



## DEPARTMENT OF THE NAVY

COMMANDER  
TRAINING AIR WING FIVE  
7480 USS ENTERPRISE STREET SUITE 205  
MILTON, FLORIDA 32570-6017

IN REPLY REFER TO  
COMTRAWINGFIVEINST 1531.2F  
N3  
8 Mar 16

### COMTRAWING FIVE INSTRUCTION 1531.2F

Subj: ORIENTATION FLIGHT PROCEDURES IN TRAWING FIVE AIRCRAFT

Ref: (a) OPNAVINST 3710.7 Series  
(b) CNATRAININST 3710.2 Series  
(c) COMTRAWINGFIVEINST 3500.1 Series

Encl: (1) Clearance for Non-military/Non-aircrew Personnel  
OPNAV 3710/18  
(2) Sample Orientation Flight Request to CTW-5  
(3) T-6 Orientation Flight Profile  
(4) TH-57 Orientation Flight Profile

1. Purpose. To promulgate standardized procedures and requirements for conducting orientation flights in Training Air Wing (TRAWING) FIVE aircraft in conjunction with references (a), (b), and (c). Enclosures (1) through (4) are provided for additional guidance.

2. Cancellation. COMTRAWINGFIVEINST 1531.2E

3. Background. Orientation Flights are typically one-time events for participants in TRAWING FIVE aircraft on a not-to-interfere with training or operations basis.

4. Discussion. Reference (a) lists categories of eligible participants for orientation flights.

5. Action. Commanding Officers shall ensure their highest qualified flight instructors are selected to conduct orientation flights and shall implement policy in compliance with the content of this instruction to ensure safety of flight and standardized procedures. Additionally, Commanding Officers shall thoroughly screen all requests for orientation flights before submittal to the Commander, Training Air Wing FIVE (CTW-5).

6. Medical Screening. All non-military and non-aircrew personnel are required to obtain an appropriate medical screening per reference (a) using the selected passenger medical screening form included in enclosure (1) prior to requesting authorization for an orientation flight.

7. Prerequisite Training. Appropriate Naval Aviation Survival Training Program (NASTP) requirements shall be completed for all orientation flights per reference (a). The T-6 requires Class 1 training for ejection seat aircraft per reference (a); however, USAF physiology training in similar aircraft is accepted per reference (b). Approval from the Chief of Naval Air Training (CNATRA) is required for the T-6 per reference (b). Waiver requests are included in the request for orientation flight letter, see enclosure (2). If NASTP has been waived, CTW-5 may restrict flight profiles, as appropriate, to include (but not limited to) flight below 10,000 ft and/or overland only.

8. Orientation Flight Approval Authority. CTW-5 is the approval authority for all orientation flights listed in reference (a) except where restricted by reference (b).

a. Per references (a) and (b), CTW-5 may authorize orientation flights in the T-6B for active duty personnel with a current medical clearance and appropriate NASTP training. NOTE: CNATRA remains waiver approval authority for T-6B NASTP requirements.

b. Per reference (a) and (b), CTW-5 may authorize flights for active duty military personnel as passengers in the TH-57B/C. Additionally, CTW-5 may authorize TH-57B/C flights for federal employees, government officials, or civilian contractors for purposes of familiarization of a base complex or operating area.

c. Public affairs orientation flights require CNATRA approval.

9. Orientation Flight Requests. Orientation flight requests shall be submitted with appropriate lead time in advance of the desired flight date.

a. Flights requiring CTW-5 approval (no CNATRA waivers required): seven business days.

b. Flights requiring CNATRA approval: two weeks.

c. Public affairs orientation flights: one month.

