

# Survey of Airmen Satisfaction with Aeromedical Certification Services: Communications Package

## **Communications Schedule**

E-mail messages are sent sequentially starting with the Notification and Invitation e-mails. Reminders are sent on following weeks to remaining nonresponders.

1. Notification E-mail Message
2. Invitation E-mail Message
3. Reminder E-mail Message (sent 3x with 1 week between messages only to remaining nonresponders)
4. Reminder Postal Letter (sent only to remaining nonresponders if response rate is low near the end of the survey period)
5. Notice of Survey Closing E-mail Message (sent only to remaining nonresponders)

## Notification E-mail Message

The Notification E-mail Message is sent one week before delivery of the Invitation E-mail Message.

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**From:** Susan E. Northrup, M.D., MPH

**Subject:** Notification of Upcoming FAA 2025 Airmen Medical Feedback Survey

Dear **FNAME LNAM**:

The Office of Aerospace Medicine strives to continually improve airmen medical certification services provided to you. Every two years we ask pilots like you to complete an evaluation of our airmen medical certification service to help identify areas for improvement.

You can expect to receive your e-mail invitation to complete the Airmen Medical Feedback Survey next week. For your convenience, you will be able to complete the survey online using a direct link that will be provided in your invitation e-mail.

❖ If you do not receive your survey invitation e-mail within the next 10 days, please send an e-mail to: **SurveySupport@faa.gov** or call (405) 954-8579, Monday through Friday, 9:00 a.m. to 5:00 p.m. Central.

Your participation in this evaluation is greatly appreciated and will help us to improve our services and support to you and other pilots.

Sincerely,

[signature]

Susan A. Northrup, M.D., MPH

Federal Air Surgeon

FAA Office of Aerospace Medicine

If you decline the invitation to participate in this year's survey, click: **#Opt out link#** and your name will be removed from the list.

**Paperwork Reduction Act Statement.** Note that a federal agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this collection of information is 2120-0707, which expires **[DATE]**.

## Invitation E-mail Message

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**From:** Susan E. Northrup, M.D., MPH

**Subject:** Invitation to Participate in FAA 2025 Airmen Medical Feedback Survey

Dear **FNAME LNAM**:

My office is conducting a survey evaluation of our airmen medical certification services to help identify areas for improvement. You were randomly selected to participate out of all pilots who recently applied for an airman medical certificate from an Aviation Medical Examiner (AME). As a pilot, you are in a unique position to provide us valuable feedback based on your most recent experiences with this process. I would like to emphasize that your input is vital in our efforts to improve medical certification services for all pilot applicants (OMB 2120-0707).

Participation in the Airmen Medical Feedback Survey is voluntary and your feedback is anonymous. Your responses will be kept private to the extent provided by law. Your responses go directly to a contractor for removal of any personally identifiable information, before the FAA has access to the dataset.

I encourage you to take this opportunity to have your voice heard. It should take approximately 15 minutes to complete the survey.

**[Click HERE to TAKE survey]**

At the survey log in screen, enter this password: **USERNAME** (*upper-case letters ONLY*) and click the 'Next' button.

- ❖ If the above link does not take you to the survey, please copy the entire web address below and paste it into your browser's address bar.  
[\\${!://SurveyURL}](#)
- ❖ For **survey support**, call (405) 954-8579 Monday through Friday, 9:00 a.m. to 5:00 p.m. Central or send an e-mail to: [SurveySupport@faa.gov](mailto:SurveySupport@faa.gov)
- ❖ For **medical certification** questions call (405) 954-4821 (Option 1) Monday through Friday, 8:00 a.m. to 4:15 p.m. Central.
- ❖ For **questions regarding the survey content and purpose**, contact Dr. Katrina Avers ([Katrina.Avers@faa.gov](mailto:Katrina.Avers@faa.gov)) or Dr. Carla Hackworth ([Carla.Hackworth@faa.gov](mailto:Carla.Hackworth@faa.gov)).

Your participation in this evaluation is greatly appreciated and will help us improve our services and support to you and other pilots.

Sincerely,  
**[signature]**

Susan E. Northrup, M.D., MPH

Federal Air Surgeon  
FAA Office of Aerospace Medicine

If you decline the invitation to participate in this year's survey, click: [#Opt out link#](#) and your name will be removed from the list.

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## Reminder E-mail Message

The Reminder E-mail Message is only sent to remaining nonresponders with 1 week between messages.

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**From:** Susan E. Northrup, M.D., MPH

**Subject:** Reminder to Participate in FAA 2025 Airmen Medical Feedback Survey

Dear **FNAME LNAME**:

I am sending this e-mail to remind you that you are invited to participate in this year's Airmen Medical Feedback Survey and to emphasize the value that the Office of Aerospace Medicine places on your feedback. Your input is vital in our efforts to improve our services (OMB 2120-0707).

I encourage you to submit your feedback without hesitation to ensure your voice is heard. It should take approximately 15 minutes to complete the survey.

For your convenience, you may complete the survey online.

