# **SPE CERTIFICATE RENEWAL APPLICATION**

Name:	Telephor	ne # :
Address:		
City:	State:	Zip:
Expiration date of current SPE certif	ficate:	
Approximate miles driven under cur	rent SPE certificate:	
Traffic violations incurred in the last	t 2 years (indicate date and	type of violation):
Accidents incurred in last 2 years. On number of fatalities and/or injuries a police accident report for each accident report.	and total amount of propert ent.	
List any changes in the type of vehic perform.	-	
Is there any significant change in the certificate?  Yes No If yes, please		•
<ol> <li>A list of all motor carriers you have work</li> <li>A copy of the results of your current med</li> <li>A medical evaluation summary, which hat qualified physiatrist (form attached).</li> <li>A copy of your State motor vehicle driving</li> </ol>	lical examination and medical examination and medical examples been completed by an orthope and record (MVR) for the past 2 years.	saminer s certificate (form attached). dic surgeon or a board certified or years.
Signature of Applicant:	Date:	

Mail completed package to the medical program specialist in the service center for the State in which you are a legal resident.

(CONTINUATION SHEET)	
Violations (continued from 1 <sup>st</sup> page):	
Accidents (continued from 1 <sup>st</sup> page):	
	·
Additional information and/or comments:	

# **EMPLOYMENT INFORMATION**

Current E	Employer:
A	ddress:
Po	osition Held:
Fı	rom: To:
Previous	Employer:
	ddress:
Po	osition Held:
Fı	rom: To:
R	eason for leaving:
Previous	Employer:
	ddress:
Po	osition Held:

From:	To:	
Reason for leaving:		

# Medical Examination Report FOR COMMERCIAL DRIVER FITNESS DETERMINATION

649-F (6045)

Oriver's Name (Last, First, Midd	e)	Social Security No	).	Birthdate	Age	Sex		Certification   rtification	Date of Exam
				M/D/Y		☐ F	Follo		
address	City, State, Zip		Work Tel:	l: ( )	Driver			License Class  A C B D  Other	State of Issue
Any illness or injury in the last 5 Head/Brain injuries, disorders of Seizures, epilepsy medication  Eye disorders or impaired vision Ear disorders, loss of hearing of Heart disease or heart attack; of medication  Heart surgery (valve replacement pacemaker)	years? r illnesses n (except corrective lenses balance ther cardiovascular con nt/bypass, angioplasty, reation	dition	Lung diseas Kidney diseas Liver diseas Digestive pr Diabetes or	ee, emphysema, asth ase, dialysis se coblems elevated blood suga psychiatric disorders ation	nma, chronic ar controlled b s, e.g., severe	bronchitis by: e depress	ion	while asleer snoring  Stroke or par Missing or im finger, toe Spinal injury  Chronic low be Regular, freq Narcotic or ha	ers, pauses in breathing of daytime sleepiness, loud alysis paired hand, arm, foot, leg, or disease back pain uent alcohol use abit forming drug use
certify that the above information dedical Examiner's Certificate.  Edical Examiner's Comments edications, including over-the-comments are also as a second control of the	Driver's Sigr	nature ory (The medical e	xaminer m	nust review and o	discuss wit	h the d	river a	Date	

TESTING	(Medical Exan	niner comple	tes Sectio	n 3 through	7) Name: Last,		First,		Mid	ddle,		
3. VISIO					rith or without correct hould be noted on the					orizonta	l meridi	an
ratio with 20 as	numerator and the sm	allest type read at 2	20 feet as denoi	minator. If the app	omparable values. In reco licant wears corrective ler d tolerance and adaptatio	nses, these sho	ould be worr	n while vis	ual acuity i	s being t	ested. If	the driver
Numerical re	eadings must be pro	ovided.			Applicant can reco					0		Yes
ACUITY	UNCORRECTED	CORRECTED	HORIZONTAL	FIELD OF VISION	signals and device	s showing stai	ndard red, g	reen, and	amber col	ors?		No
Right Eye	20/	20/	Right Eye	0	Applicant meets v		equirement	t only whe	en wearin	g:		
Left Eye	20/	20/	Left Eye	0	Corrective L	enses						
Both Eyes	20/	20/			Monocular Vision:	Yes	No					
frequencies te	☐ Check if	nearing aid used to metric test results	for tests.	Check if hearing	≥ 5 ft., with or without aid required to meet st O for 500Hz, -10dB for 1,0	andard.	•		_			
	ance from individual		I	\_	f audiometer is used, record		500 Hz	1000 Hz	2000 Hz	500 Hz	1000 Hz	2000 Hz
iorcea wnispe	red voice can first be	neard.	\ Feet	\ Feet	lecibels. (acc. to ANSI Z24.5-	1951)	Average:	1	<u> </u>	Average:		
5. BLOOD	PRESSURE/ PULSE	RATE Num	erical reading	gs must be reco	orded. Medical Exami	ner should ta	ake at leas	t two rea	adings to	confirm	n BP.	
Blood	Systolic Diastol	c Reading	 1	Category	Expiration Date			Red	ertificati	on		
Pressure Driver qualifi	ed if <140/90.	140-159	/90-99	Stage 1	1 year			One	ear if <140 e-time cer -159/91-9	tificate f	or 3 mo	nths if
Pulse Rate:	☐ Regular ☐ Irregu	ar 160-179	/100-109	Stage 2	One-time certificate	e for 3 months	S.		ear from c		xam if <	140/90
		≥180/11	10	Stage 3	6 months from date	e of exam if <	140/90	6 m	onths if ≤	_140/90		
Urinalysis is req	ORY AND OTHER T	r sugar in the urine		al readings mus		URINE SPE		P. GR.	PROTI	EIN BL	LOOD S	SUGAR
	erlying medical probler Describe and record)	n. 										

