## Low Testosterone (Low T) Hypogonadism Status Summary

(Updated 09/25/2024)

Name	Birthdate
Applicant ID#	PI#

Please have your **urologist, endocrinologist, or treating physician** who manages your Low Testosterone (Low T) Hypogonadism provide the requested information in the space provided or submit a <u>current, detailed Clinical Progress Note</u> addressing each item.

- Pilots: Take this completed page (or equivalent current, Detailed Clinical Progress Note) and a copy of your current complete blood count (CBC) to your AME for review and electronic upload into your FAA file.
- ATCS: Submit the information to your Regional Flight Surgeon's Office.

1.	Is the individual <b>UNSTABLE</b> on current regimen, are treatment changes recommended, or are any concerning side effects present?	NO	YES
2.	Does the individual require treatment with phlebotomy?	NO	YES
3.	<b>Any</b> history of cardiovascular disease, thromboembolic events, or prostate cancer? (Note: Do not need to include well controlled Hypertension)	NO	YES
		54% or	55% or
4.	Results of a CBC within the previous 90 days shows hematocrit is:	less	more
5.	Do you have any clinical concerns about this individual?	NO	YES

Current medications OR attach current therapy (medication and dose):

- □ Anastrozole
- □ Human Chorionic Gonadotropin (HCG)
- Testopel
- □ Testosterone (oral or injectable)
- □ Clomiphene citrate (AME must confirm no visual side effects present.)
- Other

If any "YES or 55% or more" responses or change in your condition(s), you must also submit a current, detailed Clinical Progress Note addressing ALL items.

Endocrinologist, urologist, or physician name	Signature	Date of evaluation

## AME ACTIONS:

- If ALL items fall into the "NO"/CLEAR COLUMN, the individual may qualify for CACI.
- \*If ANY SINGLE ITEM falls into the "YES"/SHADED COLUMN, the AME MUST DEFER.
- The AME should note what aspect caused the deferral and explain any YES answers. Attach the most recent detailed Clinical Progress Note(s) and copies of any imaging reports already performed which addresses these items.

**NOTE:** This Status Summary is NOT required (clinical records may be submitted); however, it will help to streamline and significantly DECREASE FAA review time.