HORMONE REPLACEMENT THERAPY (HRT) - Female

All Classes

(Updated 04/29/2026)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
A. Hormone replacement (e.g. estrogen, progesterone, or testosterone) near physiologic levels	If the AME can determine there are • no side effects which would interfere with flight duties, • no history of VTE (PE/DVT) • no history or increased risk of stroke, severe migraine, or uncontrolled HTN Note: if the AME determines the individual is at increased risk for VTE (e.g. hypercoagulable condition), go to row B.	**ISSUE** Summarize in Item 60.
B. All others If history of VTE or stroke, see that page	Submit the following for FAA review: 1. A current, detailed Clinical Progress Note generated from a clinic visit with the **treating physician** no more than 90 days prior to the AME exam. It must include: • A detailed summary of the history of the condition; • Current medications, dosage, and side effects (if any); • Physical exam findings; • Results of any testing performed; • Diagnosis; • Assessment and Plan; • Prognosis and Follow-up. 2. It must specifically include if any history of: ○ Hypercoagulable condition ○ VTE (PE/DVT) or stroke. 3. Labs or imaging already performed or determined necessary by the treating provider.	**DEFER** Submit the information to the FAA for a possible Special Issuance. Summarize elements or findings in Item 60.