7. PHYSICAL EXAM	MINATION	Height:	(in.) Weight:	(lbs.)	Name	Last,	First,	Middle,		
Even if a condition does r	ot disqualify a	driver, the med	y disqualify a driver, particularly it dical examiner may consider defe dition, if neglected, could result in	rring the	driver to	emporarily. Also, the d	driver should be advis	en or is readily amenable to tre sed to take the necessary step	atment s to co	i. rrect
	ercial motor ve	ehicle safely. E	f the body system is normal. Disc nter applicable item number befo						e drive	∍r's
BODY SYSTEM	CHECK FO			YES*	NO	BODY SYSTEM	CHECK FO	R:	YES*	NO
General Appearance	Marked ove drinking, or		signs of alcoholism, problem			7. Abdomen and Visc	era Enlarged liver hernia, signific	enlarged spleen, masses, bruits, ant abdominal wall muscle		
2. Eyes	motility, ocu nystagmus,	lar muscle imba exophthalmos.	to light, accommodation, ocular alance, extraocular movement, Ask about retinopathy, cataracts r degeneration and refer to a	i,		8. Vascular System		se and amplitude, cartoid or varicose veins.		
	specialist if		<b>G</b>			9. Genito-urinary Syst	tem Hernias.			
<ul><li>3. Ears</li><li>4. Mouth and Throat</li></ul>	perforated e	ardrums.	rane, occlusion of external canal	,		10. Extremities- Limb impaired. Driver r be subject to SPE	finger, Percep weakness, pa	ment of leg, foot, toe, arm, hand, tible limp, deformities, atrophy, ralysis, clubbing, edema, sufficicent grasp and prehension		
	swallowing.	e deformities like	ely to interfere with breathing or			certificate if other qualified.	in upper limb t Insufficient mo	o maintain steering wheel grip. bility and strength in lower limb		
5. Heart	Murmurs, eximplantable		arged heart, pacemaker,			11. Spine, other musculoskeletal	Previous surgimotion, tender	ery, deformities, limitation of		
6. Lungs and chest, not including breast examination	abnormal br impaired res physical exa	eath sounds inc spiratory function	sion, abnormal respiratory rate, cluding wheezes or alveolar rales n, cyanosis. Abnormal findings of further testing such as pulmonary	n		12. Neurological	Impaired equil pattern; asymisensory or pos	ibrium, coordination or speech metric deep tendon reflexes, sitional abnormalities, abnormal abinki's reflexes, ataxia.		
*COMMENTS:										
<ul><li>☐ Meets standar</li><li>☐ Does not mee</li><li>☐ Meets standar</li></ul>	ds in 49 CFR t standards ds, but period	391.41; qualifie	the Medical Examiner for guidants for 2 year certificate quired due to nonths □1 year □ Other	ce.		exemption at Skill Perform  Skill Perform  Driving with Qualified by	aring aid d by a t time of certification. nance Evaluation (SF nin an exempt intraci	PE) Certificate ty zone (See 49 CFR 391.62) R 391.64	•	
	•	·	medication):		M	ledical Examiner's nan Address —————	ne			
Return to medi	cal examiner's	office for follow	v up on		-	Telephone Number				
If mosts standards, con	nlete a Medica	I Evaminar's Co	rtificate as stated in 40 CEP 301 43	(h) (Driv	er must o	earry cartificate when one	rating a commercial vel	picle )		

# 49 CFR 391.41 Physical Qualifications for Drivers

#### THE DRIVER'S ROLE

Responsibilities, work schedules, physical and emotional demands, and lifestyles among commercial drivers vary by the type of driving that they do. Some of the main types of drivers include the following: turn around or short relay (drivers return to their home base each evening); long relay (drivers drive 9-11 hours and then have at least a 10-hour off-duty period), straight through haul (cross country drivers); and team drivers (drivers share the driving by alternating their 5-hour driving periods and 5-hour rest periods.)

The following factors may be involved in a driver's performance of duties: abrupt schedule changes and rotating work schedules, which may result in irregular sleep patterns and a driver beginning a trip in a fatigued condition; long hours; extended time away from family and friends, which may result in lack of social support; tight pickup and delivery schedules, with irregularity in work, rest, and eating patterns, adverse road, weather and traffic conditions, which may cause delays and lead to hurriedly loading or unloading cargo in order to compensate for the lost time; and environmental conditions such as excessive vibration, noise, and extremes in temperature. Transporting passengers or hazardous materials may add to the demands on the commercial driver.

There may be duties in addition to the driving task for which a driver is responsible and needs to be fit. Some of these responsibilities are: coupling and uncoupling trailer(s) from the tractor, loading and unloading trailer(s) (sometimes a driver may lift a heavy load or unload as much as 50,000 lbs. of freight after sitting for a long period of time without any stretching period); inspecting the operating condition of tractor and/or trailer(s) before, during and after delivery of cargo; lifting, installing, and removing heavy tire chains; and, lifting heavy tarpaulins to cover open top trailers. The above tasks demand agility, the ability to bend and stoop, the ability to maintain a crouching position to inspect the underside of the vehicle, frequent entering and exiting of the cab, and the ability to climb ladders on the tractor and/or trailer(s).

In addition, a driver must have the perceptual skills to monitor a sometimes complex driving situation, the judgment skills to make quick decisions, when necessary, and the manipulative skills to control an oversize steering wheel, shift gears using a manual transmission, and maneuver a vehicle in crowded areas.

