SUMMARY of CHANGE

AR 600–105
Aviation Service of Rated Army Officers

This major revision, dated 17 April 2019—

- Realigns approval authority from Commanding General, Human Resources Command to Commanding General, U.S. Army Aviation Center of Excellence for aeromedical waivers, exception to policy, and terminations (para 1–4f).

- Clarifies aviation service entry dates adjustments (para 2–3c).

- Adds the condition that aviators outside of specific broadening, developmental, or aviation assignments for a period in excess of 48 consecutive months lose eligibility for aviation incentive pay until returning to an aviation assignment (para 3–1b(4)).

- Adds conditional aviation incentive pay eligibility for rated aviators in specific Functional Area 48 and Functional Area 40C assignments (paras 3–1c(2) and 3–1c(3)).

- Clarifies processing waivers for aviation gates (para 3–5c).

- Updates the prescribed guidance for this regulation to DODI 7730.67 (throughout).

- Updates the prescribed guidance for this regulation to Section 334, Title 37, United States Code (throughout).
By Order of the Secretary of the Army:

MARK A. MILLEY
General, United States Army
Chief of Staff

Official:

KATHLEEN S. MILLER
Administrative Assistant to the Secretary of the Army

**History.** This publication is a major revision.

**Summary.** This regulation prescribes the aviation service policies of rated Army officers and flight surgeons.

**Applicability.** This regulation applies to the Regular Army, the Army National Guard/Army National Guard of the United States, and the U.S. Army Reserve, unless otherwise stated. Also, it applies to the Regular Army and Reserve Component officers (Army National Guard and U.S. Army Reserve) ordered into aviation service by the Secretary of the Army and applies to all commissioned and warrant officers who are training for or have Army aeronautical ratings. The policies of this regulation remain in effect upon declaration of war or mobilization.

**Proponent and exception authority.** The proponent of this regulation is the Deputy Chief of Staff, G–1. The proponent has the authority to approve exceptions or waivers to this regulation that are consistent with controlling law and regulations. The proponent may delegate this approval authority, in writing, to a division chief within the proponent agency or its direct reporting unit or field operating agency, in the grade of colonel or the civilian equivalent. Activities may request a waiver to this regulation by providing justification that includes a full analysis of the expected benefits. All waiver requests will be endorsed by the commander or senior leader of the requesting activity and forwarded through their higher headquarters to the policy proponent. Refer to AR 25–30 for specific guidance.

**Army internal control process.** This regulation contains internal control provisions in accordance with AR 11–2 and identifies key internal controls that must be evaluated (see appendix B).

**Supplementation.** Supplementation of this regulation and establishment of command and local forms are prohibited without prior approval from the Deputy Chief of Staff, G–1, 300 Army Pentagon, Washington, DC 20310–0300.

**Suggested improvements.** Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) directly to Deputy Chief of Staff, G–1 (AHRC–PDP–I) 300 Army Pentagon, Washington, DC 20310–0300.

**Committee management.** The Department of the Army committee management official concurs in the establishment and/or continuance of the committee(s) outlined herein. AR 15–1 requires the proponent to justify establishing/continuing committee(s), coordinate draft publications, and coordinate changes in committee status with the U.S. Army Resources and Programs Agency, Department of the Army Committee Management Office (AARP–ZX), 2511 Jefferson Davis Highway, 13th Floor, Taylor Building, Arlington, VA 22202–3926. Further, if it is determined that an established “group” identified within this regulation, later takes on the characteristics of a committee, as found in the AR 15–1, then the proponent will follow all AR 15–1 requirements for establishing and continuing the group as a committee.

**Distribution.** This regulation is available in electronic media only and is intended for the Regular Army, the Army National Guard/Army National Guard of the United States, and the U.S. Army Reserve.

**Contents (Listed by paragraph and page number)**

**Chapter 1**

**Introduction, page 1**

Purpose • 1–1, page 1

References and forms • 1–2, page 1

Explanation of abbreviations and terms • 1–3, page 1

Responsibilities • 1–4, page 1

Records management (recordkeeping) requirements • 1–5, page 1

**Chapter 2**

**Aviation Service for Rated Officers, page 1**
Contents—Continued

Section I
Qualification for Aviation Service, page 2
Initial qualification for aviation service • 2–1, page 2
Aviation service authority • 2–2, page 2
Aviation service entry date • 2–3, page 2
Termination of aviation service • 2–4, page 3

Section II
Aeronautical Ratings, page 4
General • 2–5, page 4
Detailed requirements • 2–6, page 4

Section III
Career Aviation Service, page 8
Rated inventory • 2–7, page 8
Qualification for aviation service on a career basis • 2–8, page 8

Chapter 3
Aviation Incentive Pay for Rated Officers, page 8
Qualification factors for aviation incentive pay • 3–1, page 8
Aviation incentive pay rate determination • 3–2, page 9
Operational aviation positions • 3–3, page 9
Total operational flying duty credit • 3–4, page 10
Total operational flying duty credit waiver • 3–5, page 11
Operational flying duty for flight surgeons • 3–6, page 11
Flight surgeons annual minimum flying hours • 3–7, page 11
Operational flying duty orders for flight surgeons • 3–8, page 12

Chapter 4
Aeromedical Disqualification, page 12
Disqualification factors • 4–1, page 12
Determination of medical fitness • 4–2, page 12
Temporary medical suspension • 4–3, page 13
Medical termination • 4–4, page 13
Medical requalification after medical termination from aviation service • 4–5, page 14
Aeromedical waivers • 4–6, page 14

Chapter 5
Nonmedical Termination from Aviation Service, page 14
Conditions for nonmedical termination • 5–1, page 14
Nonmedical suspension • 5–2, page 15
Nonmedical suspension pending a flying evaluation board • 5–3, page 15
Nonmedical termination not requiring flying evaluation board action • 5–4, page 15
Requalification • 5–5, page 16

Chapter 6
Flying Evaluation Board, page 17
Standards • 6–1, page 17
Membership • 6–2, page 18
Objectives • 6–3, page 18
Appeals • 6–4, page 19
Time phasing • 6–5, page 19
Requalification • 6–6, page 20
Aviation service orders • 6–7, page 20

Chapter 7
Aeromedical Consultation and In-Flight Evaluation, page 20
Contents—Continued

General • 7–1, page 20
Functions • 7–2, page 21
In-flight demonstration capability • 7–3, page 21
Aeromedical consultation service • 7–4, page 22
Temporary aviation service orders • 7–5, page 22
Travel orders • 7–6, page 22
Distribution of the final Aeromedical Consultation In-flight Evaluation Report • 7–7, page 22

Appendixes
A. References, page 23
B. Internal Control Evaluation, page 25

Table List
Table 2–1: Entry into aviation service, page 2
Table 2–2: Aviation service entry date, page 3
Table 2–3: Aviation service termination authority, page 3
Table 2–4: Application for reentry in aviation service, page 3
Table 2–5: Eligibility requirements for aeronautical ratings, page 5
Table 2–6: How to apply for an aeronautical rating, page 6
Table 2–7: Awarding aeronautical ratings, page 7
Table 3–1: Gate criteria for career aviation incentive pay when not performing operating flying duty, page 10
Table 3–2: Flight surgeons annual flying hour minimums, page 12
Table 5–1: Suspension and appointing authority, page 16

Glossary
Chapter 1
Introduction

1–1. Purpose
This regulation sets policies, responsibilities, and processes for qualifying, disqualifying, and re-qualifying officers for aviation service. It contains policies pertaining to establishing and adjusting aviation service entry dates (ASEDs), as well as awarding Army aeronautical ratings. This regulation codifies Armywide implementation of the aviation incentive pay (AvIP) laws. It describes conditions for disqualification (or termination) and requalification for aviation service, contains additional processes for convening and conducting a flying evaluation board (FEB), and contains courses of action for an aeromedical consultation and in-flight evaluation (ACIE).

1–2. References and forms
See appendix A.

1–3. Explanation of abbreviations and terms
See the glossary.

1–4. Responsibilities
a. Secretary of the Army. The SECARMY will award Army aeronautical ratings. The SECARMY has further delegated this responsibility to the authorities listed in table 2–7.
   b. Chief, National Guard Bureau. The Chief National Guard Bureau (CNGB) will publish aviation service and aeronautical rating orders as required for Army National Guard (ARNG) and ARNGUS personnel.
   c. Deputy Chief of Staff, G–1. The DCS, G–1 has the authority to approve exceptions to this regulation. On behalf of the DCS, G–1, the Commanding General, U.S. Army Human Resources Command (HRC) will—
      (1) Issue orders authorizing or terminating aviation service to include AvIP.
      (2) Issue orders designating members of the U.S. Army Reserve (USAR) and Army National Guard of the United States (ARNGUS) as Army aviators.
      (3) Assist in developing, recommending, and executing personnel policies, requirements, and organization of Army aviation elements.
      (4) Publish aeronautical rating orders and aviator badges, as required.
      (5) Conduct official 12-year and 18-year gate audits.
   d. Deputy Chief of Staff, G–3/5/7. The DCS, G–3/5/7 will determine the composition of Army aviation.
   e. The Surgeon General. TSG will publish aviation service and aeronautical rating orders as required for Medical service personnel.
      f. Commanding General, U.S. Army Aviation Center of Excellence. The CG, USAACE will—
         (1) Publish aviation service and aeronautical rating orders, as required.
         (2) Approve exception to policy requests on Class 1 flight physicals on a case-by-case basis.
         (3) Approve aeromedical waivers and terminations.
   g. Unit commanders. The unit commanders will establish objectives to ensure compliance with the policy and processes outlined in this regulation.

1–5. Records management (recordkeeping) requirements
The records management requirement for all record numbers, associated forms and reports required by this regulation are addressed in the Army Records Retention Schedule-Army (RRS–A). Detailed information for all related record numbers, forms and reports are located in Army Records Information Management System (ARIMS)/RRS–A at https://www.arims.army.mil. If any record numbers, forms, and reports are not current, addressed and/or published correctly in ARIMS/RRS–A, see DA Pam 25–403 for guidance.

Chapter 2
Aviation Service for Rated Officers
The active or inactive service performed in compliance with all applicable Army aviation regulations and requirements by an officer who holds or is in flight training leading to an aeronautical rating is considered to be aviation service.
Section I
Qualification for Aviation Service

2–1. Initial qualification for aviation service
   a. Officers are initially qualified for aviation service at the start of the initial flight training course or aviation medicine course leading to the award of an aeronautical rating.
   b. The CG, USAACE will publish initial aviation service orders using AR 600–8–105, format 331.
   c. When student officers fail the qualification course, or are medically or nonmedically eliminated from the course before completion, the aviation service order will be promptly terminated.
   d. The officer’s aviation service is continuous unless terminated in accordance with chapters 4, 5, or 6.
   e. The ARNGUS personnel must apply for aviation service orders according to paragraph 2–2.

2–2. Aviation service authority
The SECARMY has authorized the commanders in table 2–1 to enter officers into aviation service.

