

ATRIAL FLUTTER / TYPICAL ATRIAL FLUTTER

All Classes
(Updated 01/28/2026)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
A. <ul style="list-style-type: none"> Typical Atrial Flutter successfully treated with ablation 2 or more years ago Asymptomatic No Anti-arrhythmia medications required or recommended 	<p>The AME should review a completed and signed Typical Atrial Flutter Treated with Ablation Status Summary from the CARDIOLOGIST.</p> <p>If all items fall into the “YES” column, and the AME has no concerns:</p>	<div style="background-color: green; color: white; text-align: center; padding: 5px;">ISSUE</div> <p>Annotate Block 60 and submit the evaluation to the FAA for retention in the file.</p>
B. TYPICAL Atrial Flutter successfully treated with ablation within the previous 2 years OR Treated with Anti-arrhythmia medications	<p>Submit the following for FAA review:</p> <ol style="list-style-type: none"> A current, detailed Clinical Progress Note generated from a clinic visit with their treating physician or cardiologist no more than 90 days before the AME exam. <i>It should include a summary of the history of the condition or diagnosis; current medications, dosages, and side effects (if any); clinical exam findings; results of any testing performed; diagnosis; assessment and plan (prognosis); and follow-up.</i> It must include if they have been, or are currently symptomatic and the clinical interpretation of any studies performed (echo, ECG, stress test, etc.) Echocardiogram (Echo). <i>Copies of a 2-D and Doppler flow study report performed no more than 90 days prior to the AME exam.</i> 24-hour cardiac monitor performed no more than 90 days prior to the AME exam. 	<div style="background-color: red; color: white; text-align: center; padding: 5px;">DEFER</div> <p>Submit the information to the FAA for a possible Special Issuance</p> <p>Annotate (elements or findings) in Block 60.</p>

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
	<p>≥ 24-hour cardiac monitor (such as a Holter, Zio Patch, etc.) It should have atrial and ventricular ectopic counts; hourly tabular data to include the longest pause duration and counts of all pauses > 2.0 or 2.5 seconds; heart rate (max, min, and average); other histograms and frequency graphs; and percentage of atrial fibrillation/flutter.</p>	
<p>C.</p> <p>History of:</p> <ul style="list-style-type: none"> • Atypical Atrial Flutter • Any other type of flutter • Atrial Fibrillation • Symptomatic 	<p>See the Atrial Fibrillation page, row C.</p>	<div data-bbox="1216 485 1474 520" style="background-color: red; height: 17px; width: 100%;"></div> <p style="text-align: center;">DEFER</p> <p style="text-align: center;">Submit the information to the FAA for a possible Special Issuance</p> <p style="text-align: center;">Annotate (elements or findings) in Block 60.</p>