#### §391.45 PHYSICAL QUALIFICATIONS FOR DRIVERS

- (a) A person shall not drive a commercial motor vehicle unless he is physically qualified to do so and, except as provided in §391.67, has on his person the original, or a photographic copy, of a medical examiner's certificate that he is physically qualified to drive a commercial motor vehicle.
- (b) A person is physically qualified to drive a motor vehicle if that person:
- (1) Has no loss of a foot, a leg, a hand, or an arm, or has been granted a Skill Performance Evaluation (SPE) Certificate (formerly Limb Waiver Program) pursuant to §391.49.
- (2) Has no impairment of: (i) A hand or finger which interferes with prehension or power grasping; or (ii) An arm, foot, or leg which interferes with the ability to perform normal tasks associated with operating a commercial motor vehicle; or any other significant limb defect or limitation which interferes with the ability to perform normal tasks associated with operating a commercial motor vehicle; or has been granted a SPE Certificate pursuant to §391.49.
- (3) Has no established medical history or clinical diagnosis of diabetes mellitus currently requiring insulin for control;
- (4) Has no current clinical diagnosis of myocardial infarction, angina pectoris, coronary insufficiency, thrombosis, or any other cardiovascular disease of a variety known to be accompanied by syncope, dyspnea, collapse, or congestive cardiac failure.
- (5) Has no established medical history or clinical diagnosis of a respiratory dysfunction likely to interfere with his ability to control and drive a commercial motor vehicle safely.
- (6) Has no current clinical diagnosis of high blood pressure likely to interfere with his ability to operate a commercial motor vehicle safely.

- (7) Has no established medical history or clinical diagnosis of rheumatic, arthritic, orthopedic, muscular, neuromuscular, or vascular disease which interferes with his ability to control and operate a commercial motor vehicle safely.
- (8) Has no established medical history or clinical diagnosis of epilepsy or any other condition which is likely to cause loss of consciousness or any loss of ability to control a commercial motor vehicle;
- (9) Has no mental, nervous, organic, or functional disease or psychiatric disorder likely to interfere with his ability to drive a commercial motor vehicle safely;
- (10) Has distant visual acuity of at least 20/40 (Snellen) in each eye without corrective lenses or visual acuity separately corrected to 20/40 (Snellen) or better with corrective lenses, distant binocular acuity of at least 20/40 (Snellen) in both eyes with or without corrective lenses, field of vision of at least 70 degrees in the horizontal meridian in each eye, and the ability to recognize the colors of traffic signals and devices showing standard red, green and amber;
- (11) First perceives a forced whispered voice in the better ear not less than 5 feet with or without the use of a hearing aid, or, if tested by use of an audiometric device, does not have an average hearing loss in the better ear greater than 40 decibels at 500 Hz, 1,000 Hz and 2,000 Hz with or without a hearing device when the audiometric device is calibrated to the American National Standard (formerly ASA Standard) Z24.5-1951:

- (12) (i) Does not use a controlled substance identified in 21 CFR 1308.11 Schedule I, an amphetamine, a narcotic, or any other habit-forming drug. (ii) Exception: A driver may use such a substance or drug, if the substance or drug is prescribed by a licensed medical practitioner who: (A) Is familiar with the driver's medical history and assigned duties; and (B) Has advised the driver that the prescribed substance or drug will not adversely affect the driver's ability to safely operate a commercial motor vehicle; and
- (13) Has no current clinical diagnosis of alcoholism.

# INSTRUCTIONS TO THE MEDICAL EXAMINER

#### **General Information**

The purpose of this examination is to determine a driver's physical qualification to operate a commercial motor vehicle (CMV) in interstate commerce according to the requirements in 49 CFR 391.41-49. Therefore, the medical examiner must be knowledgeable of these requirements and guidelines developed by the FMCSA to assist the medical examiner in making the qualification determination. The medical examiner should be familiar with the driver's responsibilities and work environment and is referred to the section on the form, **The Driver's Role**.

In addition to reviewing the **Health History** section with the driver and conducting the physical examination, the medical examiner should discuss common prescriptions and over-the-counter medications relative to the side effects and hazards of these medications while driving. Educate the driver to read warning labels on all medications. History of certain conditions may be cause for rejection, particularly if required by regulation, or may indicate the need for additional laboratory tests or more stringent examination perhaps by a medical specialist. These decisions are usually made by the medical examiner in light of the driver's job responsibilities, work schedule and potential for the conditions to render the driver unsafe.

Medical conditions should be recorded even if they are not cause for denial, and they should be discussed with the driver to encourage appropriate remedial care. This advice is especially needed when a condition, if neglected, could develop into a serious illness that could affect driving.

If the medical examiner determines that the driver is fit to drive and is also able to perform non-driving responsibilities as may be required, the medical examiner signs the medical certificate which the driver must carry with his/her license. The certificate must be dated. Under current regulations, the certificate is valid for two years, unless the driver has a medical condition that does not prohibit driving but does require more frequent monitoring. In such situations, the medical certificate should be issued for a shorter length of time. The physical examination should be done carefully and at least as complete as is indicated by the attached form. Contact the FMCSA at (202) 366-1790 for further information (a vision exemption, qualifying drivers under 49 CFR 391.64, etc.).

#### **Interpretation of Medical Standards**

Since the issuance of the regulations for physical qualifications of commercial drivers, the Federal Motor Carrier Safety Administration (FMCSA) has published recommendations called Advisory Criteria to help medical examiners in determining whether a driver meets the physical qualifications for commercial driving. These recommendations have been condensed to provide information to medical examiners that (1) is directly relevant to the physical examination and (2) is not already included in the medical examination form. The specific regulation is printed in italics and it's reference by section is highlighted.

# Federal Motor Carrier Safety Regulations -Advisory Criteria-

#### Loss of Limb: §391.41(b)(1)

A person is physically qualified to drive a commercial motor vehicle if that person:

Has no loss of a foot, leg, hand or an arm, or has been granted a Skill Performance Evaluation (SPE) Certificate pursuant to Section 391.49.

# Limb Impairment: §391.41(b)(2)

A person is physically qualified to drive a commercial motor vehicle if that person:

Has no impairment of: (i) A hand or finger which interferes with prehension or power grasping; or (ii) An arm, foot, or leg which interferes with the ability to perform normal tasks associated with operating a commercial motor vehicle; or (iii) Any other significant limb defect or limitation which interferes with the ability to perform normal tasks associated with operating a commercial motor vehicle; or (iv) Has been granted a Skill Performance Evaluation (SPE) Certificate pursuant to Section 391.49.

A person who suffers loss of a foot, leg, hand or arm or whose limb impairment in any way interferes with the safe performance of normal tasks associated with operating a commercial motor vehicle is subject to the Skill Performance Evaluation Certification Program pursuant to section 391.49, assuming the person is otherwise qualified.

