



**ACCREDITED TRAINING FOR THE NATIONAL  
REGISTRY OF CERTIFIED MEDICAL  
EXAMINERS**

**MODULE 1**

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*TeamCME Chief Medical Officer*



Welcome to Module 1 of the TeamCME Training to become a Certified Medical Examiner in the National Registry of Certified Medical Examiners. TeamCME is an Accredited Federal Motor Carrier Safety Administration Training Organization.



## Postgraduate Institute for Medicine

AMA PRA Category 1 Credit(s)<sup>™</sup> will be awarded after the completion of this FMCSA Accredited Training for the National Registry of Certified Medical Examiners.

Postgraduate Institute for Medicine is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

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TeamCME is **recognized** by the Providers of Approved Continuing Education of the Federation of Chiropractic Licensing Boards (FCLB).

The FCLB has **approved this course for PACE “Distance Learning”** Continuing Education Credits for Doctors of Chiropractic.

*For Chiropractic CE approval verification, please contact your State Chiropractic Licensing Board.*

TeamCME is recognized by the Federation of Chiropractic Licensing Boards “Provider of Approved Continuing Education (or PACE)” program. PACE “Distance Learning” Continuing Education Credit has been approved for Doctors of Chiropractic. Doctors of Chiropractic should check with their State Licensing Board to verify PACE distance learning is acceptance.



### **FMCSA is one of nine DOT Administrations**

- Established on January 1, 2000
- Services provided by Field Operations, Service Centers, and State level division offices



The federal motor carrier safety administration is one of nine DOT administrations. The main office is in Washington DC. There are four regional service centers, and additional State offices.



### Office of Medical Programs

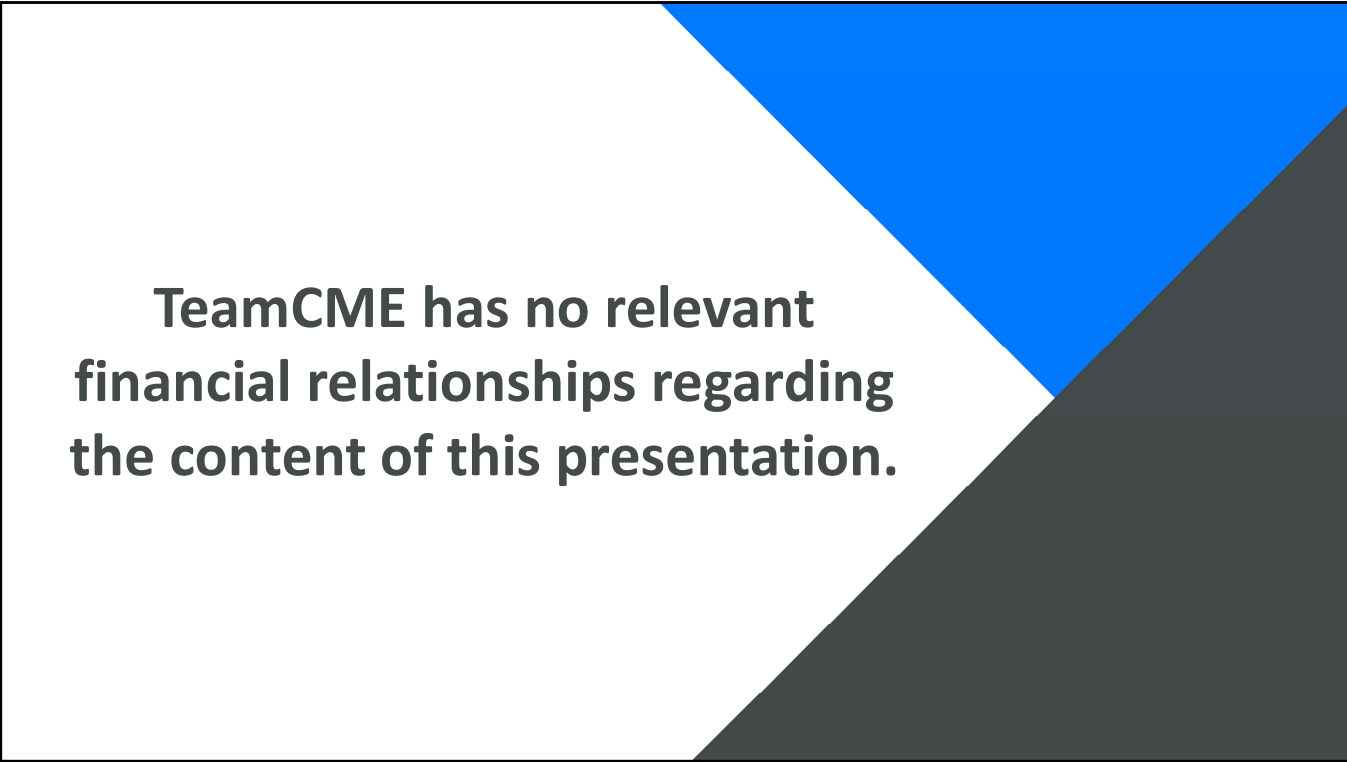
- Oversee medical certification process for CMV drivers operating in interstate commerce
- Develops/Implement medical regs, policies, procedures
- Oversees the MRB (Federal Advisory Committee Act)
- Develops/Implement the National Registry Program
- Oversee Medical Exemption & Certificate Programs
- Lead Office/Agency for CMV driver health, safety, and conducts relevant medical research

The Office of Medical programs oversees medical certification of commercial drivers operating in interstate commerce. They also oversee the Medical Review Board which makes recommendations for changes in medical guidelines, and they oversee the Certified Medical Examiners in the National Registry.



**This ME training course conforms to FMCSA's training curriculum** and topics on regulations and guidelines for conducting CMV driver medical examinations.

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**TeamCME has no relevant  
financial relationships regarding  
the content of this presentation.**

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## Regulations VS Guidelines

**Regulations** concerning the physical qualifications of drivers are legally binding on those subject to their provisions.

- FMCSA has the authority to compel compliance with regulations

**Guidance** is provided in the form of advisory criteria, bulletins, interpretations of the regulations, guidelines, and the contents of the medical examiner handbook.

- The handbook assists in applying the regulations governing the physical qualifications of interstate CMV drivers
- Guidance is based in significant part on input from medical expert panels or derived from clinical best practices
- Guidance does not have the force and effect of law and is not meant to bind MEs, drivers, or the public in any way



It is important to understand the difference between regulations and guidelines. Regulations are legally binding, and FMCSA has the authority to compel compliance. Guidance on the other hand, is not meant to bind medical examiners in any way. Guidance is provided through the FMCSA Medical Examiner Handbook and the interpretations of the handbook. Guidance is also provided in the form of advisory criteria, bulletins, and input from medical expert panels.



## FMCSA Medical Examiner Handbook

The FMCSA Medical Examiner Handbook provides information and guidance to the medical examiner who performs the commercial driver medical examination.

**Determining driver medical fitness for duty is a critical element of the FMCSA safety program.**

Specialists, such as cardiologists and endocrinologists, may perform additional medical evaluation, **but it is the medical examiner who decides if the driver is medically qualified to drive.**



The FMCSA Medical Examiner Handbook provides information and guidance to the medical examiner, but it is the medical examiner who decides if the driver is medically qualified to drive. The examiner may seek the opinion and/or additional evaluation from a medical specialist.



# FMCSRs

## Federal Motor Carrier Safety Regulations (FMCSRs)

FMCSA regulates drivers, trucks and buses, and motor carriers (both private and for-hire) operating in interstate commerce. It also regulates the shipment and transportation of hazardous materials on the highways in interstate and intrastate commerce.

The FMCSRs under the Code of Federal Regulations (CFR), 49 CFR 391.45 states that the following persons must be medically examined and certified as physically qualified to operate a CMV:

- Any person who has not already been medically certified
- Any driver who has not been medically certified in the preceding 2 years
- Any driver authorized to operate a CMV only within an exempt intra-city zone that has not been medically certified during the preceding year

FMCSA regulations are generally referred to as FMCSRs. These are found in the Code of Federal Regulations, or CFR. FMCSA regulates drivers, trucks, buses, and motor carriers operating in interstate commerce. It also regulates the shipment and transportation of hazardous materials on the highways in interstate and intrastate commerce.

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- Any driver who has not been medically certified in the preceding 2 years
- Any driver authorized to operate a CMV only within an exempt intra-city zone that has not been medically certified during the preceding year

## Federal Motor Carrier Safety Regulations (FMCSRs)

- Any driver with insulin-treated diabetes mellitus who has not been medically certified during the preceding 12 months, with the use of the Insulin-Treated Diabetes Mellitus Assessment Form (MCSA-5870), completed by their treating provider
- Any driver who does not satisfy, with the worse eye, either the distant visual acuity standard with corrective lenses or the field of vision standard, or both, who has not been medically certified during the preceding 12 months
- Any driver that has not been medically certified during the preceding 12 months, who has previously been certified under the Alternate Vision Standard
- Any driver whose ability to perform their normal duties has been impaired by a physical or mental injury or disease

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# IMPORTANT REGULATORY DEFINITIONS



## Commercial Driver Licenses, Section 383.5

States are required to issue the following license classifications:



**Class A** -- Any combination of vehicles with a GCWR of **26,001** or more lbs. where the GVWR of the vehicle(s) being towed is in excess of 10,000 lbs.

**Class B** -- Any single vehicle with a GVWR of 26,001 or more lbs. or any such vehicle towing a vehicle not in excess of 10,000 lbs. GVWR.

**Class C** -- Any single or combination of vehicles that does not meet the definition of Class A or B but is either designed to transport 16 or more passengers (including the driver); is placarded hazardous; or is transporting any quantity of a material listed as a select agent or toxin in 42 CFR Part 73.

It's important for medical examiners to clearly understand the difference between the definition of a commercial motor vehicle and the requirements for a driver to obtain a commercial driver's license.

There are three classes of commercial driver's licenses: Class A, Class B, and Class C. Class A is for drivers of vehicles that weigh or have a gross vehicle weight rating of 26,001 or more pounds or such vehicle towing a trailer weighing or rated to carry in excess of 10,000 pounds. Class B is for drivers of any vehicle that weighs or has a gross vehicle weight rating of 26,001 or more pounds, or similar vehicle towing another vehicle that is **not** in excess of 10,000 pounds. Class C is for drivers of any single or combination of vehicles that do not meet the definitions of Class A or B but is either designed to transport 16 or more passengers (including the driver), is placarded as hazardous, or is transporting any quantity of a material listed as a select agent or toxin in 42 CFR Part 73.

**Medical certification is generally required when the driver is operating a Commercial Motor Vehicle (CMV) in interstate commerce 49 CFR 390.5T**

**CMV Definition:**

- Has a gross vehicle or gross combination weight or rated to transport 10,001 lbs or more
- Designed or used to transport more than 9 passengers (including the driver) for compensation
- Designed or used to transport more than 16 passengers (including the driver) not for compensation
- Transport requiring Placard for Hazardous Waste



Medical certification is generally required when the driver is operating a Commercial Motor Vehicle (CMV) in interstate commerce. Section 390.5T defines a CMV as any motor vehicle that has a gross vehicle weight, gross combination vehicle weight, or is rated to transport 10,001 or more pounds. A motor vehicle designed or used to transport more than 9 passengers (including the driver) for compensation, or a motor vehicle designed or used to transport more than 16 passengers (including the driver) without compensation. It also includes any motor vehicle transporting material that requires the vehicle be placarded for hazardous waste.



