TEXAS DEPARTMENT OF PUBLIC SAFETY

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www.dps.texas.gov

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Attached is the Intrastate Limb Waiver packet. This packet contains an Intrastate Limb Waiver Application, Medical Evaluation Summary, and Physical Examination Form. These items must be completed and returned before your limb waiver is processed.

The Medical Evaluation Summary must be completed by an **orthopedic surgeon or physiatrist**. If a prosthetic device is required, please provide this information in as much technical detail as possible on the Intrastate Limb Waiver Application. **If the information above is not completed and returned to this office within 45 days, your file will be inactivated.**

In order to obtain your Texas CDL with an intrastate restriction, you must first obtain your Intrastate Limb Waiver. In order to obtain your Texas CDL without an intrastate restriction, you may apply with the Federal Motor Carrier Safety Administration at (404) 327-7371 for an Interstate Limb Waiver.

Please note: Once your completed application has been processed, you will be notified to contact the DL station nearest you to arrange a comprehensive driving examination. In order to take the comprehensive driving examination, you must do the following:

1. Arrange for the vehicle in which the test will be administered. It should be the vehicle you will be driving if the waiver is granted or one in the same vehicle class.

2. If the vehicle is equipped with a clutch, the clutch must be used when changing transmission speeds. If required, a prosthesis must be worn. If special equipment is necessary, it must be on the test vehicle.

3. You must ensure the test vehicle meets the Federal Motor Carrier Safety Regulations equipment standards. DPS personnel will accompany you on a pre-operational check. Any vehicle that does not meet safety standards will be rejected.

Please return your completed application to:

TEXAS DEPARTMENT OF PUBLIC SAFETY
ENFORCEMENT AND COMPLIANCE SERVICE
ATTN: ANALYSIS
PO BOX 4087
AUSTIN TX 78773-0320

If you have any questions, please contact the Customer Contact Center at (512) 424-2600 and select "driver license information."

(Rev. 7/12)

INTRASTATE LIMB WAIVER APPLICATION **CDL-37 (Rev. 02/12)**

PLEASE TYPE OR PRINT CLEARLY:
TEXAS DRIVER LICENCE #: _____
NAME: _____DATE OF BIRTH: _____
ADDRESS: _____
CITY: _____STATE: _____ZIP: _____
HOME PHONE: (___)_____SOCIAL SECURITY #: _____
ADDRESS OF DRIVER LICENSE OFFICE NEAREST YOUR HOME OR WORK PLACE: _____
_____
NAME OF MOTOR CARRIER (IF APPLICABLE): _____
ADDRESS: _____
CITY:_____ STATE:_____ ZIP:_____ BUSINESS PHONE:(___)_____
DESCRIPTION OF HANDICAP: _____
TYPE OF PROSTHESIS WORN: _____ IS PROSTHESIS REQUIRED: _____
GENERAL DRIVING DUTIES:

AVERAGE PERIOD OF DRIVING TIME: _____TYPE OF CARGO: _____
TYPE OF OPERATION (SLEEPER TEAM, RELAY, ETC.): _____
NUMBER OF YEARS EXPERIENCE DRIVING TYPE VEHICLE REQUESTED IN APPLICATION:_____
NUMBER OF YEARS DRIVING ALL TYPE (S) VEHICLES:_____

DESCRIPTION OF VEHICLE (S):

MAKE:_____ MODEL:_____ YEAR:_____
DRIVE TRAIN: _____TRANSMISSION TYPE: _____NO. OF SPEEDS: _____
AUXILIARY TRANSMISSION TYPE: _____ NO. OF SPEEDS:_____
VARIABLE SPEED REAR AXLE:_____ NO. OF SPEEDS:_____
TYPE OF BRAKE SYSTEM:_____
STEERING (MANUAL OR POWER ASSISTED):_____
NUMBER OF SEMITRAILERS: _____DESCRIPTION OF TRAILERS:_____
DESCRIPTION OF VEHICLE MODIFICATIONS:_____

THE LETTER OF APPLICATION FOR A WAIVER SHALL BE ACCOMPANIED BY:

1. A Physical Examination Form
2. A Medical Certificate
3. A Medical Evaluation Summary completed by either a board qualified or board certified physiatrist or orthopedic surgeon
4. A description of the prosthetic or orthopedic device worn, if any
5. A copy of any waivers of certain physical defects issued by the State, if applicable

I HEREBY CERTIFY THAT I AM OTHERWISE QUALIFIED UNDER PART 391 OF THE FEDERAL MOTOR CARRIER SAFETY REGULATIONS.

