

DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION

SPECIFICATIONS FOR NEUROLOGIC EVALUATION

- I. If not previously submitted, all records are required covering prior hospitalizations and/or other periods of observation and treatment. These records must be in sufficient detail to permit a clear evaluation of the nature and extent of any previous neurologic disorder. Medical release forms are enclosed for you to complete and send to the physicians and/or hospitals which hold your records. You should request that copies of your records be mailed directly to this office. Please date and sign one of the release forms and return it to us for our records. An envelope is provided for this purpose.

- II. A report by a qualified neurologist is required. (A "qualified" neurologist is preferably one who has been certified by the American Board of Psychiatry and Neurology or by the American Board of Neurological Surgery, or one who has the background equivalent for Board certification.) Your aviation medical examiner or personal physician is often a good source for such a referral.

The neurologist's report must supply the following:

1. Detailed report of a recent neurological examination.
2. Pertinent x-rays, electroencephalogram with activating procedures*, or other tests and laboratory procedures as may be indicated.

An airman with a history of neurologic disorder who seeks a special issuance under Part 67.401 of the Federal Aviation Regulations on the basis of full recovery, must submit the reports and objective evidence as listed above. In instances of cerebrovascular disorders, the airman must be free from all symptoms for at least two years before the request will be favorably considered by the Federal Air Surgeon.

* These procedures are utilized to elicit a latent abnormality in brain rhythm and are of special value where the resting record has shown no change from the normal. The standard techniques are hyperventilation, sleep and photic drive. Generally, three minutes of hyperventilation and a period of recording during drowsiness and sleep are included in a standard tracing. The sleep may be spontaneous or induced by chloral hydrate or barbiturates. Drugs used in the activation procedure, including dosages, should be indicated in the report.