With the advancement of technology, medical aids and equipment modifications have been developed to compensate for certain disabilities. The SPE Certification Program (formerly the Limb Waiver Program) was designed to allow persons with the loss of a foot or limb or with functional impairment to qualify under the Federal Motor Carrier Safety Regulations (FMCSRs) by use of prosthetic devices or equipment modifications which enable them to safely operate a commercial motor vehicle. Since there are no medical aids equivalent to the original body or limb, certain risks are still present, and thus restrictions may be included on individual SPE certificates when a State Director for the FMCSA determines they are necessary to be consistent with safety and public interest.

If the driver is found otherwise medically qualified (391.41(b)(3) through (13)), the medical examiner must check on the medical certificate that the driver is qualified only if accompanied by a SPE certificate. The driver and the employing motor carrier are subject to appropriate penalty if the driver operates a motor vehicle in interstate or foreign commerce without a curent SPE certificate for his/her physical disability.

#### Diabetes §391.41(b)(3)

A person is physically qualified to drive a commercial motor vehicle if that person:

Has no established medical history or clinical diagnosis of diabetes mellitus currently requiring insulin for control.

Diabetes mellitus is a disease which, on occasion, can result in a loss of consciousness or disorientation in time and space. Individuals who require insulin for control have conditions which can get out of control by the use of too much or too little insulin, or food intake not consistent with the insulin dosage. Incapacitation may occur from symptoms of hyperglycemic or hypoglycemic reactions (drowsiness, semiconsciousness, diabetic coma or insulin shock).

The administration of insulin is, within itself, a complicated process requiring insulin, syringe, needle, alcohol sponge and a sterile technique. Factors related to long-haul commercial motor vehicle operations, such as fatigue, lack of sleep, poor diet, emotional conditions, stress, and concomitant illness, compound the dangers, the FMCSA has consistently held that a diabetic who uses insulin for control does not meet the minimum physical requirements of the FMCSRs.

Hypoglycemic drugs, taken orally, are sometimes prescribed for diabetic individuals to help stimulate natural body production of insulin. If the condition can be controlled by the use of oral medication and diet, then an individual may be qualified under the present rule. CMV drivers who do not meet the Federal diabetes standard may call (202) 366-1790 for an application for a diabetes exemption.

(See Conference Report on Diabetic Disorders and Commercial Drivers and Insulin-Using Commercial Motor Vehicle Drivers at:

http://www.fmcsa.dot.gov/rulesregs/medreports.htm)

### **Cardiovascular Condition**

§391.41(b)(4)

# A person is physically qualified to drive a commercial motor vehicle if that person:

Has no current clinical diagnosis of myocardial infarction, angina pectoris, coronary insufficiency, thrombosis or any other cardiovascular disease of a variety known to be accompanied by syncope, dyspnea, collapse or congestive cardiac failure.

The term "has no current clinical diagnosis of" is specifically designed to encompass: "a clinical diagnosis of" (1) a current cardiovascular condition, or (2) a cardiovascular condition which has not fully stabilized regardless of the time limit The term "known to be

accompanied by" is designed to include a clinical diagnosis of a cardiovascular disease (1) which is accompanied by symptoms of syncope, dyspnea, collapse or congestive cardiac failure; and/or (2) which is likely to cause syncope, dyspnea, collapse or congestive cardiac failure.

It is the intent of the FMCSRs to render unqualified, a driver who has a current cardiovascular disease which is accompanied by and/or likely to cause symptoms of syncope, dyspnea, collapse, or congestive cardiac failure. However, the subjective decision of whether the nature and severity of an individual's condition will likely cause symptoms of cardiovascular insufficiency is on an individual basis and qualification rests with the medical examiner and the motor carrier. In those cases where there is an occurrence of cardiovascular insufficiency (myocardial infarction, thrombosis, etc.), it is suggested before a driver is certified that he or she have a normal resting and stress electrocardiogram (ECG), no residual complications and no physical limitations, and is taking no medication likely to interfere with safe driving.

Coronary artery bypass surgery and pacemaker implantation are remedial procedures and thus, not unqualifying. Implantable cardioverter defibrillators are disqualifying due to risk of syncope. Coumadin is a medical treatment which can improve the health and safety of the driver and should not, by its use, medically disqualify the commercial driver. The emphasis should be on the underlying medical condition(s) which require treatment and the general health of the driver. The FMCSA should be contacted at (202) 366-1790 for additional recommendations regarding the physical qualification of drivers on coumadin.

(See Cardiovasular Advisory Panel Guidelines for the Medical examination of Commercial Motor Vehicle Drivers at: http://www.fmcsa.dot.gov/rulesregs/medreports.htm)

# Respiratory Dysfunction §391.41(b)(5)

A person is physically qualified to drive a commercial motor vehicle if that person:

Has no established medical history or clinical diagnosis of a respiratory dysfunction likely to interfere with ability to control and drive a commercial motor vehicle safely.

Since a driver must be alert at all times, any change in his or her mental state is in direct conflict with highway safety. Even the slightest impairment in respiratory function under emergency conditions (when greater oxygen supply is necessary for performance) may be detrimental to safe driving.

There are many conditions that interfere with oxygen exchange and may result in incapacitation, including emphysema, chronic asthma, carcinoma, tuberculosis, chronic bronchitis and sleep apnea. If the medical examiner detects a respiratory dysfunction, that in any way is likely to interfere with the driver's ability to safely control and drive a commercial motor vehicle, the driver must be referred to a specialist for further evaluation and therapy. Anticoagulation therapy for deep vein thrombosis and/or pulmonary thromboembolism is not unqualifying once optimum dose is achieved, provided lower extremity venous examinations remain normal and the treating physician gives a favorable recommendation.

# Hypertension §391.41(b)(6)

A person is physically qualified to drive a commercial motor vehicle if that person:

Has no current clinical diagnosis of high blood pressure likely to interfere with ability to operate a commercial motor vehicle safely.