10. Flight Standardization

a. Authorized Pilots. T-6 Instructor Pilots shall be current Day Contact (DCON) to conduct familiarization and aerobatics training for orientation flights. If aerobatics are not going to be conducted, CTW-5 may waive the DCON restriction. Any TH-57 Instructor Pilot is authorized to conduct orientation flights in the TH-57; however, Familiarization Pilots Contact/Tactics B shall be selected if low-work is to be performed by orientation participants.

b. ORM/NATOPS Brief. The participant shall be briefed by the Instructor Pilot using reference (c) and the appropriate NATOPS pocket checklist for the aircraft being used.

c. Egress Training. Prior to flight, T-6 participants at Naval Air Station, Whiting Field (NASWF) shall receive emergency egress training conducted by the TRAWING FIVE Aeromedical Safety Officer or trained egress instructor at the Emergency Egress Training Device, Bldg. 2994, when available. When unavailable, or for T-6 orientation flights away from NASWF, egress training shall be conducted by a designated NATOPS Instructor Pilot on the aircraft ramp. Prior to flight, all TH-57 participants shall receive egress training, by the Aircraft Commander, consisting of a demonstration on how to disconnect their harness and communication cord, and showing the placement and operation of the Emergency Door Release handles.

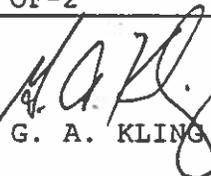
d. Flight Conduct. All orientation flights shall be conducted during daylight hours with weather minimums equal to or better than VFR (1000-3). All orientation flights shall be conducted within the local flying area. T-6 participants shall occupy the rear cockpit only, unless otherwise approved by CTW-5.

e. Authorized Maneuvers. Maneuvers other than those outlined in enclosures (3) and (4) shall not be conducted without CTW-5 approval. Maneuvers outlined shall be conducted per current applicable aircraft NATOPS, Flight Training Instruction (FTI), and local operating procedures manuals. Flight profiles may be modified by CTW-5 as deemed appropriate based on previous flight experience. Requests for profile modifications shall be included in the orientation flight request letter, enclosure (2).

11. Administration. All orientation flights will be identified by squadron call-sign and side number. Training codes for Electronic Flight Record (EFLIR) purposes shall be "1G1." The participant's name need not be entered into the Training Intergrated Management System (TIMS) for the flight. For daily reporting and Navy Outlying Field (NOLF) tracking purposes, the following codes shall be used:

Table 2. Orientation Flight Documentation

Group	Type of Flight	NOLF Codes	Daily Report
Midshipmen	Orientation Flight-1	OF-1	52 Non-Pipeline
VIP/Other	Orientation Flight-2	OF-2	65 Support

  
G. A. KLING

Distribution:  
COMTRAWINGFIVEINST 5216.1U  
Lists I(a,b), II, III(a,g,h)

OPNAVINST 3710.7U  
23 NOV 2009

**Medical Clearance for Non-Aircrew / Non-Military Personnel to Participate  
in Naval Aviation Survival Training and Fly in USN/USMC Aircraft**

***THIS FORM SHALL BE PROVIDED BY THE FLIGHT APPROVING AUTHORITY***

**TO THE APPLICANT, PLEASE READ CAREFULLY:** You are requesting clearance to fly in military aircraft as a nonaircrew observer. Prior to flying, you are required to complete high risk training of the Naval Aviation Survival Training Program (NASTP) which may include altitude, egress, parachute and water survival training based upon what aircraft you are flying. NASTP training requires a high level of fitness and stamina. You will be required to complete training in full flight gear, including helmet, gloves, boots, flight suit, parachute harness and survival vest. Training includes a 25- 50 yard surface swim, treading water / drown-proofing for up to 2 minutes each and orally inflating your life preserver. Underwater emergency egress training requires you to swim 15 yards underwater in a flight suit and boots. Additionally, you may receive dynamic hypoxia recognition training in a hypobaric chamber up to simulated altitude of 25,000 feet. Actual flight may be in high performance ejection seat aircraft capable of sustained high g-force maneuvering. To obtain clearance to fly in military aircraft, you are required to obtain a physical examination. Civilian personnel may be required to bear the cost of this examination. Please fill out the medical questionnaire and have your physician fill out the physical examination section of this form. You must then present this completed form to either a FAA AME or Navy Flight Surgeon for endorsement for high risk NASTP training and subsequent flight.

