

PHYSICIAN'S STATEMENT FOR POC USE

Dear Physician,

Your patient desires to use a portable oxygen concentrator (POC) onboard a United or United Express aircraft for upcoming travel. Federal Aviation Administration regulations require that a physician verify the customer's medical need to use this device while traveling on a commercial aircraft. Accordingly, please answer the questions below. After you have completed and signed this form, please return the form to your patient, as it must be in his or her possession and available for inspection on the day of travel.

We appreciate your time and assistance with this process.

– United Airlines Medical Department

TO BE COMPLETED BY PHYSICIAN

This letter serves as my verification that _____ [Passenger's name – please print] requires the use of supplementary oxygen while traveling and that this requirement can be met through the use of an approved portable oxygen concentrator (POC). I further verify the following:

- I verify that the passenger has the physical and cognitive ability to see, hear and understand the device's aural and visual cautions and warnings and is able, without assistance, to take the appropriate action in response to those cautions and warnings.
- I verify that the passenger's use of the POC is medically necessary.

Please check the appropriate statement below.

A POC is medically necessary...

_____ during all phases of the flight, including taxi, takeoff and landing.

_____ only during the portion of the flight when approved electronic devices are authorized by the crew, which is generally after takeoff and before landing.

_____ intermittently during flight, but not during taxi, takeoff or landing.

Physician's name (please print):	State license or registration number:
Telephone number:	Fax number:
Address:	
City:	State/country:
Physician's signature:	Date: