

# CACI – Colitis Worksheet

(Updated 11/27/2024)

To determine the applicant’s eligibility for certification, the AME must review a [current, detailed Clinical Progress Note](#) generated from a clinic visit with the treating physician or specialist **no more than 90 days prior** to the AME exam. If the applicant **meets ALL the acceptable certification criteria** listed below, the AME can issue. Applicants for first- or second- class must provide this information annually; applicants for third-class must provide the information with each required exam.

AME MUST REVIEW	ACCEPTABLE CERTIFICATION CRITERIA
A current, detailed Clinical Progress Note from the treating physician	<input type="checkbox"/> Condition is stable with no effects that would interfere with flight duties. AND <input type="checkbox"/> No surgery for the condition in the last 6 (six) weeks.
Symptoms	<input type="checkbox"/> None or mild diarrhea with or without mild abdominal pain/cramping  Fatigue which limits activity or severe abdominal symptoms are not acceptable for certification.
Cause of Colitis	<input type="checkbox"/> Crohn’s disease, ulcerative colitis, or irritable bowel syndrome Any other causes require FAA decision.
Medications for condition  <b>KEY:</b> Interleukin Inhibitors (IL) Phosphodiesterase-4 Enzyme Inhibitor (PDE4) Tumor necrosis factor inhibitors (TNF):	<input type="checkbox"/> One or more of the following: <ul style="list-style-type: none"> <li>• Steroids               <ul style="list-style-type: none"> <li>▪ Oral formulations prednisone 20 mg/day equivalent or less (see <a href="#">steroid conversion calculator</a>)</li> <li>▪ Oral budesonide 9mg or less</li> <li>▪ Steroid foams or enemas/ budesonide enema</li> </ul> </li> <li>• azathioprine (Imuran)</li> <li>• hyoscyamine - use 1-2 times a week with no side effects and no-fly 48 hours after use</li> <li>• loperamide less than or equal to 16 mg a day and no side effects</li> <li>• mercaptopurine (6-MP)</li> <li>• mesalamine (Asacol, Pentasa, Lialda)</li> <li>• sulfasalazine (Azulfidine)</li> <li>• Any single medication listed below after a 2-week ground trial and:               <ul style="list-style-type: none"> <li>▪ <b>No post-dose observation time:</b> <ul style="list-style-type: none"> <li>○ tofacitinib (Xeljanz) - JAK</li> </ul> </li> <li>▪ <b>4-hour post-dose observation time:</b> <ul style="list-style-type: none"> <li>○ adalimumab (Humira and all biosimilars) - TNF</li> <li>○ certolizumab (Cimzia) - TNF</li> <li>○ golimumab (Simponi) – TNF</li> <li>○ risankizumab (Skyrizi) - IL</li> <li>○ ustekinumab (Stelara) - IL</li> <li>○ vedolizumab (Entyvio) - SAM</li> </ul> </li> <li>▪ <b>24-hour post-dose observation time:</b> <ul style="list-style-type: none"> <li>○ infliximab (Inflectra, Remicade, Renflexis) - TNF</li> </ul> </li> </ul> </li> </ul>

**AME MUST NOTE in Block 60 one of the following:**

CACI qualified Colitis. (Documents do not need to be submitted to the FAA.)

Has current OR previous SI/AASI but now CACI qualified Colitis.

NOT CACI qualified Colitis. I have deferred. (Submit supporting documents.)