

Pregnancy is a most natural event. Despite this normality pregnancy can result in changes or complications that have the potential to reduce aviation safety. Accordingly, the Civil Aviation Rules include pregnancy and its consequences in the definition of **medical condition**. (See 'Looking at the Law' section at the end of this MIS.)

This Medical Information Sheet provides general information concerning the aeromedical disposition of pregnant pilots¹.

CAUTION

This Medical Information Sheet contains general advice concerning the CAA's regulatory handling of medical conditions. This sheet is not intended as clinical medical advice and should not ever be used as the basis of decisions concerning your medical care. You should consult your medical advisers and discuss your options thoroughly with them before making any decisions about your medical care.

Pregnancy is a normal event! How can it interfere with aviation safety?

Even the most normal of pregnancies leads to changes in the size and shape of the body. These changes have the potential to reduce physical agility and interfere with the ability to adopt some stances and postures that might be necessary during flight or pre-flight activities. A pregnant abdomen also has the potential to physically impede your ability to apply full back-stick control inputs in some situations.

Pregnancy also has the potential to result in mood or cognitive changes.

There is also the possibility of a pregnancy resulting in either an early miscarriage or, later on, in premature labour. These complications have the potential to result in unexpected and significant physical and mental/emotional impairment. The first and final thirds of a pregnancy is when the risk of miscarriage or premature labour is particularly elevated.

Other possible complications of pregnancy (e.g. nausea, vomiting, and fatigue) also have the capacity to lead to physical and/or mental/emotional impairment or distraction.

I'm pregnant! Do I have to notify CAA?

Yes, you are required to notify CAA as soon as you know or believe you are pregnant.

Every pilot has an obligation, under Schedule 2, clause 8 of the Civil Aviation Act 2023, to report any change in their medical condition, or the existence of any previously unknown medical condition, that may interfere with flight safety. Pregnancy is certainly a medical condition that could interfere with flight safety and so must be reported.

Can I keep flying?

The early and late periods of pregnancy are associated with increased risk of potentially incapacitating complications such as miscarriage and premature labour. During late pregnancy the changes in the shape and size of your body also have the greatest potential to interfere with your movement and agility.

¹ While this MIS only mentions pilots, the information provided applies equally well to Air Traffic Controllers.

For these reasons flying status is usually retained during the low-risk middle period of an uncomplicated pregnancy (with a multicrew restriction for air operations involving the carriage of passengers), but not prior to the end of the 12th week or after the end of the 28th week. Depending on the nature of any problems this *window* of time is likely to be reduced in the case of pregnancy complications.

What will CAA do?

As soon as CAA has been notified of your pregnancy you will be sent a letter advising you of the restrictions and conditions applied (e.g. No flying until after the end of the 12th week of pregnancy) and outlining any reports that will be required during your pregnancy and/or after delivery.

What restrictions are likely to be applied?

Generally, class 1 medical certificate holders are precluded from flying, in any capacity, prior to the end of the 12th week and after the end of the 28th week. Class 2 certificate holders are usually precluded from flying in any capacity prior to the end of the 12th week, required to fly with a pilot during 28-32 weeks, and to not fly after 32 weeks. Class 3 certificate holders are able to operate during the first 12 weeks of pregnancy, require relief personnel to be available within 15 minutes during 34-38 weeks, and must not operate after 38 weeks.

After delivery will my return to flying be unrestricted?

Unless there is some significant ongoing complication of your pregnancy, or some other medical problem has occurred, it is likely that you will be returned to unrestricted flying 6 or so weeks after delivery.

Looking at the law

Civil Aviation Rule Part 67: Definitions

The definition of —medical condition|| in the Civil Aviation Rules (rule 67.3) includes pregnancy and the consequences of pregnancy. This definition states that **medical condition** includes:

- (1) any of the following (no matter how minor):
 - (i) any illness or injury;
 - (ii) any bodily infirmity, defect or incapacity;
 - (iii) any mental infirmity, defect or incapacity;
 - (iv) Any sequela of an illness, injury, infirmity, defect or incapacity mentioned in (i), (ii) or (iii); and
- (2) any abnormal psychological state or behavioural or cognitive disorder; and
- (3) drug addiction and drug dependence; and
- (4) for a female – pregnancy and the physiological and psychological consequences of pregnancy or of termination of pregnancy.

Civil Aviation Rule Part 67: Medical Standards

The medical standards relating to pregnancy in Part 67 of the Civil Aviation Rules are very similar for Class 1, Class 2, and Class 3 medical certificates. The exact wording of the class 1 vision medical standards is shown below. These standards (rule 67.103(i) Reproductive system) state that an applicant must –

- (1) have no history or diagnosis of any condition of the reproductive system that is of aeromedical significance; and
- (2) without limiting paragraph (i)(1), have no history or diagnosis of any of the following specific medical conditions, to an extent that is of aeromedical significance:
 - (i) menstrual disturbance;
 - (ii) pregnancy.

* Rule 67.3(a) defines —aeromedical significance||: A medical condition is of aeromedical significance if, having regard to any relevant general direction, it interferes or is likely to interfere with the safe exercise of the privileges or the safe performance of the duties to which the relevant medical certificate relates.

International Law: ICAO Medical Standards

The International Civil Aviation Organisation class 1 medical standards include the following provisions concerning pregnancy:

6.3.2.22 Applicants who are pregnant shall be assessed as unfit unless obstetrical evaluation and continued medical supervision indicate a low-risk uncomplicated pregnancy.

6.3.2.22.1 Recommendation - *For applicants with a low-risk uncomplicated pregnancy, evaluated and supervised in accordance with 6.3.2.22, the fit assessment should be limited to the period from the end of the 12th week until the end of the 26th week of gestation.*

6.3.2.23 Following confinement or termination of pregnancy, the applicant shall not be permitted to exercise the privileges of her licence until she has undergone re-evaluation in accordance with best medical practice and it has been determined that she is able to safely exercise the privileges of her licence and ratings.

Aviation Medicine Team

Tel: +64-4-560 9466

Email: med@caa.govt.nz

Website: www.aviation.govt.nz

P O Box 3555, Wellington, 6140, New Zealand