



DEVAN A. NORRIS

SICK NOTE

Blame it on the time of year. It usually starts with a little itch in the throat or perhaps a few sniffles. A few hours later your eyes are feeling grainy, and the color of your nose reminds you of Bozo the Clown. You have caught somebody’s germs, and now you’re sick. While no one has time to be sick, there is not much you can do for the next few days except medicate. Then

you need to decide whether or not you call scheduling to get released from your next trip.

Ah, the dreaded call to scheduling. This is the call that says, “I am too sick to fly my next trip. Please let me stay home.” For a mission-oriented and classically Type A group like pilots, it can be tough to admit when we are not currently able to do our jobs. For us admitting illness can be like admitting weakness—it is practically taboo. We have the worst habits of wanting to be able to do it all, all the time, and the inactivity of being sick is simply not a part of that game plan. This can result in failing to spend the adequate time to rest and recuperate.

Illness can be incredibly sneaky. If you only feel kind of sick, sometimes you can peek at your schedule and decide you will actually get more rest at work than you would at home. It is much simpler when your symptoms are so nasty and obvious; there is no other choice than to call in sick. The trouble is when you are on the fence about how sick is too sick—or even sick enough. You may be on medications that make you feel almost well, but does the FAA permit those medicines? How will you feel when you are at a cabin altitude of 7,000 feet and the relative humidity is 0.05 percent?

My mother always has a single question for me when I call her wailing that I don’t know whether or not to call in sick. “If you were your own passenger, would you want you in the cockpit?” Once during a bout with the common cold, I was gross to look at, but felt okay enough to go to work and fly. I felt confident my symptoms were not too severe, and that if my mom had been the passenger she would have given me a pass. What I had failed to consider was that my captain

might be *far* less sanguine about my disgusting symptoms, and that he would give me a lecture about coming to work in that condition! In his opinion, not only was I using questionable judgment to fly, but also I was inconsiderate to sit next to him for three days while he was distracted by my hacking and stressed about getting my germs. Point taken.

My most recent sick call was one where I truly wanted to go on the trip and tried my hardest to make it happen. I went to urgent care and got prescriptions. I rested and hydrated, and really thought I had my virus licked. I even called scheduling from my couch to make sure my deadhead was arranged for the next day. Imagine how embarrassed I was a few hours later to explain to the very same scheduler that I was having side effects from my prescriptions and needed to stay home. He was understandably incredulous when I explained standing up quickly was inducing cartoon-quality stars in front of my eyes. I felt absolutely certain no passenger would have wanted to fly with me.

As tough as we are, it can be even tougher to admit when we need to sit one out. Having a personal set of parameters—or even just a single question—that lets you know when it is time to throw in the towel can be a valuable tool in making the best possible decision. Regardless of what your own limitations and guidelines are, just be sure whatever call you make it is with the best interest of safety in mind. Or at least be the choice that your passengers or your mother would make for you. ➔



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