

MITRAL VALVE DISEASE

Mitral Regurgitation, Mitral Insufficiency, Mitral Valve Prolapse (MVP)

All Classes

(Updated 01/28/2026)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
<p>A.</p> <p>MILD or TRACE (based on ECHO results)</p> <ul style="list-style-type: none"> • Mitral Valve regurgitation; or • Mitral Valve insufficiency; or • Mitral Valve Prolapse (MVP); <p>AND</p> <p>Asymptomatic</p>	<p>The AME should review:</p> <ol style="list-style-type: none"> 1. Echocardiogram (Echo). Copies of the most recent 2-D and Doppler flow study report. <p>OR</p> <p>A clinical problem list or progress note which lists the echo findings as mild.</p> <p>If the AME can determine the condition is Asymptomatic and the valve disease is MILD:</p>	ISSUE Annotate this information in Block 60.
<p>B.</p> <p>MODERATE (based on ECHO results)</p> <ul style="list-style-type: none"> • Mitral Valve regurgitation; or • Mitral Valve insufficiency; or • Mitral Valve Prolapse (MVP); <p>AND</p> <p>Asymptomatic</p> <p>Note: For Asymptomatic individuals, if the ECHO report reads mild to moderate, use row B (Moderate). If it reads moderate to severe, use row C (Severe).</p>	<p>Submit the following for FAA review:</p> <ol style="list-style-type: none"> 1. A current, detailed Clinical Progress Note generated from a clinic visit with their treating physician or cardiologist no more than 90 days before the AME exam. <p><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></p> <ol style="list-style-type: none"> 2. It must include if they have been, or are currently symptomatic and the clinical interpretation of any studies performed (echo, ECG, stress test, etc.) 3. Echocardiogram (Echo). Copies of a 2-D and Doppler flow study report performed no more than 90 days prior to the AME exam. 	DEFER Submit the information to the FAA for a possible Special Issuance Annotate (elements or findings) in Block 60.

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	<p>4. 24-hour cardiac monitor performed no more than 90 days prior to the AME exam.</p> <p>≥ 24-hour cardiac monitor (such as a Holter, Zio Patch, etc.). It should have atrial and ventricular ectopic counts; hourly tabular data to include the longest pause duration and counts of all pauses > 2.0 or 2.5 seconds; heart rate (max, min, and average); other histograms and frequency graphs; and percentage of atrial fibrillation/flutter.</p>	
<p>C. SEVERE (based on ECHO results)</p> <ul style="list-style-type: none"> • Mitral valve regurgitation; or • Mitral valve insufficiency; or • Mitral Valve Prolapse (MVP); <p>OR</p> <p>Symptomatic (any severity) (e.g. Chest pain, palpitations, fatigue, shortness of breath, dizziness or pre-syncopal episodes)</p> <p>Note: For Asymptomatic individuals, if the ECHO report reads mild to moderate, use row B (Moderate). If it reads moderate to severe, use row C (Severe).</p>	<p>Submit the following for FAA review:</p> <ol style="list-style-type: none"> 1. A current, detailed Clinical Progress Note generated from a clinic visit with their treating physician or cardiologist no more than 90 days before the AME exam. <p><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></p> <ol style="list-style-type: none"> 2. It must include if they have been, or are currently symptomatic and the clinical interpretation of any studies performed (echo, ECG, stress test, etc.) 3. Echocardiogram (Echo). <i>Copies of a 2-D and Doppler flow study report performed no more than 12 months prior to the AME exam</i> <p>If valve surgery has been performed, see:</p> <ul style="list-style-type: none"> • Mitral Valve Repair Disposition Table or • Protocol for Cardiac Valve Replacement 	<p>DEFER</p> <p>Submit the information to the FAA for a possible Special Issuance</p> <p>Annotate (elements or findings) in Block 60.</p>