_____
(Signature) (Date)

TEXAS DEPARTMENT OF PUBLIC SAFETY

5805 N. LAMAR BLVD. - BOX 4087 - AUSTIN, TEXAS 78773-0310
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NOTICE TO MEDICAL EXAMINER/ APPLICANT

The enclosed Texas **Physical Examination Form** must be completed by a licensed medical examiner.

The attached five page **Medical Evaluation Summary** can only be completed by a **physiatrist** (person who specializes in physical medicine) or an **orthopedic surgeon** (specialist in afflictions of the skeletal system). The applicant and his/her orthopedic surgeon and/or physiatrist must review and check every box that applies to the type of duties or the environment in which the applicant will be driving or working.

The completed original **Physical Examination Form** and completed original **Medical Evaluation Summary** must be mailed to:

TEXAS DEPARTMENT OF PUBLIC SAFETY
ENFORCEMENT & COMPLIANCE SERVICE
ATTN: ANALYSIS
PO BOX 4087
AUSTIN, TEXAS 78773-0320

If you have any questions, please contact the Customer Contact Center at (512) 424-2600 and select "driver license information."

(Rev. 7/12)

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 board qualified or board certified **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

Date_____

FROM:_____
(Motor Carrier's Name)

TO: _____
(Doctor's Name) **Must be Board Qualified or Board Certified Orthopedic Surgeon or Physiatrist**

SPE Applicant Name:_____

PART I

The above driver is being referred to you for a medical evaluation summary 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:

1. 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. IN CASES INVOLVING LIMB IMPAIRMENT - 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. IN CASES INVOLVING EITHER AN UPPER LIMB AMPUTATION OR UPPER LIMB IMPAIRMENT, 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, drivers minimally must have adequate:

A. Strength - 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. Stability - 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. Power Grasp and Prehension - 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 checked as pertinent to this particular driver.**

A. VEHICLE TYPE

☐ **StraightTruck**
May have up to 5 axles, utilizing van, flatbed, tank or dump bodies.
☐ A. Over 10,00l lbs
☐ B. Combination Sraight Trk with Trailer over 10,001lbs.
☐ C. Less than 10,001 lbs & Placarded Hazardous Materials

☐ **Motor Home**
Gross Vehicle Weight Rating of 10,001 or more

☐ **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 turnaround point, exchanges trucks and drives back to starting point.

☐ ii. Long-relay drives 8-10 hours, sleeps for 8 hours and returns to starting point.

☐ iii. Straight-through to destination, including coast to coast operations, and typically is away from home for ____ nights at a time.

☐ iv. Sleeper-team drives constantly for 4 hours followed by 4 hours in the bunk while co-driver drives and typically is away from home ____ nights at a time.

☐ v. Local deliveries, often with frequent stops

☐ vi. Driver may spend hours climbing in and out of truck to load and unload cargo.

B. ENVIRONMENTAL FACTORS

Drivers may be subject to:

☐ a. Abrupt duty hour changes,

☐ b. Sleep deprivation,

☐ c. Unbalanced work/rest cycles,

☐ d. Temperature and weather extremes,

☐ e. Long trips without regular meals,

☐ f. Short notice to assignment of run,

☐ g. Tight delivery schedule,

☐ h. Delay en route,

☐ 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 ~~right upper and left lower extremity~~. 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 driver have adequate MUSCLE STRENGTH to perform the tasks required:

   ☐ Yes

   ☐ No **If no, please indicate the impaired extremity.**

   Upper Extremity ☐ Right ☐ Left

   Lower Extremity ☐ Right ☐ Left

2. Does this driver have adequate MOBILITY of the extremities and trunk to perform the tasks required?

   ☐ Yes

   ☐ No **If no, please indicate the impaired extremity.**

   Upper Extremity ☐ Right ☐ Left

   Lower Extremity ☐ Right ☐ Left

   Trunk ☐

3. Does this driver have adequate JOINTS and TRUNK STABILITY to perform the tasks required?

   ☐ Yes

   ☐ No **If no, please indicate the impaired extremity.**

   Upper Extremity ☐ Right ☐ Left

   Lower Extremity ☐ Right ☐ Left

   Trunk ☐

4. This driver has an **impairment** of: ☐ **hand or** ☐ **upper limb**
has an **amputation** of: ☐ **hand (**○partial ○full**) or** ☐ **upper limb**:

Does he/she have POWER GRIP and PREHENSION FUNCTION of the hand and fingers?
[Power Grip and precision prehension further defined: the capability of holding, clutching, clasping, or seizing firmly the steering wheel and/or other vehicle equipment to effectively control the vehicle and perform normal and emergency vehicle operations [steering (potholes, tire failure (blowouts), etc), operate gear shift levers, air brake controls, light switches, directional signals, horns].

Right ○ Yes ○ No

Left ○ Yes ○ No

If no, do you recommend a surgical reconstruction to produce power grip and/or prehension?
○ Yes ○ No

5. If this driver has an ☐ **UPPER** or ☐ **LOWER LIMB** **IMPAIRMENT** (☐ Right ☐ Left)

or has an ☐ **UPPER** or ☐ **LOWER LIMB** **AMPUTATION** (☐ Right ☐ Left)

does he/she have:

a. The APPROPRIATE TYPE OF PROSTHESIS OR ORTHOTIC DEVICE ?

○ Yes ○ No

b. The appropriate type of TERMINAL DEVICE?

○ Yes ○ No

c. If yes, does the prosthesis\orthotic fit satisfactorily, is it in good operating condition?

○ Yes ○ No

d. Is the applicant able to use the prosthetic/orthotic device proficiently?

○ Yes ○ No

e. In case of a hand or upper limb amputation or impairment does the prosthetic/orthotic device aid the driver in the ability to demonstrate power grasp and precision prehension?

○ Yes ○ No

If no to any of above, what is your recommendation?

_____

_____

_____

6. Please give a clinical description of the prosthetic or orthotic device, power source, etc.

_____

_____

_____

7. Does this driver have any other medical conditions, other than the physical disability indicated in Part III that will interfere with his/her ability to adequately perform the tasks required?

No

Yes - Explain: _____

_____

8. Please summarize your findings and evaluation, include assessment and medical opinion of whether the condition will likely remain medically stable over the lifetime of the driver applicant:

_____

_____

_____

_____

_____

Doctor's Name_____Date_____
(Print or Type)

Address: _____

Telephone No.: __(___)_____

Physiatrist_____ Orthopedic Surgeon_____ Other_____

Board Certified ___Yes ___ No

Board Eligible ___Yes ___ No

Physiatrist's or Orthopedic Surgeon's SIGNATURE_____

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 in intrastate commerce. The requirements for operation of a commercial motor vehicle within the State of Texas are those specified in 49 CFR, 391.41-49, (with the exception of the applicable Texas Intrastate Vision and Limb waivers). Therefore, the medical examiner must be knowledgeable of these requirements and guidelines developed by the Federal Motor Carrier Safety Administration (FMCSA), to assist in making the qualification determination. The medical examiner should be familiar with the driver's responsibilities and work environment. 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, as well as educating 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 condition 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 that the driver must carry with his/her driver 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 forms.

Interpretation of Medical Standards

Since the issuance of the regulations for physical qualifications of commercial drivers, the 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 is directly relevant to the physical examination and is not already included in the medical examination form. The specific regulation is printed in *italics* and its reference by section is **highlighted**:

FMCSA 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, or a Texas Intrastate Limb Waiver.

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 Certificate pursuant to Section 391.49, or a Texas Intrastate Limb Waiver.

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, or a Texas Intrastate Limb Waiver, 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 and Texas Intrastate Limb Waiver program were 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 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 (Limb Waiver) certificates when determined they are necessary to be consistent with safety and public interest.

