

# Pilots for Christ-Wyoming

PO Box 582

Green River, WY 82935

Phone (307) 622-7249 Fax (888) 743-6504

email: pci\_wy@vcn.com website: pilotsforchrist-wy.org

## Physician's Evaluation of Eligibility

The patient would most likely be transported in a light General Aviation aircraft, unpressurized and at altitudes of up to 12,000 feet above sea level. If you can approve this patient taking this flight, please fill out the following information and return it to our office as soon as possible. If you have questions please feel free to contact us.

**Patient/Recipient Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Weight:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone:** (\_\_\_\_) \_\_\_\_\_

**If patient is a minor, enter name of the parent or guardian:** \_\_\_\_\_

**Parent/guardian address if different from minor's** \_\_\_\_\_

**Physician's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone:** (\_\_\_\_) \_\_\_\_\_

**Patient's Diagnosis:** \_\_\_\_\_

**Medical reason for requested travel:** (please check all that apply)

Time-Critical

Financially Needy (individual and family unable to provide finances for trip)

Compassion (physically unable to travel by any other means)

Low Immunity System

Other \_\_\_\_\_

---

### PILOTS FOR CHRIST INTERNATIONAL-WYOMING CHAPTER IS NOT AN AIR AMBULANCE

To the best of my knowledge, this patient/family is eligible for charitable transportation. I am sufficiently familiar with aviation physiology to be of the opinion that this patient can travel in small aircraft at ambient pressure altitudes up to 12,000 feet above sea level.

*(Prior to Medical Apt., Medical Stay, and/or Medical Procedure)*

**Signature:** \_\_\_\_\_, **M.D./D.O. Date:** \_\_\_\_\_

*(After Medical Apt., Medical Stay, and/or Medical Procedure)*

**(From Destination M.D./D.O.) Signature:** \_\_\_\_\_, **M.D./D.O. Date:** \_\_\_\_\_