Hypertension alone is unlikely to cause sudden collapse; however, the likelihood increases when target organ damage, particularly cerebral vascular disease, is present. This regulatory criteria is based on FMCSA's Cardiovascular Advisory Guidelines for the Examination of CMV Drivers, which used the Sixth Report of the Joint National Committee on Detection, Evaluation, and Treatment of High Blood Pressure (1997).

Stage 1 hypertension corresponds to a systolic BP of 140-159 mmHg and/or a diastolic BP of 90-99 mmHg. The driver with a BP in this range is at low risk for hypertension-related acute incapacitation and may be medically certified to drive for a one-year period. Certification examinations should be done annually thereafter and should be at or less than 140/90. If less than 160/100, certification may be extended one time for 3 months.

A blood pressure of 160-179 systolic and/or 100-109 diastolic is considered Stage 2 hypertension, and the driver is not necessarily unqualified during evaluation and institution of treatment. The driver is given a one time certification of three months to reduce his or her blood pressure to less than or equal to 140/90. A blood pressure in this range is an absolute indication for anti-hypertensive drug therapy. Provided treatment is well tolerated and the driver demonstrates a BP value of 140/90 or less, he or she may be certified for one year from date of the initial exam. The driver is certified annually thereafter.

A blood pressure at or greater than 180 (systolic) and 110 (diastolic) is considered Stage 3, high risk for an acute BP-related event. The driver may **not** be qualified, even temporarily, until reduced to 140/90 or less and treatment is well tolerated. The driver may be certified for 6 months and biannually (every 6 months) thereafter if at recheck BP is 140/90 or less.

Annual recertification is recommended if the medical examiner does not know the severity of hypertension prior to treatment.

An elevated blood pressure finding should be confirmed by at least two subsequent measurements on different days.

Treatment includes nonpharmacologic and pharmacologic modalities as well as counseling to reduce other risk factors. Most antihypertensive medications also have side effects, the importance of which must be judged on an individual basis. Individuals must be alerted to the hazards of these medications while driving. Side effects of somnolence or syncope are particulary undesirable in commercial drivers.

Secondary hypertension is based on the above stages.

#### Epilepsy §391.41(b)(8)

A person is physically qualified to drive a commercial motor vehicle if that person:

Has no established medical history or clinical diagnosis of epilepsy or any other condition which is likely to cause loss of consciousness or any loss of ability to control a motor vehicle.

Epilepsy is a chronic functional disease characterized by seizures or episodes that occur without warning, resulting in loss of voluntary control which may lead to loss of consciousness and/or seizures. Therefore, the following drivers cannot be qualified: (1) a driver who has a medical history of epilepsy; (2) a driver who has a current clinical diagnosis of epilepsy; or (3) a driver who is taking antiseizure medication.

If an individual has had a sudden episode of a nonepileptic seizure or loss of consciousness of unknown cause which did not require antiseizure medication, the decision as to whether that person's condition will likely cause loss of consciousness or loss of ability to control a motor vehicle is made on an individual basis by the medical examiner in consultation with the treating physician. Before certification is considered, it is suggested that a 6 month waiting period elapse from the time of the episode. Following the waiting period, it is suggested that the individual have a complete neurological examination. If the results of the examination are negative and antiseizure medication is not required, then the driver may be qualified.

In those individual cases where a driver has a seizure or an episode of loss of consciousness that resulted from a known medical condition (e.g., drug reaction, high temperature, acute infectious disease, dehydration or acute metabolic disturbance), certification should be deferred until the driver has fully recovered from that condition and has no existing residual complications, and not taking antiseizure medication.

Drivers with a history of epilepsy/seizures off antiseizure medication **and** seizure-free for 10 years may be qualified to drive a CMV in interstate commerce. Interstate drivers with a history of a single unprovoked seizure may be qualified to drive a CMV in interstate commerce if seizure-free **and** off antiseizure medication for a 5-year period or more.

(See Conference on Neurological Disorders and Commercial Drivers at:

http://www.fmcsa.dot.gov/rulesregs/medreports.htm)

#### Mental Disorders §391.41(b)(9)

A person is physically qualified to drive a commercial motor vehicle if that person:

Has no mental, nervous, organic or functional disease or psychiatric disorder likely to interfere with ability to drive a motor vehicle safely.

Emotional or adjustment problems contribute directly to an individual's level of memory, reasoning, attention, and judgment. These problems often underlie physical disorders. A variety of functional disorders can cause drowsiness, dizziness, confusion, weakness or paralysis that may lead to incoordination, inattention, loss of functional control and susceptibility to accidents while driving. Physical fatigue, headache, impaired coordination, recurring physical ailments and chronic "nagging" pain may be present to such a degree that certification for commercial driving is inadvisable. Somatic and psychosomatic complaints should be thoroughly examined when determining an individual's overall fitness to drive. Disorders of a periodically incapacitating nature, even in the early stages of development, may warrant disqualification.

Many bus and truck drivers have documented that "nervous trouble" related to neurotic, personality, or emotional or adjustment problems is responsible for a significant fraction of their preventable accidents. The degree to which an individual is able to appreciate, evaluate and adequately respond to environmental strain and emotional stress is critical when assessing an individual's mental alertness and flexibility to cope with the stresses of commercial motor vehicle driving.

When examining the driver, it should be kept in mind that individuals who live under chronic emotional upsets may have deeply ingrained maladaptive or erratic behavior patterns. Excessively antagonistic, instinctive, impulsive, openly aggressive, paranoid or severely depressed behavior greatly interfere with the driver's ability to drive safely. Those individuals who are highly susceptible to frequent states of emotional instability (schizophrenia, affective psychoses, paranoia, anxiety or depressive neuroses) may warrant disqualification. Careful consideration should be given to the side effects and interactions of medications in the overall qualification determination. See Psychiatric Conference Report for specific recommendations on the use of medications and potential hazards for driving.

