LOGAL PORM WWW.F	
LOCAL FORM TITLE  W.S. HTN. (Hymostopsian Workshoot)	
WS-HTN (Hypertension Worksheet)	
REQUIRING DOCUMENT (Title and Number)	ISSUANCE DATE
Aeromedical Reference and Waiver Guide	30 August 2015
	VALUE II A A DI USI CAUL
Submit this completed form, <b>electronic Aeromedical Summary</b> (you may use N/A in fields other than Disqualifying Conditions fields) and current physical exam to NAMI Code 53HN via AERO. If desired, contact NAMI Code 53HN to expedite	
* *	essing.
NEW WAIVER REQUEST	CONTINUATION REQUEST
Health record reviewed and aeromedical status	Health record reviewed and aeromedical status
checked. Member is in compliance with all previous	checked. Member is in compliance with all previous
waivers and/or physical exam submission requirements.	waivers and/or physical exam submission requirements.
Cardiac Risk Factors have been reviewed and	Cardiac Risk Factors have been reviewed and
evaluated. Member has been counseled on risks and	evaluated. Member has been counseled on risks and
current treatment guidelines. Consider 10-year risk	current treatment guidelines. Consider 10-year risk
calculation: <a href="http://www.cvriskcalculator.com/">http://www.cvriskcalculator.com/</a>	calculation: <a href="http://www.cvriskcalculator.com/">http://www.cvriskcalculator.com/</a>
Effect of therapy:	
3-5 Day BP Average (with therapy):	
Yes No	Yes No
*Is BP consistently <140/90 with therapy?	*Is BP <u>consistently</u> <140/90 with therapy?
*Is fundoscopic exam normal?	Lab review:
Lab review:	*Is Chem 7/BMP normal?
*Is Chem 7/BMP normal?	*Is CBC normal?
*Is CBC normal?	*Is TSH normal?
*Is TSH normal?	*Is UA NEG for protein, blood, glucose?
*Is UA NEG for protein, blood, glucose?	*Is ECG NOT suggestive of LVH?
*Is ECG NOT suggestive of LVH?	
	Diagnosis:
Diagnosis:	I10 Benign essential hypertension
I10 Benign essential hypertension Z79.899 Long term use of medications	Z79.899 Long term use of medications
Medication:	Medication:
Wedication.	Treditation.
Aeromedical disposition:	Aeromedical disposition:
NPQ/AA DIF , WR annual submission	NPQ/AA DIF , WR-continue annual submission
Member's commanding officer is aware of and concurs	Member's commanding officer is aware of and concurs
with waiver recommendation. Yes No	with waiver recommendation.
Member issued 90 day up chit via LBFS?	YY/41 15-14-1
177741 1° 4 1° 4 1° 4 1° 4 1° 4 1° 4 1°	With your digital signature, you are certifying that all
With your digital signature, you are certifying that all	above is true. Errors/omissions may be brought to attention of your clinical supervisor and/or privileging
above is true. Errors/omissions may be brought to attention of your clinical supervisor and/or privileging	authority.
authority.	Flight Surgeon digital signature:
Flight Surgeon digital signature:	
6 6 6 6	
	Any other comments should be included in discussion
Any other comments should be included in discussion	section of AERO AMS.
section of AERO AMS.	*If no, or if member <u>previously grounded</u> by Waiver Authority, do not use this worksheet, fully describe case in AMS in AERO,
*If no, or if member <u>previously grounde</u> d by Waiver Authority, do not use this worksheet, fully describe case in AMS in AERO, LBFS	member is med down until NAMI review completed.
not use this worksheet, runy describe case in Avis in AEAO, EBFS	
Date	Name
Aviation Duty DOD ID #	
Category: Treatment Page 1 of 1	