

PITUITARY ADENOMA
(Microadenoma or Macroadenoma)

All Classes
Updated 07/29/2026

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
A. Microadenoma (Tumor size < 1cm) Not treated with surgery or radiation	Submit the following for FAA review: 1. A current, detailed Clinical Progress Note generated from a clinic visit with their treating endocrinologist 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 specifically include whether surgical intervention is recommended. 2. MRI of the pituitary gland with and without contrast within the last 12 months confirming tumor size. 3. Copies of all prior clinical records, laboratory testing, and imaging for this condition. Note: If functional tumor (secreting), please also refer to appropriate page (Acromegaly, Cushing's, etc.) for additional requirements	DEFER Submit the information to the FAA for a possible Special Issuance.
B. Macroadenoma (Tumor size 1cm or larger) Not treated with surgery or radiation	Submit the following for FAA review: 1. A current, detailed Clinical Progress Note generated from a clinic visit with their treating endocrinologist 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 specifically include whether surgical intervention is recommended. 2. MRI of the pituitary gland with and without contrast within the last 12 months confirming tumor size.	DEFER Submit the information to the FAA for a possible Special Issuance.

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	3. Copies of all prior clinical records, laboratory testing, and imaging for this condition. 4. A current, detailed Clinical Progress Note generated from a clinic visit with an ophthalmologist no more than 90 days before the AME exam. <i>It should include an explanation of the visual fields (normal, abnormal, or field loss) and if there is any evidence of optic nerve disease.</i> 5. Visual field graphs (24-2 or 30-2) with clinical interpretation by the treating eye specialist performed no more than 90 days prior to the AME exam. 6. Any other testing/studies accomplished for the diagnosis or treatment. 7. If evaluated by surgeon (neurosurgery or ENT), submit a copy of the progress note from the office visit including discussion of surgical recommendation. Note: If functional tumor (secreting), also refer to the appropriate page (Acromegaly, Cushing's, etc.) for additional requirements.	
C. Pituitary Adenoma (micro or macro) Treated with surgery or radiation	After completion of <u>all</u> treatment (including radiation therapy, if applicable), allow a 6-month recovery period before submitting the following to the FAA for review: 1. All items in Row B 2. Hospital records pertaining to surgical resection: a. History and Physical b. Discharge Summary c. Operative Reports d. Pathology reports Note: If functional tumor (secreting), also refer to the appropriate page (Acromegaly, Cushing's, etc.) for additional requirements.	DEFER Submit the information to the FAA for a possible Special Issuance.