(See Conference on Psychiatric Disorders and Commercial Drivers at:

http://www.fmcsa.dot.gov/rulesregs/medreports.htm)

#### Vision §391.41(b)(10)

A person is physically qualified to drive a commercial motor vehicle if that person:

Has distant visual acuity of at least 20/40 (Snellen) in each eye with or without corrective lenses or visual acuity separately corrected to 20/40 (Snellen) or better with corrective lenses, distant binocular acuity of at least 20/40 (Snellen) in both eyes with or without corrective lenses, field of vision of at least 70 degrees in the horizontal meridian in each eye, and the ability to recognize the colors of traffic signals and devices showing standard red, green, and amber.

The term "ability to recognize the colors of" is interpreted to mean if a person can recognize and distinguish among traffic control signals and devices showing standard red, green and amber, he or she meets the minimum standard, even though he or she may have some type of color perception deficiency. If certain color perception tests are administered, (such as Ishihara, Pseudoisochromatic, Yarn) and doubtful findings are discovered, a controlled test using signal red, green and amber may be employed to determine the driver's ability to recognize these colors.

Contact lenses are permissible if there is sufficient evidence to indicate that the driver has good tolerance and is well adapted to their use. Use of a contact lens in one eye for distance visual acuity and another lens in the other eye for near vision is not acceptable, nor telescopic lenses acceptable for the driving of commercial motor vehicles.

If an individual meets the criteria by the use of glasses or contact lenses, the following statement shall appear on the Medical Examiner's Certificate: "Qualified only if wearing corrective lenses."

CMV drivers who do not meet the Federal vision standard may call (202) 366-1790 for an application for a vision exemption.

(See Visual Disorders and Commercial Drivers at: http://www.fmcsa.dot.gov/rulesregs/medreports.htm)

# Hearing §391.41(b)(11)

A person is physically qualified to drive a commercial motor vehicle if that person:

First perceives a forced whispered voice in the better ear at not less than 5 feet with or without the use of a hearing aid, or, if tested by use of an audiometric device, does not have an average hearing loss in the better ear greater than 40 decibels at 500 Hz, 1,000 Hz, and 2,000 Hz with or without a hearing aid when the audiometric device is calibrated to American National Standard (formerly ADA Standard) Z24.5-1951.

Since the prescribed standard under the FMCSRs is the American Standards Association (ANSI), it may be necessary to convert the audiometric results from the ISO standard to the ANSI standard. Instructions are included on the Medical Examination report form.

If an individual meets the criteria by using a hearing aid, the driver must wear that hearing aid and have it in operation at all times while driving. Also, the driver must be in possession of a spare power source for the hearing aid.

For the whispered voice test, the individual should be stationed at least 5 feet from the examiner with the ear being tested turned toward the examiner. The other ear is covered. Using the breath which remains after a normal expiration, the examiner whispers words or random numbers such as 66, 18,

23, etc. The examiner should not use only sibilants (s sounding materials). The opposite ear should be tested in the same manner. If the individual fails the whispered voice test, the audiometric test should be administered.

If an individual meets the criteria by the use of a hearing aid, the following statement must appear on the Medical Examiner's Certificate "Qualified only when wearing a hearing aid."

(See Hearing Disorders and Commercial Motor Vehicle Drivers at: http://www/fmcsa.dot.gov/rulesregs/medrports.htm)

#### Drug Use §391.41(b)(12)

A person is physically qualified to drive a commercial motor vehicle if that person:

Does not use a controlled substance identified in 21 CFR 1308.II. Schedule I, an amphetamine, a narcotic, or any other habit-forming drug. Exception: A driver may use such a substance or drug, if the substance or drug is prescribed by a licensed medical practitioner who is familiar with the driver's medical history and assigned duties; and has advised the driver that the prescribed substance or drug will not adversely affect the driver's ability to safely operate a commercial motor vehicle.

This exception does not apply to methadone. The intent of the medical certification process is to medically evaluate a driver to ensure that the driver has no medical condition which interferes with the safe performance of driving tasks on a public road. If a driver uses a Schedule I drug or other substance, an amphetamine, a narcotic, or any other habit-forming drug, it may be cause for the driver to be found medically unqualified. Motor carriers are encouraged to obtain a practitioner's written statement about the effects on transportation safety of the use of a particular drug.

A test for controlled substances is not required as part of this biennial certification process. The FMCSA or the driver's employer should be contacted directly for information on controlled substances and alcohol testing under Part 382 of the FMCSRs.

The term "uses" is designed to encompass instances of prohibited drug use determined by a physician through established medical means. This may or may not involve body fluid testing. If body fluid testing takes place, positive test results should be confirmed by a second test of greater specificity. The term "habit-forming" is intended to include any drug or medication generally recognized as capable of becoming habitual, and which may impair the user's ability to operate a commercial motor vehicle safely.

The driver is medically unqualified for the duration of the prohibited drug(s) use and until a second examination shows the driver is free from the prohibited drug(s) use. Recertification may involve a substance abuse evaluation, the successful completion of a drug rehabilitation program, and a negative drug test result. Additionally, given that the certification period is normally two years, the examiner has the option to certify for a period of less than 2 years if this examiner determines more frequent monitoring is required.

(See Conference on Neurological Disorders and Commercial Drivers and Conference on Psychiatric Disorders and Commercial Drivers at: http://www.fmcsa.dot.gov/rulesregs/medreports.htm)

### Alcoholism

### §391.41(b)(13)

A person is physically qualified to drive a commercial motor vehicle if that person:

Has no current clinical diagnosis of alcoholism.

