

Congress of the United States

Washington, DC 20515

The Honorable Sean Duffy
Secretary
United States Department of Transportation
1200 New Jersey Ave, SE
Washington, DC 20590

April 14, 2025

Dear Secretary Duffy:

Thank you for your dedication to the safety and efficiency of our Nation's airspace. We write today eager to partner with you in addressing a significant bottleneck affecting air traffic controller training.

Under current Federal Aviation Administration (FAA) regulations, a candidate hoping to become an air traffic controller must first pass a medical examination administered by either an Aviation Medical Examiner – Employee Examiner (AME-EE) or a Regional Flight Surgeon (RFS). However, there is a significant lack of AME-EEs throughout our Nation.

For example, Oklahoma, which has a robust aviation industry and houses the Mike Monroney Aeronautical Center and FAA Academy, has only three AME-EEs. This lack of FAA-approved physicians causes air traffic controller candidates to experience significant delays to begin training at the Academy. Ultimately, this shortage constrains the Trump Administration's ability to maximize air traffic controller training.

According to FAA Order 3930.14A, aside from the handful of Regional Flight Surgeons, an AME-EE is the sole FAA-approved physician designation eligible to medically clear air traffic controllers.¹ Physicians can apply to become an Aviation Medical Examiner (AME) through the FAA and based on regional needs and their own interest, may then apply to become an AME-EE. AME-EEs undergo the same training as AMEs, attending a multi-day training course at the Civil Aerospace Medical Institute in Oklahoma City. According to the FAA, the only difference between the two designations are that AME-EEs must have access to an audiometer to assess hearing for air traffic controllers, but they otherwise follow the same training and practice standards as AMEs.

While there are only 472 AME-EEs nationwide, there are over 2,000 AMEs.² To help accelerate the air traffic controller hiring timeline, the FAA should consider allowing AMEs to medically clear air traffic controllers so long as the AMEs have access to an audiometer. We

¹ Order 3930.14A, FED. AVIATION ADMIN., MEDICAL EXAMINATIONS FOR FAA EMPLOYEES AND AIR TRAFFIC APPLICANTS REQUIRING MEDICAL CLEARANCE AND CERTIFICATION (April 12, 2024), *available at* https://www.faa.gov/regulations_policies/orders_notices/index.cfm/go/document.information/documentID/1042572.

² See e.g. FED. AVIATION ADMIN., *Designee Locator Search* (last visited April 14, 2025) *available at* <https://designee.faa.gov/designeeLocator>.

urge the FAA to work alongside the Regional Flight Surgeons to identify and recruit physicians to apply to become AMEs and AME-EEs.

The lack of AME-EEs is a significant barrier to increasing the number of air traffic controllers working in the national airspace system. By allowing AMEs with access to audiometers to medically clear air traffic controllers, we can increase the number of needed physicians and quicken the pace at which candidates can begin training at the Academy. Addressing the medical clearance backlog will reduce the time it takes for candidates to become certified public controllers. This is one step the FAA can implement to increase the number of controllers and keep our airspace safe.

Thank you for your attention to this matter and we look forward to working with you. Our staff is available at any time to discuss this issue with you should you need further information.

Sincerely,



Frank D. Lucas
Member of Congress



Sam Graves
Chairman
Committee on Transportation and
Infrastructure

cc: Chris Rocheleau, Acting FAA Administrator