



Refer to: Civil Aviation Safety Regulations 67.025 and 67.045

Section A: Application Details

1. Appointment Type

- Designated Aviation Medical Examiner (DAME)
- Designated Aviation Ophthalmologist (DAO)

Aviation Reference Number (ARN):

(If no ARN, apply [here](#))



Upload Photo Here

2. Application Type

- New Appointment
- Reappointment

Examiner No(s):

Section B: Contact Details

*Fields marked with * indicate information that is published on CASA website.*

1. DAME/DAO Details

Title: *		Family name: *	
Given name(s):		Date of Birth:	
Gender: *		Email Address:	

2. Practice Details

Address of Consulting Rooms (PO Box not acceptable): *		
State: *	Postcode: *	Country: *
Postal Address (if same as consulting rooms address, write 'as above'):		
State:	Postcode:	Country:

2. Practice Details (continued)

Phone: *	Fax: *	Mobile:
Practice Email Address: *		
Practice Website Address: *		
Are there additional practice locations? <input type="checkbox"/> Yes - Attach separate sheet with details * <input type="checkbox"/> No	Average hours spent per week at each location:	

3. Practice Staff – For MRS Access (Nurse, Reception)

ARN	Title	Name	Date of Birth	Role

Section C: Experience and Qualification

1. Qualifications (Initial Only) – Unless updates are to be added

Initial Application - Provide Curriculum Vitae with Avmed training and experience

University or medical school at which qualified, qualification obtained:	
Higher Qualifications:	
Type of Practice and/or registered speciality:	
Experience in aviation medicine:	
Pilot: <input type="checkbox"/> No <input type="checkbox"/> Yes (confirm category below) <input type="checkbox"/> ATPL <input type="checkbox"/> CPL <input type="checkbox"/> PPL <input type="checkbox"/> RPL	
Current Memberships: <input type="checkbox"/> ASAM <input type="checkbox"/> AMSNZ <input type="checkbox"/> ASMA <input type="checkbox"/> ICASM <input type="checkbox"/> ESAM <input type="checkbox"/> Other: _____	
Note: Australian examiners both DAME and DAO must be registered with the ASAM	
Affiliation(s) with aero/space medical organisations:	
If approved to conduct medicals for overseas flight crew licensing authorities, please provide country:	

Attendance of aero/space medical scientific meetings in the last three years (or other relevant). Please provide certificates of attendance where possible.			
Date	Organisation	Location	Attend. Cert.
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

Section D: Applicant Checklist

Please ensure you have provided all of the following:

Appointment

- Completed Application Form
- Certified Av med/Franzco Qualification
- Evidence of Current Medical Registration
- ASAM Membership Certificate
(or equiv (e.g. ASMA, IASM))
- Aviation Reference Number (ARN)
(If no ARN, apply [here](#))
- Curriculum Vitae
- Signed Declaration (see page 5 for DAME,
page 7 for DAO)
- Passport Sized Colour Photograph

Reappointment

- Completed Application Form
- Listed attended Aviation Medicine
Education (CPD)
- Evidence of Current Medical Registration
- ASAM Membership Certificate
(or equiv (e.g. ASMA, IASM))
- Signed Declaration (see page 5 for DAME,
page 7 for DAO)
- Passport Sized Colour Photograph

Section E: Application Submission

Return fully completed form and signed declaration to CASA Aviation Medicine:

Email: dame.liaison@casa.gov.au (CASA preferred option)

Fax: 02 6217 1640

Post: Civil Aviation Safety Authority
Aviation Medicine
GPO Box 1544
Canberra City ACT 2601

All enquiries please call CASA on 131 757.

CASA Official Use Only

Approved	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Appointed for	Year(s).....	No. of Exams Conducted – Past 12 months
Reason for non-approved / conditions of approval		
CASA Principal Medical Officer signature		

CONDITIONS OF APPOINTMENT

CASA DESIGNATED AVIATION MEDICAL EXAMINER (DAME) under Civil Aviation Safety Regulations Part 67

1. Designation is for a period of four years unless earlier terminated, and is renewable.
2. Designation lapses if the aviation medical examiner ceases to practise in the locality for which he/she is designated.
3. Designation does not extend to the DAME's partners, assistants or locums unless written consent from the CASA Director of Aviation Medicine/Principal Medical Officer is obtained in advance of the requirement.
4. The DAME is required:
 - i. to conduct himself/herself in a professional manner and in accordance with the Australian Medical Association's Code of Ethics (details of which are available from the Association's web page www.ama.com.au);
 - ii. to be satisfied as to the identity of each applicant;
 - iii. to examine personally each application presenting for examination;
 - iv. to devote such time and skill to the examination of applicants as is necessary to elicit a careful history and to conduct a full and thorough examination;
 - v. at the conclusion of each medical examination to forward the report to CASA promptly;
 - vi. if the holder of a medical certificate tells a DAME about a medical condition that is relevant to aviation safety, the DAME must inform CASA of the condition within 5 working days;
 - vii. to keep informed of, and follow the relevant standards, techniques and administrative procedures associated with medical examinations detailed in *The DAME Handbook* and in the DAME Newsletter published by CASA on its website;
 - viii. to undertake continuing training, acceptable to CASA, in Aviation Medicine;
 - ix. to notify CASA if absent from active practice for more than 4 weeks;
 - x. to notify CASA of any change of address, of contact details, or of cessation of practice;
 - xi. to acknowledge CASA's right to terminate Designation should the DAME conduct himself/herself in a manner that is detrimental to the interests of CASA or breach any of these Conditions of Appointment;
 - xii. **(Australian applicants only)** to effect and maintain membership of the Australasian Society of Aviation Medicine (ASAM) or other approved aviation medical/scientific organization;
 - xiii. to authorise CASA to publish in the DAME Newsletter and the CASA website the DAME's cessation of practice, resignation of appointment as a DAME or termination of appointment as a DAME by CASA;

