**Class 1/2 certification – Ventricular Ectopy**

**Ventricular Premature/Aberrant beats noted on resting ECG**

Remains Fit unless symptomatic

Holter 24 hour ECG recording (to be performed within one month)

Result Acceptable

Further investigation indicated (note 1)

Cardiology review (note 2)
- Exercise ECG (note 3)
- Echocardiogram (note 4)
- Cardiac MRI if ectopy originates from Right Ventricle

Results acceptable (note 5)

Fit Class 1/2 (note 6)

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**NOTES:**

1) Further investigation needed if:
   a) >2% Ventricular Ectopic Beats (VEBs) recorded in 24hrs
   b) complex forms seen including non-sustained ventricular tachycardia
   c) long runs of bigeminy seen
   d) >20 VEBs per minute seen

2) By a cardiological specialist:
   3) Exercise ECG - Bruce protocol and symptom limited. Requirements are at least 9 minutes and no significant ECG or blood pressure changes. (See UK CAA exercise ECG protocol). Any abnormality may require further investigation.
   4) Echocardiogram - Should reveal a structurally normal heart with normal LV/RV function.
   5) The cardiology report will be reviewed by the AME. It may be necessary to refer cases to the AMS with the investigation results (the actual tracings/videos may be requested.) In difficult cases a secondary review panel of cardiologists will be convened.
   6) If the above investigations show a significant abnormality, an OML/OSL limitation may need to be applied by the AMS (Class 1) or AME (Class 2). An ectopic beat count of >7.5% of the total beat count on Holter recording will normally require an OML limitation. Periodic cardiological review may be required.

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PLEASE PRINT THIS DOCUMENT AND TAKE TO YOUR SPECIALIST ADVISOR