

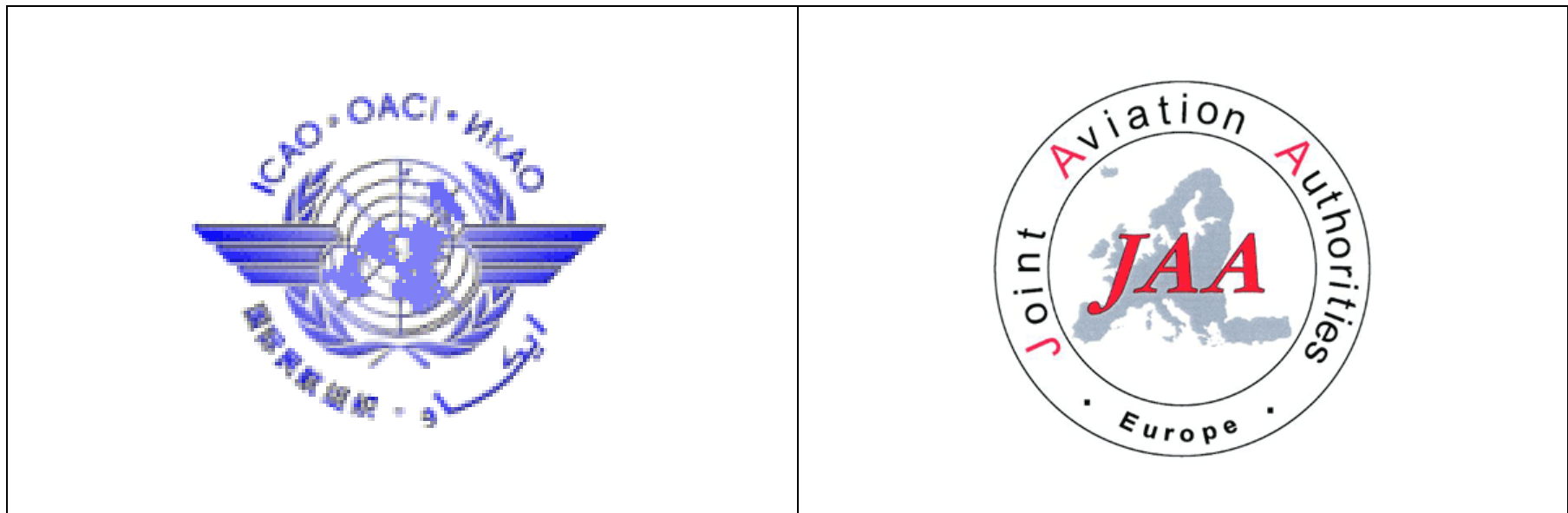
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## Comparison

Annex 1 to the ICAO Convention

«»

JAR-FCL 3



*Used Versions :*

- » Annex 1 to the ICAO Convention - up to Amendment 166
- » JAR-FCL 3 – Amendment 4 (i.e. Amendment 3 including NPA-FCL 3-21)

## Chapter 1. Definitions and General Rules concerning Licences

### 1.1 Definitions

ICAO Annex 1	JAR-FCL » JAR-FCL 3	Notes
Accredited medical conclusion. <i>The conclusion reached by one or more medical experts acceptable to the Licensing Authority for the purposes of the case concerned, in consultation with flight operations or other experts as necessary.</i>	No definitions for medical subjects in JAR-FCL 3, equivalent in JAR-FCL 3.125 (a) , (b)	
Medical Assessment. <i>The evidence issued by a Contracting State that the licence holder meets specific requirements of medical fitness</i>	No definitions for medical subjects in JAR-FCL 3, equivalent in JAR-FCL 3.035 (c)	
Medical Assessor. <i>A physician qualified and experienced in the practice of aviation medicine who evaluates medical reports submitted to the Licensing Authority by medical examiners.</i>	No definitions for medical subjects in JAR-FCL 3, no such position, equivalent in JAR-FCL 3.080 (a)	
Medical Examiner. <i>A physician with training in aviation medicine and practical knowledge and experience of the aviation environment, who is designated by the Licensing Authority to conduct medical examinations of fitness of applicants for licences or ratings for which medical requirements are prescribed.</i>	No definitions for medical subjects in JAR-FCL 3, equivalent in JAR-FCL 3.090 (a)	
Problematic use of substances. <i>The use of one or more psychoactive substances by aviation personnel in a way that:</i>  <i>a) constitutes a direct hazard to the user or endangers the lives, health or welfare of others; and/or</i>  <i>b) causes or worsens an occupational, social, mental or physical problem or disorder.</i>	No definitions for medical subjects in JAR-FCL 3, equivalent in Appendix 10 (4)	

Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.

