Dad Booted From Flight With Newborn Deemed Not Old Enough To Fly. Reasonable Or Not?

By Jamie Wells, M.D. — March 23, 2018

A father was not permitted to board a Frontier flight with his 4-day-old infant because the airline’s policy insists on a newborn being at least 7 days old.

The dad conveyed he addressed in advance what he was told he needed to be cleared to fly. In accordance with that information, he presented the birth certificate as well as a letter of medical clearance from the hospital at the gate. There he discovered the age limit and was denied access to the flight.

The result of stranding him in Phoenix wound up generating a heartwarming tale that captivated news outlets. But, is the guideline that prompted it sensible or misguided?

In general, does this policy make any sense?

Actually, like most things, the answer isn’t so simple. The hard line of being one week old is a bit arbitrary, but that in itself somewhat addresses the gray area for the safety of newborn travel.

Perinatal physiology is quite complex. Remember, a baby in the womb is in a cozy, fluid-filled environment that represents the most extraordinary suspension system known to man. Multiple holes in the heart are open in utero to sustain life as the umbilical cord is the neonate’s sustenance and means of survival. It isn’t until the baby is born and takes her first breath that she dramatically changes the pressure differential in the heart and lungs.
Once outside into the air, the lungs expand and many shifts occur in the coming days and weeks that permit the newborn to adapt to a whole new world. The holes in the heart no longer required steadily close, one by one, on a rather unique schedule during the neonatal period.

This is why certain congenital heart defects aren’t discovered until the infant faces these challenges. Some need a hole to remain patent so as to compensate for the abnormality. Usually, these issues present themselves within the first week of life and can be routinely related to pulmonary problems too. A subset of infants might have needed some support during their hospitalization and while certain lung or other issues are okay for flying, others might be less advisable. The person’s treating physician will be fully aware of these distinctions and best be able to know who can or cannot safely fly. For those otherwise healthy, it is usually less concerning.

This explains, in part, the cutoff of such a policy given oxygen levels in flight might be lower than on land and pressure changes can influence specific scenarios. Avoiding the window of when a symptomatic infant could present spares all involved unnecessary stress and an inevitable delay in appropriate care depending on the duration of a flight. Additionally, this time period is where other issues like poor feeding and jaundice prevail. All require timely intervention and most are quite manageable today with proper treatment.

In this case, it appears the baby had been in the NICU, yet the hospital deemed the infant safe to travel in this manner and otherwise healthy. This implies there was no acute or underlying medical concern, as some conditions can affect such a determination.

However, in general and irrespective of this policy, pediatricians tend to care more about infection risks to the very young when around large groups. Exposing a very young and not yet vaccinated infant to crowded areas like enclosed spaces on a plane (or airports themselves) during cold and flu season is something to consider. Newborns, especially premature infants, don’t have the capacity to localize infection like adults do and are replete with a less robust, but developing immunity. So, in this age group, infections can be more serious and require more aggressive and protracted therapies, including hospital admission.

That said, people adopt from other states and fly young infants and they do well. Or, families might face other difficult circumstances that compel the need to fly so early. The flying, which poses a risk, is no absolute they will acquire an infection. But, it is always advisable with a young infant, just as with someone with an impaired immunity to wash your hands frequently, stay away from those actively coughing or sick and avoid when possible such situations until they are a bit older and more apt to be resilient and more developed.

Weighing the risks and benefits of air travel with young infants is a personal choice for you and your family. Many opt to use air travel with infants and do so successfully. Taking precautions in those instances and discussing such decisions in advance with your pediatrician is typically in everyone’s best interest to guarantee the most optimal of outcomes. Also, checking a specific air carrier’s requirements is important given there can be variability between companies.

The happy ending

Due to the delay from the logistics of getting his money back and financial constraints, he called
the volunteer who helped comfort his daughter while she was in the hospital’s neonatal intensive care unit (NICU). They had made a connection and established a rapport during his daughter’s stay. He figured she might be of help for a ride or alternative suggestion, and never imagined she would come get them at the airport and take them to her home to stay, be fed and shown such friendship and compassion.

This Good Samaritan story of community and love spread throughout the internet.

Ultimately, he and his new baby were taken care of and flew home once compliant with Frontier’s rules [3]: "To comply with Frontier policy regarding the age of traveling infants these passengers were rebooked on a Frontier flight department on March 20. We also waived any change fees associated with this change so the passenger can travel in accordance with our policy."

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