

FAA CERTIFICATION AID – SSRI Recertification/ Follow Up Clearance (Page 1 of 2)

(Updated 03/29/2017)

The following information is to assist your treating physician/ provider who may be unfamiliar with FAA medical certification requirements. It lists the ABSOLUTE MINIMUM information required by the FAA to make a determination on a medical certificate for airmen or medical clearance for FAA ATCS. You should strongly consider taking a **copy to each evaluator so they understand what specific information is needed in their report to the FAA**. If each item is not addressed by the corresponding provider there may be a **delay** in the processing of your medical certification until that information is submitted. Additional information such as clinic notes or explanations should also be submitted as needed. All reports must be **CURRENT** (within the last 90 days) for FAA purposes.

REPORT FROM	REQUIRED INTERVAL	MUST SPECIFICALLY ADDRESS OR STATE THE FOLLOWING (SSRI Recertification/ Follow Up Clearance)
HIMS AME All classes and FAA ATCS	Every 6 months or as stated in the airman Authorization letter Or FAA ATCS Special Consideration Letter	<ol style="list-style-type: none"> 1. Must be a face-to-face, in person evaluation every 6 months. 2. Summarize findings from additional interim evaluations that were performed by any other venue (phone/ video/ email), either at the AME's discretion or as required by the Authorization or Special Consideration Letter (every 1-3 months). 3. Summarize your aeromedical impression and evaluation as a HIMS AME based on the face-to-face evaluation AND review of the supporting documents. 4. If you do not agree with the supporting documents, or if you have additional concerns not noted in the documentation, please discuss your observations or concerns. 5. State if the airman/FAA ATCS meets all the requirements of the Authorization Letter/Special Consideration Letter or describe why they do not. 6. Review and comment if there has been any change in the dose, type, or discontinuation of medication stated in the Authorization Letter/ Special Consideration Letter. 7. Do you recommendation continued Special Issuance/Special Consideration in this airman/FAA ATCS? 8. Agreement to continue to serve as the airman/FAA ATCS's HIMS AME and follow this airman/FAA ATCS per FAA policy. 9. Agreement to immediately notify the FAA (for airmen: 405-954-4821; for FAA ATCS contact the RFS office) if there is any change in condition, deterioration in psychiatric status or stability, if the medication dosage has changed, or there is a plan to reduce or discontinue any medication. 10. Using the HIMS AME Checklist –SSRI Recertification/ Follow Up Clearance, comment on any items that fall into the shaded category. 11. Submit the SSRI check list, your HIMS AME written report, and all required supporting documentation that you reviewed with your package.
PSYCHIATRIST INTERIM HISTORY REPORT (or treating physician as noted in the Authorization letter) If the prescribing physician is not a psychiatrist, items #2-7 must be submitted from the prescribing physician IN ADDITION TO the psychiatrist report.	Every 6 months or per Authorization Letter Or FAA ATCS Special Consideration Letter	<ol style="list-style-type: none"> 1. Summarize clinical findings and status of how the airman/FAA ATCS is doing. 2. Have there been any new symptoms or hospitalizations? 3. Did a change in dose or medication occur or is one recommended or anticipated? 4. Have there been any clinical concerns or changes in treatment plan? 5. Has the clinical diagnosis changed? 6. Agreement to immediately notify the FAA (for Airmen: 405-954-4821; for FAA ATCS: contact the RFS office) if there is any change in the airman/FAA ATCS's condition, dosage, change in medication or if the medication is stopped. 7. Interval treatment records such as clinic or hospital notes should also be submitted.

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REPORT FROM	REQUIRED INTERVAL	MUST SPECIFICALLY ADDRESS OR STATE THE FOLLOWING (SSRI Recertification/ Follow Up Clearance)
CLINICAL PSYCHOLOGIST OR NEUROPSYCHOLOGIST CogScreen Results (or neurocognitive testing as required per the Authorization Letter or Special Consideration Letter) AND Neurocognitive evaluation	1 st and 2 nd class: Every 12 months or per Authorization Letter FAA ATCS: Every 12 months or per the Special Consideration Letter 3 rd class: Every 24 months or per Authorization Letter	CogScreen information results that must be addressed in the narrative: 1. Specify the norm used: <ul style="list-style-type: none"> Major Carrier (age-corrected); or Regional Carrier (NOT age-corrected) [also acceptable for GA pilots]; or General Aviation Pilot Norms (age-corrected) 2. Specify Session Number administered (listed on Page 1 and Page 2 of printout). Session 1 for initial test <i>only</i> ; retests should be Session 2 or incrementally higher. Clinical report MUST specifically comment on the following CogScreen items. If they have changed or are not normal, the narrative must discuss these findings and if they are of any clinical or aeromedical concern: 1. Any increase in LRPV (page 4) 2. Taylor Factor scores (page 5) 3. Base Rate for Speed, Accuracy, or Process (page 4) The psychologist or neuropsychologist report should also specifically mention: 1. The overall neurocognitive status of the airman/FAA ATCS. 2. Any adverse neurocognitive findings or a decline in condition. 3. If additional focused neuropsych testing is/was required or recommended. If any additional testing was performed, the report must explain why the testing was performed, the results, and how that fits into the airman/FAA ATCS's overall neurocognitive status. 4. Any other concerns or absence of concerns. 5. Agreement to immediately notify the FAA (for Airmen: 405-954-4821; for FAA ATCS: contact the RFS office) if there is any change or deterioration in the psychological status or stability in the airman/FAA ATCS's condition. 6. Submit the entire CogScreen report (approximately 13 pages) and any additional testing (if performed).
CHIEF PILOT AIRLINE MANAGEMENT DESIGNEE OR AIR TRAFFIC MANAGER (ATM) 1 st and 2 nd class pilots who have been employed by an air carrier within the last 2 years or FAA ATCS employee 3 rd class pilots or ATCS Applicant for hire – Not applicable	1 st , 2 nd class, and FAA ATCS: Every 3 months (bring cumulative reports to AME evaluation every 6 months.)	Report must address: For Airman: <ol style="list-style-type: none"> The airman's performance and competence. Crew interaction. Mood and behavioral changes . Any other concerns. For FAA ATCS: <ol style="list-style-type: none"> Issues related to safety and safe operations. Interaction with other FAA ATCSs. Mood and behavioral changes. Any other concerns.
ADDITIONAL PROVIDERS Additional reports for SSRI or any other condition noted in Authorization or FAA ATCS Special Consideration Letter.	Every 6 months or per Authorization or FAA ATCS Special Consideration Letter	Varies. See the Authorization Letter or Special Consideration Letter. Include any drug testing results, therapist follow up reports, social worker reports, etc. If the prescribing physician is NOT a psychiatrist, reports from the prescribing physician and their clinic office notes must be submitted in addition to the required psychiatric evaluations (see above). If the airman/FAA ATCS has other non-SSRI conditions that require a special issuance/consideration, those reports should also be submitted according to the Authorization or FAA ATCS Special Consideration Letter.