Catheter ablation for WPW or AVNRT (note 1) → Unfit for 3 months

Cardiology review (note 2)
- Shall require:
  - Exercise ECG
  - 24 Hour ECG
  - Echocardiogram
- May require (notes 3/4):
  - Electrophysiological studies (EPS)

No EPS (note 4)

Class 1 OML
- Class 2 unrestricted

Follow-up (note 4)

Class 1/2 unrestricted

NOTES:
1) Catheter ablation for pre-excitation (Wolff-Parkinson-White syndrome - WPW) or atrio-ventricular nodal re-entry tachycardia (AVNRT).
2) By a cardiological specialist. Shall include:
   - Exercise ECG to the Bruce protocol or equivalent. The test should be to maximum effort or symptom limited. Bruce stage 4 should be achieved and no significant abnormality of rhythm or conduction, nor evidence of myocardial ischaemia shall be demonstrated. Withdrawal of beta blockade or other anti-arrhythmic treatment should be considered prior to the test.
   - 24-hour ambulatory ECG shall demonstrate no significant rhythm or conduction disturbance.
   - Echocardiogram shall show no significant selective chamber enlargement, or significant structural or functional abnormality, and a left ventricular ejection fraction of at least 50%.
   - The cardiology report(s) will be reviewed by the Authority Medical Section (AMS) for class 1 and by the AME for class 2. It may be necessary to see the investigations, in which case the actual results will be requested. In difficult cases a secondary review panel of cardiologists may be convened.
3) Applicants seeking unrestricted Class 1 certification and any applicant (Class 1/2) with a history of significant tachycardia (syncope or haemodynamic compromise) shall have a satisfactory post ablation EPS:
   - Pre-excitation - No evidence of accessory pathway conduction pre or post isoprenaline/adrenaline. For WPW where antegrade conduction was present pre-ablation, a satisfactory adenosine test may be sufficient.
   - AVNRT - No inducible tachycardia pre or post isoprenaline/adrenaline. Dual pathways and single echoes acceptable. Failure to reach these requirements will require a period with an OML/OSL and follow up as in note 4 below
4) Other Class 1 applicants with satisfactory tests as in note 2 above, who elect not to have a post ablation EPS will require an OML and follow up. Satisfactory review in 1 year should allow unrestricted Class 1 certification.
   - Other Class 2 applicants who elect not to have a post ablation EPS may gain an unrestricted certificate with satisfactory tests as in note 2 above. Further review may not be necessary. Failure to achieve the requirements may require an OSL.