

***DISQUALIFYING  
MEDICAL ISSUES***

***THE MOST COMMON THINGS THAT  
CAUSE PROBLEMS FOR DRIVERS***

# ***GUIDELINES VS REGULATIONS***

# GUIDELINES:

ARE RECOMMENDATIONS THAT FMCSA INTENDED AS BEST PRACTICES FOR MEDICAL EXAMINERS TO FOLLOW.

EXAMINERS SHOULD FOLLOW THESE

# *GUIDANCE:*

THE EXAMINER USES GUIDELINES  
THAT FMCSA ISSUES TO HELP  
MAKE DECISIONS DURING THE  
EXAM

# ***REGULATIONS:***

RULES THAT THE EXAMINER ***MUST*** FOLLOW. THE EXAMINER HAS SPECIFIC RULES THAT FMCSA HAS SET AND WE CANNOT DEVIATE FROM THEM.

# *REGULATIONS:*

**THERE ARE ONLY 4  
ABSOLUTE REGULATIONS  
THAT FMCSA HAS ISSUED**

# *ABSOLUTE REGULATIONS:*

- VISION
- HEARING
- INSULIN USE
- SEIZURES

*MOST COMMON ISSUES CAUSING TEMPORARY  
DISQUALIFICATIONS FOR DRIVERS*

- **MEDICATIONS**
- **HISTORY OF HEART PROBLEMS**
- **ORTHOPEDIC CONDITIONS**
- **SLEEP APNEA**
- **NEUROLOGICAL CONDITIONS**



# ***MEDICATIONS:***

MANY MEDICATIONS THAT ARE CONSIDERED TO BE COMMON BY MOST PEOPLE ARE CONSIDERED BY FMCSA AS NEEDING FURTHER DOCUMENTATION AND/OR TESTING.

***THE MEDICATIONS THAT  
CAUSED MOST OF THE  
PROBLEMS WERE:***

- ANTI-ANXIETY
- ANTI-DEPRESSANT
- ANTI-CONVULSANTS
- PAIN MEDICATIONS

**(SEE HANDOUTS)**

*WHAT INFORMATION IS  
NEEDED FOR EACH MEDICATION THAT  
THE DRIVER USES?*

**(SEE HANDOUT)**

***WHY SHOULD THE  
EXAMINER REQUIRE  
FURTHER  
DOCUMENTATION FROM THE  
TYPES OF MEDICATIONS  
PREVIOUSLY LISTED?***

# **FMCSR 49 CFR 392**

- (a) No driver shall be on duty and possess, be under the influence of, or use any of the following drugs or other substances:**
- 1. Any 21 CFR 1308.11 Schedule 1 substance**
  - 2. An amphetamine or any formulation thereof (including “Pep Pills”)**
  - 3. A narcotic drug or any derivative thereof; or**
  - 4. Any other substance, to a degree which renders the driver incapable of safely operating a motor vehicle.**

**(b) No motor carrier shall require or permit a driver to violate paragraph (a) of this section**

**(c) Paragraphs (a) 2, 3 and 4 do not apply to the possession or use of a substance administered to a driver by or under the instructions of a licensed medical practitioner, who has advised the driver that the substance will not affect the driver's ability to safely operate a motor vehicle.**

***THIS IS WHY THE EXAMINER SHOULD ASK  
THE PRESCRIBING PRACTITIONER TO  
PROVIDE A WRITTEN STATEMENT***

# ***FMCSR 49 382.213***

## ***Controlled Substance Use - NEW***

**(c) No employer having actual knowledge that a driver has used a controlled substance shall permit the driver to perform or continue to perform a safety sensitive function**

**(d) An employer *may require* a driver to inform the employer of any therapeutic drug use.**



**IF THE EXAMINER DECIDES TO ALLOW THE  
MEDICATIONS PREVIOUSLY MENTIONED,  
ADDITIONAL REQUIREMENTS MAY BE REQUESTED  
BY THE EXAMINER SUCH AS:**