<table>
<thead>
<tr>
<th>Authority</th>
<th>Applies to</th>
</tr>
</thead>
<tbody>
<tr>
<td>CG, USAACE</td>
<td>Student officers enrolled in the flight training course leading to the award of an Army aviator aeronautical rating.</td>
</tr>
<tr>
<td></td>
<td>Medical corps officers when they are enrolled in the U.S. Army Flight Surgeon Primary Course at the U.S. Army School of Aviation Medicine.</td>
</tr>
<tr>
<td>CDR, HRC</td>
<td>Aviators who receive inter-Service transfers to the U.S. Army and aviators recalled for extended active duty.</td>
</tr>
<tr>
<td>CNGB</td>
<td>Aviators or flight surgeons that have left active duty or other Reserve Components (RCs) and become active members of ARNGUS units. The ARNGUS officers whose aviation service has been terminated because of medical or nonmedical reasons, requalification must be verified. Prior service aviators assigned to ARNGUS units who have been awarded aeronautical rating of Army Aviator by Human Resource Command. Officers on active duty under the Active Guard Reserve program in ARNGUS aviation positions, ARNGUS graduates of flight training course leading to the award of an Army aviator aeronautical rating and ARNGUS flight surgeons who have been assigned to ARNGUS units.</td>
</tr>
<tr>
<td>TSG</td>
<td>Medical corps officers attending another military service aviation medicine basic course or an Office of The Surgeon General (OTSG) recognized Accreditation Council for Graduate Medical Education approved residency program in Aerospace Medicine. Medical students who have graduated from the U.S. Army Flight Surgeon Primary Course on appointment in the Medical Corps and successful completion of first year graduate medical education.</td>
</tr>
</tbody>
</table>

2–3. Aviation service entry date
   a. The initial aviation service order establishes an officer’s ASED. Table 2–2 defines ASED for aviators and flight surgeons.
   b. The ASEDs are used in key areas including determining an officer’s AvIP rate, termination date of AvIP, and time in aviation service.
   c. The ASEDs will only be adjusted when—
      (1) Officers fail to complete the qualification course leading to the award of an aeronautical rating and are later allowed to reenter that course. The ASED will then become the date of reentry.
      (2) Officers were terminated from aviation service and subsequently re-qualified for aviation service for reasons other than failure to maintain annual flight physical.
      (3) An officer enters active service through a call to active duty after a break in aviation service.


d. When an officer’s application for return to the Regular Army (RA) is accepted, or an officer’s aviation service is reinstated, HRC, Incentives and Compensation Branch (ICB), determines whether or not a change to the ASED is needed. If a change is made HRC (ICB) will publish the order.

e. If required, the original ASED will be adjusted forward the number of days the officer was out of aviation service. Qualification for aviation service in any other service or component will be considered as time in aviation service.

<table>
<thead>
<tr>
<th>Personnel</th>
<th>Aviation Service entry date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Officers who attend U.S. flight or aviation medicine course.</td>
<td>The day that military flight training or aviation medicine training begins.</td>
</tr>
<tr>
<td>Medical students who graduate from the Army Flight Surgeon Primary Course.</td>
<td>The date of completion of first year graduate medical education after appointment in the Medical Corps or the date that military aviation medicine training begins, whichever is later.</td>
</tr>
</tbody>
</table>

### Table 2–2

2–4. Termination of aviation service

a. Aviation service orders will remain in effect for an RA and/or USAR aviator’s entire aviation career unless terminated in accordance with chapters 4, 5, and 6. For termination of flight surgeons see paragraph 3–8.

b. When an RA and/or USAR aviator enters the ARNGUS, their aviation service orders are suspended. The appropriate state ARNGUS organization will publish applicable aviation orders for service in their state ARNGUS.

c. The ARNGUS aviators will be terminated from aviation service at the State level using AR 600–8–105, format 331. The termination orders will specify whether the individual is eligible for AvIP and if so, to what aviation service gate-year.

d. Upon an aviator’s reentry into either the RA or USAR, the previously suspended aviation service order will be reviewed and revalidated by HRC (ICB). The individual will submit the appropriate documentation in accordance with table 2–3 for review and audit. Following review and audit HRC (ICB) will either validate the original orders or will publish new orders adjusting the ASED in accordance with paragraph 2–3.

e. If an officer’s aviation service is terminated, the appropriate organization will publish the aviation service order terminating aviation service (see table 2–3).

<table>
<thead>
<tr>
<th>Officer Branch</th>
<th>Component</th>
<th>Authority</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aviation Branch officers and Medical Service Corps</td>
<td>RA and USAR</td>
<td>CDR, HRC (AHRC–PDP–I)</td>
</tr>
<tr>
<td>Medical Corps (Flight Surgeons)</td>
<td>RA</td>
<td>TSG (AHRC–OPH–C)</td>
</tr>
<tr>
<td></td>
<td>USAR</td>
<td>Chief, USAR</td>
</tr>
<tr>
<td>All National Guard</td>
<td>ARNGUS.</td>
<td>CNGB (Termination orders may be issued at the state level (see para 2–4c))</td>
</tr>
</tbody>
</table>

### Table 2–3

Application for reentry in aviation service

<table>
<thead>
<tr>
<th>Applicants</th>
<th>Application will include but not limited to—</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>For RA and USAR, aviators with an aeronautical rating from a U.S. military Service</td>
<td>(1) DA Form 4187 (Personnel Action). (2) Copy of original designation order (U.S. Army, U.S. Air Force) or undergraduate flight training completion certificate (U.S. Navy, U.S. Marine Corps, or U.S. Coast Guard).</td>
<td>Send request through command channels to CDR, HRC (AHRC–PDP–I), 1600 Spearhead Division Avenue, Dept 480, Fort Knox, KY 40122–5408.</td>
</tr>
</tbody>
</table>
Table 2–4
Application for reentry in aviation service—Continued

| (3) Copy of current DD Form 2992 (Medical Recommendation for Flying or Special Operational Duty). |
| (4) Copy of officer’s record brief, or order determining ASED or applicable service documentation appropriate for previous service component. |
| (5) Copies of DA Form 759 (Individual Flight Record and Flight Crew Certificate—Army (Flight Hours)), that cover all previous periods of aviation service or applicable service documentation appropriate for previous service component. |
| (6) Current order to active duty and previous qualification order (when applicable). |
| (7) The signed statement, “I understand that a service member who knowingly makes a false official statement may be punished under the Uniform Code of Military Justice (UCMJ), article 107. With this understanding I make the following official statement (excluding medical suspension of less than 30 days). I have never been restricted or suspended from flight duty or involved in an aircraft accident other than (fully explain any of the below or if none so state)—  
  a. Restrictions from flight duty.  
  b. Suspensions from flight duty.  
  c. Military aircraft accidents.  
  d. Any other aircraft accidents.  
(8) For USAR aviators an additional signed statement prepared by the officer as follows, “I have/have not been suspended or relieved from aviation service before my release from active duty, discharge, or released from ARNGUS extended active duty.” (If yes, explain) |

Note. If the officer is disqualified because of an FEB, application must be sent to the proper FEB approving authority for action. Then forward to either CDR, HRC, or CNGB as appropriate.

Section II
Aeronautical Ratings

2–5. General
An aeronautical rating certifies successful completion of prescribed aviation related training and experience. Current U.S. Army aeronautical ratings are Army aviator, senior Army aviator, master Army aviator, flight surgeon, senior flight surgeon, and master flight surgeon.

2–6. Detailed requirements
a. After meeting the eligibility requirements of table 2–5, U.S. Army aeronautical ratings are awarded to Army officers in accordance with tables 2–6 and 2–7, by publishing an aeronautical order (AR 600–8–105, format 331). CG, USAACE will award the initial rating when the Army training has been successfully completed. Only the CDR, HRC or CG, USAACE will issue the initial ratings of Army aviators or flight surgeons.

b. Army aeronautical ratings will not be awarded to members of other military services or foreign armed forces. See AR 600–8–22 for award of aviation badges to persons who are not U.S. Army officers.
c. Before an officer may fly and be eligible for AvIP, they must be qualified for aviation service and be authorized by aeronautical orders.

d. The aeronautical order awarding the rating of Army aviator or flight surgeon (see table 2–7), as well as other awards of advanced ratings, also authorizes wear of the proper aviation badge (see AR 600–8–22).

e. Once awarded, this rating becomes part of the officer’s credentials and can only be terminated in accordance chapters 5 and 6 by the appropriate authorities. A copy of the aeronautical order(s) will become a permanent part of the Army Military Human Resource Record (AMHRR) and individual flight records folder.

<table>
<thead>
<tr>
<th>Table 2–5</th>
<th>Eligibility requirements for aeronautical ratings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rating</td>
<td>Rated Service</td>
</tr>
<tr>
<td>Army Aviator</td>
<td>None</td>
</tr>
<tr>
<td>Army Aviator</td>
<td>Rated service in another U.S. military Service.</td>
</tr>
<tr>
<td>Senior Army Aviator</td>
<td>At least 7 years of rated aviation service (of which 4 years must be as an Army aviator).</td>
</tr>
<tr>
<td>Master Army Aviator</td>
<td>At least 15 years of rated aviation service (of which 12 years must be as an Army aviator).</td>
</tr>
<tr>
<td>Flight Surgeon</td>
<td>None</td>
</tr>
<tr>
<td>Flight Surgeon</td>
<td>Aeromedical service in another U.S. military Service.</td>
</tr>
</tbody>
</table>
Table 2–5
Eligibility requirements for aeronautical ratings—Continued

<table>
<thead>
<tr>
<th>Rating</th>
<th>Rated Service</th>
<th>Basic Requirements</th>
<th>Special requirements</th>
<th>Apply</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senior Flight Surgeon</td>
<td>At least 5 years flying duty as a flight surgeon.</td>
<td>At least 400 hours of flying time of which 30 hours may be synthetic flight training system/combat mission simulator/Aviation Combined Arms Tactical Trainer time and medically qualified class 2F.</td>
<td>Qualified for aviation service</td>
<td>Yes</td>
</tr>
<tr>
<td>Senior Flight Surgeon</td>
<td>Or- At least 3 years flying duty as a flight surgeon plus 2 years as an army aviator.</td>
<td>At least 350 hours of total flying time in military aircraft of which 30 hours may be Synthetic Flight Training System (SFTS)/ combat mission simulator (CMS)/aviation combined arms tactical trainer (AVCATT) time and medically qualified class 2F.</td>
<td>Qualified for aviation service</td>
<td>Yes</td>
</tr>
<tr>
<td>Senior Flight Surgeon</td>
<td>Or- At least 2 years flying duty as a flight surgeon.</td>
<td>At least 300 hours of flying time of which 24 hours may be SFTS/CMS/AVCATT time and medically qualified class 2F.</td>
<td>Certified by American Board of Preventive Medicine as a specialist in aerospace medicine.</td>
<td>Yes</td>
</tr>
<tr>
<td>Master Flight Surgeon</td>
<td>At least 10 years flying duty as a flight surgeon and designated as a senior flight surgeon.</td>
<td>At least 850 hours of flying of which 60 hours may be SFTS/CMS/AVCATT time and medically qualified class 2F.</td>
<td>Certified by American Board of Preventive Medicine as a specialist in aerospace medicine.</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Notes.
1 Rated service is computed from the date initial U.S. military aeronautical rating is established.
2 Time logged in military aircraft as a student pilot, pilot, co-pilot, or instructor pilot (AR 95–1). Time logged in a SFTS or CMS, not to be confused with procedural trainers, may be included (exception: flight surgeons see table for guidelines).

