

HYPOPARATHYROIDISM

All Classes
(08/28/2024)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
<p>A.</p> <p>Post-surgical <u>hypoPARA</u>thyroidism</p> <p><u>hypoPARA</u>thyroidism treated with surgery six (6) or more months ago</p> <p>AND</p> <ul style="list-style-type: none">• Condition resolved• Asymptomatic• No longer requires treatment.	<p>If the AME is able to determine through history and physical exam, the condition has resolved with surgery 6 or more months ago, is asymptomatic, and no longer requires treatment</p>	<p>ISSUE</p> <p>Annotate (elements or findings) in Item 60.</p>
<p>B.</p> <p>Post-surgical <u>hypoPARA</u>thyroidism treated with surgery less than six (6) months ago</p> <p>OR</p> <p>Treated at any time and remains symptomatic</p> <p>AND/OR</p> <p>Currently requires treatment with medications and/or supplements (e.g., calcium carbonate or calcium citrate)</p>	<p>Submit the following:</p> <ol style="list-style-type: none">1. A current, detailed Clinical Progress Note generated from a clinic visit with the treating SURGEON no more than 90 days before the AME exam.2. It must include:<ul style="list-style-type: none">• 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.3. It must specifically include the indication for surgery and clinical interpretation of lab results below.	<p>DEFER</p> <p>Submit the information to the FAA for a possible Special Issuance</p> <p>Annotate (elements or findings) in Item 60.</p>

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
	<p>4. Lab performed no more than 90 days before the AME exam to include:</p> <ul style="list-style-type: none"> • Basic metabolic panel • Intact PTH • Magnesium • Phosphorus • Total serum or ionized calcium • 25-hydroxy vitamin D <p>5. Any other testing already performed or deemed clinically necessary by the treating physician.</p>	
<p>C.</p> <p>Chronic <u>hypoPARA</u>thyroidism due to autoimmune or other cause (treated or untreated)</p>	<p>Submit the following:</p> <ol style="list-style-type: none"> 1. A current, detailed Clinical Progress Note generated from a clinic visit with a board-certified ENDOCRINOLOGIST no more than 90 days before the AME exam. 2. It must include: <ul style="list-style-type: none"> • 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. 3. It must specifically include if any history (or not) of cardiac, renal (including nephrolithiasis) ,or skeletal manifestations; clinical interpretation of lab results below; and a detailed neurological exam. 4. Lab performed no more than 90 days before the AME exam to include: 	<div data-bbox="1216 743 1461 783" style="background-color: red; height: 19px; width: 151px;"></div> <p>DEFER</p> <p>Submit the information to the FAA for a possible Special Issuance</p> <p>Annotate (elements or findings) in Item 60.</p>

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
	<ul style="list-style-type: none"> • Basic metabolic panel • Intact PTH • Magnesium • Phosphorus • Total serum or ionized calcium • 25-hydroxy vitamin D • 24-hour urine calcium and creatinine excretion <p>5. Report from renal stone imaging of clinician's choice (to identify presence of stones).</p> <p>6. A current, detailed Clinical Progress Note generated from a clinic visit with a board-certified OPTHALMOLOGIST no more than 90 days before the AME exam. It must include:</p> <ul style="list-style-type: none"> • A detailed summary of the history of the condition; • Any history of cataracts and/or keratoconjunctivitis • Current medications, dosage, and side effects (if any); • Physical exam findings; • Results of any testing performed; • Diagnosis; • Assessment and plan; • Prognosis; and • Follow-up. <p>7. Any other testing already performed or deemed clinically necessary by the treating physician.</p> <p>Note: Neuropsychological evaluation that meets FAA Specifications for Neuropsychological Evaluations for Potential Neurocognitive Impairment may be required after review of the submitted information.</p>	