



Protocol for Human Immunodeficiency Virus (HIV) Related Conditions

Persons who are infected with the HIV and who do not have a diagnosis of Acquired Immunodeficiency Syndrome (AIDS) may be considered for any class medical certificate, if otherwise qualified. The diagnosis of AIDS will be based on the criteria established by the U.S. Public Health Service Centers for Disease Control and Prevention (CDC) except a low CD4⁺ cell count will not necessarily exclude an applicant from consideration. Decisions will be based on individual medical evaluation and followup monitoring. Such certification will be through the special issuance process.

Persons on antiretroviral medication will be considered only if the medication is approved by the U.S. Food and Drug Administration and is used in accordance with an acceptable drug therapy protocol. Acceptable protocols are cited in ***Guidelines for the Use of Antiretroviral Agents in HIV-Infected Adults and Adolescents*** developed by the Department of Health and Human Services Panel on Clinical Practices for Treatment of HIV Infection.

Application for special issuance must include reports of examination by a physician knowledgeable in the treatment of HIV-infected persons and a medical history emphasizing symptoms and treatment referable to the immune system. In addition, these reports must include a "viral load" determination by polymerase chain reaction (PCR), CD4⁺ lymphocyte count, a complete blood count, and the results of liver function tests. An assessment of cognitive function (preferably by ***Cogscreen*** or other test battery acceptable to the Federal Air Surgeon) must be submitted. Additional cognitive function tests may be required as indicated by results of the cognitive tests. At the time of initial application, viral load must not exceed 1,000 copies per milliliter of plasma, and cognitive testing must show no significant deficit(s) that would preclude the safe performance of airman duties.

Followup evaluations of persons granted certification will include quarterly determinations of viral load by PCR, a CD4⁺ cell count, and the results of other laboratory and clinical tests deemed appropriate by the treating physician. These will be included in a written status report provided by the treating physician every 6 months. In addition, the results of cognitive function studies will be required at annual intervals for medical clearance or medical certification of ATCS's and first- and second-class applicants. Third-class applicants will be required to submit cognitive function studies every 2 years.

Adverse clinical findings, including significant changes in cognitive test results or an increased viral load exceeding 5,000 copies per milliliter shall constitute a basis for withdrawing medical certification.

Exceptions to this MGL, if any, will be based on individual consideration by the Federal Air Surgeon.