

Protocol for Cardiovascular Evaluation (CVE)

(Updated 03/27/2024)

An FAA CVE is comprised of **Cardiology Evaluation + Lab Testing**

Cardiology Evaluation should be submitted in the form of a current, detailed Clinical Progress Note and include:

- A detailed summary of the history of any cardiac or co-morbid condition(s);
- Personal and family medical history including premature heart disease;
- Current medications, dosage, and side effects (if any);
- Clinical cardiac and general physical exam findings;
- Results of any testing performed;
- Diagnosis;
- Assessment and plan (prognosis); and
- Follow-up.

It must specifically include:

- If hospitalization or procedure, include a summary of events that led to the cardiac intervention(s) or treatment;
- A statement regarding the individual's functional capacity and if they have been cleared to return to regular activity;
- Attempts to meet the guidelines for modifiable risk factors (such as lipid levels, aspirin use, beta-blocker use, and smoking cessation per the American College of Cardiology and American Heart Association); and
- Prognosis for incapacitation.

Labs must be current (performed no more than 90 days before the AME exam) and include:

- Hemoglobin A1c (preferred) or fasting blood sugar (FBS);
- Blood lipid profile with total cholesterol, HDL, LDL, and triglycerides; and
- INR monthly readings if on warfarin (Jantoven)

Note: CVE does not include stress testing. See the corresponding disposition table or FAA letter to identify which type of stress test (if any) is required.