- **PASS A DRUG TEST ON THE INITIAL AND FOLLOW UP EXAM**
- **MORE FREQUENT RE-EXAMS**
- **DISQUALIFICATION DUE TO USE OF CERTAIN MEDICATIONS**

*MOST COMMON CONDITIONS CAUSING TEMPORARY  
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# *Most Common Heart Conditions Seen*

- **Stents (PCI)**
- **H/O MI**
- **CABG**

# ***CORONARY STENTS (PCI)***

- **WAITING PERIOD IS AT LEAST ONE WEEK POST PROCEDURE**
- **INSERTION SITE IS HEALED**
- **NO CONTINUED S/S's**
- **EKG SHOWS NO CHANGES**
- **NEEDS A NEW EXAM BEFORE RETURNING TO A DRIVING POSITION**

# ***CORONARY STENTS (PCI)***

- **CERTIFY FOR 6 MONTHS**
- **NEEDS A STRESS TEST 3-6 MONTHS AFTER PCI**
- **CLEARANCE FROM A CARDIOLOGIST FAMILIAR WITH FMCSA REGULATIONS**
- **MUST HAVE A STRESS TEST EVERY 2 YEARS**

# ***HISTORY OF A HEART ATTACK (MI)***

- **WAIT AT LEAST 2 MONTHS AFTER A HEART ATTACK BEFORE BEING ALLOWED TO RETURN TO DRIVING A COMMERCIAL VEHICLE**
- **NO CONTINUED S/S's OF HEART PROBLEMS**
- **TOLERATES MEDICATIONS WELL**
- **MUST HAVE A SATISFACTORY STRESS TEST BEFORE RETURNING TO WORK**
- **DRIVER WILL NEED TO HAVE A STRESS TEST DONE EVERY TWO YEARS**
- **NEEDS A NEW EXAM**

# **CABG**

- **CORONARY ARTERY BYPASS GRAFTING**
- **3 MONTH WAIT POST CABG**
- **TOLERATES MEDICATIONS WITHOUT COMPLICATIONS**



# S/S's (cont.)

- **NO S/S's SUCH AS:**

**FEELING LIGHTHEADED OR DIZZY AFTER  
STANDING UP**

**BLURRED VISION**

**OVERALL WEAKNESS**

**FAINING**

**CONFUSION**

**NAUSEA**

- **NEEDS A NEW EXAM**

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# *ORTHOPEDIC CONDITIONS*

## *49 CFR 391.41(b)(1,2,7)*

- HAS NO LOSS OF FOOT, LEG, HAND, OR ARM. HAS A SKILL PERFORMANCE EVALUATION CERTIFICATE (SPE)
- HAS NO IMPAIRMENT OF:
  - HAND, FINGER INTERFERING WITH PREHENSION OR POWER GRASP, OR
  - ARM, FOOT, LEG THAT INTERFERES WITH ABILITY TO OPERATE A CMV, OR HAS SPE
- HAS NO ESTABLISHED MEDICAL HISTORY OR CLINICAL DIAGNOSIS OF RHEUMATIC, ARTHRITIC, ORTHOPEDIC, MUSCULAR, NEUROMUSCULAR, OR VASCULAR DISEASE WHICH INTERFERES WITH DRIVERS ABILITY TO CONTROL AND OPERATE A COMMERCIAL MOTOR VEHICLE SAFELY.



***ORTHOPEDIC CONDITIONS (cont.)***

**SURGERIES - MUST BE RE EVALUATED PRIOR  
TO RETURNING TO DUTY.**

**MUST BE RELEASED FROM ORTHO THAT DID  
THE SURGERY AND NEEDS A LETTER STATING  
THAT THE DRIVER IS SAFE TO OPERATE A  
COMMERCIAL VEHICLE**

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# *Sleep Apnea*

- **If a driver meets certain criteria, the examiner may order a sleep study**
- **The examiner can issue the driver a two month card to allow the driver time to have a sleep study done and to use the CPAP if the driver is prescribed one**
- **The driver will need to bring in a one month compliance report after beginning use of the CPAP machine**
- **The examiner may then issue a three-month card after the initial 60 day card**
- **The driver needs to bring in another compliance report before the end of the 3 months, the examiner can then issue another card for the remainder of the year**



