

**HEADACHE or MIGRAINE**

(Cluster, Tension, Ocular, Acephalgic, Ophthalmic, or Retinal)

All Classes

(Updated 01/25/2023)

<b>DISEASE/CONDITION</b>	<b>EVALUATION DATA</b>	<b>DISPOSITION</b>
<p>A. Stress Headache</p> <p>Tension Headache</p> <p>Controlled with OTC meds</p>	<p>If the AME can determine the condition is: mild and under control:</p> <ul style="list-style-type: none"> <li>• Average of less than two headache days per month;</li> <li>• Medications are acceptable (seldom requiring more than OTC analgesics);</li> <li>• Is not incapacitating (The individual has no symptoms that would interfere with flight duties.); and</li> <li>• Not associated with any neurological findings:</li> </ul>	<p><b>ISSUE</b></p> <p>Annotate this information in Block 60.</p>
<p>B. Migraine with aura (Classic migraine/ Common Migraine)</p> <p>OR</p> <p>Chronic tension</p> <p>OR</p> <p>Chronic daily</p> <p>OR</p> <p>Cluster</p> <p>OR</p> <p>Any history of a migraine which results in changes in vision (excluding migraine aura)</p> <p>(Older terms include acephalgic migraine, ocular migraine, ophthalmic migraine)</p>	<p><b>See the <a href="#">CACI-Migraine and Chronic Headache Worksheet</a>.</b></p> <p>This will require a <a href="#">current, detailed Clinical Progress Note</a> from the treating physician or neurologist.</p>	<p>If the pilot meets <b>all</b> CACI worksheet criteria and is otherwise qualified</p> <p><b>ISSUE</b></p> <p>with no time limitation</p> <p>Annotate the <b>correct CACI statement</b> in Block 60 and keep the required supporting information on file.</p>

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
<p>C. Complicated migraine, OR Post-traumatic headaches, OR Retinal migraine (previously called ocular migraine)*</p> <p>*This type spreads across the retina and the concern is amaurosis)</p>	<p>Submit the following for FAA review:</p> <ol style="list-style-type: none"> <li>1. A current, detailed neurological evaluation that meets <a href="#">FAA Specifications for Neurologic Evaluation</a> generated from a clinic visit with the <b>treating neurologist no more than 90 days before</b> the AME exam.</li> <li>2. <b>MRI* of the brain</b> performed <b>no more than one (1) year before</b> the AME exam.  *If an MRI is contraindicated or cannot be performed, the treating neurologist should discuss why. If CT is used, with or without contrast is per the treating neurologist.  Submit the interpretive report on paper and imaging on CD in DICOM readable format (there must be a file named 'DICOMDIR' in the root directory of the CD-ROM). Please verify the CD will display the images before sending. You may wish to retain a copy of all films as a safeguard if lost in the mail.</li> <li>3. Number of headache days per month per the applicant.</li> <li>4. <b>Other testing completed or</b> deemed necessary by the treating physician.</li> </ol> <p><b>Note:</b> If associated with a seizure – see seizure section.</p> <p>Chronic recurring headaches or pain syndromes often require medication for relief or prophylaxis, and, in some instances, the use of such medications is disqualifying because they may interfere with the individual's alertness and functioning.</p> <p>In some conditions, pain may be incapacitating.</p>	<p><b>DEFER</b></p> <p>Submit the information to the FAA for a possible Special Issuance.</p>