The term "current clinical diagnosis of" is specifically designed to encompass a current alcoholic illness or those instances where the individual's physical condition has not fully stabilized, regardless of the time element. If an individual shows signs of having an alcohol-use problem, he or she should be referred to a specialist. After counseling

MEDIC	CAL EXAMINER'S CERTIFICAT	TE		
I certify that I have examined rier Safety Regulations (49 CFR 391.41-391.49) and with knowledge of	the driving duties, I find this person		accordance with the Federal Motor lied; and, if applicable, only when:	Car- I I
I I  □ wearing corrective lenses	☐ driving within an exemp		,	 
<ul><li></li></ul>			nce Evaluation Certificate (SPE) 391.64	i !
I I I The information I have provided regarding this physical examination I completely and correctly, and is on file in my office.	n is true and complete. A complete	e examina	ation form with any attachment er	ا ا mbodies my findings ا
SIGNATURE OF MEDICAL EXAMINER		TELEPH	ONE	DATE I
MEDICAL EXAMINER'S NAME (PRINT)				ctice
I MEDICAL EXAMINER'S LICENSE OR CERTIFICATE NO./ISSUING STATE	E			! !
I SIGNATURE OF DRIVER		DRIVER'S	S LICENSE NO.	TATE I
ADDRESS OF DRIVER				1 1 1
MEDICAL CERTIFICATE EXPIRATION DATE				 

# YOU MUST CAREFULLY READ THE FOLLOWING INSTRUCTIONS BEFORE CONTINUING

The attached MEDICAL EVALUATION SUMMARY must be completed for every Skill Performance Evaluation (SPE) Certificate applicant.

There are several important points about this Summary that you **must adhere to**:

- 1. As the applicant, you must review and consider every block in Part II and check every box that applies to the type of duties or the environment you will be driving/working in.
- 2. Only a <u>board qualified</u> or <u>board certified</u> **physiatrist** (physician who specializes in physical medicine) OR an **orthopedic surgeon** (specialist in afflictions of the skeletal system) can complete and sign the Summary. The signature of a general practitioner alone is not sufficient.

#### **MEDICAL EVALUATION SUMMARY**

FROM:	
(Motor Carrier's Name)	
TO: (Doctor's Name) Must be Board Qualified or Board Certified Orthopedic Surgeon or Physiatrist	
SPE Applicant Name:	

Date

### **PART I**

The above driver is being referred to you for a <u>medical evaluation summary</u> as required by Section 391.49 of the Federal Motor Carrier Safety Regulations (FMCSR). The FMCSR states that the motor carrier shall furnish the examining physiatrist or orthopedic surgeon with a description of the job tasks which are contained herein. The FMCSR further states that the medical evaluation summary shall be completed, dependent upon the driver's physical disability in accordance with the following objectives:

- IN CASES INVOLVING AMPUTATION The summary shall include an assessment of the driver's physical
  capabilities as they relate to the driver's ability to perform the tasks as specified in the accompanying job task
  description.
- 2. <u>IN CASES INVOLVING LIMB IMPAIRMENT</u> The summary shall include an explanation as to how and why the impaired area interferes with the driver's ability to perform the tasks as specified in the accompanying job task description. The summary shall also contain an assessment of whether the condition will likely remain medically stable over the driver applicant's lifetime.
- 3. <u>IN CASES INVOLVING EITHER AN UPPER LIMB AMPUTATION OR UPPER LIMB IMPAIRMENT</u>, the summary shall include a statement by the examiner that the applicant is capable of demonstrating precision prehension (manipulating knobs and switches) and power grasp prehension (holding and maneuvering the steering wheel) with each upper limb separately.

Few people outside of the motor carrier industry fully appreciate the mental and physical demands placed on commercial drivers. Medical examiners should not apply automobile driving experience to evaluate fitness of commercial driver applicants.

The physical demands of commercial driving and related tasks vary considerably with type of vehicles and duties involved. To effectively match job demands with an applicant's abilities to meet these demands, the physiatrist or orthopedic surgeon must know the type of vehicle to be driven, the job demands, and environment involved. For their own, as well as the safety of others, <u>drivers minimally must have adequate</u>:

- A. <u>Strength</u> of the skeletal muscles to turn large diameter steering wheels (20-24 inches) rapidly and maintain a grip on them when confronted with tire failures and/or striking potholes or obstructions on the roadway.
- B. Mobility of the joints to reach various controls that must be pushed, pulled, or twisted; and to climb, bend, crawl, lift, twist, and turn to position for visual inspection; and to perform various related other associated tasks such as coupling and uncoupling trailers and vehicle inspections.
- C. <u>Stability</u> of joints and of the torso to maintain alert driving postures to smoothly modulate foot and hand controls, to climb into and out of the vehicle cab and cargo compartments.
- D. <u>Power Grasp and Prehension</u> of hands and fingers to control the steering wheel, operate the transmission (gear shift lever), air brake controls, and various other tasks such as operating light switches, directional signals, horns.

### PART II

### THIS PART TO BE COMPLETED BY MOTOR CARRIER AND/OR DRIVER

Modification to the task statements may be made if necessary.

The following is a universal job task description, your attention is directed to those boxes that have been <u>checked</u> as pertinent to this particular driver.

### **A. VEHICLE TYPE**

Ma ax fla bo	straightTru ay have up t les, utilizing tbed, tank o dies. A. Over 10 B. Combina Sraight T Trailer ov 10,001lbs C. Less tha lbs & Pla Hazardous	o 5 van, r dum ,001 lb ation rk with er s. n 10,00 acarde	10,001 of filore s n O1 d	□ Tractor-Trailer Comprised of a power unit (tractor) and one or more trailers.	□ Passenger Vhl. List the Seating Capacity  Type: □ Motor Coach □ Bus □ Van				
		i.	Short-relay drives 4-5 hours to a turn starting point.	naround point, exchanges truck	s and drives back to				
		ii.	Long-relay drives 8-10 hours, sleeps	s for 8 hours and returns to start	ting point.				
		iii.	Straight-through to destination, included home for nights at a time.	including coast to coast operations, and typically is away from					
		iv.	Sleeper-team drives constantly for 4 drives and typically is away from hor		e bunk while co-driver				
		V.	Local deliveries, often with frequent	uent stops					
		vi.	Driver may spend hours climbing in	g in and out of truck to load and unload cargo.					
			B. ENVIRONME	NTAL FACTORS					
Driv	ers may be	subjec	et to:						
Па	Abrupt duty	hour	changes	□ e. Long trips without regular meals,					
	Sleep depr		-	□ f. Short notice to assignment of run,					
			·/rest cycles,	□ g. Tight delivery schedule	е,				
	Temperatu		•	□ h. Delay en route,					
_ u.	•	emes,		□ I. Others					

### **C. PHYSICAL DEMAND**

Moderate physical activity levels are associated with commercial vehicle driving. Perceptual skills are needed to monitor the driving situation for relevant information. Manipulation skills are needed to turn the steering wheel, applying brakes, shift the gears, etc. The demands imposed on a commercial driver's sensory organs and musculoskeletal systems are briefly discussed below.

