## MALIGNANCIES

## COLON CANCER/ COLORECTAL CANCER

All Classes (Updated 07/18/2023)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
A. Non metastatic - treatment completed <u>5 or more years ago</u>	If no recurrence or ongoing treatment:	<b>ISSUE</b> Summarize this history in Block 60.
<b>B.</b> Pedunculated cancerous polyp (Adenocarcinoma) removed by <b>colonoscopy</b> <u>Less than 5 years ago</u>	Review current, detailed Clinical Progress Note. If it shows: • Local lesion only (TNM stage 0 or I); • Complete resection with no additional treatment needed; • Follow up is annual or less frequent colonoscopy; • No clinical concerns.	<b>ISSUE</b> Summarize this history in Block 60.
<b>C.</b> Non metastatic and no High- Risk features*	Follow CACI worksheet.	Follow the <u>CACI-Colon</u> <u>Cancer/Colorectal</u> <u>Cancer Worksheet</u> Note in Block 60
Treatment completed Less than 5 years ago		Note in Block 60
D. HIGH RISK features* Or Metastatic disease (Refers to distant metastatic disease such as: lung, liver, lymph nodes, peritoneum, brain.)	Submit the following to the FAA for review:         Status report or treatment records from treating oncologist that provide the following information:         Initial staging;         Including recurrence(s);         Incloation(s) of         <	DEFER Submit the information to the FAA for a possible Special Issuance. Follow-up Special Issuance – Will be per the airman's authorization letter

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
	<ul> <li>Treatment records including clinic notes.</li> <li>Operative notes and discharge summary, if applicable.</li> <li>Colonoscopy reports.</li> <li>Pathology reports.</li> <li>Results of MRI/CT or PET scan reports that have already been performed (In some cases, the actual CDs will be required in DICOM format for FAA review.)</li> <li>Lab reports.         <ul> <li>CBC and CEA performed within the last 90 days;</li> <li>Previous tumor marker lab results (such as CEA).</li> </ul> </li> </ul>	

\*Notes: High-Risk features for FAA purposes include the following. These DO NOT CACI qualify:

- CEA increase or CEA did not decrease with colectomy;
- Chemotherapy ever (including neoadjuvant);
- Familial Adenomatous Polyposis (FAP);
- High risk pathology per the treating oncologist;
- Incomplete resection or positive margins;
- Lynch syndrome;
- Metastatic disease (Refers to distant metastatic disease such as: lung, liver, lymph nodes, peritoneum, brain)
- Pathology of any type other than adenoma (ex: lymphoma, GIST, carcinoid)
- Radiation therapy;
- Recurrence; and or
- Sessile polyp with invasive cancer surgically treated only, no additional chemo/radiation.

An applicant with an ileostomy or colostomy may also receive FAA consideration. A report is necessary to confirm that the applicant has fully recovered from the surgery and is completely asymptomatic.

In the case of a history of bowel obstruction, a report on the cause and present status of the condition must be obtained from the treating physician.

## **OTHER MALIGNANCIES**

All Classes

(Updated 07/18/2023)

DISEASE/CONDITION	EVALUATION DATA	DISPOSITION
Other Malignancies	Submit all pertinent medical records, operative/ pathology reports, current oncological status report, including tumor markers, and any other testing deemed necessary.	Requires FAA Decision