

MULTIPLE SCLEROSIS (MS)All Classes
(Updated 01/25/2023)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
A. Multiple Sclerosis	<p>After a minimum of 6 (six) months of clinical and radiological stability, submit the following for FAA review:</p> <ol style="list-style-type: none"> 1. A current, detailed neurological evaluation that meets FAA Specifications for Neurologic Evaluation generated from a clinic visit with the treating neurologist no more than 90 days before the AME exam. 2. MRI brain with and without gadolinium performed no more than 90 days before the AME exam. 3. MRI cervical and thoracic spine with and without gadolinium (most recent, if already performed). <p>For each MRI 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.</p> <ol style="list-style-type: none"> 4. Eye evaluation. A current, detailed Clinical Progress Note generated from a clinic visit with the treating ophthalmologist no more than 90 days before the AME exam. It must include a detailed summary of the history of any eye condition(s); current medications, dosage, and side effects (if any); physical exam findings; results of any testing performed; diagnosis; assessment and plan (prognosis); and follow-up. 	<div data-bbox="1109 273 1550 304" style="background-color: red; height: 15px; width: 100%;"></div> <p style="text-align: center;">DEFER</p> <p>Submit the information to the FAA for a possible Special Issuance.</p>

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	<ul style="list-style-type: none"> • It must specifically include an interpretation of the visual field testing; • Visual field testing (24-2 SITA standard) performed within the previous 90 days; and • Optical Coherence Tomography (OCT), if performed. Supply the color draft and printouts. <p>5. A Neuropsychological (NP) evaluation that meets FAA Specifications for Neuropsychological Evaluations for Potential Neurocognitive Impairment.</p> <p>6. Lab. The following testing, if already performed or clinically indicated:</p> <ul style="list-style-type: none"> • Rheumatological antibody screening (ANA, RF, Lyme titer); • Cerebrospinal Fluid (CSF) testing; • All evoked potential testing; and • NMO antibody panel (such as anti AQP4, anti MOG) in cases with spinal involvement, optic neuritis, or concerns for NMO-SD. (Submit most recent test result.) <p>7. Any other testing already performed or deemed clinically necessary by the treating physician.</p>	