Table 2–6
How to apply for an aeronautical rating

<table>
<thead>
<tr>
<th>Aeronautical rating</th>
<th>Application will include—</th>
<th>Comments</th>
</tr>
</thead>
</table>
| Army aviator (with a rating from another U.S. military Service) | (1) A copy of the original aeronautical rating (U.S. Air Force (USAF)) or undergraduate flight training completion certificate (USN, USMC or USCG).  
(2) An official certification of total military flying time by category (fixed or rotary wing), skill qualifications, and hours flown in the past 12 months.  
(3) Copy of current DD Form 2992.  
(4) The following signed statement. “I understand that a service member who knowingly makes a false official statement may be punished under the Uniform Code of Military Justice, article 107. With this understanding I make the official statement below: Excluding medical suspension of less than 30 days, I have never been restricted or suspended from flight duty or involved in an aircraft accident other than (fully explain any of the below or if none so state)—  
a. Restrictions from flight duty.  
b. Suspensions from flight duty.” | Include application as part of an inter-Service transfer (AR 614–120), a recall request (AR 135–210), or a direct appointment request (AR 135–100) through command channels to proper headquarters (see table 2–7). |
Table 2–6
How to apply for an aeronautical rating—Continued

<table>
<thead>
<tr>
<th>Rating</th>
<th>Awarded by</th>
<th>Awarded to</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army aviators other than Army aviator (with a rating from another U.S. military Service) above CG, USAACE</td>
<td>CG, USAACE, (initial awards without application).</td>
<td></td>
</tr>
<tr>
<td>Flight Surgeons</td>
<td>CG, USAACE, CDR, HRC (AHRC–OPH–C), or DARNG will award all basic ratings.</td>
<td></td>
</tr>
<tr>
<td>Senior or Master Army Aviator (1) The original aeronautical rating order. If applying for the Master award, include the Senior Army Aviator rating order. (2) Copy of current DD Form 2992. (3) The latest DA Form 759 showing enough flying time. To apply, complete DA Form 4187 through command channels to the proper headquarters (see table 2–7).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Senior or Master Flight Surgeon (1) The U.S. Army School of Aviation Medicine attendance dates and graduation. A copy of basic flight surgeon aeronautical rating. Include the senior flight surgeon rating if applying for the master award. (2) A copy of the original and other (if any) aviation service qualification orders. (3) A copy of the latest DA Form 759 that shows enough flight time to qualify for award (table 2–5). (4) A medically qualified class 2F flight physical completed within the last 12 months approved by Director, U.S. Army Aeromedical Activity (USAAMA) (MCXY–AER). (5) For master flight surgeon, a certificate from the American Board of Preventive Medicine indicating individual is a specialist in aerospace medicine. Apply through TSG Aviation Medicine Consultant to CDR, HRC (AHRC–OPH–C). National Guard Bureau flight surgeons apply to DARNG.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 2–7
Awarding aeronautical ratings

<table>
<thead>
<tr>
<th>Rating</th>
<th>Awarded by</th>
<th>Awarded to</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army Aviators or Flight Surgeons</td>
<td>CG, USAACE.</td>
<td>Officers who have never held an aeronautical rating from a U.S. military Service; officers who complete flight training; posthumously; officers who complete aviation medicine training (Medical Corps only, not aeromedical physician assistants, or aviation medicine nurse practitioners).</td>
</tr>
<tr>
<td>Army Aviators or Flight Surgeons</td>
<td>CDR, HRC (AHRC–PDP–I)</td>
<td>Inter service transfers who previously held an aeronautical rating in another service; officers recalled to active duty or appointed in an RC who previously held an aeronautical rating in another service and U.S. Army officers requalifying.</td>
</tr>
<tr>
<td>Army Aviators or Flight Surgeons</td>
<td>CDR, HRC (AHRC–OPH–C), or CNGB for flight surgeons.</td>
<td>Flight Surgeons. See table 2–5 for inter-Service transfer of flight surgeons.</td>
</tr>
<tr>
<td>Senior Army Aviator and Master Aviator</td>
<td>Commanders who have Special Court Martial Convening Authority, or CDR, HRC (AHRC–PDP–I).</td>
<td>All officers except ARNGUS officers.</td>
</tr>
</tbody>
</table>
Section III
Career Aviation Service

2–7. Rated inventory
   a. To be considered part of the rated inventory, an officer must—
      (1) Have a valid aviation service order.
      (2) Hold or be in training for an aeronautical rating.
      (3) Meet Class 2 medical fitness standards.
      (4) Be an aviator on extended active duty or active guard and/or reserve duty that maintains a pilot status code (PSC) of 1 or 5 in Total Officer Personnel Management Information System (TOPMIS) and; holds a basic branch code of aviation with and control branch code of aviation or acquisition, or area of concentration (AOC) of 67J (Medical Service Corps), or primary military occupational specialty (PMOS) 152 through 155. Additionally, an aviator not on extended active duty must be—
      (5) Assigned to and performing operational flying duty (except Individual Ready Reserve) or;
      (6) Assigned to a rated position in the RC or;
      (7) Considered by component (active or reserve) as part of their rated inventory.
   b. Medical Corps officers who maintain an AOC of 61N and have been placed on operational flight status by CDR, HRC; TSG; or CNGB are considered to be in aviation service but are not part of the rated inventory.
   c. All aviators and flight surgeons regardless of assignment must maintain annual medical fitness standards in accordance with AR 40–501. All aviators and flight surgeons must be issued and maintain a medical clearance on a DD Form 2992. Issue of medical clearance on a DD Form 2992 does not imply the current flight physical is qualified by the USAAMA or a waiver was granted by the waiver authority. All aviators and flight surgeons should check the disposition of their flight physical or aeromedical summary in the Aeromedical Electronic Resource Office’s (AERO’s) Servicemember Access portal at https://vfso.rucker.amedd.army.mil.

2–8. Qualification for aviation service on a career basis
Service performed by an aviator in the rated inventory. Aviation service continues without interruption if the aviator remains in the rated inventory.

Chapter 3
Aviation Incentive Pay for Rated Officers
Aviation Incentive Pay is intended to extend the aviation careers of Aviation Officers and is not “Flight Pay” or Hazardous Duty Incentive Pay. The Army AvIP program is derived from Section 334, Title 37, United States Code (37 USC 334) as implemented by DOD 7000.14–R (DODFMR), Volume 7A, chapter 22 and is broken down into career AvIP (formerly “continuous aviation career incentive pay (ACIP)”) or conditional AvIP earned monthly. This chapter administers the Army AvIP program but is used in conjunction with DOD 7000.14–R.

3–1. Qualification factors for aviation incentive pay
   a. Eligibility. Pursuant to DODI 7730.67, paragraph 3.2.b., officers eligible for career aviation incentive pay or conditional aviation incentive pay include those who—
      (1) Are entitled to basic pay pursuant to 37 USC 204, or compensation pursuant to 37 USC 206.
      (2) Maintain, or are in training to receive, an aeronautical rating or designation that qualifies the officer to engage in operational flying duty (OFD) or proficiency flying duty (PFD).
      (3) Engage in, or are in training to receive, frequent and regular performance of OFD or PFD.
(4) Engage in or remain in aviation service for a specified period of time.

(5) Achieve the minimum flight requirements of 4 hours during 1 calendar month or 24 hours during 6 consecutive months (the minimum flight hour requirement for Reserve Component officers not on active duty for a period of more than 30 consecutive days is 2 hours during 1 calendar month or 12 hours during 6 consecutive months). A certified flight simulator may be used to meet this requirement. The SECARMY may waive minimum flight requirements in the following situations:

(a) For officers (except flight surgeons or medical officers) who meet the AvIP eligibility requirements outlined in paragraph 3–1b.

(b) In extenuating circumstances (for example, military operations (combat or otherwise) or non-availability of aircraft), when the SECARMY may authorize a commanding officer to certify that an officer is unable to meet minimum flight requirements.

(6) Meet all applicable eligibility requirements of DODI 7730.67 and such other criteria as the SECARMY determines appropriate.

b. Career aviation incentive pay. Army aviators who remain part of the rated inventory in accordance with paragraph 2–7a are eligible for career AvIP through first 12 years of aviation service. After the 12th year of aviation, service aviators who meet the gate criteria listed in table 3–1 will remain eligible for career AvIP, if they remain assigned to one or more of the following categories:

1. Aviation specific positions that must be filled by officers with an aeronautical rating.
2. Joint assignment or position on the Joint Duty Assignment List.
3. Attending resident professional military education (including any captain’s career course and resident intermediate level education (CGSC–ILE) for example) or a fully funded graduate degree program authorized by the SECARMY.

(4) Other career-enhancing assignments outside of aviation or based on the needs of the Army (voluntary or involuntary) for a period not to exceed 48 consecutive months. For officers that are assigned to one of these positions upon publication of this regulation, the count of 48 consecutive months will begin on 1 October 2017. Officers whose eligibility for career AvIP lapses under this paragraph will regain their eligibility upon reassignment to an aviation position, or will transition to conditional AvIP eligibility according to paragraph 3–1c, whichever comes first.

(c) Conditional aviation incentive pay. Aviators that remain in the rated inventory but fail to meet the criteria for eligibility for career AvIP in paragraph 3–1b, may receive conditional AvIP. These aviators must meet the monthly flight or banking minimums prescribed in DODFMR 7000.14–R, to be eligible. Flight hours used to qualify for conditional AvIP must be performed in an aircraft (no simulator time) while logging a rated crewmember duty symbol other than “CP” in accordance with AR 95–1. The military personnel office will inform the servicing defense military pay office (DMPO) on a monthly basis, as to whether or not the aviator has met the requirement to earn conditional AvIP.

(1) Flight surgeons may receive conditional AvIP while serving on operational flying duty. These flight surgeons must meet the monthly flight or banking minimums prescribed in DODFMR 7000.14–R, to be eligible. Flight hours used to qualify for conditional AvIP may be performed in any aircraft while logging “MO” or “FS” in accordance with AR 95–1. Flight surgeons must also meet the requirements outlined in paragraphs 3–6 through 3–8, but table 3–1 does not apply.

(2) Functional Area 48 (FA48), officers with an Army aeronautical rating in select assignments identified by HRC (AHRC–PDP–I) may receive conditional AvIP.

