

**BENIGN PAROXYSMAL POSITIONAL VERTIGO (BPPV)**

All Classes  
(Updated 11/29/2023)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
<p><b>A. RESOLVED</b></p> <p><b>AND</b> symptoms lasted <b>1 year or less in total.</b></p> <p>(This may have been single or multiple episode[s]).</p>	<p>If the AME can determine:</p> <ul style="list-style-type: none"> <li>• The condition has fully resolved without sequelae (with favorable notes from PCP, ER, or ENT);</li> <li>• No symptoms or current problems that would interfere with flight duties;</li> <li>• Medications, if any, are discontinued; and</li> <li>• No hearing loss:</li> </ul> <p><b>Note:</b> Symptoms should be brief, mild, not disabling, and respond to repositioning.</p>	<p style="background-color: #008000; color: white; text-align: center; padding: 5px;"><b>ISSUE</b></p> <p><b>Annotate</b> this information in Block 60.</p>
<p><b>B. Multiple/intermittent episodes for which the combined time of symptoms/sickness lasted 1 year or more.</b></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 the treating <b>otolaryngologist (ENT)</b> or PCP <b>no more than 90 days prior</b> 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;</li> <li>• Assessment and plan (prognosis);</li> <li>• Follow-up; and</li> <li>• It must specifically include any underlying pathology, if found.</li> </ul> </li> <li>2. Copies of additional tests such as (ECOG, VEMP, MRI with Gadolinium of the cerebellopontine angle [CPA], etc.) performed as clinically indicated.</li> </ol>	<p style="background-color: #ff0000; color: white; text-align: center; padding: 5px;"><b>DEFER</b></p> <p>Submit the information to the FAA for a possible Special Issuance.</p> <p>Annotate elements or findings in Block 60.</p>

<p><b>C. Severe/persistent recurrent/refractory to treatment</b></p> <p>OR</p> <p>Requiring surgery at any time</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 the treating <b>ENT</b>, preferably with a <b>neurotologist</b> (a subspecialty of ENT/otolaryngology). The clinic visit should be <b>no more than 90 days prior</b> 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;</li><li>• Assessment and plan (prognosis); and</li><li>• Follow-up.</li></ul></li><li>2. If surgery was performed, copies of all clinic records including:<ul style="list-style-type: none"><li>• Operative notes;</li><li>• Hospital admission H&amp;P;</li><li>• Discharge summary; and</li><li>• Copies of any testing performed including CT/MRI/imaging.</li></ul></li></ol>	<p><b>DEFER</b></p> <p>Submit the information to the FAA for a possible Special Issuance.</p>
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