## Driver Qualifications: Motor Carriers' Responsibility

- Be at least 21 Years Old to drive across state lines (unless the driver is in a FMCSA pilot Program)
  - Some states allow 16-year-olds to drive in intrastate commerce
- Speak and Read English well enough to perform the duties of a commercial driver
- Capable to safely operate CMV
- Perform Driving Tasks
- Current Medical Certificate
- Only one valid CDL License
- Provide background/violation background
- Completed driver road test or equivalent

Motor Carriers are ultimately responsible for ensuring that their drivers meet the medical standards and other general requirements for safe driving. Drivers must be at least 21-years-old to drive across state lines unless the driver is in a FMCSA pilot program. Some states allow 16-year-olds to drive commercial vehicles within their state. They must be able to safely operate a commercial vehicle, perform driving tasks, obtain and maintain a current medical certificate and have only one state Commercial driver's license. They must provide background information including past violations. They must complete a road test or an equivalent evaluation.



## Medical Standards & Motor Carriers

It is possible for a driver to meet the federal requirements to obtain a medical examiners certificate but fail the motor carrier's pre-employment medical exam.

- Motor carriers can have additional medical requirements beyond the federal driving requirements, such as a demonstration of lifting capacity

ME would certify the driver, issue a MEC, and inform the company that the driver does not meet their requirements.



It is possible for a driver to meet the federal requirements to obtain a medical examiners certificate but fail the motor carrier's pre-employment medical exam. Motor carriers can have additional medical requirements beyond the federal driving requirements, such as a demonstration of lifting capacity. Should this occur, the medical examiner should certify the driver and issue a medical certificate to the driver, then inform the company that the driver did not meet their driver requirements.

## Driver Hours of Service (HOS)

### Who Has to Comply?

CDL and Non-CDL Drivers operating a commercial motor vehicle and:

- are engaged in interstate commerce
- are engaged in intrastate commerce where the state adopted and enforces the HOS regulations.

11 Hour Maximum Daily Driving Time!

14 Hour Maximum Daily Work Limit (includes non-driving work and driving time)



To increase highway safety, FMCSA has developed driver hours of service. These regulations apply to interstate drivers of commercial motor vehicles and intrastate drivers within a state that has adopted the hours-of-service regulations. These regulations include actual time driving and time not driving but still working. Drivers are limited in the number of hours they can drive per day, per week, and per eight-day interval. Medical Examiners are to counsel drivers who are not complying with these hours-of-service regulations.

## Interstate Commerce

Trade, traffic, or transportation of goods or services in the United States that:

- *May* involve the crossing of a state boundary
- Cross from one state to another state or a foreign country
- Travel between two places within a state, but during part of the trip, the CMV crosses into another state or country
- Travel between two places within a state but the cargo is part of a trip that began or will end in another state or country



Interstate commerce is defined as trade, traffic, or transportation of goods or services in the United States that may involve the crossing of a state boundary, crosses from one state to another state or a foreign country, travel between two places within a state, but during part of the trip, the CMV crosses into another state or country, or travel between two places within a state but the cargo is part of a trip that began or will end in another state or country. For this reason, even the local UPS delivery driver involved in delivering the cargo to its final destination, (and who may never drive a CMV across state lines), is involved in interstate commerce. All drivers of a commercial motor vehicle in interstate commerce must have a current medical examiner's certificate.

## Interstate Drivers That Do Not Need a Medical Exam

1. School bus drivers transporting children/staff between home and school
2. Federal, State or local government employees
3. Transportation of human corpses
4. Transportation of sick or injured persons
5. Emergency response vehicles
6. Transportation of propane winter heating fuel when responding to an emergency condition requiring immediate response such as damage to a propane gas system after a storm or flooding
7. Response to a pipeline emergency condition requiring immediate response such as a pipeline leak or rupture

The following drivers in interstate transportation are not required to have a medical examiners certificate. School bus drivers who transport children or staff between home and school. Federal, state, or local government employees, transporting human corpses or sick or injured persons, firetruck rescue vehicles during emergencies or other related activities, transportation of propane winter heating fuel when responding to an emergency condition requiring an immediate response such as damage to a propane gas system after a storm or flooding, a response to a pipeline emergency condition requiring immediate response such as a pipeline leak or rupture.

## Interstate Drivers That Do Not Need a Medical Exam

8. In custom harvesting on a farm or to transport farm machinery and supplies used in the harvesting operation and transportation of harvested crops to storage or market
9. Transportation of farm machinery or farm supplies (no placardable hazardous materials) to and from a farm and within 150 air-miles of the farm
10. Beekeepers in the seasonal transportation of bees
11. As a private motor carrier of passengers for non-business purposes
12. Transportation of migrant workers

Drivers in custom harvesting on a farm or to transport farm machinery and supplies used in harvesting operations and transportation of harvested crops to storage or to market. Also, the transportation of agricultural products, farm machinery or farm supplies that are non-hazardous materials to and from a farm and within 150 air miles from the farm. Beekeepers in the seasonal transportation of bee. A private motor carrier of passengers for non-business purposes or to transport migrant workers. If one of the above activities is only operation in which they drive, they operate in excepted interstate commerce and are not required to have a medical certificate.

## Intrastate Commerce

Trade, traffic, or transportation of goods or services in any State that does not meet the description of *interstate* commerce.

### **States regulate intrastate commercial drivers**

- May adopt additional or more stringent requirements
- Drivers can operate with either a medical certificate performed in accordance with FMCSA regulations, **OR**
- With any applicable State variance or exemption

Medical Examiners are responsible for knowing the CMV driver regulations for the state in which they practice.

Each state regulates its own intrastate drivers of commercial vehicles. States can adopt the federal physical exam requirements for intrastate drivers, or they can have fewer or additional requirements. Intrastate drivers must have a medical examiner's certificate in accordance with the FMCSA regulations 49CFR 391.41-391.49 with any applicable State variances. Medical Examiners are responsible for knowing commercial motor vehicle driver regulations and applicable State variances in the state in which they practice.

## Intrastate Drivers That Do Not Need a Medical Exam

- Drive a CMV only in intrastate commerce (goods do not cross state lines) activities for which the State of licensure has determined the driver is not required to meet the State's medical certification requirements

Medical Examiners should know which intrastate drivers are exempted from the requirement to obtain a medical certificate (such as state workers and school bus operations).



Like with interstate driving, states may also exempt certain types of driving activities for drivers involved solely in intrastate commerce (not transporting goods that travel across state lines). Otherwise, if you drive only within your state, you are a non-exempted intrastate and are therefore required to meet the state medical certification requirements. Medical Examiners should know which intrastate drivers are exempted from the requirement to obtain a medical certificate.

## Issuing an “Interstate” or “Intrastate” Medical Examiner’s Certificate



**The ME should conduct the driver medical examination and issue the appropriate Medical Examiner’s Certificate based on “Medical Qualification”**

1. **Interstate certificates:** Drivers that are examined and meet the Federal Medical requirements with or without a Federal exemption
2. **Intrastate certificates:** Drivers that are examined and do not meet the Federal Medical Requirements and are therefore required to have a State variance. If the ME is willing, and understands the available State variances, they may perform the examination and issue a medical certificate indicating the requirement of a State variance

If there is a nonmedical reason for NOT being medically qualified to drive across state lines (such as being less than 21 years old), the State Drivers Licensing Agency will limit the driver’s “license” to only being able to drive a CMV within the state.

When determining whether to issue an interstate or intrastate medical certificate, the ME should conduct the driver medical exam based on whether the driver meets the Federal regulations (with or without a Federal exemption), or whether the driver is required to have a State variance. If the ME is willing, and understands the driver’s licensing State variances available, the ME may perform the examination and issue a medical certificate indicating the requirement of a State variance. Drivers that meet the Federal Medical requirements, with or without a Federal exemption, are medically qualified to drive across state lines in Interstate commerce. If there is a nonmedical reason for **not** being allowed to drive across state lines (such as being less than 21 years old), the State Drivers Licensing Agency will limit the driver’s “License” of the driver to only being able to drive a CMV within the state.




## School Bus Operations

The following School Bus Drivers are not required by federal regulation to have a medical certificate:

- Drivers of vehicles transporting students and/or staff between home and school, regardless of whether the bus crosses state lines
  - Drivers involved with field trips or sporting events, or any driving outside of home to school are not exempt
- Drivers who are employed by a school district, city, county, or state government entity



Determining whether a school bus driver is required to have a medical certificate is complicated. Drivers involved only in “school bus operations” are not required by federal regulation to have a medical certificate. “School bus operation” is defined as transporting students and/or staff between home and school. A driver involved with field trips, sporting events, or anything outside this definition is required to have a medical certificate unless they are employed by a school district, city, county, or state government entity.



## State School Bus Driver Medical Exams

- Most, if not all states require all School Bus Drivers to have a medical examination
- School Bus Driver regulations may be regulated by the State Department of Education
- Many States have additional physical requirements to be a school bus driver
- States may also have their own form rather than the Federal Medical Exam Form
- Some states restrict who can perform a school bus driver physical (DC restrictions in: GA-(1 of 2), MA, MI, NY, SC, WA)
- Download your State's School Bus Driver Handbook

Some states have their own medical certification requirements for school bus drivers, and they may use their own forms. Some states restrict who can perform the school bus physical. Doctors of Chiropractic cannot perform the school bus driver physicals in New York, South Carolina, Georgia, Washington, and Michigan. School bus driver medical regulations in your state may fall under the jurisdiction of your state Department of Education rather than your state licensing agency. You should download your states school bus driver handbook for more information.

## State Driver Licensing Agencies (SDLA) Requirements



SDLAs must retain a copy of a current medical certificate for interstate and intrastate CDL drivers of a CMV until June 23, 2025.

State drivers license agencies are required to retain a copy of a current medical certificate for drivers with a commercial driver's license.

## License / Medical Certificate

- CDL/CLP Drivers are required to submit copies of their medical certificate to their SDLA and the motor carrier.
- FMCSA advises CDL drivers to carry their medical certificate when they drive.
- After 6/23/2025, SLDAs will be receiving medical certificate results directly from FMCSA.
  - Drivers will not be required to carry a copy of their medical certificate after the first 15 days of receiving it
- Non-CDL/CLP drivers are required carry their medical certificate when they drive
  - They are not required by federal law to provide copies to their SDLA
    - May still be required by state law, their employer, DOT officials, or law enforcement

Commercial driver's license and commercial learning permit holders are required to submit a copy of their medical certificate to their state driver's license agency and their motor carrier. FMCSA advises that CDL Drivers carry their medical certificate when they drive. However, after June 23, 2025, SLDAs will be receiving medical certificate results directly from FMCSA at which time drivers will only need to carry a copy of their medical certificate for the first 15 days. Drivers who do not have a commercial driver's license or commercial learner's permit **are** required to carry their medical certificate but are not required by *Federal regulation* to submit copies to their state driver's license agency. However, they may still be required to submit copies according to state law, their employer, motor carrier, DOT officials, or local law enforcement.

