## ALZHEIMER'S DISEASE OR MILD COGNITIVE IMPAIRMENT (MCI) or DEMENTIA

All Classes (Updated 02/22/2023)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
A.	Submit the following for FAA	
Alzheimer's disease	review:	<b>DEFER</b> Submit the information to
OR	The most recent detailed, Clinical Progress Note performed by the treating physician or	the FAA.
Mild Cognitive Impairment (MCI)	neurologist. It must include a detailed summary of the history of	
OR Dementia from:	the condition; current medications, dosage, and side effects (if any);	
	physical exam findings; results of any testing performed; diagnosis;	
Creutzfeldt-Jakob disease;	assessment; plan (prognosis); and follow-up.	
<ul> <li>Frontotemporal dementia;</li> </ul>	In most cases, this condition is	
<ul><li>Lewy body dementia;</li><li>Mixed dementia;</li></ul>	incompatible with aviation safety.	
<ul> <li>Normal Pressure Hydrocephalus;</li> </ul>		
<ul> <li>Vascular dementia; or</li> </ul>		
Others		
B. Pre-clinical	Submit the following for FAA	
Alzheimer's condition	review:	<b>DEFER</b> Submit the information to
	1. A current, detailed	the FAA for a possible
	neurological evaluation generated from a clinic visit	Special Issuance.
	with the treating neurologist no more than 90 days	
	before the AME exam in	
	accordance with the <u>FAA</u> <u>Specifications for Neurologic</u>	
	Evaluation.	
	Neuropsychological     evaluation in accordance with	
	the FAA Specifications for	
	Neuropsychological Evaluations for Potential	
	Neurocognitive Impairment no more than 90 days before the	
	AME exam.	

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
DISEASE/CONDITION	3. <b>Brain MRI</b> . Magnetic Resonance Imaging (MRI) of the brain performed no more than 90 days prior to your AME exam. Submit the interpretive report on paper and imaging on CD in DICOM readable format (there must be a file named 'DICOMDIR' in the root directory of the CD- ROM). Please verify the CD will display the images before sending. You may wish to retain a copy of all films as a safeguard if lost in the mail.  4. <b>Other testing:</b> Already performed by the treating <b>neurologist</b> .  Note: Upon receipt and review of the above information, additional documentation may be required.	DISPOSITION