[\\${://SurveyURL}](#)

- ❖ At the survey log in screen, enter this password: **USERNAME** (*upper-case letters ONLY*) and click the 'Next' button.
- ❖ For **survey support** call (405) 954-8579 Monday through Friday, 9:00 a.m. to 5:00 p.m. Central or send an e-mail to: [SurveySupport@faa.gov](mailto:SurveySupport@faa.gov)
- ❖ For **medical certification** questions call (405) 954-4821 (Option 1) Monday through Friday, 8:00 a.m. to 4:15 p.m. Central.
- ❖ For **questions regarding the survey content and purpose**, contact Dr. Katrina Avers ([Katrina.Avers@faa.gov](mailto:Katrina.Avers@faa.gov)) or Dr. Carla Hackworth ([Carla.Hackworth@faa.gov](mailto:Carla.Hackworth@faa.gov)).

Your participation in this evaluation is greatly appreciated and will help us improve our services and support to you and other pilots.

Sincerely,

**[signature]**

Susan E. Northrup, M.D., MPH

Federal Air Surgeon

FAA Office of Aerospace Medicine

If you decline the invitation to participate in this year's survey, click: [#Opt out link#](#) and your name will be removed from the list.

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## Reminder Postal Letter

The Reminder Postal Letter is only sent to remaining nonresponders if statistical trending suggests that response rates will fall significantly short of estimates.



U.S. Department  
of Transportation  
**Federal Aviation  
Administration**

Civil Aerospace Medical Institute  
PO Box 25082  
Oklahoma City, OK 73125

**[Date]**

**FName LName**  
**Street Address**  
**City, State Zip**

Dear **FirstName LastName**:

My office is conducting a survey evaluation of our pilot medical certification services to help identify areas for improvement. You were randomly selected to participate out of all pilots who recently applied for a medical certificate from an Aviation Medical Examiner (AME). As a pilot, you are in a unique position to provide us valuable feedback based on your most recent experiences with this process. I would like to emphasize that your input is vital in our effort to improve medical certification services for all pilot applicants (OMB 2120-0707).

Participation in the survey is voluntary and your feedback is anonymous. Your responses will be kept private to the extent provided by law. Your responses go directly to a contractor for removal of any personally identifiable information, before the FAA has access to the dataset.

I encourage you to take this opportunity to have your voice heard. It should take approximately 15 minutes to complete the survey.

An invitation with a direct link to complete the survey online was sent to your email address on record, **[email address]**. You may also access the survey using the URL address or QR code shown below.

- ❖ To access the survey online, either scan the QR code using your mobile device or from your web browser go to: **[URL]**



At the survey log in screen, enter this password: **username** (*upper-case letters ONLY*) and click the 'Next' button.

- ❖ For **survey support** or to receive a direct link to the survey at a different email address, send an email to: **SurveySupport@faa.gov** or call (405) 954-8579 Monday through Friday, 9:00 a.m. to 5:00 p.m. Central.
- ❖ For **medical certification** questions call (405) 954-4821 (Option 1) Monday through Friday, 8:00 a.m. to 4:15 p.m. Central.

Your participation in this evaluation is greatly appreciated and will help us improve our services to you. The survey will be available today until **[close date]**.

Sincerely,

**[signature]**

Susan E. Northrup, M.D., MPH  
Federal Air Surgeon  
FAA Office of Aerospace Medicine

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## Notice of Survey Closing E-mail Message

The Notice of Survey Closing E-mail Message is only sent to remaining nonresponders.

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**From:** Susan E. Northrup, M.D., MPH

**Subject:** Last Chance to Participate in FAA 2025 Airmen Medical Feedback Survey

Dear **FNAME LNAME**:

The Airmen Medical Feedback Survey closes at midnight on **DATE**. If you have already responded, thank you. If you have not yet responded, I would like to encourage you to share your feedback today. Your input is vital in our efforts to improve our services (OMB 2120-0707).

Participation in the evaluation is voluntary and your responses are confidential. Your survey will go directly to a contractor for removal of all personally identifiable information.

The survey should take approximately 15 minutes to complete.

**[\\$\[!://SurveyURL\]](#)**

- ❖ For **survey support**, call (405) 954-8579 Monday through Friday, 9:00 a.m. to 5:00 p.m. Central or send an e-mail to: **[SurveySupport@faa.gov](mailto:SurveySupport@faa.gov)**
- ❖ For **medical certification** questions call (405) 954-4821 (Option 1) Monday through Friday, 8:00 a.m. to 4:15 p.m. Central.
- ❖ For **questions regarding the survey content and purpose**, contact Dr. Katrina Avers (**[Katrina.Avers@faa.gov](mailto:Katrina.Avers@faa.gov)**) or Dr. Carla Hackworth (**[Carla.Hackworth@faa.gov](mailto:Carla.Hackworth@faa.gov)**).

Your participation in this evaluation is greatly appreciated.

Sincerely,

**[signature]**

Susan E. Northrup, M.D., MPH

Federal Air Surgeon

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