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PROTOCOL FOR EVALUATION OF HYPERTENSION

<u>Initial</u>: The Examiner may issue first-, second-, or third-class medical certificates to otherwise qualified airmen whose hypertension is adequately controlled with acceptable medications without significant adverse effects. In such cases, the Examiner shall:

- 1. Conduct an evaluation or, at the applicant's option, review the report of a current (within preceding 6 months) cardiovascular evaluation by the applicant's attending physician. This evaluation must include pertinent personal and family medical history, including an assessment of the risk factors for coronary heart disease, a clinical examination including at least three blood pressure readings, separated by at least 24-hours each, a resting ECG, and a report of fasting plasma glucose, cholesterol (LDL/HDL), triglycerides, potassium, and creatinine levels. A maximal electrocardiographic exercise stress test will be accomplished if it is indicated by history or clinical findings. Specific mention must be made of the medications used, their dosage, and the presence, absence, or history of adverse effects.
- 2. Summarize the results of this evaluation in Item 60 of the transmitted application and forward the appropriate documents to the AMCD.
- 3. Report the results of any additional tests or evaluations that have been accomplished.
- 4. If appropriate, state in Item 60 on the FAA Form 8500-8 that the applicant's blood pressure is adequately controlled with acceptable medication, there are no known significant adverse effects, and no other cardiovascular, cerebrovascular, or arteriosclerotic disease is evident.
- 5. Defer certification if the person declines any of the recommended evaluations.

Medications:

- 1. Medications acceptable to the FAA for treatment of hypertension in airmen include all Food and Drug Administration (FDA) approved diuretics, alphaadrenergic blocking agents, beta-adrenergic blocking agents, calcium channel blocking agents, angiotension converting enzyme (ACE inhibitors) agents, and direct vasodilators. Centrally acting agents (such as, reserpine, guanethidine, guanadrel, guanabenz, and methyldopa) are <u>not</u> usually acceptable to the FAA. Dosage levels should be the minimum necessary to obtain optimal clinical control and should not be modified to influence the certification decision.
- 2. The Examiner may submit for the Federal Air Surgeon's review requests for Authorization under the special issuance section of part 67 (14 CFR 67.401) in

cases in which these or other usually unacceptable medications are used. Specialty evaluations are required in such cases and must provide information on why the specific drug is required. The Examiner's own recommendation should be included. The Examiner must defer issuance of a medical certificate to any applicant whose hypertension is being treated with unacceptable medications.

<u>Followup</u>: Followup evaluations must include a current status report describing at least the medications used and their dosages, the adequacy of blood pressure control, the presence or absence of side effects, the presence or absence of endorgan complications and the results of any appropriate tests or studies. This evaluation can be performed by the Examiner if the Examiner can attest to the accuracy of the above information.

Hypertension follow-ups are required annually for first- and second-class medical certificate applicants and at the time of renewal for third-class certificate applicants.

<u>Duration of Certificates</u>: The duration of the certificate will be valid until the time of normal expiration, unless otherwise specified by the FAA.