European Parliament

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Committee on Petitions

19.12.2018

NOTICE TO MEMBERS

Subject: Petition No 0528/2018 by P.C.H. (German) on mandatory colour blindness and colour vision deficiency testing requirements for all pilots and aviation personnel operating aircraft within EU airspace

1. Summary of petition

The petitioner is concerned that current colour vision deficiency testing for pilots and flight crew within the EU does not fully apply to non-EU pilots. The petitioner describes how foreign-trained pilots are not subject to the same colour blindness tests as EU-trained pilots, and yet they are permitted to operate aircraft within EU airspace even though they would not have been able to do so had they been trained and tested within the EU. The petitioner calls for the introduction of regulations, which would remedy this situation, in such a way that the actual medical condition rather than the origin of the pilot is determinative.

2. Admissibility

Declared admissible on 17 October 2018. Information requested from Commission under Rule 216(6).

3. Commission reply, received on 19 December 2018

The Commission's observations

Both the EU and US requirements mandate the use of pseudoisochromatic plates for the initial screening of colour vision. If a person fails that first test using Ishihara plates, he/she will undergo additional colour tests to prove they are colour safe. In this additional testing, there appears to be some discrepancy between EU and the US Federal Aviation Authority (US FAA) requirements.

i. Within the EU, the National Aviation Authorities (NAAs) can choose their own appropriate methods for the additional colour test. Some NAAs have opted for the

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anomaloscope testing due to the poor reliability of the lantern tests. In the opinion of European Union Aviation Safety Agency (EASA) this may have led the petitioner to believe that the EU tests are stricter. Furthermore, a new test is developed and may be deployed in the future (CAD – Colour Assessment and Diagnostic). Some NAAs have already implemented the CAD test into their testing practice.

ii. In the US, if a person fails the initial test, he/she has to undergo the additional specialised operational medical tests. For a class 1 medical certificate (needed to fly large commercial planes), these tests include an operational colour vision test (OCVT) and a medical flight test (MFT). Failing either OCVT or MFT will result in the inability to receive a class 1 medical certificate.

Based on the FAA and ICAO requirements, EASA believes that there are no colour blind pilots (or with severely deficient vision of colours) to an extent that would endanger flight safety, unless they obtained their medical certificate by fraud. EASA does not see any safety concerns concerning the testing and enforcement carried out by the US FAA. It needs to be noted that, since the 2002 FedEx accident, the US FAA has been treating the colour vision testing very seriously (OCVT and MFT tests are performed only in one US location under very strict supervision of the US FAA).

EASA acknowledges and recognises the operational and safety need for the pilot to be colour safe (minor deficiencies may be acceptable depending on the axis).

EASA notes that for private pilots (PPL or LAPL licences), colour deficiency is allowed, albeit subject to daytime limitation endorsed on the medical certificate.

Conclusion

EASA considers that, based on the current requirements, there are no major differences between the European and US requirements with regard to aviation that would discriminate against EU pilots or could be considered unsafe.