If the driver is found otherwise medically qualified, the medical examiner must check on the medical certificate that the driver is qualified only if accompanied by a SPE (Limb Waiver certificate. The driver and the employing motor carrier are subject to appropriate penalty if the driver operates a motor vehicle without a current SPE (Limb Waiver) 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 reactions, including 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 diabetic problem. Thus, because of these inherent dangers, the FMCSA has consistently held that **a diabetic who uses insulin for control does not meet the minimum physical requirements of the Federal Motor Carrier Safety Regulations.**

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.

(OVER)

Cardiovascular Condition:
391.41(b)(4)

A person is physically qualified to drive a commercial motor vehicle if that person:
Has no 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 phrase "has no current clinical diagnosis of" is specifically designed to encompass:

(1) a current cardiovascular condition, or
(2) a cardiovascular condition which has not fully stabilized regardless of the time limit. The phrase *"known to be accompanied by"* is defined 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 disqualifying. 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.

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 disqualifying 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.

A blood pressure of 161-180 systolic and/or 91-104 diastolic is considered mild hypertension, and the driver is not necessarily unqualified during evaluation and institution of treatment. The driver is given a three-month period to reduce his or her blood pressure to less than or equal to 160/90; the certifying physician should state on the medical certificate that it is only valid for that three-month period. If the driver is subsequently found qualified with a blood pressure less than or equal to 160/90, the certifying physician may issue a medical certificate for a one-year period, but should confirm blood pressure control in the third month of this one-year period. The individual should be certified annually thereafter.

A blood pressure greater than 180 systolic and/or greater than 104 diastolic is considered moderate to severe. The driver shall not be qualified, even temporarily, until his or her blood pressure has been reduced to less than 181/105. The examining physician may temporarily certify the individual once the individual's blood pressure is below 181 and/or 105. For blood pressure greater than 180 and/or 104, documentation of continued control should be made every six months. The individual should be certified biannually thereafter. The expiration date must be stated on the medical certificate. Commercial drivers who present for certification with normal blood pressure but are taking medication(s) for hypertension should be certified on the same basis as individuals who present with blood pressures in the mild or moderate to severe range. Annual recertification is recommended if the medical examiner is unable to establish blood pressure at the time of diagnosis.

An elevated blood pressure finding should be confirmed by at least two subsequent measurements on different days. Inquiry should be made regarding smoking, cardiovascular disease in relatives and immoderate use of alcohol. An electrocardiogram (ECG) and blood profile including glucose, cholesterol, HDL cholesterol, creatinine and potassium should be made. An echocardiogram and chest X-ray are desirable in subjects with moderate or severe hypertension. Since the presence of target organ damage increases the risk of sudden collapse, group 3 or 4 hypertensive retinopathy, left ventricular hypertrophy not otherwise explained (echocardiography or ECG by Estes criteria), evidence of severely reduced left ventricular function, or serum creatinine of greater than 2.5 warrants the driver being found unqualified to operate a commercial motor vehicle in intrastate commerce.

Treatment includes non-pharmacologic and pharmacologic modalities as well as counseling to reduce other risk factors. Most anti-hypertensive 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 particularly undesirable in commercial drivers.

A commercial driver who has normal blood pressure three or more months after a successful operation for pheochromocytoma, primary aldosteronism (unless bilateral adrenalectomy has been performed), renovascular disease or unilateral renal parenchymal disease, and who shows no evidence of target organ damage may be qualified. Hypertension that persists despite surgical intervention with no target organ damage should be evaluated and treated following the guidelines set forth above.

Rheumatic, Arthritic Orthopedic, Muscular, Neuromuscular or Vascular Disease: 391.41(b)(7)

A person is physically qualified to drive a commercial motor vehicle if that person:
Has no established medical history or clinical diagnosis of rheumatic, arthritic orthopedic, muscular, neuromuscular or vascular disease which interferes with ability to control and operate a commercial motor vehicle safely.
Certain diseases are known to have acute episodes of transient muscle weakness, poor muscular coordination (ataxia), abnormal sensations (paresthesia), decreased muscular tone (hypotonia), visual disturbances and pain which may be suddenly incapacitating. With each recurring episode, these symptoms may become more pronounced and remain for longer periods of time. Other diseases have more insidious onsets and display symptoms of muscle wasting (atrophy), swelling and paresthesia which may not suddenly incapacitate a person but may restrict his/her movements and eventually interfere with the ability to safely operate a motor vehicle. In many instances these diseases are degenerative in nature or may result in deterioration of the involved area.
Once the individual has been diagnosed as having a rheumatic, arthritic orthopedic, muscular, neuromuscular or vascular disease, then he/she has an established history of that disease. The physician when examining an individual should consider the following:

the nature and severity of the individual's condition (such as sensory loss or loss of strength);
the degree of limitation present (such as range of motion);
the likelihood of progressive limitation (not always present initially but may manifest itself over time); and
the likelihood of sudden incapacitation.
If severe functional impairment exists, the driver does not qualify. In cases where more frequent monitoring is required, a certificate for a shorter time period may be issued.

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:

a driver who has a medical history of epilepsy;
a driver who has a current clinical diagnosis of epilepsy; or
a driver who is taking anti-seizure medication.

If an individual has had a sudden episode of a non-epileptic seizure or loss of consciousness of unknown cause which did not require anti-seizure 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 six-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 anti-seizure 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 is not taking anti-seizure medication.

Mental Disorders: 391.41(b)(9)

A person is physically qualified to operate 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 loss of coordination, 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 may be 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, 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.

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 phrase "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.

(OVER)

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 are telescopic lenses acceptable for the driving of commercial motor vehicles.)

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

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 five 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 ASA 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 when 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 five 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 test 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".

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. (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.

A test for controlled substances is not required as part of this biennial certification process. 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 disqualified for the duration of the prohibited drug(s) use and until a second examination shows the driver is free from the drug. 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.

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.

If an individual displays signs of an alcohol-use problem, he or she should be referred to a specialist. After counseling and/or treatment, he or she may be considered for certification.

49 CFR 391.41 PHYSICAL QUALIFICATION 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 8-10 hours and then have an 8-hour off-duty period); straight through haul (cross country drivers); and team drivers (drivers share the driving by alternating their 4-hour driving periods and 4-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 pounds of freight after sitting for a long period of time without any stretching period); inspecting the operating condition of tractor and 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. These tasks demand agility, the ability to bend and stoop, the ability to maintain a crouching position, frequent entry and exit 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.

49 CFR, 391.41 PHYSICAL QUALIFICATIONS FOR DRIVERS

(a) A person shall not drive a commercial motor vehicle unless he/she 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/she 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 foot, a leg, a hand or an arm, or has been granted a Skill Performance Evaluation Certificate (formerly Limb Waiver) pursuant to 391.49;

(2) Has no impairment of a hand or finger which interferes with prehension or power grasping; or 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 diagnoses 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 heart failure;

(5) Has no established medical history or clinical diagnosis of a respiratory dysfunction likely to interfere with his/her 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/her 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 that 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 aid when the audiometric device is calibrated to American National Standard (formerly ASA Standard) Z24.5-1951;

(12) Does not use a controlled substance identified in 21 CFR 1308.11 Schedule 1, an amphetamine, a narcotic or any other habit-forming drug. (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); and

(13) Has no current clinical diagnosis of alcoholism.

Medical Examination Report
FOR COMMERCIAL DRIVERS

1. Driver's Information (To be completed by driver)

****APPLICANT MUST SIGN LAST PAGE.

Driver's Name (Last, First, Middle)	Social Security Number	Birth date MM/DD/YEAR	Age	Sex ☐ M ☐ F	☐ New Application ☐ Renewal	Date of Examination
	- -					

Resident Address	Mailing Address	Work Tel: ( ) Home Tel: ( )	Driver License Number	Class of License ☐ A ☐ B ☐ C	CDL ☐ Yes ☐ No

2. Health History (To be completed by medical examiner) ***See Instructions to the Medical Examiner for guidance.***

Yes	No	
☐	☐	Injury or Illness in the past 5 years ?
☐	☐	Head or spinal cord injuries
☐	☐	Seizures, convulsions or fainting spells
	☐	Medication ? _____
☐	☐	Vision impairment (other than corrective lenses)
☐	☐	Hearing disorder, hearing loss, balance loss
☐	☐	Heart attack, cardiovascular disease
	☐	Medication ? _____
☐	☐	Heart surgery (valve replacement, bypass, angioplasty, etc.)
☐	☐	Hypertension
	☐	Medication ? _____
☐	☐	Muscular disease
☐	☐	Shortness of breath

