

## ESOPHAGEAL VARICES

All Classes  
(Updated 02/25/2026)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
<p><b>A.</b></p> <p>Small varices (grade 1 or F1) without red signs</p> <p>If the underlying cause is identified (e.g., <a href="#">cirrhosis</a>), see that page.</p>	<p>Submit the following for FAA review:</p> <ol style="list-style-type: none"> <li>1. A <b>current, detailed Clinical Progress Note</b> generated from a clinic visit with a board-certified <b>Gastroenterologist</b>, no more than 90 days prior to the AME exam. It must include: <ul style="list-style-type: none"> <li>• A detailed summary of the history of the condition;</li> <li>• Current medications, dosage, and side effects (if any);</li> <li>• Physical exam findings;</li> <li>• Results of any testing performed;</li> <li>• Diagnosis; assessment and plan;</li> <li>• Prognosis; and follow-up.</li> </ul> </li> <li>2. The Clinical Progress Note <b>must specifically include</b>: <ul style="list-style-type: none"> <li>• Underlying cause of the varices;</li> <li>• Dates of any bleeding events, treatment, and outcome;</li> <li>• If no history of bleeding events, that should be stated;</li> <li>• Size, grade, and location of varices;</li> <li>• ANY red signs (e.g., red wale markings, erythematous raised spots, also referred to as cherry red spots); and</li> <li>• Prognosis for risk of bleeding.</li> </ul> </li> <li>3. Report from the <b>most recent upper endoscopy study/EGD</b> (esophagogastroduodenoscopy)</li> <li>4. <b>Labs</b>: <ul style="list-style-type: none"> <li>• Complete Blood Count (CBC) performed within the past 90 days; and</li> <li>• Copies of other labs already performed or clinically indicated.</li> </ul> </li> <li>5. Results of any other testing already performed or clinically indicated.</li> </ol>	<div style="background-color: red; height: 15px; width: 100%;"></div> <p style="text-align: center;"><b>DEFER</b></p> <p style="text-align: center;">Submit the information to the FAA for a possible Special Issuance</p> <p style="text-align: center;">Annotate (elements or findings) in Item 60.</p>

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
<p><b>B.</b></p> <p><b>Any history of</b> bleeding esophageal varices, after adequate treatment</p> <p>See corresponding page if underlying cause is identified (e.g., cirrhosis)</p>	<p>After a <b>6-month</b> recovery period, submit the following for FAA review:</p> <ul style="list-style-type: none"> <li>• All items in row A</li> </ul> <p>If less than 6 months recovery period, go to row C.</p>	<div style="background-color: red; height: 20px; width: 100%;"></div> <p style="text-align: center;"><b>DEFER</b></p> <p style="text-align: center;">Submit the information to the FAA for a possible Special Issuance</p> <p>Annotate (elements or findings) in Block 60.</p>
<p><b>C.</b></p> <p>Enlarged or large varices (Grade 2-3 or F2-3)</p> <p>OR</p> <p>Varices of ANY size WITH red signs</p> <p>OR</p> <p>History of bleeding esophageal varices, within the past 6 months</p> <p>OR</p> <p>Disease process inadequately controlled</p>	<p>Submit the following for FAA review:</p> <ol style="list-style-type: none"> <li>1. The <b>most recent</b> detailed Clinical Progress Note generated from a clinic visit with a board-certified <b>Gastroenterologist</b>. <ul style="list-style-type: none"> <li>It must include: <ul style="list-style-type: none"> <li>• A detailed summary of the history of the condition;</li> <li>• Current medications, dosage, and side effects (if any);</li> <li>• Physical exam findings;</li> <li>• Results of any testing performed;</li> <li>• Diagnosis; assessment and plan;</li> <li>• Prognosis; and follow-up.</li> </ul> </li> </ul> </li> <li>2. The Clinical Progress Note <b>must specifically include:</b> <ul style="list-style-type: none"> <li>• Underlying cause of the varices;</li> <li>• Dates of any bleeding events, treatment, and outcome;</li> <li>• If no history of bleeding events that should be stated;</li> <li>• Size, grade, and location of varices</li> <li>• ANY red signs (e.g., red wale markings, erythematous raised spots, also referred to as cherry red spots); and</li> <li>• Prognosis for risk of bleeding.</li> </ul> </li> <li>3. Report from the <b>most recent upper endoscopy study/EGD</b> (esophagogastroduodenoscopy).</li> </ol>	<div style="background-color: red; height: 20px; width: 100%;"></div> <p style="text-align: center;"><b>DEFER</b></p> <p style="text-align: center;">Submit the information to the FAA for a possible Special Issuance</p> <p>Annotate (elements or findings) in Block 60.</p>