PROTOCOL FOR CARDIAC VALVE REPLACEMENT
(Updated 01-27-2021)

For applicants with tissue or mechanical valve replacement(s):

INITIAL CONSIDERATION:

- **First- or Second-Class Applicants**: Applicants are reviewed by the Federal Air Surgeon's (FAS) Cardiology Panel or FAS Cardiology Consultant and must have a **6-month recovery period** after procedure to ensure stabilization.

- **Multiple heart valve replacement(s)**: Applicants who have received multiple heart valve replacements may be considered.

- **Ross Procedure**: The FAA may consider certification of all classes of applicants who have undergone a **Ross Procedure** (pulmonic valve transplanted to the aortic position and pulmonic valve replaced by a bioprosthesis).

- **Transcatheter Aortic Valve Replacement (TAVR) Procedure**: TAVR may also be considered for any class. In addition to the requirements listed below, a note from the cardiologist specifically explaining why the TAVR procedure was chosen (risk factors, conditions making open procedure not acceptable, etc.) must be provided.

- The following information must be submitted for **all classes**:

  1. **Copies of all hospital/medical records** pertaining to the valve replacement:
     - Admission History & Physical (H&P);
     - Discharge summary;
     - Operative report with valve information (make, model, serial number and size); and
     - Pathology report

  2. **A current report from the treating cardiologist** regarding the status of the cardiac valve replacement. It should address your general cardiovascular condition, any symptoms of valve or heart failure, any related abnormal physical findings, and must substantiate satisfactory recovery and cardiac function without evidence of embolic phenomena, significant arrhythmia, structural abnormality, or ischemic disease.

  3. **If on warfarin (Coumadin)**, the attending physician must confirm stability without complications. Report must include warfarin (Coumadin) dose history, schedule, and International Normalized Ratio (INR) values (monthly for the past 6-month period of observation; must be within acceptable range).
4. **Current 24-hour Holter monitor** evaluation to include select representative tracings.
5. **Current** M-mode, 2-dimensional, and M-Mode Doppler echocardiogram, specifically including chamber dimensions and valvular gradients. Submit the video resulting from this study on CD-ROM in DICOM compatible format.
7. If cardiac catheterization and coronary angiography have been performed, all reports AND films must be submitted, including a copy of the cineangiogram on CD-ROM in DICOM compatible format.

### FOLLOW-UP CERTIFICATION:

After initial certification, all classes are usually followed at 12-month intervals with the following requirements:

- Current clinical status report from your treating cardiologist;
- Standard resting ECG; (actual LEGIBLE tracing);
- Doppler echocardiogram report; and
- If used, a warfarin (Coumadin) status report: Include dose; monthly INRs; any complications from treatment and subsequent actions taken.

**Note:**

- Holter and GXT may be required periodically, if clinically indicated.
- All classes may be eligible for an AASI Cardiac Valve Replacement.
- If any new valve replacement since their Special Issuance, the AME must defer.

### SUBMITTING INFORMATION TO THE FAA:

- The applicant is responsible for providing all medical information required by the FAA to determine eligibility for medical certification. A medical release form may help in obtaining the necessary information. Authorization cannot be considered until all the required data has been received.
- Use full name and applicant ID on any reports or correspondence. This will assist in locating the file.
- Keep a copy of all documents and media submitted as a safeguard against loss.
- Send all information in one mailing to either:

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<th>Using regular mail (US Postal Service)</th>
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<tr>
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<tr>
<td>PO Box 25082</td>
<td>6700 S MacArthur Blvd., Room B-13</td>
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