## Downgrading & Upgrading CDL Licenses

When a driver's medical certificate expires, their SDLA will downgrade their CDL license to a regular license. Once a new certificate is produced, the CDL license will be renewed.

### Each State will decide how it will comply with downgrading of CDL licenses

- They decide how long a certificate can be expired before the license is downgraded
- They decide how long a license can be downgraded before the driver will be required to obtain re-testing before their CDL license is reinstated

When a driver's medical certificate expires, their SDLA will downgrade their CDL license to a regular license. Once a new certificate is produced, the CDL license will be renewed. Each State creates their own procedures for the downgrading of CDL licenses. They decide how long a certificate can be expired before the license is downgraded and how long a license can be downgraded before the driver will be required to obtain re-testing before their CDL license is reinstated. There is a link in the bottom menu of the TeamCME website titled "State-by-State Medical Certificate Submission". This document provides the contact information and the downgrading regulations for each state's CDL division.



# FOREIGN COUNTRY DRIVERS



## Foreign CDLs that are accepted in the United States:

1. The Federal Government of Mexico
2. Provinces and territories in Canada



Only two foreign country commercial driver's licenses are accepted in the United States. These are from the Federal Government of Mexico and provinces and territories in Canada.

## Mexican CDL & Non-CDL Drivers

The United States accepts the *Licencia Federal de Conductor* issued by the United Mexican States

- Mexico-domiciled CDL holders are not required to obtain a US medical certificate

The agreement **does not allow** Mexico-issued **noncommercial** licensed drivers to drive a CMV in interstate commerce

A US employer of a Mexican driver may require the driver to obtain a US medical certificate.

- *Not submitted to FMCSA*
- ME maintains documents as part of office records



The United States accepts the *Licencia Federal de Conductor* issued by the United Mexican States as proof of medical fitness for a Mexican driver. Therefore, Mexico-domiciled CDL holders are not required to carry a separate US medical certificate. The US agreement with Mexico does not allow Mexico-issued **non-commercial** licensed drivers to drive a Commercial Motor Vehicle in interstate commerce. When employed by a US motor carrier, sometimes the company will require a Mexican driver to obtain a US medical certificate. Medical Examiners are to maintain documents related to exams performed on Mexico-domiciled commercial drivers as part of their office records, but they are not required to submit exam results to FMCSA.



## Canadian CDL & Non-CDL Drivers

The agreement with Canada allows Canadian CDL drivers to drive without a US medical certificate

- They have their own CDL medical examination.

Canada does not require their **Non-CDL** drivers to have a Canadian CDL medical exam

- These drivers **must obtain a US medical certificate** to drive a CMV in the US
- This is why "Province" is listed on the medical exam report form and certificate
- **MEs report exams performed on Canadian *non-commercial/non-CDL* drivers to FMCSA**



The agreement with Canada allows commercial (CDL) drivers to drive a commercial motor vehicle in the US without being examined by a Medical Examiner because they have a medical exam in Canada as part of obtaining their Canadian CDL license. However, Canada does not require their non-commercial driver's license holders to obtain a medical exam. For this reason, a Canadian non-CDL driver operating a commercial vehicle in the U.S. must be examined by a US Medical Examiner and meet the same medical standards as US drivers. The reason that "province" is listed on the medical exam report form and Medical Examiners Certificate is to allow Medical Examiners to report examinations to FMCSA that are performed on Canadian *non-commercial* licensed drivers of a commercial vehicle operating in the U.S..

## Medical Conditions of Foreign Drivers

### Conditions that disqualify a foreign driver:

- Drivers who use insulin
- Drivers with epilepsy
- Drivers with diminished vision
- Drivers who are hearing impaired

**Canadian drivers** who must wear a **prosthesis** to drive must also wear the prosthesis while driving in the US.

- They cannot apply for a SPE in the United States

Canadian or Mexican drivers who use insulin, have epilepsy, or are vision or hearing impaired are not qualified to drive commercial motor vehicles in the United States. Canadian drivers who must wear prosthesis to drive must also wear the prosthesis while driving in the United States. Canadian drivers cannot apply for a US-issued special performance evaluation.



# CMV DRIVER DEMANDS & DUTIES



**All drivers of commercial vehicles must be treated as if they are driving an 18-wheeler weighing 110,000 lbs. from coast to coast**

It does not matter if they...

- have easy driving duties
- are currently employed or currently driving
- just want to keep their CDL privileges current
- need a medical examiner's certificate for a non-driving position or employment



All drivers of commercial vehicles must be treated as if they are driving an 18-wheeler weighing 110,000 lbs. from coast to coast. It does not matter if the driver has easy driving duties or even whether they are currently employed or currently driving. Even if they just want to keep their CDL privileges current or need a medical examiners certificate for a non-driving position or employment.

## Heavy Labor & Other Job Tasks of a Driver

- **Coupling and uncoupling trailers** requires strength and full range of motion to climb, balance, turn, grip, and pull
- **Loading and unloading trailers** of freight after sitting for a long period of time without any stretching period
- **Lifting, installing, and removing heavy tire chains** requires pulling/lifting motions in the range of 35 to 90 pounds
- **Lifting tarpaulins to cover open top trailers** requires pulling/lifting motions in the range of 50 to 100 pounds
- **Performing pre-trip and post-trip safety checks** requires climbing, bending, kneeling, crawling, reaching, stretching, turning, and twisting



MEs need to consider the duties and abilities necessary to perform the tasks associated with being a commercial driver. These tasks include the following:

- **Coupling and uncoupling trailers** requires strength and full range of motion to climb, balance, turn, grip, and pull
- **Loading and unloading trailers** of freight after sitting for a long period of time without any stretching period
- **Lifting, installing, and removing heavy tire chains** requires pulling/lifting motions in the range of 35 to 90 pounds
- **Lifting tarpaulins to cover open top trailers** requires pulling/lifting motions in the range of 50 to 100 pounds
- **Performing pre-trip and post-trip safety checks** requires climbing, bending, kneeling, crawling, reaching, stretching, turning, and twisting

## Driving Maneuvers & Operations of a Driver

- **Moving gear shift levers** requires timely coordination and complex manipulation skills of right upper and left lower extremity
- **Controlling the steering wheel** requires mobility, power grasp, and prehension of hands and fingers
- **Operating brakes and accelerator pedals** requires coordinated movement in lower extremities
- **Operating light switches, windshield wipers, directional signals, emergency lights, horn, etc.** requires mobility and manipulative skills of upper extremities
- **Backing and parking** requires adequate depth perception and coordinated manipulative skills



Other abilities necessary to perform the tasks associated with being a commercial driver include the ability to perform driving maneuvers and performing the operations of a CMV. These include the following:

- **Moving gear shift levers** requires timely coordination and complex manipulation skills of right upper and left lower extremity
- **Controlling the steering wheel** requires mobility, power grasp, and prehension of hands and fingers
- **Operating brakes and accelerator pedals** requires coordinated movement in lower extremities
- **Operating light switches, windshield wipers, directional signals, emergency lights, horn, etc.** requires mobility and manipulative skills of upper extremities
- **Backing and parking** requires adequate depth perception and coordinated manipulative skills



# THE MEDICAL EXAMINER






**Medical examiners shall:**

1. “Be knowledgeable of the specific physical and mental demands associated with operating a commercial motor vehicle and the requirements of this subpart, including the medical advisory criteria prepared by the FMCSA as guidelines to aid the medical examiner in making the qualification determination”
2. “Be proficient in the use of and use the medical protocols necessary to adequately perform the medical examination required by this section.”

In making qualification determinations, medical examiners need to be knowledgeable of the medical standards, advisory criteria, and medical guidelines, and of the physical and mental demands of driving. They are also expected to be proficient in the medical protocols and procedures needed to perform the components of the physical exam.





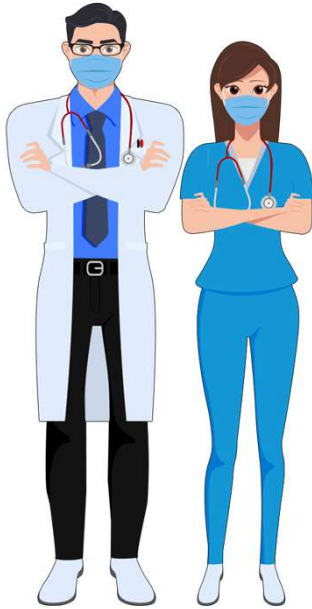
The *purpose of the physical exam* is to detect the presence of a medical or physical condition that could affect safe driving.

- Medical examiners frequently communicate with the driver's PCP or with a specialist whose medical opinions should be considered.
  - PCPs or specialists may not be familiar with the driver medical standards
    - It is the medical examiner's responsibility to determine the driving status for every examination performed
- FMCSA describes the CDL medical exam as a medical "*fitness for duty*" examination

The purpose of the physical exam is to detect the presence of a medical or physical condition that could affect safe driving. In performing these physical exams, medical examiners frequently communicate with the driver's PCP or with a specialist whose medical opinions should be considered. However, they may not be familiar with the driver medical standards. It is the medical examiner's responsibility to determine the driving status for every examination performed.

FMCSA describes the CDL medical exam as a medical "fitness for duty" examination and has described the duties of a commercial driver in a document known as "The Role of the Driver".

## Additional Testing



- MEs order tests to determine if the standards / guidelines for a particular medical condition are met
  - For some guidelines, these tests may determine the severity of the medical condition

Example: A driver with a diagnosis of COPD must meet PFT testing minimums. A ME might order spirometry to help make that determination.

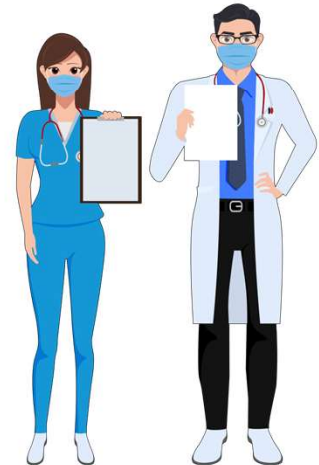
Medical examiners frequently perform or order tests to determine if the medical standard has been met for a certain medical condition. An example would be ordering spirometry for drivers with COPD to determine if the driver meets the pulmonary standards.

### MEs are required to complete the ENTIRE physical qualification examination

- Even if you detect a medical condition that you consider disqualifying, such as deafness

“MEs are expected to determine if the driver meets the physical qualification standards. Thus, if you find a disqualifying condition for which a driver may receive a Federal medical exemption from FMCSA, please record that on the driver’s Medical Examiner’s Certificate, Form MCSA-5876, as well as on the Medical Examination Report Form, MCSA-5875.”