# ***NARCOLEPSY***

THE GUIDELINES RECOMMEND  
DISQUALIFYING A CMV DRIVER WITH A  
DIAGNOSIS OF NARCOLEPSY REGARDLESS OF  
TREATMENT BECAUSE OF THE LIKELIHOOD OF  
EXCESSIVE DAYTIME SOMNOLENCE

## ***OTHER LUNG PROBLEMS***

- **If the driver has any respiratory problems, the examiner may order a PFT**
- **Certain values will be used from the PFT report to determine if the driver is fit to drive**



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# *Neurological Diseases*

- **H/O SEIZURES**
- **STROKES**
- **PERIPHERAL NEUROPATHY**
- **BRAIN INJURIES**

# *Seizures*

Childhood febrile seizures  
are usually not an issue

# *Single Unprovoked Seizure*

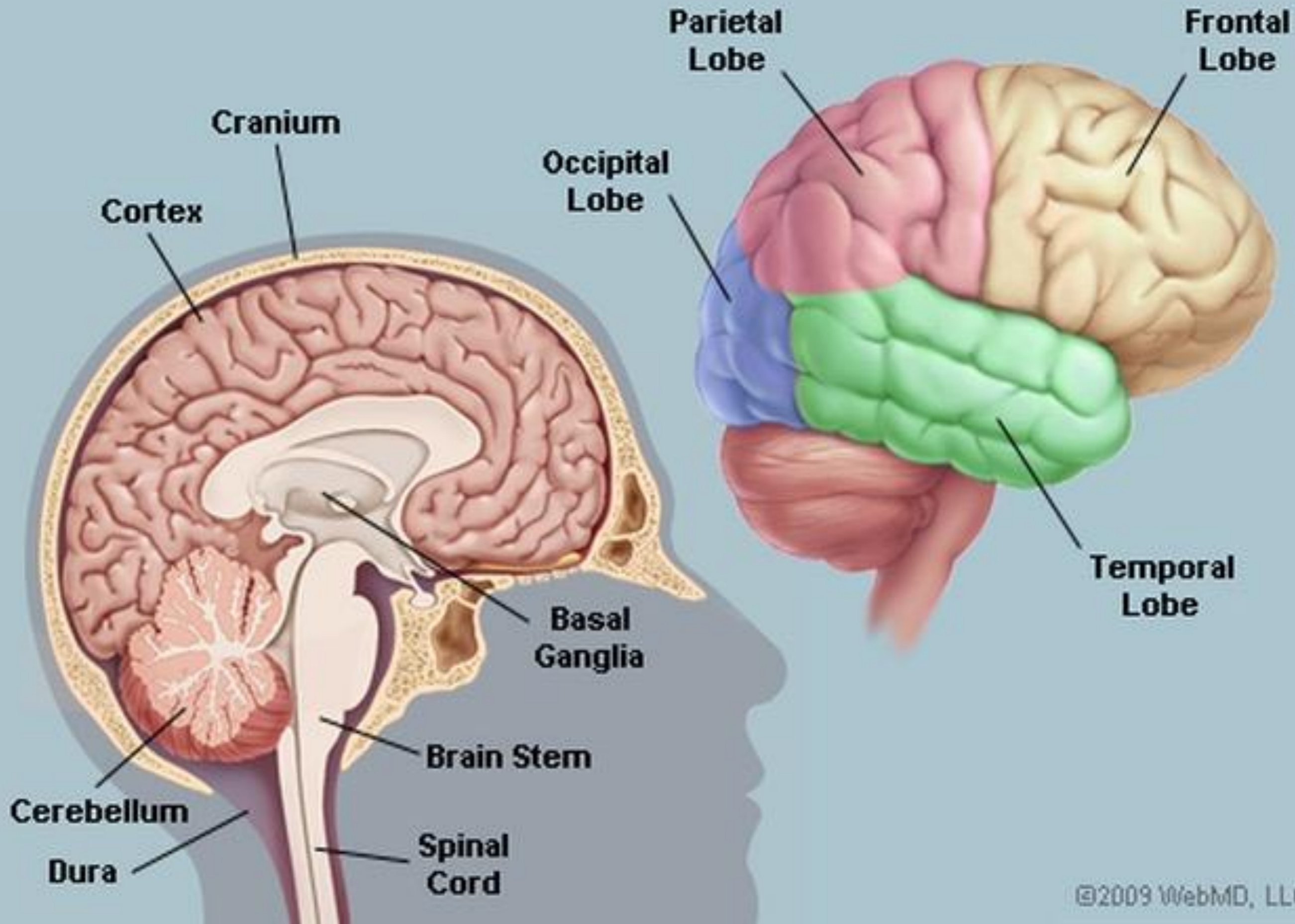
- Minimum waiting period is *five* years seizure free
- Must have a clearance from a neurologist who specializes in epilepsy and understands the functions and demands of driving a commercial vehicle