(3) Functional Area 40C (FA40C), astronaut, with an Army aeronautical rating identified by HRC (AHRC–PDP–I) may receive conditional AvIP.

d. Aviation incentive pay for Reserve Component aviators, not on extended active duty. RC aviators, not on extended active duty, will receive AvIP in accordance with DODFMR.

e. Permanent medical incapacitation. In the event aviation service is terminated due to permanent medical incapacitation, the Commanding General, HRC will determine the date AvIP is stopped based on the approval of permanent medical disqualification recommendation by Director, USAAMA and circumstances applicable to each case.

3–2. Aviation incentive pay rate determination

The AvIP rates and AvIP termination dates are determined by an officer’s ASED in accordance with paragraph 2–3.

3–3. Operational aviation positions

a. Army authorization documents with officer positions coded for 15 (all), 67J, 51*15 and 152–155 (all) are operational aviation positions except:

1. Positions with a “G7” on the line, usually under an additional skill identifier column, are nonoperational.
2. All 15 (all), 67J, 51*15 positions located in the National Capital Region without aircraft are nonoperational.
3. Any position coded for any AOC or military occupational specialty (MOS) other than 15 (all), 67J, 51*15 and 152–155 (all) is not an aviation position and therefore not an operational aviation position.
b. Rated aviators assigned to an operational aviation position must be integrated into a unit Aircrew Training Program (ATP) in accordance with AR 95–1. Authorities for waiving ATP requirements due to extenuating circumstances or non-availability of resources are outlined in AR 95–1, however, an officer assigned to an ATP with all requirements waived does not meet the requirements for earning operational flying duty credit.

3–4. Total operational flying duty credit

Operational flying duty is flying performed under competent orders by rated or designated members while serving in operational aviation positions in which basic flying skills are normally maintained in the performance of assigned duties as determined by the Chief of Staff of the Army. It also includes flying performed by members in training that leads to the award of an aeronautical rating or designation.

a. Conditions for accumulating total operational flying duty credit. An aviator must meet the requirements of paragraphs 2–7a and 3–3. In addition, total operational flying duty credit (TOFDC) may be credited to the following:

(1) Aviators who are prisoners of war or are declared missing in action.

(2) Aviators whose release from active duty is voided by the Army Board for Correction of Military Records.

(3) Aviators who have been issued a temporary medical suspension for 365 days or less.

b. Operational flying duty credit. Operational flying duty credit may begin the day following the date the aviator signs out of nonoperational flying duty in route to an operational flying duty. Credit may be continuous until the aviator signs out in route to nonoperational flying duty.

c. Operational flying duty dates. TOFDC is recorded by number of months. The 15th day is the “break even” point for crediting or not crediting a month. For example, if an aviator signs out of nonoperational flying duty in route to operational flying duty on the 14th day of a month or earlier, credit begins the following day and the month is counted. Conversely, if the date of sign out is the 15th day of a month or later, the month is not counted. If departure from operational flying duty is on the 15th day or later, the full month is counted. Departures on the 14th day of the month or earlier cause the month not to be counted.

d. Consecutive assignments. If an aviator remains on operational flying duty in consecutive assignments, credit is continuous. Leave, temporary duty (TDY), and travel time between assignments are included. Assignments to the Aviation Captains Career Course, will receive TOFDC.

e. Total operational flying duty credit audits.

(1) The TOFDC audit window opens approximately 12 months prior to reaching 12 or 18 year gate. HRC (ICB’s) audit will be the audit of record for calculation of TOFDC. Officers who dispute the findings may appeal the audits through HRC (ICB) to DCS, G–1 (DAPE–PRP) aviation personnel system staff officer who will make the final determination. Appeals must be filed within 24 months of the close of the gate in question. Disputes to audits may not be made if the officer has requested a waiver of that gate.

(2) The Army’s authorization documents maintained by the U.S. Army Force Management Support Agency will be used to determine whether a position meets requirements in paragraph 3–3a. Officers assigned to positions that meet the requirements in paragraph 3–3a that are converted and no longer meet the requirements will continue to accrue credit as long as they remain in that position. Officers assigned to positions that do not meet the requirements of paragraph 3–3a and are converted to meet the requirements may accrue credit effective the date of change.

(3) Officers may demonstrate operational flying duty by submitting certified DA Forms 759, DA Forms 7122 (Crew Member Training Record) and other documents as requested. DA Forms 759 must clearly indicate the unit ATP, annual proficiency and readiness test (APART) completion, and aircraft/simulator flight hours. Determination to accept documents provided rests with HRC (ICB) and may be appealed in accordance with paragraph 3–4e(1).

Table 3–1
Gate criteria for career aviation incentive pay when not performing operating flying duty

<table>
<thead>
<tr>
<th>Gate</th>
<th>Months TOFDC required</th>
<th>Continuous AvIP to—</th>
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<tbody>
<tr>
<td>12-year gate</td>
<td>96 months or greater</td>
<td>18 years of aviation service</td>
</tr>
<tr>
<td>18-year gate</td>
<td>120 months through 143 months</td>
<td>22 years of aviation service</td>
</tr>
<tr>
<td></td>
<td>144 months or greater</td>
<td>25 years of aviation service</td>
</tr>
</tbody>
</table>

Note. Warrant officers who pass their 18-year gate and have accumulated at least 144 months of TOFDC will be paid AvIP in accordance with paragraph 3–1b.
3–5. Total operational flying duty credit waiver
HRC will manage the aviation career of aviators in the rated inventory to meet table 3–1 requirements. However, the needs of the Army come first and some officers will fail to meet these gates. Some needs of the Army assignments are considered critical and may be eligible for a waiver. These waivers only waive the gate as if it did not exist and move the termination date to the next termination point (18 or 22 years, termination of aviation service, disqualification, leaving the rated inventory, and so forth).

a. Eligibility requirements.

(1) Aviators who have failed to meet the TOFDC requirements due to the needs of the Army assignments, may be eligible for a waiver. The officer must not have voluntarily left the Aviation Branch (CNTL BRANCH, as listed in the top line of the officer record brief) for another branch or functional area other than acquisition. Needs of the Army assignments as listed are only waiverable if the officer met the requirements of paragraph 2–7 at the time they were assigned to these positions. If an aviator branch transfers and then is assigned to one of these needs of the Army assignments, that time is not waiverable. Needs of the Army assignments are defined as—
   (a) DOD or joint duty in a designated critical billet.
   (b) Mandatory Army educational requirements system and utilization tour as outlined in AR 621–108.
   (c) U.S. Army Recruiting Command, Reserve Officers’ Training Corps, or U.S. Military Academy cadre assignment.
   (d) Aviation officer position (coded 15, 67J, or 152–155) on the table of distribution and allowances of the Army Staff (ARSTAF), field operating agency of the ARSTAF, or Army command (ACOM), Army service component command (ASCC), or direct reporting unit (DRU) headquarters without assigned aircraft.
   (e) Assigned when medically disqualified but subsequently re-qualified for aviation service.
   (f) Assigned to a Brigade Aviation Element coded 15 or 152–155 position.
   (g) Any position in an area designated as a hostile fire zone at the time of assignment.

(2) Officers who decline flying assignments will sign a declination memorandum from HRC. The memorandum will be filed in the officers’ AMHRR.

b. Prerequisites for requesting a waiver.

(1) The officer must have accrued at least 72 months TOFDC.
(2) The request may be submitted no earlier than 12 months prior to the gate for which the waiver is being requested.
(3) Aviators who receive a waiver are not eligible for a second waiver.
(4) Aviators applying for an 18-year gate waiver are only eligible for AvIP to 22 years of aviation service. They are not eligible for a waiver for pay to 25 years of aviation service, or from 22 to 25 years of aviation service.

c. Waiver request processes.

(1) Submit the request for a waiver to HRC (ICB), or DARNG for ARNG aviators. HRC (ICB) will staff through the appropriate career management branch. All components will forward the request through DCS, G–1 (DAPE–PRP) to the SECARMY for approval or disapproval.
(2) HRC and NGB career management branches will document officer's needs of the Army assignments which precluded TOFDC. This will establish an audit trail should the officer require a waiver.

3–6. Operational flying duty for flight surgeons

a. Flight surgeons are considered on operational flying duty when placed on aviation service orders by TSG; CDR, HRC; or CNGB. Flight surgeons may be eligible for conditional AvIP provided they meet the requirements in paragraph 3–1c(1) and table 3–2. Questionable cases will be submitted for review by TSG, HRC, or CNGB.

b. Duties include any of the following:

(1) Formal aviation medicine training leading to the award of an aeronautical rating.
(2) Formal aerospace medicine residency training leading to certification in aerospace medicine.
(3) An assignment to a position or location determined by TSG; CDR, HRC; or CNGB that requires the flight surgeon to conduct a local aviation medicine program.
(4) Any assignment for an aerospace medicine specialist, primary AOC 61N9A/B/C, provided the person remains actively involved in an aviation medicine program.

3–7. Flight surgeons annual minimum flying hours

a. Table 3–2 defines semiannual and annual minimum ATP flight requirements for flight surgeons. These minimums may be prorated in accordance with TC 3–04.11.

b. Local unit commanders whose mission includes little or no night flying are authorized to waive night hour requirements for their assigned or attached flight surgeons. Questionable cases may be referred to TSG; CDR, HRC; or CNGB for determination as applicable. Minimum flying requirements for conditional AvIP are not waiverable.

c. Flight surgeons are considered essential aircrew and are expected to fly—
(1) Primarily with the unit(s) they support.
(2) In all of the mission profiles within their unit aircraft offering seating without access to flight controls.
(3) May log up to 12 hours (RA) or 6 hours (ARNGUS and USAR) of SFTS time toward accomplishment of annual flying hour requirements. SFTS may not be counted toward the accomplishment of conditional AvIP requirements.

3–8. Operational flying duty orders for flight surgeons

a. Only TSG; CDR, HRC; or CNGB, will issue orders initiating or terminating flying duty and eligibility for conditional AvIP for flight surgeons. AR 600–8–105, format 331, will be used for all orders. Orders for flight surgeons will normally qualify them for aviation service and will, in addition, indicate whether or not they are being assigned to operational flying duty (duty AOC 61N).

b. Normally, all Medical Corps officers who have been awarded AOC 61N, and who meet the requirements in paragraph 3–6, will be placed on flying duty orders. Officers in other positions, not qualifying under paragraph 3–6, are authorized to practice aviation medicine on an occasional or short-term substitute basis without being on orders. Those serving more than 2 weeks as a substitute for the regular flight surgeon will be placed on temporary flight status.

c. Once entered aviation service, flight surgeons continue in aviation service regardless of duty. However, TSG; CDR, HRC; or CNGB will issue assignment instructions in the orders that terminate or continue operational flying duty and eligibility for conditional AvIP or upon reassignment to nonoperational flying duty.