ICAO Annex 1	JAR-FCL » JAR-FCL 3	Notes
Psychoactive substances. <i>Alcohol, opioids, cannabinoids, sedatives and hypnotics, cocaine, other psychostimulants, hallucinogens, and volatile solvents, whereas coffee and tobacco are excluded.</i>	No definitions for medical subjects in JAR-FCL 3, equivalent in JAR-FCL 3.205, 325 (b) (6), (7)	

## 1.2 General rules concerning licences

### 1.2.4 Medical fitness

ICAO Annex 1	JAR-FCL » JAR-FCL 3	Notes
Note 1	JAR-FCL 3, Section 2 and JAA Manual of Civil Aviation Medicine	ICAO Manual severely outdated, some references as e.g. HIV are not even to be found in Doc 8984
Note 2	JAR-FCL 3.025 (b), 3.035 (b)	separate medical certificate
1.2.4.1	JAR-FCL 3.025 (b)	
1.2.4.2	JAR-FCL 3.105 (a)	
1.2.4.2.1	JAR-FCL 3.105 (b)	
Note 1	JAR-FCL 3.105 (a)	
1.2.4.3	JAR-FCL 3.035 (b)	
1.2.4.4	JAR-FCL 3.090 (a)	
1.2.4.4.1	JAR-FCL 3.090 (d), (e)	
1.2.4.4.2 and Note	in JAR-FCL 3.090 (d)	practical knowledge and experience in JAR-FCL 3 only "should" (except some member states with requirements above JAR-FCL 3)
1.2.4.5	JAR-FCL 3.120 (a)	
1.2.4.5.1	JAR-FCL 3.120 (b)	
1.2.4.6	JAR-FCL 3.095 (c)	
1.2.4.6.1	NIL	no explicit requirement

**Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.**

1.2.4.6.2	JAR-FCL 3.095 (c)	AMC as such does not exist in ICAO Annex 1
1.2.4.7	NIL, similar to JAR-FCL 3.080 (a)	no medical assessors in JAR-FCL 3
1.2.4.7.1 and Note	JAR-FCL 3.095 (c)	auditing not particularly referred to in JAR-FCL 3
1.2.4.8	JAR-FCL 3.125 (a)	
1.2.4.8 (a)	JAR-FCL 3.035 (a) in connection with 3.125 (a)	
1.2.4.8 (b)	JAR-FCL 3.125 (a) (2)	
1.2.4.8 (c)	JAR-FCL 3.125 (a) (4)	
1.2.4.9	JAR-FCL 3.080 (b)	
1.2.4.9.1	JAR-FCL 3.080 (b)	
1.2.4.9.2	NIL	in JAR-FCL 3 medical information sensu strictu restricted to medical personnel

**1.2.5 Validity of licences**

<b>ICAO Annex 1</b>	<b>JAR-FCL » JAR-FCL 3</b>	<b>Notes</b>
1.2.5.1	JAR-FCL 3.025 (a)	
1.2.5.1.1	NIL	No need for such a para as there is a harmonised approach
Note 1	see JAR-FCL 1	
Note 2	see JAR-FCL 1	
Note 3	see JAR-FCL 1	
1.2.5.2 60 m PPL (A), (H), glider , free balloon 12 m CPL (A), (H) 12 m ATPL (A), (H)	JAR-FCL 3.105 (a) (2) JAR-FCL 3.105 (a) (1) JAR-FCL 3.105 (a) (1)	glider and free balloon not covered by JAR-FCL 3
Note 1	JAR-FCL 3.105 (b)	
Note 2	NIL	
1.2.5.2.1	JAR-FCL 3.105 (e) JAR-FCL 3.105 (a) (1)	no reduction of validity > 40 a for multi-pilot commercial air transport in ICAO (in JAR-FCL 3 not for flight

**Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.**

		engineers)
1.2.5.2.2	JAR-FCL 3.105 (a) (1)	reduction nto 6 m in commercial air transport in ICAO only for those in single-pilot ops carrying pax
1.2.5.2.3	JAR-FCL 3.105 (a) (2)	in ICAO reduction for Class 2 above 40, in JAR-FCL 3 above 30 years ATCO not regulated in JAR-FCL 3
1.2.5.2.4, recommendation	JAR-FCL 3.105 (a) (2)	
Note	JAR-FCL 3.105 (a) (1) to (3)	
1.2.5.2.5	NIL	no possibility to postpone a medical examination