- **If the exam was not completed**, the ME fills in the form with all the available information and *marks the box indicating the examination was incomplete*
- Ensure the driver signs the medical exam report form
- For those qualified to drive, the driver signs and the ME issues the *original copy of the medical examiner’s certificate* to the driver
- There is no requirement to issue a copy of the medical exam report to the driver unless a skill performance evaluation or exemption is required



As the ME conducting the driver’s physical examination, you are required to complete the entire physical qualification examination even if you detect a medical condition that you consider disqualifying, such as deafness. MEs are expected to determine if the driver meets the physical qualification standards outlined in the FMCSRs. Thus, if you find a disqualifying condition for which a driver may receive a Federal medical exemption from FMCSA, please record that on the driver’s Medical Examiner’s Certificate, Form MCSA-5876, as well as on the Medical Examination Report Form, MCSA-5875. Ensure that the form includes the examiners name, exam date, contact information and national registry ID number. Make sure the driver signs the medical examiners certificate. If a driver has been qualified to drive, the medical examiner issues the original copy of the medical examiners certificate to the driver. There is no requirement to issue a copy of the medical examiner report to the driver unless a skilled performance evaluation or exemption is required. This is especially true if a driver has been disqualified.

## Commercial Driver's Signature

### CMV DRIVER'S SIGNATURE

I certify that the above information is accurate and complete. I understand that inaccurate, false or missing information may invalidate the examination and my Medical Examiner's Certificate, that submission of fraudulent or intentionally false information is a violation of [49 CFR 390.35](#), and that submission of fraudulent or intentionally false information may subject me to civil or criminal penalties under [49 CFR 390.37](#) and [49 CFR 386](#) Appendices A and B.

Driver's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Medical Examiners are not expected to be lie detectors,  
but they should not ignore well-based suspicions.**

**The driver is responsible for providing complete and truthful information.**

What can a ME do if they believe a driver has lied?

1. Report to FMCSA: FMCSA requires verifiable evidence to act
2. Talk to driver to resolve the matter
3. Report (without disclosing reason) to the employer that the driver is not qualified to drive
4. Report the issue to the SDLA, ask for instructions

When a driver signs the Medical Exam Report form, they are certifying that the information provided is accurate and complete. They also acknowledge that they understand that submission of fraudulent or intentionally false information not only may invalidate the exam and their Medical Examiners Certificate, but it makes them subject to possible civil or criminal penalties. Medical Examiners are also not expected to be lie detectors, but they should not ignore well based suspicions. The driver is responsible for providing complete and truthful information. If it is believed that a driver has lied, if the ME has verifiable evidence, they can report the driver to FMCSA. They can also talk to the driver to resolve the matter or report the incident to their employer explaining that the driver is not qualified, without disclosing the reason. Lastly, the ME can report the issue to the state SDLA and ask for instructions.

## Determination Pending

**Medical Examiners must make a qualification determination on the day of the exam...with one exception.**

*When the ME does not have sufficient information to make a driving status determination, they can delay making the driving status decision for up to 45 days*

The driver is **not** issued a medical certificate on the day of the exam and the exam is left open until the needed information is received, or 45 days have passed.

**Do not use determination pending if the driver has a condition making them unsafe to operate a CMV.**

Medical Examiners must decide the driver's status on the day the exam is performed, with one exception. When the ME does not have sufficient information to make a driving status determination, they can delay making the driving status decision for up to 45 days, provided that the driver does not have a condition making them unsafe to drive. A determination pending status is used when the Medical Examiner does not have sufficient information. When using the determination pending driving status, the driver is not issued a Medical Examiners Certificate, and the exam is left open to be amended for up to 45 days.

## Determination Pending

### Things to consider:



1. Is the ME unsure of whether they meet the qualification guidelines?
2. Are the certification requirements part of a discretionary or a non-discretionary standard?
3. Are there signs that the driver is not being forthcoming?
4. Are there physical signs that indicate the driver may be unsafe to drive?

When contemplating whether to use determination pending, here are four things to consider. Are you unsure of whether they meet the qualification guidelines? Are the certification requirements part of a discretionary or a non-discretionary standard? Are there signs that the driver is not being forthcoming? Are there physical signs that indicate the driver may be unsafe to drive?

## Things to Remember

- MEs must **report all exams** that have been performed (qualified, disqualified, incomplete) and those that have been placed into determination pending **by midnight of the calendar day following the exam**
  - This is for all interstate CMV drivers and for intrastate CMV drivers **that have a CDL or CLP license**
- All CMV drivers must meet the medical requirements regardless of whether they have a CDL license or not, and regardless of whether they are working as a driver
  - Some non-driving occupations require a medical examiner's certificate by the employer
- A DOT exam can be performed on nearly anyone, but the only exams submitted to FMCSA are for the categories of drivers previously discussed
  - An exam can be performed on a driver less than 18 years of age or of another nationality, but they will not be submitted to FMCSA

MEs must report all exams that have been performed and those that have been placed into determination pending by midnight of the calendar day following the exam. This is for all interstate CMV drivers and for intrastate CMV drivers that have a CDL or CLP license.

All CMV drivers must meet the medical requirements regardless of whether they have a CDL license or not, and regardless of whether they are working as a driver. Some non-driving occupations require a medical examiner's certificate by the employer.

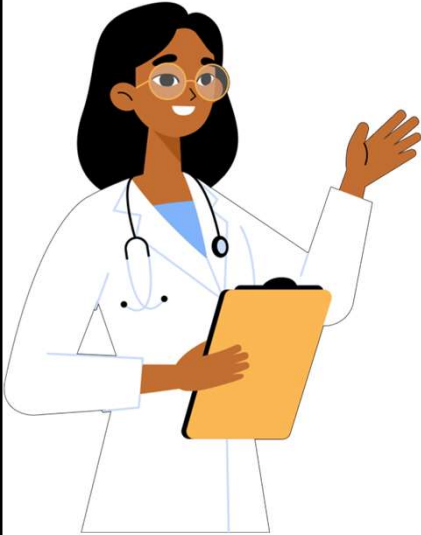
MEs can perform a DOT exam on nearly anyone but they will only submit the exam to FMCSA for the categories of drivers previously discussed. An exam can be performed on a driver less than 18 years of age or of another nationality, but they are not be required to submitted to FMCSA.



# FEDERAL EXEMPTIONS & SKILL PERFORMANCE EVALUATION







## FEDERAL EXEMPTIONS FOR DRIVERS

**FMCSA has two medical exemption programs for Interstate drivers who don't meet the standard. Both are valid for 2 years.**

1. **Seizure/Epilepsy Exemption**
  - Driver can be certified for one year at a time
2. **Hearing Exemption**
  - Driver can be certified for two years at a time

*Medical Examiners cannot issue an exemption. However, the option for applying for a federal or state exemption should be discussed with the driver.*

There are two federal exemption programs available for drivers when they don't meet the qualification standards. They are the federal seizure exemption and the federal hearing exemption. Each exemption is valid for two years but differ in the length of certification. While drivers with the hearing exemption can be certified for two years, drivers with the seizure exemption can only be certified for one year at a time. The federal exemptions are issued by FMCSA. The medical examiner's role is limited to completing the physical exam and ensuring that the driver is otherwise medically qualified to drive.

Many states have exemptions, waivers, variances or program policy of their own for these and other medical conditions. These permit the driver to operate a commercial motor vehicle within that state. Drivers should always be given the option to apply for one of these exemption programs when they do not meet the medical standards.

## Drivers Applying for a Federal Exemption

### Medical Examiners should:

1. Complete the exam just like any other exam
2. Certify the driver up to two years for the hearing exemption and up to one year for the seizure exemption, if otherwise qualified
3. Check “Accompanied by a \_\_\_\_\_ waiver/exemption” on the MER and MEC, and write Federal or State and the exemption name in the blank on both forms, such as federal hearing
4. Give a copy of the exam report form and the original Medical Examiner’s certificate to the driver
5. Inform the driver they cannot drive until they have their exemption
6. Give the federal or state phone number to call or print the application to the waiver or exemption program and give it to the driver

Federal Exemption Phone Number: 202.366.4001

If the driver wants to apply for a federal exemption or state variance, MEs complete the exam the same as for any other driver. Certify the driver for two years with the hearing exemption and up to one year for the seizure exemption, if they are otherwise medically qualified and check the box “accompanied by writing the name of the appropriate exemption or State variance”. An example would be to fill in the blank by writing either federal or state, followed by the exemption name, such as “federal hearing”. The driver receives a copy of the exam report form and the original medical certificate. Inform the driver they cannot drive until they have their exemption or State variance. MEs can print the exemption application form to give to the driver or can give the driver the federal exemption phone number. The phone numbers for the federal hearing and seizure exemptions are shown.

## Applying for a State Exemption

**Medical Examiners should know what exemptions available in their state. They should be familiar with the application procedures required by their State**

- Complete page 5 of the medical exam form MER
- Check the box indicating the accompaniment of a state variance
- Check the second oval on the certificate indicating “intrastate only”
- Give the original copy to the driver

**Some States have a process for an intrastate driver to follow rather than require the driver to obtain a waiver/exemption.**

*(CA & MT have different procedures for intrastate exemptions.)*



Medical examiners should know what state waiver or exemption programs are available within their state. Generally, they are similar to the federal exemptions. Some states depend entirely on the federal exemption program. Other states don't use a waiver or exemption program but have a process that will allow an individual to drive in their state. When completing the medical exam form for drivers who will be applying for a state exemption or waiver, medical examiners should complete page 5 and check the box indicating the accompaniment of a state variance, then check the second oval on the certificate indicating “intrastate only” driving. This is the procedure for all states except California and Montana. These two states never use page 5. They require the medical examiner to only complete page 4 and disqualify the driver. The driver will take a copy of the medical exam form and the state will issue a restricted certificate to the driver.



## Alternative for Limb Loss/Impairment

### Skilled Performance Evaluation (SPE):

- Allows a driver with a *fixed* deficit, or loss of hand, foot, arm or leg to drive a CMV
- The option for applying for a SPE should be discussed with the driver
- SPEs are performed by FMCSA representatives or an assigned State representative
- Valid for 2 years and drivers can be certified for same amount of time

*An SPE is not an exemption program*

For drivers that have a permanent impairment or loss of a limb, there is an alternative to becoming medically qualified. A Skilled Performance Evaluation (SPE) allows a driver with a fixed deficit in an extremity such as loss of a hand, foot, arm, or leg to be able to drive a commercial motor vehicle. It is not an exemption and is treated differently. When applicable, the option for applying for an SPE certificate should be discussed with the driver. SPEs are performed by FMCSA representatives. We will discuss the SPE in detail later.



# DRIVER EXAMINATION FORMS



## Record Retention

Medical Examiners must retain the original exam form, a copy of the certificate, and related health records for **three years**. Acceptable forms of retained records include:

- Paper copies
- Scanned versions of the paper copies
- Documents stored within electronic health records

If the medical exam establishes a doctor/patient relationship keep the medical exam records for the period required by state law.



Medical examiners must keep the original completed medical examination report form, a copy of the medical examiners certificate, and related health records or letters provided by the driver or their treating provider. These can be paper copies, scanned versions of the paper copies, or documents stored within their electronic health records. Federal regulation is that these records be retained for three years. Although three years is the minimum federal retention requirement, MEs should comply with their state's record retention requirements which may be longer.

## Medical Exam Report Request



When requested by a federal/state authority, regulatory requirements take precedence over HIPPA, and MEs must provide a copy within 48 hours.

If transmitting a copy of the Exam Report to the employer, get the driver's signature for HIPPA release of medical information.

