

## **Protocol for Cardiac Testing**

Coronary Artery Calcification (CAC) Scoring; Calcium Score;

Coronary Computed Tomography Angiography (CCTA)

(Updated 01/28/2026)

- Do NOT use this guidance for individuals with known prior coronary artery disease (such as those who have had a heart attack, stent, or CABG), or those on a SI/SC for a cardiac condition.
- Higher calcium scores are associated with Major Adverse Cardiac Events (MACE) which can cause sudden incapacitation.
- Coronary CT Angiography (CCTA) can assess some “soft” plaque and give an estimate of coronary obstruction, but it is NOT the same as a cardiac catheterization. If a CCTA is performed instead of a cardiac catheterization (such as in the setting of a high coronary artery calcium score), it must include the CT-FFR (fractional flow reserve) measurement for applicable/questionable lesions. The FAA requires either the CT-FFR results (as applicable) or a cardiac catheterization to assess eligibility for medical certification or clearance.
- If the CT-FFR (Fractional Flow Reserve) is determined to be clinically significant, in most cases, the individual will need cardiac catheterization to determine if the obstruction will require treatment.

### Disposition / Initial work-up for Calcium Score or CCTA Test Results

	Calcium Score				CCTA**			
	0	$\leq 100$	101-400	$>400$	0	$<50\%$	50-70%**	$>70\%**$
<b>FIRST</b>	Issue	Issue	RS*	Cath or CCTA**/CT-FFR	Issue	Issue	RS*/Cath or CCTA**/CT-FFR	Cath or CCTA**/CT-FFR
<b>SECOND</b>	Issue	Issue	RS*	Cath or CCTA**/CT-FFR	Issue	Issue	RS*/Cath or CCTA**/CT-FFR	Cath or CCTA**/CT-FFR
<b>THIRD</b>	Issue	Issue	RS*	RS*	Issue	Issue	RS*	RS*

\*If Nuclear Stress Test shows ischemia, then pilot must have a Cardiac Cath (All Classes)

\*\*If two or more Major vessels (e.g. LM, LAD, Cx, RCA) on CCTA show 50+%, then pilot must have a Cardiac Cath OR CCTA with CT-FFR.

### Follow-Up after Initial Work-Up for Yellow/Orange/Red Boxes

Annual follow-up with AASI CAD Worksheet, unless the pilot is put on Special Issuance (with specific, directed follow-up).