Yes	No	
☐	☐	Lung disease, emphysema, asthma
☐	☐	Kidney disease
☐	☐	Liver disease
☐	☐	Gastrointestinal disease
☐	☐	Diabetes or elevated blood sugar
	☐	Diet
	☐	Oral medication
	☐	Insulin injection
☐	☐	Nervous or psychiatric disorders
☐	☐	Sleep disorders, insomnia, sleep apnia, etc.
☐	☐	Stroke or paralysis
☐	☐	Missing or impaired limb
☐	☐	Spinal injury or disease

Yes	No	
☐	☐	Chronic low back pain
☐	☐	Sexually transmitted disease
☐	☐	Regular, frequent alcohol use
☐	☐	Narcotic or habit forming drug use
☐		Other _____

(The medical examiner must review and discuss any 'yes' answers with the driver, including potential impact of medications on driving ability.)

_____

_____

APPLICANT NAME: **DRIVER LICENSE NUMBER:**

TESTING (Medical Examiner to complete sections 3 through 5)

3. VISION

Standard: At least 20/40 acuity (Snellen) in each eye with or without correction. At least 70 degrees peripheral in horizontal meridian measured in each eye. The use of corrective lenses should be noted on the Medical Examiner's Certificate.

INSTRUCTIONS: *When other than the Snellen chart is used, give test results in Snellen-comparable values. In recording distant vision, use 20 feet as normal. Report visual acuity as a ratio with 20 as numerator and the smallest type read at 20 feet as denominator. If the applicant wears corrective lenses, these should be worn while visual acuity is being tested. If the driver habitually wears contact lenses, or intends to do so while driving, sufficient evidence of good tolerance and adaptation to their use must be obvious.* ***Monocular drivers must be able to demonstrate 20/25 or better distant visual acuity without corrective lenses or 20/40 or better distant visual acuity with corrective lenses in the good eye. If the use of telescopic lenses is required to meet visual acuity standards, a comprehensive driving examination is required.***

ACUITY	UNCORRECTED	CORRECTED	HORIZONTAL FIELD OF VISION
Right Eye	20/	20/	Right Eye
Left Eye	20/	20/	Left Eye
Both Eyes	20/	20/	

Applicant can recognize and distinguish among traffic control signals and devices showing standard red, green and amber colors ?

Yes ☐ No ☐

Monocular vision:

Yes ☐ No ☐

Complete next line only if vision testing is done by an ophthalmologist or optometrist.

Date of Examination	Name of Ophthalmologist or Optometrist	Telephone Number	License number/State of Issue	Signature

4. HEARING

Standard: a) Must first perceive forced whispered voice ≥ 5 ft., with or without hearing aid, or b) average hearing loss in better ear ≤ 40dB.

☐ Check if hearing aid used for tests. ☐ Check if hearing aid required to meet standard.

INSTRUCTIONS: *To convert audiometric test results from ISO to ANSI, -14dB from ISO for 500 Hz, -10 dB for 1,000 Hz, -8.5 dB for 2,000 Hz. To average, add the readings for three frequencies and divide by three.*

a) Record distance from individual at which forced whispered voice can first be heard.	Right Ear Feet	Left Ear Feet

OR

b) If audiometer is used, record hearing loss in decibels. (acc. To ANSI Z24.5-1951)	Right Ear			Left Ear		
	500 Hz	1000 Hz	2000 Hz	500 Hz	1000 Hz	2000 Hz
	Average:			Average:		

5. BLOOD PRESSURE / PULSE RATE

Numerical readings must be recorded.

Blood Pressure	Systolic	Diastolic

Pulse Rate	☐ Regular ☐ Irregular

Driver qualified if < 160 / 90 on initial examination.

Guidelines for Blood Pressure Evaluation

On Initial Exam	Within 3 months	Certify
If 161-180 and/or 91-104, qualify for 3 months only.	If ≤ 160 and/or 90, qualify for 1 yr. Document Rx & control the third month.	Annually if acceptable BP is maintained.
If > 180 and/or 104, not qualified until reduced to < 181/105. Then qualify for 3 months only.	If ≤ 160 and/or 90, qualify for 6 months. Document Rx and control the third month.	Biannually

Medical Examiner should take at least 2 readings to confirm blood pressure.