YES NO

**Medical Questionnaire – Do you have or have you ever had:**

- |                          |                          |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Disease of the eyes, ears, sinuses, seasonal allergies, hayfever, difficulty with clearing your ears, or pain in your ears or sinuses from diving or flying?       |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Chest pain, angina, heart attack, heart disease, heart murmur, palpitations, cardiac catheterizations, pacemaker or other cardio-vascular disease not listed here? |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Hypertension, stroke, blood clots in legs, swelling in feet, or excessive fatigue with mild exertion?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Asthma, wheezing, emphysema, chronic cough, tuberculosis, collapsed lung, or shortness of breath with mild exertion?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Disease of the bowel, ulcers, rectal bleeding, chronic abdominal pain, hernia, kidney stone, or painful or frequent urination?                                     |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Arthritis, joint deformity, chronic back pain, or limitation of use of your back or extremities?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Paralysis, weakness of muscles, seizures, epilepsy, migraine or other severe headaches, loss of consciousness, or amnesia?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Mania, depression, schizophrenia, suicide attempt, alcoholism, panic attacks, fear of flying, fear of heights, fear of enclosed spaces?                            |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Anemia, diabetes, cancers, arterial gas embolism, bends, surgery, hospitalization, or other chronic medical conditions not listed?                                 |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Are you currently pregnant?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 11. Are you taking any medication? List:  |
| <input type="checkbox"/> | <input type="checkbox"/> | 12. Can you jog 15 minutes continuously and can you swim 100 yards without stopping?  |

Applicant's Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Medical Clearance for Non-Aircrew / Non-Military Personnel to Participate  
in Naval Aviation Survival Training and Fly in USN/USMC Aircraft**

**TO THE EXAMINING PHYSICIAN**

This person is seeking clearance to fly military aircraft as a non-aircrew observer. He or she will be required to complete high risk Naval Aviation Survival Training Program (NASTP) aviation physiology and water survival training. These training programs are designated as High Risk Training (described on the front of this form) and require a high degree of physical and psychological stamina. Successful completion of these training programs may lead to actual flight in high performance ejection seat aircraft capable of sustained high g-force maneuvering. The purpose of this evaluation is to clear this individual for the required high risk NASTP training as well as actual flight.

Please Complete and Elaborate on all Abnormal Findings and Positive Responses

Height \_\_\_\_\_ Weight \_\_\_\_\_ Temp \_\_\_\_\_ Pulse \_\_\_\_\_ Resp \_\_\_\_\_ B/P \_\_\_\_\_

Corrected Visual Activity: Right \_\_\_\_\_ Left \_\_\_\_\_ Hearing (Normal/Abnormal) \_\_\_\_\_

HGB or HCT \_\_\_\_\_ Urinalysis: Glucose \_\_\_\_\_ Protein \_\_\_\_\_ Ketone \_\_\_\_\_ SP Gravity \_\_\_\_\_

EKG (within last 12 months) \_\_\_\_\_ Chest XRAY (within last 3 years) \_\_\_\_\_

NL	ABN		Elaboration and Comments
<input type="checkbox"/>	<input type="checkbox"/>	HEENT (include Eustachian tube patency)	_____
<input type="checkbox"/>	<input type="checkbox"/>	Heart and Vascular	_____
<input type="checkbox"/>	<input type="checkbox"/>	Chest and Lungs	_____
<input type="checkbox"/>	<input type="checkbox"/>	Abdomen, Genitalia and Hern	_____
<input type="checkbox"/>	<input type="checkbox"/>	Spine, Extremities and Musculoskeletal	_____
<input type="checkbox"/>	<input type="checkbox"/>	Neurological	_____
<input type="checkbox"/>	<input type="checkbox"/>	Mental Status	_____

I find no contraindication to this person's participation in required high risk NASTP training as well as actual flight in high performance or other military aircraft.