FMCSA does not require the driver's employer to keep a copy of their drivers' Medical Exam Report form but does not prohibit employers from obtaining copies.

What information must or can be turned over to the carrier is a legal issue, and if in doubt, the examiner should obtain a legal opinion.

If contacted by a federal or state authority, the medical examiner must provide a copy of the medical exam form within 48 hours. When the ME receives a request for records by any other entity, they should treat the medical exam form like other HIPPA-protected medical information and obtain a signed authorization release of information from the driver before releasing a copy. This issue can be avoided by giving the driver a copy of the exam form so the driver can provide it to whom they desire. Employers are allowed, but not required to obtain a copy of the driver's medical exam form. If the medical examiner has questions regarding what information must or can be released, the medical examiner should obtain a legal opinion.

**Public Burden Statement**

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information that does not display a current valid OMB Control Number. The OMB Control Number for this information collection is 2040-0047. The average burden of this collection of information is estimated to average approximately 25 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Washington Field Office, Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRR, 1200 New Jersey Avenue, SE, Washington, D.C. 20590.



U.S. Department of Transportation  
Federal Motor Carrier  
Safety Administration

**Medical Examination Report Form**  
(for Commercial Driver Medical Certification)

MEDICAL RE...

(or sticker)

**SECTION 1. Driver Information** (to be filled out by the driver)

**PERSONAL INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ Issuing State/Province: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-Mail (optional): \_\_\_\_\_ CLP/CDL Applicant/Holder\*:  Yes  No  
Driver ID Verified By\*\*:

Has your USDOT/FMCSA medical certificate ever been denied or issued for less than 2 years?  Yes  No  Not Sure

\*CLP/CDL Applicant/Holder: See instructions for definitions.

\*\*Driver ID Verified By: Record what type of photo ID was used to verify the identity of the driver, e.g., CDL, driver's license, etc.

**DRIVER HEALTH HISTORY**

Have you ever had surgery? If "yes," please list and explain below.  Yes  No



## Medical Examination Report Form (MCSA-5875)

Commonly referred to as the “Long Form”  
Composed of 5 (fillable) pages:

1. Driver’s information, Health history specifically medications, and past surgeries
2. Continued Health History, Driver’s signature area, ME history review
3. Divided into upper and lower halves
  - Upper Half: Vision, Height, Weight, Hearing, BP, Pulse Rate, Heart Rhythm, UA, other testing results
  - Lower Half: Physical Examination Findings. It is generally accepted that the page’s lower half is performed by a ME
4. Certification for Interstate Drivers
5. Certification for Intrastate Drivers
6. Instructions on use of the forms

Form MCSA-5875 OMB No. 2126-0006 Expiration Date: 03/31/2025

**Public Notice Statement:**  
Changes apply to how you conduct or operate, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of Paperwork Reduction Project (2126-0006) unless it is clearly marked as a required collection. The Data Collection Burden for this information collection is 10 to 20 minutes per response. The information collection is estimated to take approximately 20 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are voluntary, and comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, are invited. Send comments to Washington, D.C. 20503.

U.S. Department of Transportation  
Federal Motor Carrier  
Safety Administration

**Medical Examination Report Form**  
(Commercial Driver Medical Certificate)

**MEDICAL RECORD #**  
(or sticker)

**SECTION 1. Driver Information (to be filled out by the driver)**

**PERSONAL INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ Issuing State/Province: \_\_\_\_\_ Phone: \_\_\_\_\_  
E-Mail (optional): \_\_\_\_\_ CLP/CDL Applicant/Holder\*:  Yes  No  
Driver ID Verified By\*: \_\_\_\_\_  
Has your USDOT/MCSA medical certificate ever been denied or issued for less than 2 years?  Yes  No  Not Sure

**DRIVER HEALTH HISTORY**

Have you ever had surgery? If "yes," please list and explain below.  Yes  No  Not Sure

Are you currently taking medications (prescription, over-the-counter, herbal remedies, diet supplements)?  Yes  No  Not Sure  
If "yes," please describe below:

The medical exam report form is composed of 5 pages. The first page has the driver health history, medications and surgeries. Page 2 has additional health history information, the driver’s signature area, and the Medical Examiner review of the driver’s health history. Page 3 is divided into an upper and lower half. The upper half is composed of duties that can be performed by Non-Certified Medical Examiner staff which includes vision, height weight, hearing, BP, pulse, Urine analysis and more. The lower half of page three is the part of the medical exam that must be performed by a Certified Medical Examiner. Page 4 is used to indicate driving status for interstate drivers, and page 5 is for intrastate drivers. Instructions on how to use the forms is on page 6.

## MCSA 5875 - Page 1 Upper Half

Form MCSA-5875 OMB No.: 2126-0006 Expiration Date: 03/31/2025

**Public Burden Statement**  
A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0006. Public reporting for this collection of information is estimated to average approximately 25 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, 1200 New Jersey Avenue, SE, Washington, D.C. 20590.

U.S. Department of Transportation  
Federal Motor Carrier  
Safety Administration

**Medical Examination Report Form**  
(for Commercial Driver Medical Certification)

**MEDICAL RECORD #**  
\_\_\_\_\_  
(or sticker)

**SECTION 1. Driver Information** (to be filled out by the driver)

**PERSONAL INFORMATION**

Last Name: Johnson First Name: Jack Middle Initial: D Date of Birth: 12/3/8? Age: ?  
Street Address: Permanent Address City: Pendleton State/Province: OR Zip Code: 97801  
Driver's License Number: 13579 Issuing State/Province: OR Phone: 541-276-0001  
E-Mail (optional): \_\_\_\_\_ CLP/CDL Applicant/Holder\*:  Yes  No  
Driver ID Verified By\*\*: \_\_\_\_\_  
Has your USDOT/FMCSA medical certificate ever been denied or issued for less than 2 years?  Yes  No  Not Sure

\*CLP/CDL Applicant/Holder: See instructions for definitions. \*\*Driver ID Verified By: Record what type of photo ID was used to verify the identity of the driver, e.g., CDL, driver's license, passport.

In the upper left-hand corner of the form is the form number MCSA-5875. In the upper right corner is the expiration date. The gray section below the expiration date is the public burden statement. This statement is required whenever the federal government collects personal information. Over to the right and lower is a medical record number area. Use of the medical record section is optional. This area is for the CME's convenience. If you assign a clinic record number to driver exams, this is the area to print that number. Otherwise, it is left blank. The driver fills out section one, driver information, with the exception of the driver ID verification space. The driver fills in their name which should match the driver's identification. For the address space the driver should write in the address that they consider as their most permanent or home address. It does not need to match the address on the driver's identification. In the area designated for the drivers licensing state you may notice that there is province indicated. Province was added to accommodate drivers from Canada who have provinces on their driver's license. The drivers license number should match the driver's commercial license if it is available. If it is not available, write "None" in the space provided. Putting in an email address is optional. Drivers frequently do not know how to answer the CDL/CLP Applicant/Holder question. If a driver has a commercial drivers license or a commercial learner's permit, or intends to obtain either of these, the driver should check "yes". Otherwise, "No" should be marked. Your staff fills in the type of photo identification used such as a driver's license, state identification card or a passport. Lastly, drivers sometimes do not understand the last question regarding previously issued medical certificates. If the driver received a previous medical certificate that was issued for less than two years,

the driver should mark “yes”.

## MCSA 5875 - Page 1 Lower Half

**DRIVER HEALTH HISTORY**

Have you ever had surgery? If "yes," please list and explain below.  Yes  No  Not Sure

Drivers forget to mark "no" if they haven't had surgery or are not taking any medications. If the driver did not make any comments, make Sure "No" has been checked in both upper and lower section.

Are you currently taking medications (prescription, over-the-counter, herbal remedies, diet supplements)? If "yes," please describe below.  Yes  No  Not Sure

#7 Lisinopril 10mg twice a day, Dr. Jeff Carlson, Pendleton, OR

To provide a copy of the exam report form (HIPPA Protected) to an employer the ME should have a signed release from the driver.

(Attach additional sheets if necessary)

\*\*This document contains sensitive information and is for official use only. Improper handling of this information could negatively affect individuals. Handle and secure this information appropriately to prevent inadvertent disclosure by keeping the documents under the control of authorized persons. Properly dispose of this document when no longer required to be maintained by regulatory requirements.\*\*

On the bottom half of page 1, drivers mark either yes, no, or not sure to the question regarding ever having surgery. If the answer is no, drivers frequently forget to mark the no box. If the driver marks yes or not sure, the driver should write in additional details in the blue shaded area directly below the question. Medical Examiners must review yes and not sure answers with the driver. The same applies to whether the driver is taking any medications including prescriptions, over the counter medications, herbal or dietary supplements. In this case the driver is taking Lisinopril. The reason for putting the number 7 in front of the medication explanation will be explained in a following slide. At the bottom of this page is a statement regarding avoidance of inadvertent disclosure of the medical examiners report form to other entities without the driver's expressed permission.

MER 5875 - Page 2

Form MCSA-5875 OMB No. 2126-0006 Expiration Date: 03/31/2025

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Exam Date: \_\_\_\_\_

**DRIVER HEALTH HISTORY (continued)**

Do you have or have you ever had:	Yes	No	Not Sure	Do you have or have you ever had:	Yes	No	Not Sure
1. Head/brain injuries or illnesses (e.g., concussion)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	16. Dizziness, headaches, numbness, tingling, or memory loss	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Seizures/epilepsy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	17. Unexplained weight loss	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Eye problems (except glasses or contacts)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	18. Stroke, mini-stroke (TIA), paralysis, or weakness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Ear and/or hearing problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	19. Missing or limited use of arm, hand, finger, leg, foot, toe	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Heart disease, heart attack, bypass, or other heart problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	20. Neck or back problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Pacemaker, stents, implantable device, or other heart procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	21. Bone, muscle, joint, or nerve problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. High blood pressure	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	22. Blood clots or bleeding problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. High cholesterol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	23. Cancer	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Chronic (long-term) cough, shortness of breath, or other breathing problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	24. Chronic (long-term) infection or other chronic diseases	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Lung disease (e.g., asthma)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	25. Sleep disorders, pauses in breathing while asleep, daytime sleepiness, loud snoring	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. Kidney problems, kidney stones, or pain/problems with urination	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	26. Have you ever had a sleep test (e.g., sleep apnea)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
12. Stomach, liver, or digestive problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	27. Have you ever spent a night in the hospital?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
13. Diabetes or blood sugar problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	28. Have you ever had a broken bone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
14. Anxiety, depression, nervousness, other mental health problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	29. Have you ever used or do you now use tobacco?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Fainting or passing out	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	30. Do you currently drink alcohol?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	31. Have you used an illegal substance within the past two years?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	32. Have you ever failed a drug test or been dependent on an illegal substance?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other health condition(s) not described above:  Yes  No  Not Sure

Did you answer "yes" to any of questions 1-32? If so, please comment further on those health conditions below:  Yes  No  Not Sure

(which additional items if necessary)

**DRIVER SIGNATURE**

I certify that the above information is accurate and complete. I understand that inaccurate, false or missing information may invalidate the examination and the Medical Examiner Certificate, that submission of fraudulent or intentionally false information is prohibited under 23 CFR 390.201, and 23 CFR 390.203, Appendices A and B.

