

U.S. Department of Transportation Federal Aviation Administration Mike Monroney Aeronautical Center Civil Aerospace Medical Institute (CAMI) Aerospace Medical Certification Division P.O. Box 26080 Oklahoma City, OK 73126

PROTOCOL FOR THE EVALUATION OF VALVE REPLACEMENT

A six-month recovery period shall elapse after the valve replacement to ensure recovery and stabilization.

- 1. Copies of hospital/medical records pertaining to the requirement for the valve to include make, model, serial number and size, admission/discharge summaries, operative report, and **pathology report**.
- 2. A current evaluation from your attending physician regarding your use of Coumadin to confirm stability without complications, drug dose history and schedule, the <u>actual</u> prothrombin time (PTT) and control determinations, and International Normalized Ratio (INR) values, accomplished at least <u>monthly</u> during the past six-month period of observation.
- 3. A current report from your treating physician regarding the status of your cardiac valve replacement. This report should address your general cardiovascular condition as well as any symptoms of valve or heart failure and any related abnormal physical findings.
- 4. A current Holter monitor evaluation for at least 24 consecutive hours, to include select representative tracings.
- 5. Current M-mode, 2-dimensional, and Doppler echocardiogram. Please submit the video resulting from this study.
- 6. A current maximal treadmill stress test. An electrocardiographic (ECG) treadmill stress test should achieve 100 percent of predicted maximal heart rate unless medically contraindicated or prevented either by symptoms or medications. Beta blockers and calcium channel blockers (specifically diltiazem and verapamil), or digitalis preparations should be discontinued for 48 hours prior to testing (if not contraindicated) in order to obtain maximum heart rate and only with consent of the treating physician. An applicant will be expected to demonstrate a minimum functional capacity by achieving a double product of 25,000 (maximum rate X maximum systolic pressure) and completing stage 3 of the Bruce protocol or 10 METs on other protocols. (Failure to achieve these levels is not necessarily disqualifying but will have to be considered on an individual basis.) The worksheet with blood pressure/pulse recordings at various stages, interpretive report, and copies of actual ECG tracings must be submitted. Tracings must include a rhythm strip, a full 12-lead ECG recorded at rest (supine and standing) and during hyperventilation while standing, one or more times during each stage of exercise, at the end of each stage, at peak exercise, and every minute during recovery for at least five minutes or until the tracings return to baseline level. Computer generated, sample-cycle ECG tracings are unacceptable in lieu of

the standard tracings and if submitted alone may result in deferment until this requirement is met.

If cardiac catheterization and coronary angiography have been performed, all reports and films must be submitted, if required, for review by the agency. Copies should be made of all films as a safeguard against loss.

Applicants found qualified for an airman medical certificate shall be required to provide periodic, follow-up cardiovascular evaluations, including annual 24-hour ambulatory ECG. Additional diagnostic testing modalities, including radionuclear, may be required if indicated.

It is the responsibility of each applicant to provide the medical information required to determine his/her eligibility for airman medical certification. A medical release form may help in obtaining the necessary information.

All information shall be forwarded in one mailing to:

FAA Civil Aerospace Medical Institute OR	FAA Civil Aerospace Medical Institute
Medical Appeals Branch, AAM-313	Medical Appeals Branch, AAM-313 Rm B13
Post Office Box 26080	6700 S MacArthur Blvd.
Oklahoma City OK 73125-9914	Oklahoma City OK 73169

No consideration can be given for special issuance until all the required data has been received.

Use of the above reference number and your full name on any reports or correspondence will aid us in locating your file.