

# Use of Masks in the Cockpit

## PLEASE NOTE

*Regarding the prevention of transmission of COVID-19, flight crews are reminded that signs or symptoms of COVID-19 or close contact with a person suspected of having or testing positive for COVID-19 render them unfit for duty until considered fit by the operator and public health authority (e.g. following a suitable negative test). The operator should also have a proper sick-leave policy and procedure so that there is no additional burden for pilots to call in sick.*

The use of face masks is currently recommended or compulsory in many countries, especially if social distancing is not possible. Most of the authorities and airlines require passengers and cabin crew to use face masks. In the recommendations of ICAO, CAPSCA, and IATA, the use of face masks in the cockpit while operating the aircraft has not been compulsory. In EASA/ECDC the recommendation is that a face mask is not used in the cockpit during the flight due to safety reasons.

When an operator makes a decision on mask use in the cockpit, it should involve a safety risk assessment. IFALPA's position is that flight crew should have the option to remove their mask in the cockpit when the door is closed in the interest of flight safety.

The reason for wearing masks in the cockpit is mainly to prevent transmission of COVID-19 from the mask wearer to the other pilot(s) and to a lesser extent, protect the mask wearer from inhaling potentially infected respiratory droplets. Infected people appear to be most infectious just before they develop symptoms (namely 2 days before they develop symptoms) and early in their illness, but asymptomatic people can also spread the disease. Thus, a risk of infection remains even if all symptomatic pilots or pilots who have had close contact with a person suspected of having or testing positive for COVID-19 stay at home.

The World Health Organization recommends the use of a three-layer fabric mask or a medical-grade mask<sup>1</sup>.

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<sup>1</sup> <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks>

## OPERATOR RISK ASSESSMENT

The risk assessment should weigh the risk of transmission against risks to flight safety. Operator safety risk assessments should include, but not be limited to, the following:

- Transmission of COVID-19
  - Prevalence of COVID-19 in the region
  - Crew personal risk of complications from a COVID-19 infection
  - If using the mask in the cockpit, the risk of transmission while eating and drinking
- Flight safety risks
  - Effects on the use of the supplemental oxygen mask
  - Effects on inter-crew communication including the inability to read lips and non-verbal communication
  - Effects of air traffic control communication
  - Possible disturbing effects of wearing a mask during critical phases of flight (e.g. take-off and landing)
  - Diminished senses (sight or smell)
  - Possible increase of stress or fatigue

## MITIGATIONS

Risks associated with mask use should be mitigated using appropriate means, including:

- training on correct use of masks, and,
- training on emergency procedures with the face masks.

## FLIGHT CREW DECISION FRAMEWORK

The crew should follow the operator policy of the mask use, but if using the mask is considered a flight safety risk, the crew should have the option not to use it.

If a pilot becomes symptomatic during the flight, all pilots should wear medical masks and it should be considered if the symptomatic pilot should be removed from duty.

In the event of a disagreement between the crew members on the use of masks, an open discussion on the risks using CRM principles should follow. If the disagreement is not able to be resolved, the crew should follow the appropriate company procedures for similar conflicts.

## MASK USE IN THE SIMULATOR

The simulator does not pose risks to the safety of flight and therefore the use of masks in the simulator should be in accordance with public health authority and operator requirements.