Driver's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION 2. Examination Report (to be filled by the medical examiner)**

**DRIVER HEALTH HISTORY REVIEW**

Review and check appropriate diagnosis or any additional medical needs. Comment on the driver's responses to the "Health History" questions that may affect the driver's safe operation of a commercial motor vehicle (CMV).

(which additional items if necessary)

Page 2

MER 5875 - Page 2 Upper Half

Form MCSA-5875 OMB No. 2126-0006 Expiration Date: 03/31/2025

Last Name: Johnson First Name: Jack DOB: 12/3/1980 Exam Date: 10/31/20

**DRIVER HEALTH HISTORY (continued)**

Do you have or have you ever had:	Yes	No	Not Sure	Do you have or have you ever had:	Yes	No	Not Sure
1. Head/brain injuries or illnesses (e.g., concussion)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	16. Dizziness, headaches, numbness, tingling, or memory loss	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
2. Seizures/epilepsy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	17. Unexplained weight loss	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
3. Eye problems (except glasses or contacts)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	18. Stroke, mini-stroke (TIA), paralysis, or weakness	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
4. Ear and/or hearing problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	19. Missing or limited use of arm, hand, finger, leg, foot, toe	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
5. Heart disease, heart attack, bypass, or other heart problems	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	20. Neck or back problems	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
6. Pacemaker, stents, implantable devices, or other heart procedures	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	21. Bone, muscle, joint, or nerve problems	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
7. High blood pressure	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	22. Blood clots or bleeding problems	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
8. High cholesterol	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	23. Cancer	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
9. Chronic (long-term) cough, shortness of breath, or other breathing problems	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	24. Chronic (long-term) infection or other chronic diseases	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
10. Lung disease (e.g., asthma)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	25. Sleep disorders, pauses in breathing while asleep, daytime sleepiness, loud snoring	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
11. Kidney problems, kidney stones, or pain/problems with urination	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	26. Have you ever had a sleep test (e.g., sleep apnea)?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
12. Stomach, liver, or digestive problems	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	27. Have you ever spent a night in the hospital?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
13. Diabetes or blood sugar problems	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	28. Have you ever had a broken bone?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
14. Anxiety, depression, nervousness, other mental health problems	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	29. Have you ever used or do you now use tobacco?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
15. Fainting or passing out	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	30. Do you currently drink alcohol?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	31. Have you used an illegal substance within the past two years?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>
	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	32. Have you ever failed a drug test or been dependent on an illegal substance?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>

This is Page 2 of the MER 5875 form. The upper half contains the bulk of questions regarding the driver's past medical health history. The bottom half contains a section for the driver's signature and written comments by the CME. In the upper half of the page 2 of the Medical Examiner report form. The driver should respond to each question by marking either yes, no, or not sure. The medical examiner must review yes and not sure answers and make additional comments in the blue shaded area of section 2 at the bottom of the page.

## MER 5875 - Page 2 Lower Half

Other health condition(s) not described above:  Yes  No  Not Sure

Did you answer "yes" to any of questions 1-32? If so, please comment further on those health conditions below:  Yes  No  Not Sure

#7 I have high blood pressure but it's under control, treated by Dr. Carlson

#7 From Upper  
Page 2

(Attach additional sheets if necessary)

**CMV DRIVER'S SIGNATURE**

I certify that the above information is accurate and complete. I understand that inaccurate, false or missing information may invalidate the examination and my Medical Examiner's Certificate, that submission of fraudulent or intentionally false information is a violation of [49 CFR 390.35](#), and that submission of fraudulent or intentionally false information may subject me to civil or criminal penalties under [49 CFR 390.37](#) and [49 CFR 386](#) Appendices A and B.

Driver's Signature: Jack Johnson Date: 10/31/16

**SECTION 2. Examination Report** (to be filled out by the medical examiner)

**DRIVER HEALTH HISTORY REVIEW**

Review and discuss pertinent driver answers and any available medical records. Comment on the driver's responses to the "health history" questions that may affect the driver's safe operation of a commercial motor vehicle (CMV).

#7 HTN PCP Dr. Jeff Carlson, Pendleton, OR 541-276-0001

(Attach additional sheets if necessary)

Page 2

The lower half of page 2 begins by asking whether the driver has had any other health condition not already covered in the upper half of the page. There is an area for the driver to add additional information if needed. The next section is for the driver to provide comments on any yes or not sure questions from the top half of the page 2 that was on the previous slide. If the driver doesn't, the CME numbers each comment corresponding with the number of the question the driver's comments pertain to. The driver then reads the certifying statement and signs and dates the form in the areas provided. Medical Examiners should make sure that the driver has signed and dated the form. By signing the form, the driver could face criminal or civil penalties should they not disclose an accurate and complete health history. This protects the Medical Examiner should an undisclosed medical condition cause an accident in the future.

Once the form is signed, the medical examiner performs a review of all of the driver's medical history. The medical examiner should then review the list of medications from the previous page to see if they correspond to the medical conditions and comments given by the driver. The ME should number the medications to correspond with the driver's and Medical Examiner comments. In this example, the driver and CME made comments related to question #7. That is why a #7 was shown in front of Lisinopril on the previous slide.

MER 5875 - Page 3

Form MCSA-5875  
 Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Expiration Date: 03/31/2025

**TESTING**  
 Pulse Rate: \_\_\_\_\_ Pulse rhythm regular:  Yes  No  
 Height: \_\_\_\_\_ feet \_\_\_\_\_ inches Weight: \_\_\_\_\_ pounds

Blood Pressure: \_\_\_\_\_ Systolic \_\_\_\_\_ Diastolic  
 Sitting \_\_\_\_\_  
 Second reading \_\_\_\_\_  
 Other testing if indicated: \_\_\_\_\_

**Acuity**  
 Right Eye: 20/\_\_\_\_ 20/\_\_\_\_ Right Eye: \_\_\_\_\_ degrees  
 Left Eye: 20/\_\_\_\_ 20/\_\_\_\_ Left Eye: \_\_\_\_\_ degrees  
 Both Eyes: 20/\_\_\_\_ 20/\_\_\_\_

**Whisper Test Results**  
 Record distance (in feet) from driver at which a forced whispered voice can first be heard:  
 Right Ear: \_\_\_\_\_ Left Ear: \_\_\_\_\_

**Other testing if indicated**  
 10/15/16 A1c = 7.5

**PHYSICAL EXAMINATION**  
 Check this body system for abnormalities:

Body System	Normal	Abnormal
1. General	<input type="radio"/>	<input type="radio"/>
2. Skin	<input type="radio"/>	<input type="radio"/>
3. Eyes	<input type="radio"/>	<input type="radio"/>
4. Ears	<input type="radio"/>	<input type="radio"/>
5. Mouth/Throat	<input type="radio"/>	<input type="radio"/>
6. Cardiovascular	<input type="radio"/>	<input type="radio"/>
7. Lungs/Chest	<input type="radio"/>	<input type="radio"/>
8. Abdomen	<input type="radio"/>	<input type="radio"/>
9. Genitourinary system including hernias	<input type="radio"/>	<input type="radio"/>
10. Back/spine	<input type="radio"/>	<input type="radio"/>
11. Extremities/Joints	<input type="radio"/>	<input type="radio"/>
12. Neurological system including reflexes	<input type="radio"/>	<input type="radio"/>
13. Gait	<input type="radio"/>	<input type="radio"/>
14. Vascular system	<input type="radio"/>	<input type="radio"/>

Page 3

MER 5875 - Page 3 Upper Half

Form MCSA-5875  
 Last Name: Johnson First Name: Jack DOB: 12/3/1980 Expiration Date: 10/31/16

**TESTING**  
 Pulse Rate: 85 Pulse rhythm regular:  Yes  No  
 Height: 6 feet 1 inches Weight: 210 pounds

Blood Pressure: \_\_\_\_\_ Systolic \_\_\_\_\_ Diastolic  
 Sitting: 145 / 92  
 Second reading: 140 / 90

Urinalysis: Sp. Gr. 1.020 Protein None Blood NEG Sugar TR

**Other testing if indicated**  
 10/15/16 A1c = 7.5

**Acuity**  
 Right Eye: 20/\_\_\_\_ 20/\_\_\_\_ Right Eye: 90 degrees  
 Left Eye: 20/\_\_\_\_ 20/\_\_\_\_ Left Eye: 90 degrees  
 Both Eyes: 20/\_\_\_\_ 20/\_\_\_\_

**Whisper Test Results**  
 Record distance (in feet) from driver at which a forced whispered voice can first be heard:  
 Right Ear: 12 Left Ear: 8

**Other testing if indicated**  
 10/15/16 A1c = 7.5

**PHYSICAL EXAMINATION**  
 Check this body system for abnormalities:

Body System	Normal	Abnormal
1. General	<input type="radio"/>	<input type="radio"/>
2. Skin	<input type="radio"/>	<input type="radio"/>
3. Eyes	<input type="radio"/>	<input type="radio"/>
4. Ears	<input type="radio"/>	<input type="radio"/>
5. Mouth/Throat	<input type="radio"/>	<input type="radio"/>
6. Cardiovascular	<input type="radio"/>	<input type="radio"/>
7. Lungs/Chest	<input type="radio"/>	<input type="radio"/>
8. Abdomen	<input type="radio"/>	<input type="radio"/>
9. Genitourinary system including hernias	<input type="radio"/>	<input type="radio"/>
10. Back/spine	<input type="radio"/>	<input type="radio"/>
11. Extremities/Joints	<input type="radio"/>	<input type="radio"/>
12. Neurological system including reflexes	<input type="radio"/>	<input type="radio"/>
13. Gait	<input type="radio"/>	<input type="radio"/>
14. Vascular system	<input type="radio"/>	<input type="radio"/>

Page 3 is where the recording of examination findings begins. Generally speaking, the components that appear in the upper half of the page can be performed by qualified staff members. The driver's pulse rate, and rhythm, height and weight are recorded in the upper area of the testing section. If the driver's blood pressure is less than 140/90, only one blood pressure reading is required. If a second reading is taken the results should be recorded in the space provided. If additional BP measurements are performed, the results should be reported in the other testing if indicated area, or on a separate piece of paper. Urinalysis results are recorded in the appropriate spaces. With the exception of none, negative, or trace, all readings should be reported in numerical values. If using a urinalysis test strip, the devices instructions provide the numerical values associated with +, ++, and other test strip color results. If other testing is performed, the results should be recorded in the other testing if indicated section or on a separate piece of paper. It is not necessary to test and record both uncorrected and corrected visual acuity values.

## RECORDING TEST RESULTS

**Hearing**  
 Standard: Must first perceive whispered voice at not less than 5 feet OR average hearing loss of less than or equal to 40 dB, in better ear (with or without hearing aid).