**1.2.6 Decrease of medical fitness**

ICAO Annex 1	JAR-FCL » JAR-FCL 3	Notes
1.2.6.1	JAR-FCL 3.040 (a)	
1.2.6.1.1	JAR-FCL 3.040 (d) (3) pregnancy (1), (2) illness, injury (b), JAR-FCL 3.115 (a)	ICAO 20 d, JAR-FCL 3 21 d duration

**1.2.7 Use of psychoactive substances**

ICAO Annex 1	JAR-FCL » JAR-FCL 3	Notes
1.2.7.1	JAR-FCL 3.205, 325 (b) (6), (7)	
1.2.7.2	JAR-FCL 3.205, 325 (b) (6), (7)	
1.2.7.3, recommendation	Appendix 10 (4)	

## Chapter 6. Medical Provisions for Licensing

ICAO Annex 1	JAR-FCL » JAR-FCL 3	Notes
Note 1		
Note 2		
Note 3	JAR-FCL 3.125 (a)	
Note 4	JAR-FCL 3.125 (a)	
Note 5	JAR-FCL 3, Section 2 and JAA Manual of Civil Aviation Medicine	

### 6.1 Medical Assessment - General

ICAO Annex 1	JAR-FCL » JAR-FCL 3	Notes
6.1.1 Classes of Medical Assessment		
a)	JAR-FCL 1.145, 1.270, 2.145, 2.270, 4.145	flight navigators not covered in JAR-FCL
b)	JAR-FCL 1.105, 2.105	gliders and balloons not covered in JAR-FCL
c)	NIL	air traffic controllers not covered in JAR-FCL
6.1.2	JAR-FCL 3.120 (a), (b)	
6.1.3	JAR-FCL 3.125 (a)	fitness in cases where requirements is not met but flight safety not jeopardised not determined by AME but on discretion of AMS in JAR-FCL 3
6.1.4	JAR-FCL 3.105 (d)	
Note	JAR-FCL 3.095 (d)	

## 6.2 Requirements for Medical Assessments

ICAO Annex 1	JAR-FCL » JAR-FCL 3	Notes
6.2.1 General	NIL	outlined in Subparts B and C in detail
a)	NIL	outlined in Subparts B and C in detail
b)	NIL	outlined in Subparts B and C in detail
c)	NIL	outlined in Subparts B and C in detail
6.2.2 Physical and mental requirements	JAR-FCL 3.110 Requirements for medical assessments	
a)	(a) (1)	
b)	(a) (2)	
c)	(a) (3)	
d)	JAR-FCL 3.040 (b)	
Note	IEM 3.040, Use of medication , drugs, other treatments and alcohol, 11 Other treatments	
6.2.3 Visual acuity test requirements	NIL	ensured by detailed requirements for visual testing
6.2.3.1 Recommendation		
a)	NIL	level of illumination covered by professional requirements for such examinations anyway, however, details in JAA Manual of Civil Aviation Medicine (Aviation Ophthalmology - 2 Visual Acuity - 2.3 Examination techniques)
b)	NIL	use of Landolt Rings described in detail in JAA Manual of Civil Aviation Medicine (Aviation Ophthalmology - 2 Visual Acuity - 2.3 Examination techniques)
6.2.4 Colour perception requirements	JAR-FCL 3.225, 3.345	
6.2.4.1	NIL	implied in the specific requirements for colour perception testing
6.2.4.2	JAR-FCL 3.225, 3.345 (a)	
6.2.4.3	JAR-FCL 3.225, 3.345 (b), c	whereas ICAO only requires to readily

**Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.**

		distinguish the colours used in aviation JAR-FCL 3 requires to pass extensive testing
Note	NIL	in JAR-FCL 3 for guidance on methods it is generally referred to the JAA Manual of Civil Aviation Medicine
6.2.4.3.1 Recommendation	NIL	use of sunglasses described in detail in JAA Manual of Civil Aviation Medicine (Aviation Ophthalmology - 5 Visual Aids - 5.2 sunglasses), however, no special mention of non-polarising sunglasses
6.2.5 Hearing Requirements		
6.2.5.1	NIL	ensured by detailed hearing requirements
6.2.5.2	JAR-FCL 3.235, 3.355 (b)	
6.2.5.2.1	NIL	in JAR-FCL 3.235, 3.355 (e) speech discrimination test as alternative for applicants with hypoacusis
6.2.5.3	NIL	air traffic controllers not covered in JAR-FCL
6.2.5.3.1	NIL	air traffic controllers not covered in JAR-FCL
6.2.5.4 Recommendation	NIL	pure-tone audiometry in JAR-FCL 3 only for applicants with Instrument Rating at first examination, thereafter every 5 years < 40, every 2 years thereafter
6.2.5.5	JAR-FCL 3.235, 3.355 (a)	in JAR-FCL 3 a spoken voice test is required <b>every</b> examination
Note 1	NIL	reference zero for calibration covered by professional requirements for such examinations, however, details in JAA Manual of Civil Aviation Medicine (Aviation Otorhinolaryngology - 4 Hearing Requirements - 4.3 Pure tone audiometry): audiometers must be properly calibrated

**Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.**

Note 2	NIL	intensity of background noise covered by professional requirements for such examinations, however, some included in details in JAA Manual of Civil Aviation Medicine (Aviation Otorhinolaryngology - 4 Hearing Requirements - 4.3 Pure tone audiometry): audiometers must be properly calibrated
Note 3	NIL	no norms for conversational voice test given in JAR-FCL 3 except: distance of 2 m and back turned towards AME
Note 4	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
Note 5	JAR-FCL 3.355 (b)	

**6.3 Class 1 Medical Assessment**

<b>ICAO Annex 1</b>	<b>JAR-FCL » JAR-FCL 3</b>	<b>Notes</b>
<b>6.3.1 Assessment issue and renewal</b>		
6.3.1.1	JAR-FCL 1.145, 1.270, 2.145, 2.270, 4.145	flight navigators not covered in JAR-FCL
6.3.1.2	NIL	period of validity of medical certificate defined in JAR-FCL 3.105 (a) (1) and not repeated in every chapter again
6.3.1.3	JAR-FCL 3.100 (b), (c)	issue by the <b>AMS and not the Licensing Authority</b> in JAR-FCL 3
<b>6.3.2 Physical and mental requirements</b>		
6.3.2.1	NIL	general statement implied in the specific requirements for the different systems as a general statement relating to the specific system
6.3.2.2 a)	JAR-FCL 3.205 (b) (5)	

**Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.**

b)	JAR-FCL 3.205 (b) (6), (7)	
c)	JAR-FCL 3.205 (b) (1)	
d)	JAR-FCL 3.205 (b) (2)	
e)	JAR-FCL 3.205 (b) (3)	
f)	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
g)	JAR-FCL 3.205 (b) (4)	
h)	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
i)	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
j)	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
k)	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
Note	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
6.3.2.3		
a)	JAR-FCL 3.210 (b) (1)	
b)	JAR-FCL 3.210 (b) (2)	
c)	JAR-FCL 3.210 (b) (2)	
6.3.2.4	JAR-FCL 3.210 (b) (4)	
6.3.2.5	JAR-FCL 3.130 (a)	

Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.

6.3.2.5.1	JAR-FCL 3.140 (c)	fit assessment at initial only for Class 2 in JAR-FCL 3, details are given in para 6, Appendix 1
6.3.2.5.2	JAR-FCL 3.145 (a), (b), (c), (h), (i)	in JAR-FCL 3 requirements related to the specific rhythm disturbances
Note	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.3.2.6	JAR-FCL 3.130 (b)	JAR-FCL 3 requires a certain standard of ECG (12-lead resting ECG) and not only at initial examination but also thereafter, frequency depending on age
6.3.2.6.1	JAR-FCL 3.130 (b)	JAR-FCL 3 requires rest ECG every 6 m instead of annually
6.3.2.6.2 Recommendation	JAR-FCL 3.130 (b)	JAR-FCL 3 requires rest ECG every 2 a until age 40, then annually until 50 instead of bi-annually
Note 1	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
Note 2	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.3.2.7	JAR-FCL 3.135 (b)	in contrast to ICAO JAR-FCL 3 defines above what limits an applicant has to be assessed as unfit
6.3.2.7.1	JAR-FCL 3.135 (c), Appendix 1 (4)	medication is specified in Appendix
Note 1		guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.3.2.8	JAR-FCL 3.130 (a)	
6.3.2.9	JAR-FCL 3.155 (a)	
6.3.2.9.1 Recommendation	JAR-FCL 3.155 (b)	in JAR-FCL 3 chest radiography is more specified (posterior/anterior) and <b>required</b> at initial examination
Note	JAR-FCL 3.155 (b)	

Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.

