

May 14, 2007

The Honorable John D. Rockefeller IV
Chairman, Subcommittee on Aviation Operations,
Safety and Security
Committee on Commerce, Science and Transportation
United States Senate
Hart Office Building, Room 531
Washington, DC 20510
Via Fax and US Mail

Dear Senator Rockefeller;

We are writing to offer a rebuttal to a letter you received regarding Section 508 of the Aviation and Modernization Act of 2007 by the Association of Air Medical Services (AAMS). We urge you to support EMS aviation safety in S. 1300 and uphold the first law of medicine: *to do no harm*.

Who are we? We are not members of a special interest group. We are the family of Erin Reed, an inspiring woman of integrity; a woman who was intelligent and compassionate; stoic and sassy; and loving yet brutally honest. Erin was a flight nurse killed in an EMS helicopter crash that ended her life and devastated her family. While we are one family, we are also part of a larger "association." We are an association of mothers, fathers, sisters, brothers, aunts, uncles, cousins, nieces, nephews, friends and children of the 197 flight crew killed in air ambulance crashes.

In the AAMS letter referenced above, the Association claims that air medical accidents have been drastically reduced in the past 18 months largely due to collaboration between the FAA and operators. This overstatement cannot go unchallenged. While the number of accidents from 2004 through 2006 have dropped slightly below the average of 11 per year prior to 2004, the number of fatalities between 2004 and 2006 was XX, higher than the average for previous years.

AAMS has proposed alternative language in every section of the bill. We have listed our concerns to this alternative language below.

Sec. 508 Increasing Safety for Helicopter Emergency Medical Service Operators

(a) Compliance with 14 CFR Part 135

We challenge AAMS ability to conduct a meaningful feasibility study of the impact of HEMS compliance with Part 135 when medical crew are on board within 18 months.

We challenge the rationale for a feasibility study to assess the impact of a practice that is currently required operating procedure once a patient is loaded into an EMS air ambulance. If operators already fly the more stringent rules and weather minima once a

patient is on board, why risk the lives of three crew flying in marginal weather to save the life of one?

Secondly, we question the integrity of any findings resulting from such a feasibility study given the lack of available data and the fact that AAMS does not represent the entire air medical community within their membership. The Government Accounting Office singled out this lack of a reliable source for the collection of EMS hours or types of missions flown in their February 2007 investigation on EMS Aviation Safety. *“The FAA does not currently collect basic data to measure changes in the air ambulance industry, such as flight hours or number of trips flown.... The industry (AAMS) has an effort underway to create a database of air ambulance flight operations information. This initiative is still in the preliminary stages.”* AAMS cannot accurately assess the impact of requiring operators to fly all missions under part 135 if they do not have unbiased, reliable data reflective of all EMS missions.

Finally, we ask that the subcommittee talk with the numerous EMS operators whom voluntarily fly all missions under Part 135 standards or higher weather minima as part of their enhanced safety culture. These operators make this choice despite the lack of AWOS weather information at destination airports in rural areas. They do so because the lives of their flight crews are just as important as that of their patients.

(b) Implementation of Flight Risk Evaluation

AAMS notes that the FAA is already working with field inspectors to measure and monitor compliance with both 8000.301 and A008 (flight risk assessment bulletins and advisories) and conducting enforcement action as necessary to assure compliance. While the NTSB noted in their January 2006 Special Report on EMS flight Operations that voluntary advisories and circulars do not carry the full force of law, we would like to understand what additional resources the FAA has deployed to ensure there are enough qualified and trained EMS field inspectors to carry out these requirements? Additionally, what enforcement actions have been or will be undertaken for noncompliance? Like AAMS, we recommend that the FAA conduct an evaluation of compliance with these recent notices as soon as possible.

(c) Comprehensive Consistent Flight Dispatch Procedures

Dustin to work on

(d) Improving Situational Awareness

Mom to work on – two years to study it is too long, in my opinion, especially since manufacturers are driving the boat here. They’ll want to get the product out there faster.

Tom says the FAA is already laying out the standard requirements for a TAWS product and that manufacturers like Honeywell and others are participating in the development of these product guidelines. Do we know enough about this issue?

(e) Improving the Data Available to NTSB Investigators at Crash Sites-

Stacey to work on - same issues