Check if hearing aid used for test:  Right Ear  Left Ear  Neither

**Whisper Test Results**  
 Record distance (in feet) from driver at which a forced whispered voice can first be heard

			Right Ear	Left Ear	
			4ft	2ft	

**OR**

**Audiometric Test Results**

Right Ear			Left Ear		
500 Hz	1000 Hz	2000 Hz	500 Hz	1000 Hz	2000 Hz
20dB	30dB	40dB	40dB	50dB	60dB

Average (right): 30dB      Average (left): 50dB

**MEDICAL EXAMINER DETERMINATION (Federal)**  
 Use this section for examinations performed in accordance with the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49):

Does not meet standards (specify reason): \_\_\_\_\_

Meets standards in 49 CFR 391.41; qualifies for 2-year certificate

Meets standards, but periodic monitoring required (specify reason): \_\_\_\_\_

Driver qualified for:  3 months  6 months  1 year  other (specify): \_\_\_\_\_

Wearing corrective lenses  Wearing hearing aid  Accompanied by a waiver/exemption (specify type): \_\_\_\_\_

Accompanied by a Skill Performance Evaluation (SPE) Certificate  Qualified by operation of 49 CFR 391.64 (Federal)

Driving within an exempt intrastate zone (see 49 CFR 391.62) (Federal)

Determination pending (specify reason): \_\_\_\_\_

Return to medical exam office for follow-up on (must be 45 days or less): \_\_\_\_\_

Medical Examination Report amended (specify reason): \_\_\_\_\_

(If amended) Medical Examiner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Incomplete examination (specify reason): \_\_\_\_\_

**Public Burden Statement**  
 Federal agencies may not conduct or sponsor a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2125-0008. Public reporting burden for this collection of information is estimated to average 1 minute per response, including the time for reviewing instructions, gathering the data needed, and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Information Collection Projects, Federal Motor Carrier Safety Administration, 1200 New Jersey Avenue, SE, Washington, DC 20590.

**Medical Examiner's Certificate**  
 (For Commercial Driver Medical Certification)

I certify that I have examined Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ in accordance with (please check only one):

the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check all that apply) OR

the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) with any applicable State variances (which will only be valid for intrastate operations), and with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check all that apply):

Wearing corrective lenses  Accompanied by a \_\_\_\_\_ waiver/exemption  Driving within an exempt intrastate zone (49 CFR 391.62) (Federal)

Wearing hearing aid  Accompanied by a Skill Performance Evaluation (SPE) Certificate  Qualified by operation of 49 CFR 391.64 (Federal)

Grandfathered from State requirements (State)

The information I have provided regarding this physical examination is true and complete. A complete Medical Examination Report Form, MCSA-5875, with any attachments embodies my findings completely and correctly, and is on file in my office.

Medical Examiner's Certificate Expiration Date: \_\_\_\_\_

The results of the hearing test are recorded on page 3 in either feet when the whisper test is performed, or in ANSI values when an audiometric test is performed. In this example, the ME first initiated the whisper test, but the driver did not meet the requirements in either ear, so an audiometric test was conducted. The audiometric results demonstrate that the driver meets the hearing requirement in the right ear, but not in the left. As they satisfy the hearing requirement in one ear, using either test, the driver meets the hearing requirement. If a hearing aide was not needed, mark the “Neither” box. Otherwise, indicate the ear or ears needing a hearing aid to pass the test.

When a hearing aid is needed, the “Wearing Hearing aid” box should be checked on both the exam form and the medical examiner’s certificate. The medical examiner should remind the driver that they should carry an extra hearing aid battery or power source when driving.



MER 5875 - Page 3 Lower Half

**PHYSICAL EXAMINATION**

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 neglecting the condition could result in a more serious illness that might affect driving.

Check the body systems for abnormalities.

Body System	Normal	Abnormal	Body System	Normal	Abnormal
1. General	<input checked="" type="checkbox"/>	<input type="checkbox"/>	8. Abdomen	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Skin	<input checked="" type="checkbox"/>	<input type="checkbox"/>	9. Genito-urinary system including hernias	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Eyes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	10. Back/spine	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Ears	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11. Extremities/joints	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Mouth/throat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	12. Neurological system including reflexes	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6. Cardiovascular	<input checked="" type="checkbox"/>	<input type="checkbox"/>	13. Gait	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Lungs/chest	<input checked="" type="checkbox"/>	<input type="checkbox"/>	14. Vascular system	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Discuss any abnormal answers in detail in the space below and indicate whether it would affect the driver's ability to operate a CMV. Enter applicable item number before each comment.

#11: *Missing 5th digit on left hand. driver has sufficient grasp strength and prehension*

(Attach additional sheets if necessary)

The lower half of page 3 describes the components of the physical exam that should be performed by a National Registry Certified Medical examiner. The Certified Medical Examiner performs the physical exam and marks each body system reviewed as normal or abnormal. All components of the exam must be performed. For any body system that is abnormal the Medical Examiner should record the number of the body system in the area provided and make comments regarding the abnormality. In this case, the driver was missing the 5<sup>th</sup> digit on the left hand but the Medical Examiner comments that the driver has sufficient grasp strength and prehension to operate a commercial motor vehicle.

1. **General:** Appearance, Over/Under Weight, Cognition, Communication
2. **Skin:** Note any significant findings including large scars and open wounds, cyanosis
3. **Eyes:** PERRLA = Pupils are equal, round, and reactive to light and accommodation.  
EOMI = Extra-ocular eye movements intact. Note any abnormalities.
4. **Ears:** Scarring, occlusion, perforation, drainage
5. **Mouth/Throat:** breathing, speaking, swallowing
6. **Cardiovascular:** RRR with no MRG: regular rate and rhythm with no murmurs, rubs or gallops
7. **Lung/Chest:** Resp Rate, No WRR: no wheezes, rales, or rhonchi
8. **Abdomen:** Liver/Spleen enlargement, pain, AAA/bruit, bowel sounds
9. **Genito-Urinary:** Hernia, Kidneys
10. **Back/spine:** Surgery, deformity, limited motion, tenderness
11. **Extremities/joints:** Impairment, missing extremity, grasp, prehension, mobility
12. **Neurological:** Equilibrium, coordination, DTRs, sensory loss, tremor
13. **Gait:** normal, steppage, scissoring, unsteady, limp
14. **Vascular:** Note signs of vascular insufficiency, edema, varicosities



For the examination to be complete, all aspects of the exam listed on page 3 of the exam form must be performed. Here is an overview of what should be included in a DOT physical exam. Medical Examiners should consider the general appearance of the driver. Are they well kept? Also, is the driver grossly over or underweight, do they have signs of alcohol or drug abuse, and have no perceived deficits in cognition or communication skills? Any significant finding on the skin should be documented such as large surgical scars or any open wounds. When examining the eyes, it's easy to remember what to check if you remember the acronym PERRLA which stands for pupils are equal, round, and reactive to light and accommodation, and the acronym EOMI which stands for extra-ocular eye movements intact. Examination of the ear includes viewing the tympanic membrane for scarring or perforation and occlusion of the ear canal. The evaluation of the mouth and throat includes looking for interference to breathing, speaking, or swallowing. Auscultation of the heart and lungs must be performed. The most common acronym used for the cardiovascular exam is RRR with no MRG which stands for regular rate and rhythm with no murmurs, rubs or gallops. The lungs and chest should be evaluated for respiratory rate and auscultation for wheezes, rales, or rhonchi. An exam of the abdomen would include palpation of the liver and spleen for enlargement, any masses, and presence of an abdominal aortic aneurysm, bruit, or hernia. The back and spine are evaluated for previous surgery, pain, deformities, and range of motion. Document any impairments, missing limbs, muscle strength, and range of motion of the extremities. A neurological exam should evaluate the driver's equilibrium, coordination, deep tendon reflexes, and sensory loss. As the driver walks, pay attention to whether they have any limp, unsteadiness, or other abnormal gait findings. Lastly, document any evidence of vascular insufficiency, significant edema, or varicosities.

## MER 5875 - Pages 4 & 5

Form MCSA-5875 OMB No. 2126-0006 Expiration Date: 03/31/2025

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Exam Date: \_\_\_\_\_

**Please complete only one of the following (Federal or State) Medical Examiner Determination sections:**

**MEDICAL EXAMINER DETERMINATION (Federal)**

Use this section for examinations performed in accordance with the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49):

Does not meet standards (specify reason): \_\_\_\_\_

Meets standards in 49 CFR 391.41; qualifies for 2-year certificate

Meets standards, but periodic monitoring required (specify reason): \_\_\_\_\_

Driver qualified for:  3 months  6 months  1 year  other (specify): \_\_\_\_\_

Wearing corrective lenses  Wearing hearing aid  Accompanied by a waiver/exemption (specify type): \_\_\_\_\_

Accompanied by a Skill Performance Evaluation (SPE) Certificate  Qualified by operation of 49 CFR 391.61 (Federal)

Driving within an exempt intracity zone (see 49 CFR 391.69) (Federal)

Determination pending (specify reason): \_\_\_\_\_

Return to medical exam office for follow-up on (must be 45 days or less): \_\_\_\_\_

Medical Examination Report amended (specify reason): \_\_\_\_\_

(if amended) Medical Examiner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Incomplete examination (specify reason): \_\_\_\_\_

**If the driver meets the standards outlined in 49 CFR 391.41, then complete a Medical Examiner's Certificate as stated in 49 CFR 391.43(b), as appropriate.**

I have performed this evaluation for certification. I have personally reviewed all available records and recorded information pertaining to this evaluation, and attest that, to the best of my knowledge, I believe it to be true and correct.

Medical Examiner's Signature: \_\_\_\_\_

Medical Examiner's Name (please print or type): \_\_\_\_\_

Medical Examiner's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Medical Examiner's Telephone Number: \_\_\_\_\_ Date Certificate Signed: \_\_\_\_\_ Issuing State: \_\_\_\_\_

Medical Examiner's State License, Certificate, or Registration Number: \_\_\_\_\_

MD  DO  Physician Assistant  Chiropractor  Advanced Practice Nurse

Other Practitioner (specify): \_\_\_\_\_

National Registry Number: \_\_\_\_\_ Medical Examiner's Certificate Expiration Date: \_\_\_\_\_

Page 4 - Interstate Drivers

Form MCSA-5875 OMB No. 2126-0006 Expiration Date: 03/31/2025

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Exam Date: \_\_\_\_\_

**MEDICAL EXAMINER DETERMINATION (State)**

Use this section for examinations performed in accordance with the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.69) with any applicable State variances (which will only be valid for intrastate operations):

Does not meet standards in 49 CFR 391.41 with any applicable State variances (specify reason): \_\_\_\_\_

Meets standards in 49 CFR 391.41 with any applicable State variances

Meets standards, but periodic monitoring required (specify reason): \_\_\_\_\_

Driver qualified for:  3 months  6 months  1 year  other (specify): \_\_\_\_\_

Wearing corrective lenses  Wearing hearing aid  Accompanied by a waiver/exemption (specify type): \_\_\_\_\_

Accompanied by a Skill Performance Evaluation (SPE) Certificate  Grandfathered from State requirements (State)

**If the driver meets the standards outlined in 49 CFR 391.41, with applicable State variances, then complete a Medical Examiner's Certificate, as appropriate.**

I have performed this evaluation for certification. I have personally reviewed all available records and recorded information pertaining to this evaluation, and attest that, to the best of my knowledge, I believe it to be true and correct.