6.3.2.10	JAR-FCL 3.160 (a)	
6.3.2. 11	JAR-FCL 3.160 (b), Appendix 2, (2) (b)	fit assessment by AMS, if no recurrent attacks, if considered stable and acceptable medication in JAR-FCL 3. In ICAO fit, if no significant symptoms, not likely to cause incapacitation
6.3.2. 11.1	Appendix 2, (2) (a)	
Note		guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.3.2.12	JAR-FCL 3.190 (a)	pulmonary tuberculosis not specifically mentioned in JAR-FCL 3, guidance in Section 2, JAA Manual of Civil Aviation Medicine (The Respiratory System, 4 Active inflammatory disease, 4.2 Pulmonary tuberculosis)
6.3.2.12.1	NIL	pulmonary tuberculosis not specifically mentioned in JAR-FCL 3, guidance in Section 2, JAA Manual of Civil Aviation Medicine (The Respiratory System, 4 Active inflammatory disease, 4.2 Pulmonary tuberculosis)
Note	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
Note	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.3.2.13	JAR-FCL 3.165	
6.3.2.13.1	JAR-FCL 3.170 (d)	
6.3.2.14	JAR-FCL 3.170 (e)	
6.3.2.14.1	JAR-FCL 3.170 (f)	unfit for a minimum period of 3 m in JAR-FCL 3, discretion of assessor in ICAO
6.3.2.15	JAR-FCL 3.175 (a)	
6.3.2.16	JAR-FCL 3.175 (d)	

Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.

6.3.2.16.1	JAR-FCL 3.175 (c), Appendix 4 (2), (3)	
Note		guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.3.2.17	JAR-FCL 3.180 (a)	
Note	JAR-FCL 3.180 (c)	in contrast to ICAO (applicants with sickle cell <b>trait</b> usually fit), applicants with sickle cell <b>disease</b> unfit in JAR-FCL 3
6.3.2.18	JAR-FCL 3.185 (a), (b)	
6.3.2.18.1	JAR-FCL 3.185 (b)	
Note		guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.3.2.19	JAR-FCL 3.185 (d)	
6.3.2.19.1	JAR-FCL 3.185 (d)	
6.3.2.20	Appendix 7 (1), (2)	
6.3.2.20.1	Appendix 7 (2)	
Note 1	NIL	evaluation not specifically defined in JAR-FCL 3, guidance in Section 2, JAA Manual of Civil Aviation Medicine (Sexually transmitted diseases, 3 HIV positivity and AIDS)
Note 2	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle, whereas the ICAO Doc 8984 is available only in an edition not even mentioning HIV
6.3.2.21	JAR-FCL 3.195 (a)	
6.3.2.22	JAR-FCL 3.195 (c)	
6.3.2.22.1	JAR-FCL 3.195 (c)	in contrast to ICAO (fit assessment limited from 12th to 26th w) JAR-FCL 3 allows fit assessment up to 26th w, perhaps taking into account that pregnancy is detected anyway sooner or later in the first 12 w not covered by

**Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.**

		ICAO
6.3.2.23	JAR-FCL 3.195 (c)	
6.3.2.24	JAR-FCL 3.200 (a)	
Note	JAR-FCL 3.200 (c)	
6.3.2.25	JAR-FCL 3.230 (a)	
6.3.2.26		
a)	JAR-FCL 3.230 (d) (3)	
b)	JAR-FCL 3.230 (a)	dysfunction of Eustachian tubes not specifically mentioned
c)	JAR-FCL 3.230 (d) (2)	
6.3.2.26.1	Appendix 15 (3)	
Note	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.3.2.27		
a)	JAR-FCL 3.230 (d) (4)	nasal obstruction not specifically mentioned, restriction of nasal air passage instead in JAR-FCL 3
b)	JAR-FCL 3.230 (d) (5)	
6.3.2.28	JAR-FCL 3.230 (d) (6)	stuttering not specifically mentioned, significant disorder of speech or voice instead in JAR-FCL 3
<b>6.3.3 Visual requirements</b>		
6.3.3.1	JAR-FCL 3.215 (a)	
6.3.3.2	JAR-FCL 3.220 (a)	6/9 in ICAO corresponds to 6/9 (0,7) in JAR-FCL 3
a)	NIL	acceptable correction defined in JAR-FCL 3, but not specifically mentioned that it has to be worn
b)	JAR-FCL 3.220 (g) (3)	
Note 1	NIL	such resp. reference to JAR-OPS not in JAR-FCL 3

Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.

Note 2	JAR-FCL 3.215(c), (d)	
6.3.3.2.1		
a)	NIL	not specifically mentioned in JAR-FCL 3, but use of contact lenses described in detail in JAA Manual of Civil Aviation Medicine (Aviation Ophthalmology - 5 Visual Aids - 5.3 Contact lenses)
b)	JAR-FCL 3.220 (g) (1)	implied, but not specifically mentioned
c)	JAR-FCL 3.220 (g) (3)	
Note	NIL	no reference to specific ophthalmological examinations or those to be omitted in carriers of contact lenses in JAR-FCL 3
6.3.3.2.2	NIL	no such obligation to wear contact lenses of high-index spectacles in case of large refractive error in JAR-FCL 3, however, some guidance in JAA Manual of Civil Aviation Medicine (Aviation Ophthalmology - 5 Visual Aids - 5.3 Contact lenses)
Note	NIL	high-index lenses neither mentioned in JAR-FCL Section 1, nor the JAA Manual of Civil Aviation Medicine
6.3.3.2.3	JAR-FCL 3.215 (b), (d)	not specifically mentioned in JAR-FCL 3, but implied in the paragraphs cited requiring an ophthalmological examination for initial applicants anyway and recurrent examinations every 24 m anyway
Note 1	NIL	
Note 2	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.3.3.3	JAR-FCL 3.220 (h) (1)	
6.3.3.4	JAR-FCL 3.220 (b) (6), (g) (2)	paragraph is contentious, what is intended is reflected in the JAR-FCL 3-paragraphs cited

Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.

Note 1	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
Note 2	NIL	not specifically mentioned in JAR-FCL 3 that spectacles with full near vision correction are unacceptable, guidance and details given in the JAA Manual of Civil Aviation Medicine (Aviation Ophthalmology - 5 Visual Aids - 5.1 Spectacles for aircrew)
Note 3	NIL	not specifically mentioned in JAR-FCL 3, guidance and details given in the JAA Manual of Civil Aviation Medicine (Aviation Ophthalmology - 5 Visual Aids - 5.1 Spectacles for aircrew)
6.3.3.4.1	JAR-FCL 3.220 (g) (3)	near correction not specifically mentioned, paragraph cited speaks of "similarly correcting spectacles"
6.3.3.5	JAR-FCL 3.220 (c)	field of vision of the single eyes not specifically mentioned in JAR-FCL 3
6.3.3.6	JAR-FCL 3.220 (c)	
6.3.3.6.1	JAR-FCL 3.220 (c), Appendix 13 (4), (5)	no stereoscopic requirement in JAR-FCL 3
<b>6.3.4 Hearing requirements</b>		
6.3.4.1	JAR-FCL 3.235 (c) (d)	requirements for initial examination more strict in JAR-FCL 3 than at revalidation / renewal and than ICAO
6.3.4.1.1	JAR-FCL 3.235 (e), Appendix 16 (2)	
Note 1	NIL	not specifically mentioned in JAR-FCL 3, guidance and details given in the JAA Manual of Civil Aviation Medicine (Aviation Otorhinolaryngology - 4 Hearing Requirements - 4.4 Speech Audiometry)
Note 2	NIL	not specifically mentioned in JAR-FCL 3, guidance and details given in the

**Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.**

		JAA Manual of Civil Aviation Medicine (Aviation Otorhinolaryngology - 4 Hearing Requirements - 4.4 Speech Audiometry)
6.3.4.1.2	NIL	practical hearing test in flight not appearing in JAR-FCL 3

**6.4 Class 2 Medical Assessment**

ICAO Annex 1	JAR-FCL » JAR-FCL 3	Notes
<b>6.4.1 Assessment issue and renewal</b>		
6.4.1.1	JAR-FCL 1.105, 2.105	gliders and balloons not covered in JAR-FCL
6.4.1.2	NIL	period of validity of medical certificate defined in JAR-FCL 3.105 (a) (1) and not repeated in every chapter again
6.4.1.3	JAR-FCL 3.100 (b), (c)	issue by the <b>AMS and not the Licensing Authority</b> in JAR-FCL 3
<b>6.4.2 Physical and mental requirements</b>		
6.4.2.1	NIL	general statement implied in the specific requirements for the different systems as a general statement relating to the specific system
6.4.2.2		
a)	JAR-FCL 3.325 (b) (5)	
b)	JAR-FCL 3.325 (b) (6), (7)	
c)	JAR-FCL 3.325 (b) (1)	
d)	JAR-FCL 3.325 (b) (2)	
e)	JAR-FCL 3.325 (b) (3)	
f)	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)

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g)	JAR-FCL 3.325 (b) (4)	
h)	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
i)	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
j)	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
k)	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
Note	NIL	not specifically mentioned in Section 1, detailed reference in the JAA Manual of Civil Aviation Medicine (Aviation Psychiatry)
6.4.2.3		
a)	JAR-FCL 3.330 (b) (1)	
b)	JAR-FCL 3.330 (b) (2)	
c)	JAR-FCL 3.330 (b) (2)	
6.4.2.4	JAR-FCL 3.330 (b) (4)	
6.4.2.5	JAR-FCL 3.250 (a)	
6.4.2.5.1	JAR-FCL 3.260 (c)	details are given in Appendix 1 (6)
6.4.2.5.2	JAR-FCL 3.265 (a), (b), (c), (h), (i)	in JAR-FCL 3 requirements related to the specific rhythm disturbances
Note	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.4.2.6	3.250 (b)	JAR-FCL 3 requires a certain standard of ECG (12-lead resting ECG) and not only at first examination and first

