## **Pre-Diabetes Worksheet**

(Metabolic Syndrome, Impaired Fasting Glucose, Insulin Resistance, Glucose Elevation/Intolerance, Polycystic Ovary Syndrome)

The Examiner must review a current status report by the treating physician and any supporting documents to determine the applicant's eligibility for certification. If the applicant **meets ALL the acceptable certification criteria** listed below, the Examiner can issue. Applicants for first- or second- class must provide this information annually; applicants for third-class must provide the information with each required exam.

| AME MUST REVIEW   | ACCEPTABLE CERTIFICATION CRITERIA   |
|---|---|
| Treating physician finds the condition stable on current regimen and no changes recommended   | []Yes   |
| Symptoms associated with diabetes   | [ ] None  |
| Hypoglycemic events (symptoms or glucose less than or equal to 70 mg/dl) within the past 12 months.   | [ ] None  |
| Fasting blood sugar   | [ ] Less than 126 mg/dl   |
| Current A1C   | [ ] Within last 90 days<br>[ ]Less than or equal to 6.5 mg/dL   |
| Oral glucose tolerance test, if performed   | [ ] Less than 200 mg/dl at 1 hour<br>[ ] N/A  |
| Medications for condition   | [ ] None<br>[ ] Metformin only (with no side effects)   |
| AME MUST NOTE in Block 60 either of the following:  |   |
| [ ] Airman meets certification criteria for pre-diabetes (Metabolic Syndrome, Impaired Fasting Glucose, Insulin Resistance, Glucose Elevation/Intolerance, Polycystic Ovary Syndrome).  |   |
|   | ssuance for this condition and now meets the regular re-diabetes (Metabolic Syndrome, Impaired Fasting Glucose, Insulin ce, Polycystic Ovary Syndrome). |
| [ ] Airman does NOT meet certification criteria for pre-diabetes (Metabolic Syndrome, Impaired Fasting Glucose, Insulin Resistance, Glucose Elevation/Intolerance, Polycystic Ovary Syndrome). I have deferred this exam. (Mail the supporting documents to FAA identifying which criteria were not met.) |   |

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