## **ASTHMA**

All Classes (Updated 09/24/2025)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
<b>A.</b> History of childhood asthma, resolved	If the AME can determine the individual has no symptoms that would interfere with flight or safety related duties:	ISSUE
OR		Annotate this information in Block 60.
Asthma caused by a specific and avoidable trigger (e.g. exposure to pet or animal dander, specific foods etc.) managed by avoidance and use of as needed (PRN) rescue inhaler		
OR		
Exercise-induced bronchoconstriction (a.k.a. exercise-induced asthma), treated with as needed (PRN) rescue inhaler only		
B. Intermittent or mild persistent	See the <u>CACI -Asthma Worksheet</u> .	If the pilot meets all CACI worksheet
	This requires a current, detailed Clinical Progress Note and spirometry.	criteria and is otherwise qualified,
	Progress Note and sphometry.	ISSUE
	If the pilot meets all CACI worksheet criteria and is otherwise qualified:	With no time limitation
		Annotate the correct CACI statement in Block 60 and keep the required supporting information on file.

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
C. Moderate or Severe	Submit the following for FAA review:	
persistent		DEFER
persistent	<ul> <li>1. A current, detailed Clinical Progress Note generated from a clinic visit with the treating Pulmonologist no more than 90 days before the AME exam. It must include: <ul> <li>A detailed summary of the history of the condition;</li> <li>Current medications, dosage, and side effects (if any);</li> <li>Ophthalmological exam findings;</li> <li>Results of any testing performed;</li> <li>Diagnosis;</li> </ul> </li> </ul>	Submit the information to the FAA for a possible Special Issuance  Annotate (elements or findings) in Item 60.
	<ul> <li>Assessment and plan;</li> <li>Prognosis; and Follow-up.</li> <li>2. The Clinical Progress note must specifically include: <ul> <li>the disease course and severity including flare(s),</li> <li>hospitalizations or intubations,</li> <li>treatment history,</li> <li>duration of symptoms,</li> <li>how long the condition has been stable,</li> <li>if any upcoming treatment change is planned or expected; and</li> <li>does the condition severity limit activities.</li> </ul> </li> <li>3. Pulmonary functions test (PFTs) performed within the past 90 days. PFTs must be both pre-and post-bronchodilator and include flow volume loops.</li> <li>4. Copies of any other testing already performed</li> </ul>	