# *Seizures (cont.)*

- Epilepsy - Defined as more than one seizure or is at risk for seizures
- Minimum waiting period of 10 years off anti-seizure medication

# *Neurological Diseases*

- **H/O SEIZURES**
- **STROKES**
- **PERIPHERAL NEUROPATHY**
- **BRAIN INJURIES**





# *Stroke*

- Minimum waiting period is *one* year if the stroke occurred in the midbrain
- Minimum *five* years waiting period if the stroke occurred in the outer brain
- The driver can return after a normal neurological, neuro-ophthalmological evaluation and neuropsychological testing by a CMV knowledgeable neurologist



# *Stroke (cont.)*

- Strokes that occurred in the midbrain *are not* associated with increased risk for seizures, this is why there is only a one year wait
- Strokes that occur in the cortex (outer brain) *are* associated with an increased risk for seizures, this why it requires a five year wait

# *TIA's*

- **Are basically a mini stroke**
- **It requires a normal neurological, ophthalmological evaluations and neuropsychological testing**

# *Neurological Diseases*

- **H/O SEIZURES**
- **STROKES**
- **PERIPHERAL NEUROPATHY**
- **BRAIN INJURIES**

# ***PERIPHERAL NEUROPATHIES***

- COMMONLY SEEN IN DIABETICS
- DO NOT CERTIFY UNLESS THE DRIVER HAS BEEN EXAMINED BY A NEUROLOGIST OR PHYSIATRIST THAT IS FAMILIAR WITH FMCSA GUIDELINES
- MUST BE EVALUATED BY NEUROLOGIST OR PHYSIATRIST ***ANNUALLY***

# *Neurological Diseases*

- **SEIZURES**
- **STROKES**
- **PERIPHERAL NEUROPATHY**
- **BRAIN INJURIES**

# *TRAUMATIC BRAIN INJURIES*

- Must be off any anti seizure medications and seizure free
- requires normal neurological exam neuropsychological testing and seizure guidelines
- Requires clearance from a neurologist who understands commercial driving

# ***TRAUMATIC BRAIN INJURIES (cont.)***

## **Three types of brain injuries:**

- Mild - loss of consciousness for less than 30 minutes and no penetration of the skin around the brain (dura)
- Moderate - loss of consciousness for 30 minutes to 24 hours but no penetration of the skin around the brain
- Severe - loss of consciousness for over 24 hours or any penetration of the skin around the brain

# *Brain Surgeries*

- Are considered to be the same as severe TBI's
- There is a higher risk of unprovoked seizures even if there hadn't been any seizures right after the surgery
- Per FMCSA guidelines, the driver who has had a brain surgery should not be considered eligible for certification



# *Severe TBI*

- Should not be considered for certification
- No waiting period applies
- 49 CFR 391.41 (b)(8)

# *Moderate TBI*

- LOC between 30 min - 24 hrs
- Minimum 2 year waiting period
- 5 year waiting period if a seizure occurred

# *Mild TBI*

- LOC for less than 30 min
- Minimum 2 year waiting period

**THANK YOU**

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