

119TH CONGRESS  
1ST SESSION

**S.** \_\_\_\_\_

To require the Administrator of the Federal Aviation Administration to publish the list of medications that the Administrator has compiled for purposes of the medical certification of airmen and air traffic control specialists, and for other purposes.

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IN THE SENATE OF THE UNITED STATES

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Ms. DUCKWORTH introduced the following bill; which was read twice and referred to the Committee on \_\_\_\_\_

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## **A BILL**

To require the Administrator of the Federal Aviation Administration to publish the list of medications that the Administrator has compiled for purposes of the medical certification of airmen and air traffic control specialists, and for other purposes.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Aviation Medication  
5       Transparency Act of 2025”.

1 **SEC. 2. AVIATION MEDICATION TRANSPARENCY; LIST OF**  
2 **APPROVED MEDICATIONS.**

3 (a) PURPOSE.—The purpose of this Act is to ensure  
4 that aviation stakeholders, including airmen, air traffic  
5 control specialists, and individuals training to become air-  
6 men or air traffic control specialists, who are applicants  
7 for medical certification are informed, in a user-friendly  
8 and accessible manner, of the medications they may be  
9 safely prescribed.

10 (b) IN GENERAL.—Not later than 1 year after the  
11 date of enactment of this Act, the Administrator of the  
12 Federal Aviation Administration (in this section referred  
13 to as the “Administrator”) shall publish and maintain on  
14 a publicly available website of the Federal Aviation Ad-  
15 ministration (in this section referred to as the “FAA”)  
16 a list of medications that the Administrator, as of the date  
17 of publication, has—

18 (1) determined may be safely prescribed to an  
19 applicant for medical certification to treat certain  
20 medical conditions; and

21 (2) approved for purposes of the issuance of a  
22 medical certification to an airman or air traffic con-  
23 trol specialist.

24 (c) REQUIREMENTS.—To ensure medical appro-  
25 priateness, user-friendliness, and appropriate dissemina-  
26 tion, the list required under subsection (b) shall—

1 (1) be drafted in consultation with—

2 (A) the Aeromedical Innovation and Mod-  
3 ernization Working Group (established under  
4 section 411(a) of the FAA Reauthorization Act  
5 of 2024 (49 U.S.C. 44703 note))(in this section  
6 referred to as the “Working Group”);

7 (B) institutions of higher education that  
8 are accredited by the Aviation Accreditation  
9 Board International;

10 (C) the certified exclusive bargaining rep-  
11 resentatives of air traffic controllers of the FAA  
12 certified under section 7111 of title 5, United  
13 States Code;

14 (D) organizations representing certified  
15 collective bargaining representative of airline pi-  
16 lots; and

17 (E) any other stakeholder determined rel-  
18 evant by the Working Group;

19 (2) cover all medications approved by the Ad-  
20 ministrator, including prescription medications and  
21 over-the-counter medications;

22 (3) be drafted in a user-friendly and accessible  
23 manner and provided to airmen, air traffic control  
24 specialists, and individuals training to become air-  
25 men or air traffic control specialists at the time

1       when any such individual first seeks a medical cer-  
2       tification;

3           (4) if applicable, indicate the minimum and av-  
4       erage period of time an airman or air traffic control  
5       specialist is required to have limited or no duties to  
6       stabilize on an approved medication;

7           (5) include the list of medications that the Ad-  
8       ministrator has designated as “Do Not Issue”;

9           (6) include information for doctors or medical  
10      providers to contact the FAA regarding questions  
11      related to such list, including through a new or ex-  
12      isting mechanism that is accessible to such doctors  
13      and medical providers;

14          (7) include any additional information that the  
15      Administrator determines is appropriate to provide  
16      with respect to what conditions a certain medication  
17      may or may not be used to treat, as well as any in-  
18      formation to explain why a medication is allowed or  
19      prohibited by the FAA; and

20          (8) include any other information or clarifica-  
21      tion that the Administrator determines appropriate.

22      (d) ANNUAL UPDATE.—Not later than 1 year after  
23      the date of publication of the list required under sub-  
24      section (b), and annually thereafter, the Administrator  
25      shall update such list, as appropriate.