

DIPLOPIA (DOUBLE VISION)

All Classes
Updated 08/26/2026

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
A. Any history or current symptoms. Include persistent or intermittent.	Submit the following for FAA review: 1. A current, detailed Clinical Progress Note generated from a clinic visit with their treating ophthalmologist, neurologist, or neuro-ophthalmologist 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> 2. It must specifically include: • A thorough assessment identifying the underlying CAUSE of the diplopia. • Objective evidence of stability or resolution of the misalignment. (e.g. a resolved 6th nerve paresis) • Documentation of effective treatment (e.g., prism, surgical correction), if used. 3. Visual acuity. The best corrected visual acuity for distant and near vision (intermediate if age 50 or older and 1st or 2nd class). If vision standards are not met, that should be discussed. Include if the visual acuity is expected to change. 4. Copies of any testing already performed (visual fields, etc.)	DEFER Submit the information to the FAA for a possible Special Issuance. Summarize findings in Item 60.
B. Due to a neurological condition	If due to a neurological condition, see corresponding page.	