

Mitral Valve Repair Status Report Worksheet

Worksheet is to be completed by the patient's treating provider.

Patient Name: _____ DOB: _____

The patient had mitral valve repair surgery 5 or more years ago? Y N

The reason for Mitral Valve Repair was:

For primary mitral valve disease? Y N

Secondary to:

Mitral regurgitation? Y N

Coronary heart disease? Y N

Myocardial infarction? Y N

Ischemic disease? Y N

Cardiomyopathy? Y N

The condition is stable? Y N

The patient is asymptomatic and stable? Y N

Does the patient have any other current cardiac conditions? Y N

Has the patient developed any new conditions such as arrhythmias or complications that would affect cardiac function? Y N

Does the patient require more than a routine annual follow up? Y N

Is additional surgery anticipated or recommended? Y N

Does the patient have a history of:

Connective tissue disorder (Marfan's or Ehlers-Danlos, etc.)? Y N

Lung disease: COPD (moderate or higher)? Y N

Pulmonary hypertension? Y N

Other cardiac disease:

Congestive heart failure? Y N

Ischemia? Y N

Other valve disease? Y N

If YES, what other valve disease? _____

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Expert FAA Medical Assistance!

Clinic Locations:

Wisconsin: 10520 W. Bluemound Rd, Suite 206
Milwaukee, WI 53226

Ohio: 7071 Corporate Way, Suite 105
Centerville, OH 45459

Mailing Address:

1817 Highland Dr. #1135
Grafton, WI 53024
Tel: 414-419-3300
Fax: 210-640-1938

Most recent Echocardiogram:

Was performed within the last 24 months?	Y	N
Shows:		
Mitral valve regurgitation?	Y	N
If YES, is it mild?	Y	N
Other abnormalities such as:		
Dilated aorta greater than 4 cm?	Y	N
Hypertrophic or other cardiomyopathy?	Y	N
Left atrial enlargement?	Y	N
Aortic regurgitation/insufficiency (any severity)	Y	N
Regurgitation of any valve moderate or higher?	Y	N
Structural abnormalities (dilated ventricle/atria, etc.)?	Y	N
If YES, what is abnormal? _____		
Other abnormalities? _____	Y	N
If YES, what abnormalities? _____		

Is the patient's Mitral Valve Repair being treated with an anticoagulant other than aspirin?	Y	N
Is any other valve involved besides the mitral valve?	Y	N

Treating Physician's Signature Physician's Printed Name Date

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