<table>
<thead>
<tr>
<th>Table 3–2 Flight surgeons annual flying hour minimums</th>
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<tbody>
<tr>
<td>Minimum hours required</td>
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<tr>
<td>------------------------</td>
</tr>
<tr>
<td><strong>Component</strong></td>
</tr>
<tr>
<td>Night</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

Chapter 4
Aeromedical Disqualification

4–1. Disqualification factors
An aeromedical disqualification exists when an officer does not meet the medical fitness standards for flying duties (see AR 40–501 and Aeromedical Policy Letter Series located at https://vfso.rucker.amedd.army.mil).

a. Aviation officers medically suspended will be considered qualified for aviation service unless such suspension continues for more than 365 days.

b. For the purpose of aeromedical disqualification, the immediate aviation commander is defined as the aviation unit commander or designated official who maintains the officer's flight records.

c. Aeromedical disqualification requires either—
   (1) Temporary medical suspension (see para 4–3) or,
   (2) Medical termination from aviation service (see para 4–4) or,
   (3) Qualification with an aeromedical waiver (see para 4–6).

d. Aeromedical disqualification does not necessarily require termination of aeronautical rating(s) but does remove an aviator from the rated inventory and terminates eligibility for AvIP.

4–2. Determination of medical fitness

a. Officers will report a history of the following conditions to a flight surgeon—
   (1) Symptoms indicating a change of health.
   (2) Illness requiring the use of medication, visit to a health care provider for evaluation and medical or dental care, restriction to quarters, or hospitalization.
   (3) Exposure to exogenous factors that might require a restriction from flying duties (see AR 40–8).
   (4) Drug or alcohol use that results in driving under the influence or driving while intoxicated arrest regardless of the outcome of the charge; positive blood or urine screen; arrests for intoxication, Family member abuse; psychosocial dys-
function (absence or tardiness from work or school, severe marital discord, or any other psychosocial condition or circumstances that may affect operational readiness or safety); medical or psychological incapacitation; or history of evaluation or treatment for drug or alcohol misuse, abuse, or dependency.

b. The immediate aviation commander will request an aeromedical consultation with a local flight surgeon when an officer develops a change in health (see paras 4–2a(1) through 4–2a(4)).

c. The local flight surgeon will make a preliminary determination of medical fitness for flying duties and recommend full flying duties or duties not to include flying by issuance of DD Form 2992.

d. In the case of medical disqualification, the Director, USAAMA, makes the final medical disposition and recommends continuation of aviation service with an aeromedical waiver or medical termination from aviation service.

4–3. Temporary medical suspension
Temporary medical suspension restricting officers from flying duties is required for aeromedical disqualifications that are minor, self-limited, and likely to result in requalification within 365 days.

a. Temporary medical suspension does not interrupt an officer’s—
(1) Aviation service.
(2) TOFDC.
(3) Time credited toward senior or master aeronautical ratings.
(4) Eligibility for AvIP.

b. The immediate commander is required to endorse the date of incapacitation and imposes the temporary medical suspension. An aviation service order for temporary medical suspension is not required.

c. The local flight surgeon will evaluate officers with a possible medical disqualification as identified by the aviator, immediate commander, flight surgeon, or USAAMA.

d. The flight surgeon will recommend a date of medical incapacitation on DD Form 2992. The flight surgeon will follow the established standards of aeromedical care and recommend restriction from flying duties on DD Form 2992 (see AR 40–501 and Aeromedical Policy Letter Series).

e. An officer under temporary medical suspension may not be assigned flying duties or operate the flight controls of a military aircraft. As an exception, the flight surgeon may recommend and the immediate commander may endorse on a DD Form 2992 that the officer operate flight simulators, perform ground run-up procedures, and/or undergo an aeromedical in-flight evaluation with an instructor pilot (see chap 7).

f. The immediate commander may only remove the temporary medical suspension upon favorable recommendation by a flight surgeon on DD Form 2992.

g. The flight surgeon will recommend medical termination from aviation service if the term of the medical disqualification and/or temporary medical suspension may exceed 365 days. The flight surgeon will notify the immediate commander by DD Form 2992 and forward an aeromedical summary to USAAMA.

4–4. Medical termination
Medical termination from aviation service is required for aeromedical disqualifications that are not likely to result in medical requalification with or without an aeromedical waiver within 365 days (see paras 4–5 and 4–6).

a. For aviators, medical termination from aviation service results in—
(1) Termination of career AvIP or conditional AvIP.
(2) Termination of authority to pilot Army aircraft (to include SFTS).
(3) The PSC adjusted by HRC.
(4) Termination of flying duty credit toward meeting the flight gates.
(5) Termination of time creditable toward award of a senior or master aviator rating.
(6) Removal from the rated inventory.

b. For flight surgeons, medical termination from aviation service results in—
(1) Termination of conditional AvIP.
(2) Termination of authority to fly in crewmember status in Army aircraft.
(3) Termination of time creditable toward award of a senior or master flight surgeon rating.

c. Medical termination does not result in the loss of aeronautical rating(s), the authority to wear the proper aviation badge, or the authority to function as a flight surgeon (except for flying duties) in support of the Army Aviation Medicine Program.

d. The local flight surgeon will evaluate the aeromedical disqualification and make a preliminary determination of medical fitness for flying duty. If an officer is found to be medically unfit for flying duty, they will be medically disqualified from aviation service (see AR 40–501). Termination from aviation service by reason of medical incapacitation will
be effective on the first day following a period of 365 days from the date of incapacitation, or on the date a competent medical authority determines the medical incapacitation to be permanent, whichever is earlier.

e. The flight surgeon will recommend a medical termination from aviation service on DD Form 2992 and forward the notification to the immediate commander.

f. The flight surgeon will prepare an aeromedical summary and forward it to USAAMA.

g. The Director, USAAMA, will review the medical report and make the final recommendation of medical fitness for flight duty. The Director, USAAMA will make recommendations to either USAACE, TSG, or CNGB and recommend the following:

1. Date of aeromedical incapacitation.

2. Final aeromedical disposition such as—
   a. Qualification without a waiver.
   b. Or qualification with an aeromedical waiver.
   c. Or medical termination from aviation service.

h. The CDR, HRC, or CNGB will establish the date of medical termination from aviation service and publish an order disqualifying the officer and terminating eligibility for AvIP (see AR 600–8–105, format 331).

i. The appropriate personnel career division will reclassify or re-branch the officer from aviation service as warranted.

4–5. Medical requalification after medical termination from aviation service
A flight surgeon may recommend to USAAMA, by an aeromedical summary that an aviator who has been medically terminated from aviation service be re-qualified with or without an aeromedical waiver. If Director, USAAMA concurs, a recommendation requesting requalification for aviation service will be forwarded to USAACE, TSG, or CNGB. If the recommendation is approved, an order re-qualifying the officer for aviation service will be published by HRC or CNGB.

4–6. Aeromedical waivers
a. Medically disqualified officers may be evaluated by a flight surgeon for consideration of qualification for aviation service with an aeromedical waiver. The flight surgeon will submit an aeromedical summary to Director, USAAMA, who will make the final recommendation of medical fitness for flying duty to USAACE, TSG, or CNGB for approval.

b. Officers medically terminated from aviation service may not be issued a recommendation by a flight surgeon for full flying duties (DD Form 2992) until receipt of aeromedical waiver orders from the waiver authority. Temporary flying duties on a DD Form 2992 may be allowed to conduct an in-flight evaluation after the waiver authority has issued temporary flight orders and the Director, USAAMA has reviewed the case to ensure the officer is aeromedically safe to perform and in-flight evaluation. See paragraph 7–5 for requesting temporary flight orders.

c. Officers not medically terminated from aviation service may be issued a recommendation by a flight surgeon on a DD Form 2992 for temporary full flying duties pending receipt of waiver. The flight surgeon shall refer to the Aeromedical Technical Bulletins for those conditions that may not be issued temporary flying duties on a DD Form 2992 pending receipt of a waiver. Complex or questionable cases will be discussed with the Director, USAAMA, before recommending flying duties on DD Form 2992.

d. When no longer justified by either medical condition or Army requirements, the local flight surgeon may recommend via an aeromedical summary an amendment to annual waiver requirements or removal of the medical waiver to USAAMA. The Director, USAAMA, will review the aeromedical summary and make the final recommendation to USAACE, TSG, or CNGB, as appropriate.

e. If Director, USAAMA determines that the disabling condition cannot be waived, the officer will be medically terminated from aviation service in accordance with paragraph 4–4.

Chapter 5
Nonmedical Termination from Aviation Service
Terminations are serious matters and must be considered carefully at all levels of command. In the final analysis, the best interest of the Army remains the prime criterion in evaluating each case.

5–1. Conditions for nonmedical termination
An officer’s aviation service may be nonmedically terminated—

a. When an officer voluntarily requests transfer to a functional area or another branch out of aviation branch, medical service or acquisition corps.

b. When an officer requests a waiver of the FEB and voluntarily terminates aviation service.
c. As a result of civilian convictions and/or convictions under the UCMJ.
d. As a result of an FEB (see chap 6).

5–2. Nonmedical suspension
Any commander in the chain of command may impose a nonmedical suspension. The commander must determine whether the officer is unfit for flying duty because of one or more of the conditions in paragraph 6–1. The suspensions are limited to times listed in table 5–1.

5–3. Nonmedical suspension pending a flying evaluation board
a. Conditions. A temporary suspension is mandatory when a commander intends to request a FEB. A suspension will never be ordered as a disciplinary measure. Violations of flying or other regulations may be corrected by using judicial, nonjudicial or administrative measures.
b. Suspension authority. Suspension authority and time limits are listed in table 5–1.
c. Notice of suspension. The commander imposing a suspension will inform the officer and servicing DMPO in writing of the effective date the AvIP will be suspended. The suspended officer will promptly acknowledge the suspension in writing.
d. Duty while suspended. While suspended, an officer will not be assigned to flying duties. A suspended officer may not perform crew duties in a military aircraft or flight simulator until restored to flying duty.
e. Action in case of reassignment orders. If reassignment orders or instructions are received for an officer being considered for suspension or awaiting final decision on a suspension, the unit commander will inform the officer’s career management branch within 10 days of receipt of orders to ensure the officer is not reassigned. Suspended officers will not be reassigned prior to completion of the action which caused the suspension.
   (1) Any commander authorized to impose a temporary suspension may remove the suspension, restore the officer to aviation service, and retroactively reestablish the AvIP.
   (2) If an FEB recommends reinstatement and the approving authority concurs, the approving authority will remove the temporary suspension, restore the officer to flying duty, and retroactively reestablish the AvIP.

