## Detailed Clinical Progress Note Guidelines (Updated 2/17/2023)

The FAA requires a current, detailed Clinical Progress Note to determine your eligibility for a FAA Medical Certificate. If you ask your physician's office for a copy of your progress note, they may direct you to your patient portal to print out "notes" or an "After Visit Summary (AVS)." Patient Portal notes or an AVS that do not meet the criteria listed below for a detailed Clinical Progress Note are NOT sufficient for FAA purposes. Submitting incorrect or incomplete information will delay your medical certification review. To help avoid this, please review the information provided below.

You may wish to share this with your treating physician so they are aware the information is reviewed by FAA medical personnel including physicians with expertise in aerospace medicine and a variety of specialties/subspecialties (such as ENT, ophthalmology, surgery, neurology, neuropsychology, family medicine, internal medicine, and cardiology).

WHEN YOU SEE:	IT MEANS THIS TO FAA Aerospace Medicine:		
CURRENT	To be "current," in MOST CASES, the detailed Clinical Progress Note should be from an evaluation in which you saw your		
	treating physician no more than 90 days ago.		
	(*FAA ATCS clearance exams correlate with birth month, so the treating physician evaluation should be within 90 days of the		
	birth month.)		
DETAILED	This information is standard in most clinical progress notes. [e.g., Medicare standards]		
	It must include the following items:		
In some instances, the	A summary of the history of the condition:		
specialty of the physician will be	<ul> <li>A summary of the history of the condition;</li> <li>Current medications, dosages, and side effects (if any);</li> </ul>		
specified (ex.	Clinical exam findings:	(h any),	
cardiologist or	<ul> <li>Results of any testing performed;</li> <li>Diagnosis;</li> </ul>		
neurologist, etc.)			
	Assessment and Plan;		
	Prognosis [this item may not be on a standard progress note, make sure your physician adds this		
	information]; and		
	Follow-up		
	Please note: A letter stating, "Mr. Smith is ok to fly" (or any other simple note) is NOT a current detailed Clinical Progress Note		
	and is NOT acceptable.		
CLINICAL	Describes findings from an actual clinical encounter (usually in office).		
PROGRESS NOTE	This is part of the actual medical record that details events of your office or hospital visit.		
You may also see this	Physicians and other providers understand this term. It m	hav he called a SOAP note or natient note. It has specific components	
called a "current status	Physicians and other providers understand this term. It may be called a SOAP note or patient note. It has specific components (see "Detailed" above).		
report" or "status			
report" in current FAA	A patient "after visit summary" or "patient summary" are N	IOT sufficient for FAA purposes. Here is how to tell the difference	
Guidance or a previous	between patient portal notes or AVS vs a current, details	ed Clinical Progress Note:	
letter. Any reference to a "status report" equals		✓ Current, Detailed Clinical Progress Note	
the criteria listed on this	Ready immediately after the visit.	May take some time (days) for the physician to review and sign.	
sheet.	Accessible on your patient portal.	May be accessible in your patient portal, however, this depends	
	Accessible on your patient portain	on your physicians Electronic Medical Record (EMR) system.	
	Title = "After Visit Summary"	Title = "Progress Notes" or "View notes"	
	Page Contents:	Page Contents:	
	Blood pressure, weight, pulse;	Blood pressure, weight, pulse;	
	Instructions ("pick up medications, return in 6	Instructions ("pick up medications, return in 6	
	months," etc.); Reason for visit, list of medications given, or tests	months," etc.);  Reason for visit, list of medications given, or tests	
	ordered; and	ordered:	
	Medication allergies, immunization history, etc.	Medication allergies, immunization history, etc.;	
		PLUS:	
		Review of body systems;  Rhaded area for fines.	
		Physical exam findings     (Ex. constitutional, cardiovascular, skin, etc.);	
		List of all current medication(s) and dosages;	
		Assessment and Plan (prognosis); and	
		ICD-10 codes	
	You do not need to sign a release to obtain.	You may have to sign a release with your physician's office to	
		get a copy (printed or released to you in your EMR).	
"IT MUST	If this language is in your letter, it is to highlight SPECIFIC	items (that may or may not be part of a standard current detailed	
SPECIFICALLY	If this language is in your letter, it is to highlight SPECIFIC items (that may or may not be part of a standard current detailed Clinical Progress Note). Please ensure your physician addresses these specific items important for medical certification		
INCLUDE"	or clearance.		