TESTING (Medical Examiner to complete sections 6 and 7)

6. LABORATORY AND OTHER TEST FINDINGS

Numerical readings must be recorded.

Urinalysis is required. Protein, blood or sugar in the urine may be an indication for further testing to rule out any underlying medical problem.

URINE SPECIMEN	SP. GR.	PROTEIN	BLOOD	SUGAR

Other Testing ***(Describe and record)***

_____

_____

_____

_____

7. PHYSICAL EXAMINATION

Height: _____ (in.) **Weight:** _____ (lbs.)

The presence of a certain condition may not necessarily disqualify a driver, particularly if the condition is controlled adequately, is not likely to worsen or is readily amenable to treatment. Even if a condition does not disqualify a driver, the medical examiner may consider deferring the driver temporarily. Also, the driver should be advised to take the necessary steps to correct the condition as soon as possible particularly if the condition, if neglected, could result in more serious illness that might affect driving.

Check **YES** if there are any abnormalities. Check **NO** if the body system is normal. Discuss any **YES** answers in detail in the space on the last page and indicate whether it would affect the driver's ability to operate a commercial motor vehicle safely. Enter applicable item number before each comment. If organic disease is present, note that it has been compensated for.

See ***Instructions to the Medical Examiner*** for guidance.

BODY SYSTEM	CHECK FOR:	YES*	NO
1. General Appearance	Marked overweight, tremor, signs of alcoholism, problem drinking or drug abuse.		
2. Eyes	Pupillary equality, reaction to light, accomodation, ocular motility, ocular muscle imbalance, extraocular movement, nystagmus, exophthalmos, strabismus uncorrected by corrective lenses, retinopathy, cataracts, aphakia, glaucoma, macular degeneration.		
3. Ears	Middle ear disease, occlusion of external canal, perforated eardrums.		
4. Mouth and Throat	Irremediable deformities likely to interfere with breathing or swallowing.		

TESTING (Medical Examiner to complete section 7)

7. PHYSICAL EXAMINATION (continued)

BODY SYSTEM	CHECK FOR:	YES*	NO
5. Heart	Murmurs, extra sound, enlarged heart, pacemaker.		
6. Lungs and chest not including breast exam.	Abnormal chest wall expansion, abnormal respiratory rate, abnormal breath sounds including wheezes or alveolar rales, impaired respiratory tunction, dyspnea, cyanosis. Abnormal findings on physical exam may require further testing such as pulmonary tests and/or x-ray of chest.		
7. Abdomen and Viscera	Enlarged liver, enlarged spleen, masses, bruits, hernia, significant abdominal wall muscle weakness.		
8. Vascular System	Abnormal pulse and amplitude, carotid or arterial bruits, varicose veins.		
9. Genito-urinary System	Hernias		
10. Extremities - Limb impaired. Driver be subject to SPE certificate if otherwise qualified.	Loss or impairment of leg, foot, toe, arm hand, finger. Perceptible limp, deformities, atrophy, weakness, paralysis, clubbing, edema, hypotonia. Insufficient grasp and prehension in upper limb to maintain steering wheel grip. Insufficient mobility and strength in lower limb to operate pedals properly.		
11. Spine, other musculoskeletal	Previous surgery, deformities, limitation of motion, tenderness.		
12. Neurological	Impaired equilibrium, coordination or speech pattern; paresthesia, asymmetric deep tendon reflexes, sensory or positional abnormalities, abnormal patellar and Babinski's reflexes, ataxia.		

*** Comments:** _____

Note certification status here. See *Instructions to the Medical Examiner* for guidance.

☐ Qualifies for 2 year ☐ vision ☐ limb waiver certificate.

☐ Does not meet physical standards.

☐ Meets physical standards, but periodic evaluation required.

Due to _____ driver qualified only for:

☐ 3 months ☐ 1 year

☐ 6 months ☐ Other

_____
Medical Examiner's Signature

_____
Medical Examiner's Name (print)

_____ _____
Certificate number and State of issue

Address: _____

Applicant's Signature _____

Telephone number: ( ) _____