5–4. Nonmedical termination not requiring flying evaluation board action
a. An officer may request branch transfer or a change in their AOC or MOS. The proper career management division will review the application and consider individual qualifications and Army requirements and provide comments. If approved, the appropriate authority will publish the order terminating aviation service (see table 2–3). Termination will result in the following:
   (1) For Aviators termination from aviation service results in—
      (a) Termination of career AvIP or conditional AvIP.
      (b) Termination of authority to pilot Army aircraft (to include SFTS).
      (c) The PSC adjusted by HRC.
      (d) Termination of flying duty credit toward meeting the flight gates.
      (e) Termination of time creditable toward award of a senior or master aviator rating.
      (f) Removal from the rated inventory.
   (2) For flight surgeons, termination from aviation service results in—
      (a) Termination of eligibility for conditional AvIP.
      (b) Termination of authority to fly in crewmember status in Army aircraft.
      (c) Termination of time creditable toward award of a senior or master flight surgeon rating.
   b. Under certain conditions, an officer may request waiver of the FEB and voluntarily terminate aviation service. Such a request may only be approved when such action is clearly in the Army's best interest. Prior to waiving the FEB and requesting voluntary termination of aviation service, the officer will consult with legal counsel, a memorandum signed by the Trial Defense Service attorney and the officer will be included as part of this request. The officer must request in writing for a waiver of the FEB and voluntary termination of aviation service to the FEB waiver authorities listed in table 2–3.
   (1) Unless there are unusual or compelling reasons, an officer will not be granted a voluntary termination if—
      (a) The officer has not completed an active duty service commitment incurred because of initial entry or graduate flight training, or post graduate medical training in aviation.
      (b) The officer has accepted assignment to or is enrolled in a formal graduate flight or aviation medicine training course.
   (2) For paragraph 5–4b(1), the following are not unusual or compelling reasons:
(a) A personal desire not to incur an active duty service commitment for a permanent change of station or flight training.
(b) A refusal to fly a certain type of aircraft.
(c) A refusal to perform a mission.
(d) A refusal to fly in a certain location.

(3) Requirements for submitting a DA Form 4187 are outlined:
   (a) The officer must submit a DA Form 4187 to their immediate commander requesting voluntary termination of aviation service. The statement, "I understand that if this request is approved, both my aviation service order and aeronautical rating(s) will be permanently terminated. I understand that I will no longer be authorized to wear any aviation badge," must be included on the DA Form 4187.
   (b) If the immediate commander recommends the request be approved, the officer will be temporarily suspended from flying duty pending final action (see paras 5–3c through 5–3e). Authorities at any level within the chain of command may disapprove the request, return it to the officer, and, if proper, direct the commander to remove the temporary suspension.
   (c) The voluntary request and supporting documents are sent through the chain of command to the appropriate approving authority (see table 2–3). The FEB appointing authority (see para 5–3b) reviews the request and if recommending approval, prepares recommendations from paragraphs 6–3c and 6–3d, and forward to the appropriate approving authority for final determination (see table 2–3). The aviation service order that permanently disqualifies the officer from aviation service will be published by the appropriate approving authority in table 2–3.
   (d) Submitting a voluntary request may not be used as the sole basis for other administrative or disciplinary actions. This does not preclude proper action if material in the request so warrants. Examples are admitting a violation of law or directive or professing a fear of flying.
   c. Actions resulting in civilian convictions and/or under the UCMJ may be grounds for nonmedical termination of the aviation service order and aeronautical ratings under this paragraph. The commander will submit a memorandum requesting a nonmedical termination based on conviction through command channels to the appropriate authority (see table 2–3). Supporting documents are required with the memorandum.
   d. For aviators, paragraphs 5–4b and 5–4c, nonmedical termination of their aviation service order results in—
      (1) Termination of AvIP or conditional AvIP.
      (2) Termination of authority to pilot Army aircraft and SFTS.
      (3) The PSC adjusted by HRC.
      (4) Termination of flying duty credit toward meeting flight gates.
      (5) Termination of time creditable toward award of a senior or master aviator rating.
      (6) Loss of aeronautical rating(s) and the authority to wear a previously awarded aviation badge.
      (7) Removal from the rated inventory.
   e. For flight surgeons, paragraphs 5–4b and 5–4c, nonmedical termination of their aviation service order results in—
      (1) Termination of conditional AvIP.
      (2) Termination of authority to fly in crewmember status in Army aircraft.
      (3) Termination of time creditable toward award of a senior or master flight surgeon rating.
      (4) Termination of the authority to perform flight surgeon duties.
      (5) Loss of aeronautical rating(s) and the authority to wear a previously awarded aviation badge.

5–5. Requalification
   a. Officers may request requalification and restoration of aviation service when the original reason(s) for the disqualification no longer exists. Termination authorities listed in table 2–3 may approve requalification and restoration, based on the best interests of the Army.
   b. If the request is approved, a copy of the aviation service requalification order will become a permanent part of the officer's—
      (1) AMHRR.
      (2) Individual Flight records folder.
   c. An officer who requests voluntary disqualification in lieu of an FEB or was involuntarily disqualified due to convictions under civilian or the UCMJ will be permanently disqualified and not eligible for requalification.

<table>
<thead>
<tr>
<th>Authority</th>
<th>Action and length of suspension</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any commander in the chain-of-command.</td>
<td>May impose and remove a temporary suspension for up to 60 days.</td>
</tr>
</tbody>
</table>
Table 5–1
Suspension and appointing authority—Continued

<table>
<thead>
<tr>
<th>Authority</th>
<th>Action and length of suspension</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special court-martial convening authority.</td>
<td>May appoint an FEB in accordance with chapter 6 and may impose a temporary suspension for up to 365 days. This suspension runs concurrent with any 60-day suspension already imposed. If final fitness has not been determined by the end of 365 days, the appointing authority may request an extension from the approving authority or in the case of ARNGUS aviators from CNGB. The request will include the reason for delay and the expected completion date.</td>
</tr>
</tbody>
</table>

Chapter 6
Flying Evaluation Board

6–1. Standards
Each officer authorized to pilot a military aircraft or perform crewmember duties must maintain the highest professional standards. When an officer's performance is doubtful, justification for continued aviation service and aeronautical ratings are subject to a complete review.

a. When the flying evaluation board should convene. An FEB should be convened if an officer—

(1) Fails to remain professionally qualified.
(2) Has marginal potential for continued aviation service.
(3) Is currently nonmedically disqualified for aviation service and meets the provisions for requalification (see para 6–6).

b. Reasons for a flying evaluation board to convene. An FEB will be convened for the following reasons—

(1) Lack of proficiency. Evidence that shows the officer—

(a) Lacked proficiency in flying duties.
(b) Failed to meet ATP requirements (proficiency, flying hours, task iterations, PIC requirements and APART) unless waived (see AR 95–1).

(2) Failure to maintain medical certification. All officers in aviation service, regardless of component or whether or not assigned to operational flying duty must maintain medical certification for flying duty through timely physical examinations (AR 40–501). If the certification expires, the officer is unfit until medically re-qualified or a temporary medical extension is provided. Aviation service is suspended effective the day following the last day of their birth month. In cases where temporary medical extension has been provided, aviation service is suspended on the first day following the last day of the extension. The immediate commander will temporarily suspend the officer from flying duty according to table 5–1.

(a) If not physically examined and medically recertified within 365 days following the date of suspension, the proper appointing authority may convene an FEB.
(b) If the officer is given a physical examination within 365 days and the examination shows that the officer is unfit the officer will be handled in accordance with chapter 4.

(3) Flagrant violation of flying regulations. This may show a lack of judgment or proficiency that renders the officer unfit or unqualified to perform flying duties.

(4) Undesirable habits or traits of character. Evidence that shows the officer is emotionally unstable or has inherent undesirable personality traits that may affect the officer's duties as an aviation officer. These traits include, but not limited to-alcohol abuse; illegal use of hallucinogenic, narcotic, federally controlled drugs and substances; incarceration as a result of judicial action; or willful concealment of disqualifying medical history.

(a) Urinalysis testing. Failure to comply with urinalysis testing requirements or positive urinalysis results for controlled or illegal substance.

(b) Unsatisfactory duty performance. Evidence shows that an officer's overall duty performance is unsatisfactory. This may result from performance in and out of the aircraft and may be the result of lack of motivation, improper attitudes, or inability to perform duties of an aviation officer. The individual's overall demonstrated performance as an aviation officer is to be considered and a judgment made as to whether the facts are such that they should be removed from continued aviation service.

(c) Insufficient motivation. Lack of motivation is any self-imposed deficiency not covered under medical unfitnness in AR 40–501 (for example, apathy or fear of flying not because of psychiatric illness) that limits the duty or location to which an officer may be assigned. The underlying cause may, but need not, be determined. Insufficient motivation may be proven by unjustified deficient conduct, such as refusing to fly a specific aircraft or category, type, or model of aircraft or
refusing to fly certain missions or in a particular theater of operations, combat, or otherwise. This should not be confused with valid safety concerns. This paragraph does not preclude a commander from taking any proper measures, to include action under UCMJ, if the commander determines or suspects such measures may be warranted by the officer's conduct. When a commander discovers a self-imposed deficiency on the part of an officer such as a profession of "fear of flying" the following action must be taken by the commander:

1. Suspend the officer.
2. Require the officer to have a flying duty medical examination (see AR 40–501). The examining physician will determine if any disabling physical or psychiatric conditions exist. If the determination of medical fitness for flying is made, the report will be returned to the commander who should consider what action under UCMJ would be appropriate, if any. If the officer is medically unfit, the flight surgeon will notify the commander of the duration and severity of the condition. The flight surgeon will also notify USAAMA.

(5) Request to appear before a flying evaluation board. When an officer submits a written request to appear before an FEB to their commander. The commander will send the request, with recommendations, to the FEB appointing authority.

c. Flying evaluation board functions and duties are administrative. The FEB does not make recommendations on disciplinary actions. The conduct of the FEB will be guided by AR 15–6 and this regulation. When AR 15–6 and this regulation conflict, the guidance found in this regulation will prevail.

(1) Appointing authority. Appointing authority will be in accordance with table 5–1.

(2) Approving authority. An FEB report will be approved or disapproved by the approving authority. This is the first commander with General Courts Martial Convening Authority (GCMCA). If the appointing authority exercises such judgment, approval authority may be exercised at that level.

(3) Reviewing authority. An FEB may be reviewed prior to approval by the approving authority. Reviewing authorities will be in the chain of command between the appointing and approving authorities. If none exist, the approving authority may also exercise review authority.

6–2. Membership
The membership of an FEB will be according to AR 15–6. In addition—

a. Each board will consist of an uneven number of voting members (no fewer than three) who are rated officers (CW2 or higher).

b. The board may include a flight surgeon as a nonvoting, advisory member when a medical problem could interfere with the officer's duty performance.

c. If the respondent is a flight surgeon, one voting member will be a flight surgeon.

d. A nonvoting legal advisor may be appointed to the board (see AR 15–6).

e. If the respondent is a warrant officer, at least 1 voting board member will be a warrant officer, senior in grade to the respondent but not less than a CW4.

f. National Guard boards may include a rated officer from the U.S. Army Advisory Group to the ARNGUS of a State.

g. The DA Form 1574–2 (Report of Proceedings by Board of Officers) will show board membership, the voting members' aeronautical ratings, and branch code/AOC or PMOS.

