

COVID-19 INFECTIONS

All Classes
(Updated 10/26/2022)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
<p>A. Asymptomatic or mild infection;</p> <p>OR</p> <p>Prolonged outpatient course;</p> <p>OR</p> <p>Hospitalization, NOT Requiring intensive (ICU) care</p>	<p>Fully recovered. No residual symptoms or clinical findings.*</p> <p>See COVID-19 Medication</p> <p>See Anosmia Disposition Table - Item 26. Nose.</p>	<div style="background-color: #008000; height: 15px; width: 100%;"></div> <p>ISSUE if otherwise qualified with notation:</p> <p>“COVID. MO/YR resolved. No ICU, no sequelae.”</p> <p>All others: Go to Row B or C</p>
<p>B. Hospitalization, requiring ICU care with or without ventilator</p>	<p>Submit the following to the FAA for review:</p> <p>A current, detailed Clinical Progress Note from the treating physician no more than 90 days before the AME exam to include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Current functional status, treatment plan and prognosis; <input type="checkbox"/> Specialty consultations already performed (ex: neurology, cardiology, pulmonology, neuropsychology, etc.); <input type="checkbox"/> List of current medications and side effects, if any; <input type="checkbox"/> Hospital discharge summary; and <input type="checkbox"/> Copies of imaging reports and lab (if already performed). 	<div style="background-color: #ff0000; height: 15px; width: 100%;"></div> <p>DEFER*</p> <p>Note in Block 60:</p> <p>“Intensive care COVID-19 infection with full recovery.”</p> <p>Submit the information to the FAA for review.</p>
<p>C. All others</p> <p>Long COVID</p> <p>Post-COVID</p>	<p>Submit the following to the FAA for review:</p>	<div style="background-color: #ff0000; height: 15px; width: 100%;"></div> <p>DEFER**</p> <p>Note in Block 60:</p>

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
<p>Ongoing residual Signs and/or Symptoms* of confirmed COVID-19 such as:</p> <ul style="list-style-type: none"> • Cardiovascular dysfunction; • Cognitive symptoms or concerns; • Kidney injury; • Neurological dysfunction; • Psychiatric conditions (depression, anxiety, moodiness); • Respiratory abnormalities; and/or • Symptoms such as fatigue, shortness of breath, cough, arthralgia, or chest pain. 	<p>A current, detailed Clinical Progress Note from the treating physician no more than 90 days before the AME exam to include:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Description the sequelae and current functional status; <input type="checkbox"/> Treatment plan, and prognosis; <input type="checkbox"/> Specialty consultations performed (ex: neurology, cardiology, pulmonology, neuropsychology, etc.); <input type="checkbox"/> List of medications and side effects, if any; <input type="checkbox"/> Hospital discharge summary; (if applicable); and <input type="checkbox"/> Copies of imaging reports and lab (if already performed by treating physician). <input type="checkbox"/> 6MWT (in some cases) 	<p>“Currently experiencing sequelae from COVID-19 infection to include... (List the pathology or symptoms).”</p> <p>Submit the information to the FAA for review.</p>

* See [Anosmia Disposition Table](#) for evaluation criteria

****DEFER** - If the AME defers the exam, the FAA will request additional information, including hospitalization and treating physician records. After review, the FAA will determine eligibility for airman medical certificate or if special issuance or denial is indicated.