Gear Shifting: The movement of the gear shift lever(s) requires moderate strength, timely coordination, and complex manipulation skills of <u>right upper and left lower extremity</u> . This individual's vehicle will have a speed manual transmission.
Vehicle equipped with semi-automatic transmission (manual shifting but no clutch).
Vehicle equipped with a fully automatic transmission.
Control of steering wheel requires strength, mobility, and power grip of upper extremities while maintaining stability of trunk.
Operation of brake and accelerator pedal requires moderate strength, mobility, and coordinated movement in lower extremities.
Various tasks during driving, such as: operating light switches, windshield wipers, directional signals, emergency lights, horn, etc.; requiring moderate strength, mobility, and manipulative skills of upper extremities.
Backing and parking: requires good depth perception, strength, and coordinated manipulative skills.
Vehicle inspection: driver must evaluate the mechanical condition of the various vehicular systems such as: tires, brakes, suspensions, engines, and cargo. Climbing, bending, kneeling, crawling, reaching, stretching, turning, twisting, are essential for proper vehicle inspection.
Cargo handling and inspection: drivers may be required to handle cargo, climb up and down perpendicular ladders, and enter/leave the cab or cargo body many times a day.
Coupling and uncoupling: tractor-trailer drivers may hook up one or more trailers, this requires strength and full range of motion to climb, balance turn, grip, and pull.
Mounting snow chains on tires, requires pulling/lifting motions in the range of 35-90 pounds.
Changing tires, requires a combination of pulling, pushing, lifting, motions in the range of 100 to 175 pounds.
Vehicle modification(s) made for this driver are:

#### **PART III**

#### THIS PART TO BE COMPLETED BY ORTHOPEDIC SURGEON OR PHYSIATRIST

Based upon this job task description (as indicated in Part II-A, B, and C) and your examination of this driver, please answer all questions below.

It is not necessary for physician to state whether this person is likely to be a safety risk on the highway. Our SPE Specialist will conduct skill performance evaluations in the intended vehicles to determine whether limb-handicapped persons have overcome their handicaps. We are relying on your medical measurements and judgement for such information as asked below:

1. Does this dr	iver have adequate MUSCLE	STRENGTH to p	perform the tasks required:	
○ Yes				
○ No	If no, please indicate the ir	npaired extremi	ty.	
	Upper Extremity	Right	CLeft	
	Lower Extremity	○ Right	CLeft	
2. Does this dr	iver have adequate MOBILIT	<u>Y</u> of the extremiti	es and trunk to perform the tasks requ	iired?
○ Yes				
$\bigcirc$ No	If no, please indicate the ir	npaired extremi	ty.	
	Upper Extremity	Right	○ Left	
	Lower Extremity	○ Right	○ Left	
	Trunk			
3. Does this dr	iver have adequate <u>JOINTS</u> a	and <u>TRUNK STAI</u>	BILITY to perform the tasks required?	
○ Yes				
$\bigcirc$ No	If no, please indicate the ir	npaired extremi	ty.	
	Upper Extremity	○ Right	○ Left	
	Lower Extremity	Right	○ Left	
	Trunk			

		t of: □ hand or □ upper limb □ hand (□partial □full) or □ upper limb:
[Power Grip and firmly the steering emergency vehicles.]	d precision preh ng wheel and/or icle operations	R GRIP and PREHENSION FUNCTION of the hand and fingers? ension further defined: the capability of holding, clutching, clasping, or seizing other vehicle equipment to effectively control the vehicle and perform normal and steering (potholes, tire failure (blowouts), etc), operate gear shift levers, air brake and signals, horns].
Right $\bigcirc$	Yes	) No
Left $\bigcirc$	Yes	) No
If no, do you rec	commend a sur Yes	gical reconstruction to produce power grip and/or prehension?  No
5. If this driver has	an □ <b>UPPER</b> o	or □ <b>LOWER LIMB</b> <u>IMPAIRMENT</u> (□Right □Left)
or I	nas an □ <b>UPPE</b> F	R or □LOWER LIMB AMPUTATION (□Right □Left)
does he/sh	e have:	
a.	The APPROPE	RIATE TYPE OF PROSTHESIS OR ORTHOTIC DEVICE ?
	○Yes	○ No
b.	The appropriat	e type of TERMINAL DEVICE?
	○ Yes	○ No
C.	If yes, does the condition?	e prosthesis\orthotic fit satisfactorily, is it in good operating
	○Yes	○ No
d.	Is the applican	t able to use the prosthetic/orthotic device proficiently?
	○Yes	○ No
	prosthetic/ortho	upper limb amputation or impairment does the title device aid the driver in the ability to demonstrate and precision prehension?
	○Yes	○ No
If no to any of abo	ove, what is yo	ur recommendation?

6.	Please give	a clinical description of the pros	ethetic or orthotic device, po	ower source, etc.
		her ability to adequately perforn		disability indicated in Part III that will
	O'	Yes - Explain:		
		ze your findings and evaluation, medically stable over the lifetim		edical opinion of whether the condition
_				
_				
Docto Nam	e		Date	
Addr	(Print or Typess:	e) 		
Telep	ohone No.:			
Phys	iatrist	Orthopedic Surgeon	Other	
Boar	d Certified	_Yes No		

Board EligibleYes No	
Physiatrist's or Orthopedic Surgeon's	
SIGNATURE	