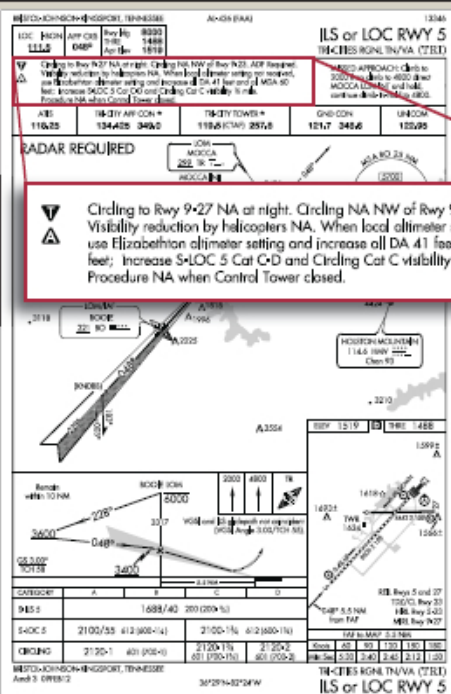


THE SMALL PRINT TAKETH AWAY

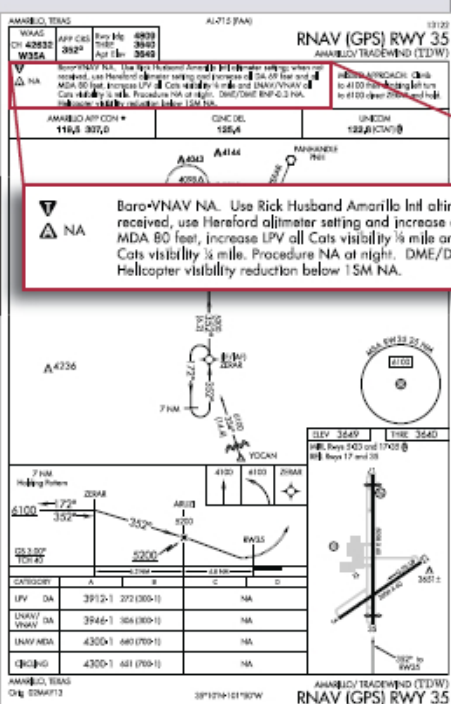
The "NA"s can be lost in the fine print of a long note on an instrument procedure chart. The ILS RWY 5 approach at eastern Tennessee's Tri-Cities Airport, for example, has these limitations:

- Circling to Runway 9/27 not authorized at night. A quick look at the surrounding terrain (which, if you've ever flown to KTRI, you know is steep and devoid of lights) tells you why.
- Circling northwest of Runways 9 and 23 not authorized. Even in the daylight, the terrain is too close to the runway to permit circling in the low visibilities that would require you to be flying a circle-to-land maneuver.
- Visibility reduction by helicopters not authorized. Often pilots of rotary wing aircraft, by virtue of their ability to turn tightly, slow and even stop in mid-air, may reduce the published visibility minima for an approach. Not so when conditions make doing so "not authorized."
- The procedure is not authorized when the tower is closed. This approach requires radar, per the larger note on the approach chart. It makes sense that when no one is in the tower there is no one to monitor your approach on radar—making the entire ILS "not authorized" when the Class D airspace is not active.



The Amarillo/Tradewind Airport RNAV (GPS) RWY 35 approach chart illustrates these approach limitations:

- Baro-VNAV approach not authorized. There are obstacles on the approach path that prevent use of a GPS-derived, non-WAAS glide-path below the published MDA for the non-precision approach.
- Procedure not authorized at night. This is also likely related to obstructions on the final approach, and/or limitations on the type of runway lighting available.
- Helicopter visibility reduction below one nautical mile not authorized. In the flat terrain near Amarillo, Texas, this is most likely related to obstacles near the runway as well.



Both of these approaches are good examples of why we must review approach charts, including a close review of all the notes, well in advance of beginning a procedure.