Examining Physician's Signature \_\_\_\_\_

Date \_\_\_\_\_

Phone # \_\_\_\_\_

FAA AME / Navy Flight Surgeon's Endorsement for Participation in High-Risk NASTP Training/Flight:

Type Aircraft \_\_\_\_\_

Qualification: PQ NPQ

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Note: Scope of examination at the discretion of the FAA AME/ Flight Surgeon)

SAMPLE ORIENTATION FLIGHTS REQUEST TO CTW-53710  
Ser N3/

From: Originator and Command Title per SECNAVINST 5216.5D  
To: Commander, Training Air Wing FIVE  
Via: Commanding Officer and Command Title per SECNAVINST 5216.5D  
(if originated by the Commanding Officer not required)

Subj: ORIENTATION FLIGHT AND WAIVER (if required) REQUEST FOR  
T-6/TH-57 (choose one) AIRCRAFT

Ref: (a) OPNAVINST 3710.7 Series  
(b) CNATRAININST 3710.2 Series  
(c) COMTRAWINGFIVEINST 1531.2 Series

1. Per references (a), (b), and (c), request permission for an orientation flight for Colonel Chuck Sanders USMC, on or about day/month/year. Colonel Sanders is the guest speaker at the Winging on day/month.
2. Colonel Sanders is currently a medically qualified aviator with CH-53 experience. Or: Colonel Sanders is an infantryman and has completed the aeromedical assessment required per references (a) and (c), using enclosure (1), and is qualified to fly onboard Naval Aircraft as a crewmember. Colonel Sanders is current in NASTP requirements (aircraft dependent R1/RP1 ejection seat required for T-6 per reference (a)) and does not require a waiver. Or: General Lee requires a waiver of NASTP requirements per reference (a). (T-6/TH-57 requires CNATRA approval with CTW-5 endorsement).
3. All required safety briefs and training shall be completed in accordance with references (a) and (c) prior to the flight.
4. The point of contact for this flight is Maj Honored at DSN 868-7149.

Very respectfully,

I. M. HONORED  
MAJ USMC

Enclosure (2)

T-6 ORIENTATION FLIGHT PROFILE  
(IP IN FRONT SEAT)

1. Authorized Maneuvers

a. Demonstrated by instructor:

Takeoff  
Aileron Roll  
Wingover  
Loop  
Barrel Roll  
Break  
Approach Pattern  
Touch-and-go  
Landing  
Inverted Flight  
Split-S  
Immelmann  
Cuban 8  
Clover Leaf

b. Participation (participant in back seat actively on controls):

Straight and Level  
Climbs and Descents  
Constant Angle of Bank Turns  
Aileron Roll  
Wingover  
Loop  
Barrel Roll

2. Prohibited Maneuvers:

Overwater Flights if NASTP Waived  
Simulated Emergencies  
Formation Flight  
Any Aerobatic Maneuver not listed above  
Spins, stalls, and OCF  
Flights over 10,000 feet if NASTP Waived

TH-57 ORIENTATION FLIGHT PROFILE

1. Authorized Maneuvers

a. Demonstrated by Instructor:

Low-work  
Transition to Forward Flight  
Vertical Takeoffs and Landings  
Quick Stop  
Approach Pattern  
Autorotations (only when required to demonstrate aircraft performance)  
Hovering Autorotations (hover/taxi "cutguns," only when required to demonstrate aircraft performance)

b. Participation (participants actively on controls):

Low-work  
Takeoffs and Landings  
Straight and Level  
Climbs and Descents  
Turns

2. Unauthorized Maneuvers

Simulated Emergencies  
Formation Flights\*  
Overwater Flights if NASTP Waived

\* Generally not authorized; however, in the case of VIPs requiring a flying backup, formation flight is allowed with CTW-5 approval.