

NEURALGIA

(Trigeminal Neuralgia, Post Herpetic Neuralgia)

All Classes
(Updated 01/25/2023)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
A1. Post Herpetic Neuralgia, Occipital Neuralgia Fully resolved AND off medications	If the AME can determine that the Post herpetic or occipital neuralgia <ul style="list-style-type: none"> Has fully resolved; Medications have been discontinued; and Individual has no symptoms that would interfere with flight or safety related duties: 	<div style="background-color: green; color: white; text-align: center; padding: 5px;">ISSUE</div> <p>Annotate this information in Block 60.</p> <p>If no AME explanation the individual may be asked to provide documentation.</p>
A2. Trigeminal Neuralgia Symptom free and treatment completed 5 or more years ago AND did NOT require surgery, gamma knife, or other procedure	If the AME can determine that the Trigeminal Neuralgia <ul style="list-style-type: none"> Fully resolved 5 or more years ago; Does not require any medication; Was never treated with surgery; and Individual has no symptoms that would interfere with flight or safety related duties: <p>If the AME is unable to determine the above, request a current, detailed Clinical Progress Note from the treating physician. If medications are currently used, the AME should check with the Do Not Issue - Do Not Fly list.</p>	<div style="background-color: green; color: white; text-align: center; padding: 5px;">ISSUE</div> <p>Annotate this information in Block 60.</p> <p>If no AME explanation the individual may be asked to provide documentation.</p>
B. Trigeminal Neuralgia Symptomatic, unresolved OR requiring treatment within the past 5 years	Submit the following for FAA review: <ol style="list-style-type: none"> 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. It must specifically include medications prescribed for this condition. Include start and stop dates; dosages, and side effects (if any). 	<div style="background-color: red; color: white; text-align: center; padding: 5px;">DEFER</div> <p>Submit the information to the FAA for a possible Special Issuance.</p>

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	<p>3. Imaging performed at any time after symptoms started:</p> <ul style="list-style-type: none"> • MRI brain • MRA head • Any other imaging (such as CT, MRI, CTA, MRA, or cerebral catheter angiography/cath angio of the head) already performed. • Submit BOTH 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>Note: If due to Multiple Sclerosis or other condition - see that section.</p>	
<p>C. Trigeminal Neuralgia</p> <p>Treated with surgery or gamma knife (ever)</p>	<p>Submit the following for FAA review:</p> <ol style="list-style-type: none"> 1. Row B evaluation data 2. Brain imaging performed AFTER the procedure. 3. Hospital records. Include these specific hospital records for any hospitalization, surgery, or procedures related to this condition. <ul style="list-style-type: none"> • Admission History and Physical (H&P); • Emergency Medical Services (EMS)/ambulance run sheet (if applicable); • Hospital consultant report(s) (such as neurology, cardiology, internal medicine, or other specialists); 	<div data-bbox="1143 1077 1425 1119" style="background-color: red; color: black; text-align: center; padding: 5px;">DEFER</div> <p>Submit the information to the FAA for a possible Special Issuance.</p>

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	<ul style="list-style-type: none"> • Hospital discharge summary. (Typically, the patient portal notes or after visit summary (AVS) that can be printed from an electronic medical record are NOT sufficient for pilot medical certification purposes.); • Lab report(s) including all drug or alcohol testing performed; • Operative/procedure report(s); • Pathology report(s); and • Radiology reports. The interpretive report(s) of all diagnostic imaging (CT, MRI, X-ray, ultrasound, or others) performed. • DO NOT submit miscellaneous hospital records such as flowsheets, nursing notes, physician orders, or medication administration records. <p>For all imaging, submit BOTH 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> <p>Note: If the applicant has a large volume of records, it is recommended that they bring them to the exam so the AME can assist in determining what is miscellaneous and not needed by the FAA.</p>	