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		examination after age 40, but also thereafter, frequency depending on age
6.4.2.6.1	JAR-FCL 3.250 (b)	JAR-FCL 3 requires rest ECG every examination after age 40 (<50 a every 24, > 50 a every 12 m)
6.4.2.6.2 Recommendation	JAR-FCL 3.230 (b)	
Note 1	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
Note 2	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.4.2.7	JAR-FCL 3.255 (b)	in contrast to ICAO JAR-FCL 3 defines above what limits an applicant has to be assessed as unfit
6.4.2.7.1	JAR-FCL 3.255 (c), Appendix 1 (4)	medication is specified in Appendix
Note 1		guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.4.2.8	JAR-FCL 3.250 (a)	
6.4.2.9	JAR-FCL 3.275 (a)	
6.4.2.9.1 Recommendation	JAR-FCL 3.275 (b)	asymptomatic pulmonary disease to be expected (ICAO) vs. indicated on clinical or epidemiological grounds (JAR-FCL 3)
6.4.2.10	JAR-FCL 3.280 (a)	
6.4.2. 11	JAR-FCL 3.280 (b), Appendix 2, (2) (b)	fit assessment by AME, if no recurrent attacks, if considered stable and acceptable medication in JAR-FCL 3. In ICAO fit, if no significant symptoms, not likely to cause incapacitation
6.4.2. 11.1	Appendix 2, (2) (b)	
Note		guidance and details given in the JAA Manual of Civil Aviation Medicine of principle

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6.4.2.12	JAR-FCL 3.310 (a)	pulmonary tuberculosis not specifically mentioned in JAR-FCL 3, guidance in Section 2, JAA Manual of Civil Aviation Medicine (The Respiratory System, 4 Active inflammatory disease, 4.2 Pulmonary tuberculosis)
6.4.2.12.1	NIL	pulmonary tuberculosis not specifically mentioned in JAR-FCL 3, guidance in Section 2, JAA Manual of Civil Aviation Medicine (The Respiratory System, 4 Active inflammatory disease, 4.2 Pulmonary tuberculosis)
Note 1	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
Note 2	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.4.2.13	JAR-FCL 3.290 (d)	
6.4.2.13.1	JAR-FCL 3.285	
6.4.2.14	JAR-FCL 3.290 (e)	
6.4.2.14.1	JAR-FCL 3.290 (f)	unfit for a minimum period of 3 m in JAR-FCL 3, discretion of assessor in ICAO
6.4.2.15	JAR-FCL 3.295 (a)	
6.4.2.16	JAR-FCL 3.295 (d)	
6.4.2.16.1	JAR-FCL 3.295 (c), Appendix 4 (2), (3)	
Note		guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.4.2.17	JAR-FCL 3.300 (a)	
Note	JAR-FCL 3.300 (c)	in contrast to ICAO (applicants with sickle cell <b>trait</b> usually fit), applicants with sickle cell <b>disease</b> unfit in JAR-FCL 3
6.4.2.18	JAR-FCL 3.305 (a), (b)	

**Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.**

6.4.2.18.1	JAR-FCL 3.305 (b)	
Note		guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.4.2.19	JAR-FCL 3.305 (d)	
6.4.2.19.1	JAR-FCL 3.305 (d)	
6.4.2.20	Appendix 7 (1), (2)	
6.4.2.20.1	Appendix 7 (2)	
Note 1	NIL	evaluation not specifically defined in JAR-FCL 3, guidance in Section 2, JAA Manual of Civil Aviation Medicine (Sexually transmitted diseases, 3 HIV positivity and AIDS)
Note 2	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle, whereas the ICAO Doc 8984 is available only in an edition not even mentioning HIV
6.4.2.21	JAR-FCL 3.315 (a)	
6.4.2.22	JAR-FCL 3.315 (c)	
6.4.2.22.1	JAR-FCL 3.315 (c)	in contrast to ICAO (fit assessment limited from 12th to 26th w) JAR-FCL 3 allows fit assessment up to 26th w, perhaps taking into account that pregnancy is detected anyway sooner or later in the first 12 w not covered by ICAO
6.4.2.23	JAR-FCL 3.315 (c)	
6.4.2.24	JAR-FCL 3.320 (a)	
Note	JAR-FCL 3.320 (c)	
6.4.2.25	JAR-FCL 3.350 (a)	
6.4.2.26		
a)	JAR-FCL 3.350 (d) (3)	
b)	JAR-FCL 3.350 (a)	dysfunction of Eustachian tubes not specifically mentioned

**Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.**

c)	JAR-FCL 3.350 (d) (2)	
6.4.2.26.1	Appendix 15 (3)	
Note	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.4.2.27		
a)	JAR-FCL 3.350 (d) (4)	nasal obstruction not specifically mentioned, restriction of nasal air passage instead in JAR-FCL 3
b)	JAR-FCL 3.350 (d) (5)	
6.4.2.28	JAR-FCL 3.350 (d) (6)	stuttering not specifically mentioned, significant disorder of speech or voice instead in JAR-FCL 3
<b>6.4.3 Visual requirements</b>		
6.4.3.1	JAR-FCL 3.355 (a)	
6.4.3.2	JAR-FCL 3.340 (a)	in ICAO binocular vision 6/9 in JAR-FCL 6/6
a)	NIL	acceptable correction defined in JAR-FCL 3, but not specifically mentioned that it has to be worn
b)	JAR-FCL 3.340 (g) (3)	
Note	JAR-FCL 3.335(c)	
6.4.3.2.1		
a)	NIL	not specifically mentioned in JAR-FCL 3, but use of contact lenses described in detail in JAA Manual of Civil Aviation Medicine (Aviation Ophthalmology - 5 Visual Aids - 5.3 Contact lenses)
b)	JAR-FCL 3.340 (f) (1)	implied, but not specifically mentioned
c)	JAR-FCL 3.340 (f) (3)	
Note	NIL	no reference to specific ophthalmological examinations or those to be omitted in carriers of contact

Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.

		lenses in JAR-FCL 3
6.4.3.2.2	NIL	no such obligation to wear contact lenses of high-index spectacles in case of large refractive error in JAR-FCL 3, however, some guidance in JAA Manual of Civil Aviation Medicine (Aviation Ophthalmology - 5 Visual Aids - 5.3 Contact lenses)
Note	NIL	high-index lenses neither mentioned in JAR-FCL Section 1, nor the JAA Manual of Civil Aviation Medicine
6.4.3.2.3 Recommendation	JAR-FCL 3.335 (b)	not specifically mentioned in JAR-FCL 3, but implied in the paragraphs cited requiring an ophthalmological examination for initial applicants anyway, recurrent full ophthalmological report only on clinical indication
Note 1	NIL	
Note 2	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
6.4.3.3	JAR-FCL 3.340 (g) (1)	
6.4.3.4	JAR-FCL 3.340 (b) (6), (f) (2)	paragraph is contentious, what is intended is reflected in the JAR-FCL 3-paragraphs cited
Note 1	NIL	guidance and details given in the JAA Manual of Civil Aviation Medicine of principle
Note 2	NIL	not specifically mentioned in JAR-FCL 3 that spectacles with full near vision correction are unacceptable, guidance and details given in the JAA Manual of Civil Aviation Medicine (Aviation Ophthalmology - 5 Visual Aids - 5.1 Spectacles for aircrew)
Note 3	NIL	not specifically mentioned in JAR-FCL 3, guidance and details given in the JAA Manual of Civil Aviation

**Comparison Annex 1 to the ICAO Convention «» JAR-FCL 3 : Versions used : ICAO Annex 1 up to Amdt. 166 and JAR-FCL 3 Amdt 4.**

		Medicine (Aviation Ophthalmology - 5 Visual Aids - 5.1 Spectacles for aircrew)
6.4.3.4.1	JAR-FCL 3.340 (f) (3)	near correction not specifically mentioned, paragraph cited speaks of "similarly correcting spectacles"
6.4.3.5	JAR-FCL 3.340 (c)	field of vision of the single eyes not specifically mentioned in JAR-FCL 3
6.4.3.6	JAR-FCL 3.340 (c)	
6.4.3.6.1	JAR-FCL 3.340 (c), Appendix 13 (4), (5)	no stereoscopic requirement in JAR-FCL 3
<b>6.4.4 Hearing requirements</b>		
6.4.4.1	JAR-FCL 3.355 (a)	
6.4.4.2	JAR-FCL 3.355 (b), Appendix 16 (2)	pure-tone audiometry only required when instrument rating is added, requirements for initial examination for instrument rating more strict in JAR-FCL 3 than revalidation / renewal and than ICAO
6.4.4.3	JAR-FCL 3.355 (c)	

**6.5 Class 3 Medical Assessment**

<b>ICAO Annex 1</b>	<b>JAR-FCL » JAR-FCL 3</b>	<b>Notes</b>
<b>6.5.1 Assessment issue and renewal</b>	Requirements for Airtraffic Control Personnel not part of JAR-FCL in general and JAR-FCL 3 in particular	
through		
6.5.4.1.2		