

# Chronic Lymphocytic Leukemia (CLL) / Small Lymphocytic Lymphoma (SLL) Status Summary

(Updated 05/31/2023)

Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Applicant ID: \_\_\_\_\_

PI: \_\_\_\_\_

Please have your treating ONCOLOGIST who manages your CLL/SLL provide the requested information in the space. Submit this summary and a current, Detailed Clinical Progress note addressing each item. Attach a copy the lab results (item #6) and submit to your AME or mail to the FAA:

Federal Aviation Administration  
Civil Aerospace Medical Institute, Building 13  
Aerospace Medical Certification Division, AAM-313, PO Box 25082  
Oklahoma City, OK 73125-9914

1. Diagnosed at age 40 or older and has been followed by oncology for five (5) or more years?

YES	NO
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2. Is the individual stable, asymptomatic, and treatment recommended is observation only.

YES	NO
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3. Rai stage:

0-1	2	3-4
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4. Binet stage:

A	B	C
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5. Applicant has NO evidence of active disease.\*  
(Consider iwCLL criteria)

\*Examples of active disease include weight loss (unintentional) greater than 10 pounds; new palpable lymph nodes

YES	NO
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6.  Labs performed no more than 90 days ago verify:

- Hemoglobin is \_\_\_\_\_ mg/dL
- Platelets greater than 100,000/microL AND total or absolute lymphocyte count doubling time is greater than 6 months.

Attach copy of lab results		
11+	10+	< 10
YES	NO	

7. Explain any "NO" answers or other concerns. (Attach a current, detailed Clinical Progress Note with this information.)

\_\_\_\_\_  
Treating Physician Signature

\_\_\_\_\_  
Date of Evaluation

\_\_\_\_\_  
Name or Office Stamp

\_\_\_\_\_  
Phone Number