if they have questions or concerns about specific medications.

Faa no fly med list. No fly medication list. Faa do not fly medication list. Faa drug no fly list.