- xiv. to authorise the regulatory authority of any ICAO Contracting State that designated or designates the DAME to disclose to CASA information about the DAME's performance and competence as a medical examiner; and
- xv. to authorise CASA to disclose to the regulatory authority of another ICAO Contracting State that designates medical examiners for that State that has designated the DAME or to which the DAME has applied to be designated, information about the DAME's performance as a medical examiner.
- xvi. DAME's are required to make available premises and documentation for inspection by CASA consistent with s.9(1)(f).

5. The DAME is required to provide the following facilities and equipment:

- i. a suitable examination room and general diagnostic equipment, including an accurate sphygmomanometer;
- ii. simple urine testing facilities;
- iii. Ishihara pseudoisochromatic chart (24 plate) for colour vision testing;
- iv. visual acuity charts(s) for use at 6 metres;
- v. N series test types for near vision testing;
- vi. ophthalmoscope;
- vii. a height measuring scale (cm);
- viii. weighing scales (kg);
- ix. an electrocardiograph machine which complies with the Australian Standard, or a reliable local source for obtaining ECGs when required. (A specimen tracing on a normal subject from this machine may be required); and
- x. a suitable computer, document scanner, modem and software package for communication with CASA. (Details will be notified from time to time).

Declaration by Applicant

I have read the Conditions of Appointment ('the Conditions') set out above and, if designated, I agree to accept the Conditions. Upon my designation, this declaration shall constitute my acknowledgment for the purposes of subparagraph 4 (xii) and respective authorisation for purposes of subparagraphs 4 (xv) and (xvi) of the Conditions.

Applicant's Signature..... Date

Name..... (Please use Block Capitals)

CONDITIONS OF APPOINTMENT

CASA DESIGNATED AVIATION OPHTHALMOLOGIST (DAO) under Civil Aviation Safety Regulations Part 67

1. Designation is for a period of four years unless earlier terminated, and is renewable.
2. Designation lapses if the aviation medical examiner ceases to practise in the locality for which he/she is designated.
3. Designation does not extend to the DAO's partners, assistants or locums unless written consent from the CASA Director of Aviation Medicine/Principal Medical Officer is obtained in advance of the requirement.
4. The DAO is required:
 - i. to conduct himself/herself in a professional manner and in accordance with the Australian Medical Association's Code of Ethics (details of which are available from the Association's web page www.ama.com.au);
 - ii. to be satisfied as to the identity of each applicant;
 - iii. to examine personally each application presenting for examination;
 - iv. to devote such time and skill to the examination of applicants as is necessary to elicit a careful history and to conduct a full and thorough ophthalmic examination;
 - v. at the conclusion of each medical examination to forward the report to CASA promptly;
 - vi. to keep informed of, and follow the relevant standards, techniques and administrative procedures associated with ophthalmological examinations detailed in The DAME Handbook and in the DAME Newsletter published by CASA on its website;
 - vii. to notify CASA if absent from active practice for more than 4 weeks;
 - viii. to notify CASA of any change of address, of contact details, or of cessation of practice;
 - ix. to acknowledge CASA's right to terminate Designation should the DAO conduct himself/herself in a manner that is detrimental to the interests of CASA or breach any of these Conditions of Appointment;
 - x. **(Australian applicants only)** to effect and maintain membership of the Australasian Society of Aviation Medicine (ASAM) or other approved aviation medical/scientific organization;
 - xi. to authorise CASA to publish in the DAME Newsletter and the CASA website the DAO's cessation of practice, resignation of appointment as a DAO or termination of appointment as a DAO by CASA;
 - xii. to authorise the regulatory authority of any ICAO Contracting State that designated or designates the DAO to disclose to CASA information about the DAO's performance and competence as a medical examiner; and

- xiii. to authorise CASA to disclose to the regulatory authority of another ICAO Contracting State that designates medical examiners for that State that has designated the DAO or to which the DAO has applied to be designated, information about the DAO's performance as an ophthalmologist examiner.
- xiv. DAO's are required to make available premises and documentation for inspection by CASA consistent with s.9(1)(f).

Declaration by Applicant

I have read the Conditions of Appointment ('the Conditions') set out above and, if designated, I agree to accept the Conditions. Upon my designation, this declaration shall constitute my acknowledgment for the purposes of subparagraph 4 (x) and respective authorisation for purposes of subparagraphs 4 (xiii) and (xiv) of the Conditions.

Applicant's Signature..... Date.....

Name..... (Please use Block Capitals)