6–3. Objectives
The objective of the FEB is to ensure that all information relevant to a person's qualifications is presented and that the proceedings are objectively evaluated.

a. Board testimony. The board receives exhibits and hears testimony in open session, witnesses are sworn in and subject to cross examination, and the respondent may be represented by counsel. The respondent may choose to do one of the following:

(1) Request military legal counsel of the respondent's choice. The rating official of the military counsel will determine availability of the counsel on the basis of workload, distance to be traveled, expected length of the hearing, and Manning.

(2) Request military legal counsel be assigned.

(3) Hire civilian attorney of the respondent's choice at own expense.

(4) Decline legal counsel.

b. Board gatherings. The formal board will be held according to AR 15–6. Informal conversation or comments, statements "off the record" and reference to other matters will be avoided. In this regard, care should be taken that extracts or attachments from safety investigation reports will not be considered as evidence by board members. The board members discuss and evaluate the evidence and develop recommendations in closed session. Findings and recommendations are announced in open session before the board adjourns.

c. Board findings and recommendations. Findings and recommendations of the board will be according to AR 15–6. Recommendations are restricted to the following:
(1) Officers with proper training and skills be awarded an aeronautical rating.

(2) Orders suspending the respondent from flying be rescinded and respondent be restored to aviation service. When aviation operations or the flying ability of the respondent can be improved, other recommendations may be made.

(3) Orders disqualifying the respondent be rescinded and the respondent be re-qualified for aviation service.

(4) Respondent’s aviation service be terminated.

(5) Respondent’s aviation service and their aeronautical ratings be terminated (no longer authorized to wear the Army Aviation Badge).

(6) Respondent’s aviation service be permanently terminated.

(7) Respondent’s aviation service and their aeronautical ratings be permanently terminated (no longer authorized to wear the Army Aviation Badge).

d. Recommendation guidance. The FEB will base its recommendations on the findings. Recommendations must clearly and logically address the respondent's potential for service as an officer in active aviation service. The findings will be reviewed for legal sufficiency by the servicing legal advisor before being submitted to the appointing authority. Recommendations will be made using the following guidelines:

(1) Recommendations to terminate aviation service and/or aeronautical ratings of an officer are normally not made on the basis of an isolated incident or action. However, if an officer clearly shows a dangerous or an unacceptable change in pattern of performance, termination should be recommended.

(2) The board must consider the officer's ability and potential to perform basic military flying duties and, when applicable, the potential for more complex skills after more training and flying experience.

(3) Officers having marginal potential for continued aviation service should be recommended for service termination. Recommendations permanently limiting ATP participation to copilot or no PIC duties or simulator only duties will not be made as this would be marginal potential for continued performance.

(4) In the final analysis, the best interest of the Army remains the prime criterion in evaluating each case.

e. Termination. When the appointing or a higher reviewing authority believes termination of aviation service is proper, the report will be sent through command channels to the next higher reviewing authority for review.

f. Restoration. The appointing or any higher reviewing authority may take final action on the board proceedings when such action restores aviation service provided the officer has not been previously terminated from aviation service. Authorities listed in table 2–3 will issue aviation service orders restoring the officer once the approved FEB proceedings are received.

g. Reintegration. If restoring the officer to flying duties and ATP requirements have been exceeded, the appointing or any higher reviewing authority will have the authority to establish a start training date with reintegration by the commander into the unit ATP in accordance with AR 95–1, TC 3–04.11 and the appropriate aircrew training manual (ATM).

h. Reviewer recommendations. When all reviewers have made their recommendations, and when the FEB appointing authority believes termination or permanent termination of aviation service is proper, final action will be taken by the approving authority.

i. Report preparation and disposition. Preparation and disposition of report proceedings are according to AR 15–6, AR 95–1, and AR 95–2. If the approving authority approves the findings and recommendations, they will retain the copy of the report for 1 year. When final action is taken, the original will be sent to the appropriate termination authority (see table 2–3), to be filed permanently in the respondent's AMHRR and according to AR 600–8–105 for preparation of orders.

6–4. Appeals
On the basis of other additional evidence or new unexpected circumstances, a respondent may request the ACOM, ASCC, or DRU commander reconsider the approving authority's decision. Appeals (complete with a copy of the disqualifying FEB) must be sent through the same channels as the FEB with each intermediate command recommendation. CDR, HRC, or CNGB, as appropriate, will consider all appeals for officers not assigned to ACOMs, ASCCs, or DRUs. Once the appellate authority has acted on an appeal, it will not be considered further. Cases that are acted on favorably will be sent to the appropriate authority for the preparation of orders (see table 2–3).

6–5. Time phasing
The FEBs will be processed according to the listed conditions. If a report is late, a written justification must be included.

a. The president of the board must convene the FEB within 30 days of their appointment.

b. The president of the board should complete and send a report of the proceedings to the appointing authority within 30 days from the convening date.

c. The respondent or respondent's counsel will have 10 days from receiving the report proceedings to review them and submit a brief to the appointing authority.
d. The appointing authority must take final action on the case or send a report of the proceedings to the next higher reviewing authority within 15 days.
e. The respondent or respondent's counsel has 30 days following the notice of final action (from the approving authority) in which to file an appeal.
f. The appointing authority will request an extension from the appropriate authority when it is apparent that final action will not be completed within 6 months from the initial date of suspension (see table 2–3).

6–6. Requalification

a. **Requalification and restoration.** Officers may seek requalification and restoration of aviation service when the original reason(s) for the disqualification and current circumstances warrant reconsideration. An FEB will be convened to review the officer's request for requalification. Approval authority for cases of requalification will be retained by the appropriate approval authority and will be based on the best interests of the Army and the needs of the officer (see table 2–3).

b. **Flying evaluation board disqualification review.** An officer disqualified as the result of an FEB review may be evaluated for requalification if the officer’s aviation service and their aeronautical ratings were not permanently terminated.

c. **Processes for requalification.**
   (1) The officer will write their immediate commander to request requalification.
   (2) The officer's immediate commander must endorse the requalification request, with a recommendation, through proper channels to the FEB appointing authority. The appointing authority may convene an FEB to evaluate the officer's qualifications for return to aviation service or deny the request.

6–7. Aviation service orders

a. If the approving authority decides in favor of the FEB recommendation that the officer’s aviation service and/or aeronautical rating be terminated, the appropriate authority will publish aviation service orders terminating aviation service (see table 2–3).

b. FEB termination of an aviator’s aviation service order and/or aeronautical rating results in—
   (1) Termination of career AvIP or conditional AvIP.
   (2) Termination of authority to pilot Army aircraft and SFTS.
   (3) The PSC adjusted by HRC.
   (4) Termination of flying duty credit toward meeting flight gates.
   (5) Termination of time creditable toward award of a senior or master aviator rating.
   (6) If aeronautical rating also terminated- loss of aeronautical rating(s) and the authority to wear a previously awarded aviation badge.
   (7) Removal from the rated inventory.

   c. For flight surgeons, paragraphs 5–4b and 5–4c, nonmedical termination of their aviation service order results in—
      (1) Termination of conditional AvIP.
      (2) Termination of authority to fly in crewmember status in Army aircraft.
      (3) Termination of time creditable toward award of a senior or master flight surgeon rating.
      (4) Termination of the authority to perform flight surgeon duties.
      (5) If aeronautical rating also terminated loss of aeronautical rating(s) and the authority to wear a previously awarded aviation badge.

   d. All approved FEB proceedings will be forwarded through the ACOM, ASCC, DRU, or NGB to the appropriate authority (see table 2–3). A copy of the proceedings will be included in the officer's AMHRR.

   e. When an approved FEB restores an officer to aviation service who was previously terminated through FEB proceedings, the appropriate authority will, subject to Army requirements, publish the aeronautical order reestablishing aviation service, the aeronautical rating (authority to wear the appropriate aviation badge) and appropriate eligibility for AvIP (see table 2–3).

   f. The appointing or any higher reviewing authority will establish an ATP start training date with reintegration by the commander into the unit ATP in accordance with AR 95–1, TC 3–04.11, and the appropriate ATM.

Chapter 7
Aeromedical Consultation and In-Flight Evaluation

7–1. General
This chapter—
a. Prescribes responsibilities and processes for conducting ACIEs for Army officers whose physical condition precludes their meeting Class 2 or 2F (flight surgeons) medical standards of fitness for flying duties.
b. Concerns all aircrew members who—
   (1) Have been medically disqualified or medically terminated from aviation service for a medical condition that renders them unfit for retention in aviation service (see AR 40–501).
   (2) Possess a capability for flying duty, with possible restrictions, as determined by the flight surgeon.
   (3) Meet a valid Army requirement for a particular grade and specialty.
   (4) Are appropriate candidates for possible return to aviation service and whose evaluation may contribute substantive aeromedical knowledge and thereby enhance Army aviation and the practice of aviation medicine.

7–2. Functions
   a. Flight surgeon. Any flight surgeon may request an ACIE for a medically disqualified or medically terminated Army officer. The Director, USAAMA will review all cases as detailed in paragraph 7–2c(1) before an in-flight evaluation is completed. Upon completion, results of the ACIE will be included in an aeromedical summary to USAAMA.
   b. Director, U.S. Army Aeromedical Activity. Director, USAAMA, through U.S. Army Aeromedical Activity will—
      (1) Review complex cases and the case for all aviators medically terminated from aviation service to ensure the officer is aeromedically safe to perform and ACIE.
      (2) When required, assist with coordination of an ACIE. The flight surgeon coordinates directly with the Fort Rucker ACIE point of contact for a Fort Rucker ACIE and the local commander for all other ACIEs. When required, assist with coordination of and issue of temporary aviation service orders, as required.
      (3) Authorize and coordinate the use of USAF and USN aeromedical consultation services, as required.
      (4) Review the findings and recommendations of the ACIE, and approve or disapprove recommendations.
      (5) Following completion of the ACIE, USAAMA will forward the aeromedical the aeromedical recommendation to the appropriate aeromedical waiver authority at USAACE, TSG, or CNGB for final disposition.
      (6) When required seek a waiver to the dual pilot requirements of AR 95–1.
   c. Commanding General, Human Resources Command or Chief, National Guard Bureau. The CDR, HRC, or CNGB will—
      (1) Determine whether returning the aviator or flight surgeon to aviation service with a waiver meets Army requirements.
      (2) Inform USAAMA when service needs exist.
      (3) When required, issue a temporary aviation service order and TDY orders for the inclusive dates of the evaluation. Amend or revoke the aviation service order if appropriate.
      (4) Determine if the officer is qualified for aviation service after the evaluation report is received. Amend or revoke the aviation service order, as appropriate.
      (5) Issue assignment and travel orders for those aviators and flight surgeons returned to aviation service.

7–3. In-flight demonstration capability
   a. Aviators—
      (1) Present a copy of their most recent DA Form 759 to USAAMA personnel.
      (2) Demonstrate their ability to safely perform all the normal and emergency functions involved with piloting the aircraft in which qualified. This demonstration will include ability to preflight the aircraft as well as perform all flight maneuvers.
   b. A qualified instructor pilot—
      (1) Works with the flight surgeon to determine minimum ATM tasks and conditions to be performed.
      (2) Accompanies the aviator during all demonstrations to include but not limited to flight demonstrations with access to one set of flight controls.
      (3) Evaluates the aviator's performance.
      (4) Provides a written report to Director, USAAMA. The report will reflect the performance capabilities and limits, if any, of the aviator in each type of aircraft flown. It will also contain comments on the ability of the aviator to operate the aircraft safely and efficiently.
      (5) Provides the aviator a copy of the findings.
   c. A flight surgeon—
      (1) Works with the instructor pilot to determine minimum ATM tasks and conditions to be performed.
      (2) Accompanies the aviator in all aircraft that can accommodate the flight surgeon.
      (3) Evaluates the aviator's restrictions to physical in-flight requirements and psycho-physiologic stresses.
      (4) Provides a report of the findings to the aviator.
(5) Provides USAAMA an aeromedical summary referencing the medical concern including the written report of the findings from the ACIE.

7–4. Aeromedical consultation service

The data provided by the flight surgeon and the instructor pilot are combined and submitted in the form of an aeromedical summary. This summary is reviewed by the Aeromedical Consultation Service (ACS) in USAAMA. Selected cases may be forwarded to the Aeromedical Consultant Advisory Panel (ACAP) for review. ACAP consists of aeromedical specialists appointed by the Director, USAAMA, and experienced aviators appointed by the CG, USAACE. After the summary is reviewed, the ACS will make recommendations concerning the officer’s fitness to perform flying duties safely and efficiently. The ACS will indicate if a reevaluation is required at a later date and state the time interval for the reevaluation. The panel will provide their conclusions, recommendations, and aeromedical summary to the Director, USAAMA, who will make the final determination of medical fitness for flying duties and send them to USAACE, TSG, or CNGB for final action. Redress or appeal of the aeromedical recommendation shall begin with the local flight surgeon and the involved officer presenting additional information to USAAMA for review. Redress or appeal actions will process through the ACAP with the results being forwarded to the Director, USAAMA, for final recommendation to the appropriate waiver authority. In cases where there is no new or additional information, administrative redress or appeal shall be done through the appropriate waiver authority.

7–5. Temporary aviation service orders

The unit will request temporary aviation service orders from HRC or CNGB as applicable, with assistance from USAAMA as required. These orders will define the limits imposed on the officer for the evaluation. Such orders will terminate on the specified date, at which time the officer will revert to the previously existing suspension or disqualified status pending final decision of the case.

7–6. Travel orders

The unit commander will contact Director, USAAMA for travel details as needed and will coordinate publication of the travel order.

a. The unit will fund the travel and issue travel orders.

b. For ARNGUS aviators, funding and orders will be the responsibility of the state adjutant general.

7–7. Distribution of the final Aeromedical Consultation In-flight Evaluation Report

The ACIE report will be distributed as follows:

a. One copy for the officer’s medical record.

b. Upload to the AERO system for review by Director, USAAMA and the appropriate authority as indicated in paragraph 7–2b.

c. One copy to the officer.
Appendix A

References

Section I

Required Publications

Aeromedical Policy Letter Series
(Cited in para 4–1.) (Available at https://vfso.rucker.amedd.army.mil/)

AR 15–6
Procedures for Administrative Investigations and Boards of Officers (Cited in para 6–1c.)

AR 40–8
Temporary Flying Restrictions Due to Exogenous Factors Affecting Aircrew Efficiency (Cited in para 4–2a(3).)

AR 40–501
Standards of Medical Fitness (Cited in para 2–7c.)

AR 95–1
Flight Regulations (Cited in table 2–5.)

AR 95–2
Air Traffic Control, Airfield/Heliport, and Airspace Operations (Cited in para 6–3i.)

AR 135–100
Appointment of Commissioned and Warrant Officers of the Army (Cited in table 2–6.)

AR 135–210
Order to Active Duty as Individuals for Other Than a Presidential Selected Reserve Call-up, Partial or Full Mobilization
(Cited in table 2–6.)

AR 600–8–22
Military Awards (Cited in para 2–6b.)

AR 600–8–105
Military Orders (Cited in para 2–1b.)

AR 614–120
Inter-Service Transfer of Army Commissioned Officers on the Active Duty List (Cited in table 2–6.)

AR 621–108
Military Personnel Requirements for Civilian Education (Cited in para 3–5a(1)(b).)

DOD 7000.14–R, Volume 7a
(Cited in chap 3.) (Available at http://comptroller.defense.gov/)

TC 3–04.11
Commander’s Aviation Training and Standardization Program (Cited in para 3–7a.)

UCMJ, Article 107
False official statements (Cited in table 2–4.) (Available at http://www.ucmj.us/)

37 USC 334
Special aviation incentive pay and bonus authorities for officers (Cited in chap 3.) (Available at https://www.gpo.gov/)

Section II

Related Publications

A related publication is a source of additional information. The user does not have to read it to understand this publication.

AR 11–2
Managers’ Internal Control Program


Section III
Prescribed Forms
This section contains no entries.

Section IV
Referenced Forms

DA Form 11–2
Internal Control Evaluation Certification

DA Form 759
Individual Flight Record and Flight Crew Certificate–Army (Flight Hours)

DA Form 1574–2
Report of Proceedings by Board of Officers

DA Form 2028
Recommended Changes to Publications and Blank Forms

DA Form 4187
Personnel Action

DA Form 7122
Crew Member Training Record

DD Form 2992
Medical Recommendation for Flying or Special Operational Duty
Appendix B
Internal Control Evaluation

B–1. Function
The function covered by this evaluation is rated Army aviation officers.

B–2. Purpose
The purpose of this evaluation is to assist unit commanders in evaluating their key internal controls. It is not intended to cover all controls.

B–3. Instructions
Answers must be based on the actual testing of key management controls such as document analysis, direct observation, interviewing, sampling, and simulation. Answers that indicate deficiencies must be explained and corrective action indicated in supporting documentation. These internal controls must be evaluated at least once a year. Certification that this evaluation has been conducted must be accomplished on DA Form 11–2 (Internal Control Evaluation Certification).

B–4. Test questions
Is a monthly review conducted to ensure—
   a. Only fully qualified officers are receiving AvIP?
   b. The aviator has current flight physical?
   c. The aviator is in a documented flight position?
   d. The aviator is receiving correct rate of pay based on gate status and years of service?
   e. If an aviator has failed a gate; has eligibility for AvIP been terminated?
   f. The aviator meets all requirements for award of senior or master army aviator/flight surgeon designation?

B–5. Supersession
Not applicable.

B–6. Comments
Help make this a better tool for evaluating management controls. Submit comments to Commanding General, HRC (AHRC–PDP–I/Chief, Incentives and Compensation), Fort Knox, KY 40122–5408.
## Glossary

### Section I

#### Abbreviations

**ACAP**
aeromedical consultant advisory panel

**ACIE**
aeromedical consultation and in-flight evaluation

**ACIP**
aviation career incentive pay

**ACOM**
Army command

**ACS**
aeromedical consultation service

**AMHRR**
Army Military Human Resource Record

**AOC**
area of concentration

**APART**
annual proficiency and readiness test

**ARIMS**
Army Records Information Management System

**ARNG**
Army National Guard

**ARNGUS**
Army National Guard of the United States

**ARSTAF**
Army Staff

**ASCC**
Army service component command

**ASED**
aviation service entry date

**ATM**
aircrew training manual

**ATP**
Aircrew Training Program

**AVCATT**
aviation combined arms tactical trainer

**AvIP**
Aviation Incentive Pay

**CDR**
commander

**CG**
commanding general

**CMS**
combat mission simulator
Section II
Terms

Aeromedical consultation and in-flight evaluation
A complete clinical and/or in-flight examination to determine if experienced Army aviators or flight surgeons with a disqualifying injury, disease, or physical condition can return to flying duties without danger to themselves or the aviation safety environment.

Aeromedical physician assistant
A physician assistant who has completed an approved medical training program and has graduated from an approved military course in aviation medicine.

Aeronautical order
A published notice by proper authority to—
- Qualify or terminate an officer for aviation service.
- Begin or terminate AvIP.
- Award or terminate an aeronautical rating and badge.

Aeronautical rating
One of several qualifications awarded to officers. A rating certifies successful completion of prescribed aviation related training or equivalent experience. Current U.S. Army aeronautical ratings are Army aviator, senior Army aviator, master Army aviator, flight surgeon, senior flight surgeon, and master flight surgeon.

Army aviator
Officers who have been awarded an Army aeronautical rating. This does not include flight surgeons.

Aviation “gates”
The 12th and 18th year computed from the ASED in an aviator’s aviation career used to determine further eligibility for AvIP. Gates do not apply to flight surgeons that follow conditional AvIP rules.

Career aviation incentive pay
Additional pay intended to attract and retain officers in an aviation career field on a career basis. It is authorized to aviators in a designated career field that remain in aviation service on a career basis. AvIP is not directly linked to monthly flying requirements but instead is linked to meeting the career flying duty requirements in paragraph 3–1.

Conditional aviation career incentive pay
Pay authorized to flight surgeons while practicing aviation medicine in an authorized operational position and aviators who are assigned to operational flying duty and are performing the minimum flight requirements in a military aircraft, but are not otherwise eligible for career AvIP according to paragraph 3–1b.
**Flight surgeon**
A physician specially trained in aviation medicine practice whose primary duty is the medical examination and medical care of aircrews.

**Flying evaluation board appointing authority**
The officer authorized to convene an FEB. The officer must hold 365-day suspension authority in accordance with table 5–1. For ARNG, DARNG, The Adjutant General of the States (includes territories), and both CGs of the District of Columbia and Rhode Island National Guard may appoint an ARNG FEB.

**Flying evaluation board approving authority**
The officer authorized to approve the findings and recommendations of an FEB. They will be the lowest level commander with GCMCA. If the appointing authority exercises general court-martial jurisdiction, approval authority may be exercised at this level.

**Flying evaluation board reviewing authority**
Any officer(s) or organization(s) within the chain of command between the appointing and approving authority that the approving authority requires to review the FEB. Reviewing authorities may make recommendations but are not required to retain copies of the FEB.

**Officer**
The term officer is used in this publication to indicate WO1 through general officer aviators and flight surgeons. When the need exists they are separated but are otherwise interchangeable.

**Pilot status codes**
Codes used to identify aviators on the Officer Record Brief, as follows:
- *Pilot Status Code 1.* Qualified for aviation service.
- *Pilot Status Code 3.* Nonmedically disqualified (by FEB or voluntary/involuntary disqualification).
- *Pilot Status Code 5.* Conditional AvIP.

**Student aviator**
Officers who are enrolled in a course leading to the award of an aeronautical rating as an Army aviator.

**Total Officer Personnel Management Information System**
Pilot Status Codes reflected on an officers Officer Record Brief will reflect TOPMIS definitions.

**Total operational flying duty credit**
The cumulative number of months of operational flying duty as defined in paragraph 3–4.

**Section III**

**Special Abbreviations and Terms**
This section contains no entries.