Medical Examiner's Signature: \_\_\_\_\_

Medical Examiner's Name (please print or type): \_\_\_\_\_

Medical Examiner's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Medical Examiner's Telephone Number: \_\_\_\_\_ Date Certificate Signed: \_\_\_\_\_ Issuing State: \_\_\_\_\_

Medical Examiner's State License, Certificate, or Registration Number: \_\_\_\_\_

MD  DO  Physician Assistant  Chiropractor  Advanced Practice Nurse

Other Practitioner (specify): \_\_\_\_\_

National Registry Number: \_\_\_\_\_ Medical Examiner's Certificate Expiration Date: \_\_\_\_\_

Page 5 - Intrastate Drivers

Pages 4 and 5 of the medical examiners report is used by the medical examiner to indicate the driving status and restrictions, if any, of the driver. Page 4 is used for interstate driver that drive across state lines. Page 5 is used for those that only drive within their state.

**Public Burden Statement**

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0006. Public reporting for this collection of information, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information, All responses to this collection of information, and other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Office, Federal Motor Carrier Safety Administration, Washington, DC 20590.



U.S. Department of Transportation  
Federal Motor Carrier  
Safety Administration

**Medical Examiner's Certificate**  
(for Commercial Driver Medical Certification)

I certify that I have examined **Last Name:** Johnson **First Name:** Jack in accordance with (please check only one):

- the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when
- the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) with any applicable State variances (which will only be valid for intrastate operations), and, with knowledge, I find this person is qualified, and, if applicable, only when (check all that apply):
  - Wearing corrective lenses
  - Wearing hearing aid
  - Accompanied by a \_\_\_\_\_ waiver/exemption
  - Accompanied by a Skill Performance Evaluation (SPE) Certificate
  - Driving within an exempt intracity zone (49 CFR 391.62) (Federal)
  - Qualified by operation of 49 CFR 391.64 (Federal)
  - Grandfathered from State requirements (State)

The information I have provided regarding this physical examination is true and complete. A complete Medical Examination Report Form, MCSA-5875, with any attachments embodies my findings completely and correctly, and is on file in my office.

Medical Examiner's Certificate Expiration Date

10/31/202?

Medical Examiner's Signature

Jeff Carlson, MD

Medical Examiner's Telephone Number

555-225-2056

Date Certificate Signed

10/31/202?

Medical Examiner's Name (please print or type)

Jeff Carlson, MD

- MD
- Physician Assistant
- Advanced Practice Nurse
- DO
- Chiropractor
- Other Practitioner (specify) \_\_\_\_\_

Medical Examiner's State License, Certificate, or Registration Number

AK3055692493

Issuing State

OR

National Registry Number

99334400

Driver's Signature

Driver's License Number

Issuing State/Province

Driver's Address

Street Address: Permanent Address City: Pendleton State/Province: OR Zip Code: \_\_\_\_\_

\*\*This document contains sensitive information and is for official use only. Improper handling of this information could negatively affect individuals. Handle and disclose by keeping the documents under the control of authorized persons. Properly dispose of this document when no longer required to be maintained.

## Medical Examiner's Certificate (MCSA-5876)

Form MCSA-5876	OMB No. 2126-0006 Expiration Date:
<b>Public Burden Statement</b> A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2126-0006. Public reporting for this collection of information is estimated to average approximately 1 minute per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-RRA, 1205 New Jersey Avenue, SE, Washington, D.C. 20590.	
U.S. Department of Transportation Federal Motor Carrier Safety Administration <b>Medical Examiner's Certificate</b> (for Commercial Driver Medical Certification)	
I certify that I have examined <b>Last Name: Johnson</b> <b>First Name: Jack</b> in accordance with (please check only one):	
<input type="checkbox"/> the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check all that apply) <b>OR</b> <input type="checkbox"/> the Federal Motor Carrier Safety Regulations (49 CFR 391.41-391.49) with any applicable State variances (which will only be valid for intrastate operations), and, with knowledge of the driving duties, I find this person is qualified, and, if applicable, only when (check all that apply):	
<input type="checkbox"/> Wearing corrective lenses <input type="checkbox"/> Accompanied by a _____ waiver/exemption <input type="checkbox"/> Driving within an exempt intracity zone (49 CFR 391.62) (Federal) <input type="checkbox"/> Wearing hearing aid <input type="checkbox"/> Accompanied by a Skill Performance Evaluation (SPE) Certificate <input type="checkbox"/> Qualified by operation of 49 CFR 391.64 (Federal) <input type="checkbox"/> Grandfathered from State requirements (State)	
The information I have provided regarding this physical examination is true and complete. A complete Medical Examination Report Form, MCSA-5875, with any attachments embodies my findings completely and correctly, and is on file in my office.	
<b>Medical Examiner's Certificate Expiration Date</b> 10/31/	
<b>Medical Examiner's Signature</b> Jeff Carlson, MD	<b>Medical Examiner's Telephone Number</b> 555-225-2056
<b>Medical Examiner's Name (please print or type)</b> Jeff Carlson, MD	<b>Date Certificate Signed</b> 10/31/
<b>Medical Examiner's State License, Certificate, or Registration Number</b> AK3053692493	Issuing State: OR    National Registry Number: 9933440022
<b>Medical Examiner's Name (please print or type)</b> Jeff Carlson, MD	<input checked="" type="checkbox"/> MD <input type="checkbox"/> Physician Assistant <input type="checkbox"/> Advanced Practice Nurse <input type="checkbox"/> DO <input type="checkbox"/> Chiropractor <input type="checkbox"/> Other Practitioner (specify) _____
<b>Driver's Signature</b>	<b>Driver's License Number</b>
<b>Driver's Address</b> Street Address: Permanent Address    City: Pendleton    State/Province: OR    Zip Code: 97801	<b>Issuing State/Province</b>
CLP/CDL Applicant/Holder <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
***This document contains sensitive information and is for official use only. Improper handling of this information could negatively affect individuals. Handle and secure this information appropriately to prevent inadvertent disclosure by keeping the documents under the control of authorized persons. Properly dispose of this document when no longer required to be maintained by regulatory requirements.***	

The medical examiner's certificate is used by all 50 states and is commonly referred to as the "short form". The upper section of the medical examiner's certificate has the driver's printed name near the top. Immediately under the name is the area that identifies the driver as being certified to drive across states lines, or to being limited to driving within the state. The top circle is for driving across state lines, the second for driving intrastate. The section below that is to indicate any driving restrictions such as being required to wear glasses or use a hearing aid, or other restrictions such as an exemption, a special performance evaluation, or operating in an exempt intracity zone. The red font is where the Medical Examiner's Certificate Expiration date is located. This refers to the date that this certificate expires, not the date of the Medical Examiner's certification as a medical examiner. In the lower right there is a place for the Medical Examiner to put their national registry ID #, and a place to mark whether the driver has a CDL or CLP license or intends to get one.

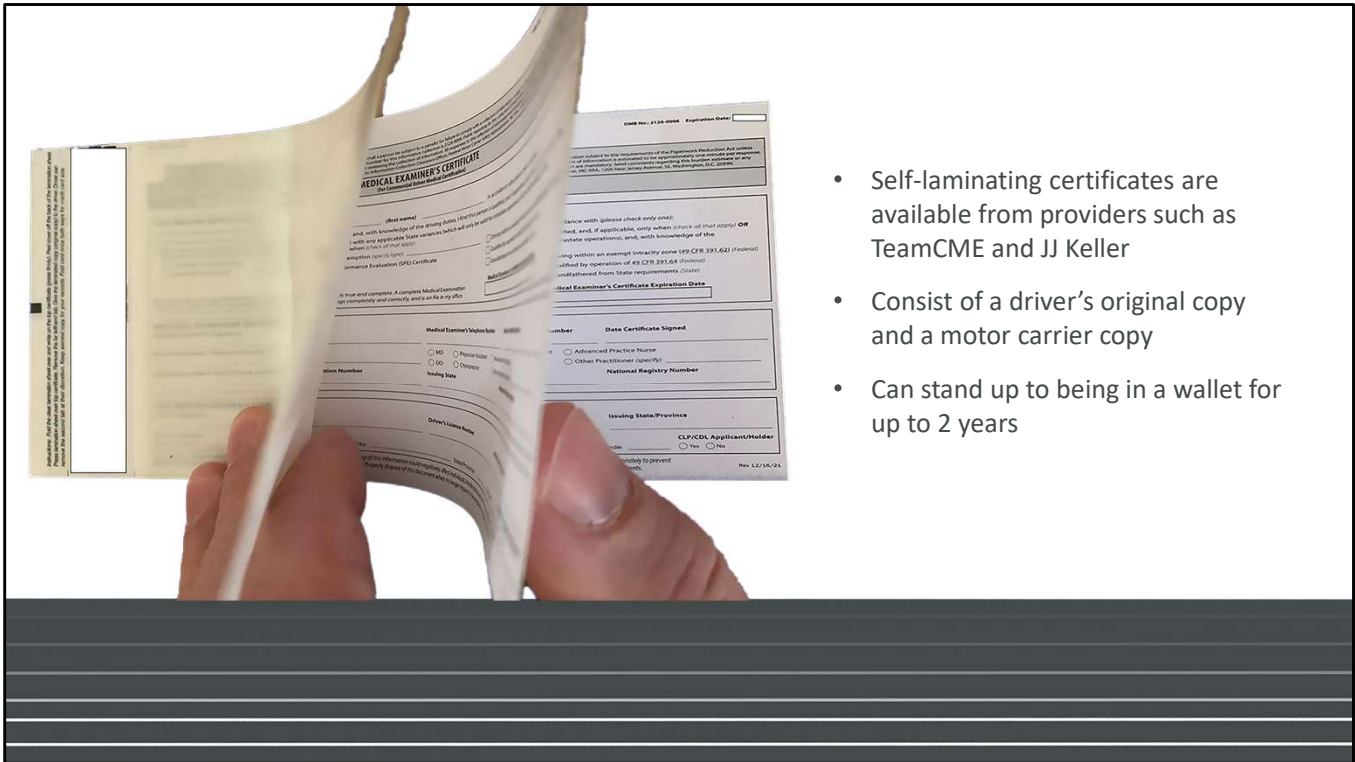
#### When issuing a MEC:

- The driver gets the original copy that was signed by the driver
- The motor carrier is required to have a copy

It is the responsibility of the driver to provide a copy of the Medical Examiners Certificate to their motor carrier and their State Driver's License Agency.

The certificate cannot be altered except for enlargement or reduction of the overall size of the certificate. If reduced, all the print must be readable.

When issuing a MEC, the driver gets the original copy that was signed by the driver. The motor carrier is required to have a copy. It is the responsibility of the driver to provide a copy of the Medical Examiners Certificate to their motor carrier and their State Driver's License Agency. The certificate cannot be altered except for enlargement or reduction of the overall size of the certificate, without changing the height to width ratio. If reduced, all the print must be readable.



- Self-laminating certificates are available from providers such as TeamCME and JJ Keller
- Consist of a driver's original copy and a motor carrier copy
- Can stand up to being in a wallet for up to 2 years

Self-laminating medical examiner certificate cards are available from providers such as TeamCME and JJ Keller, that consist of a driver's original copy and a motor carrier copy and can stand up to being in a wallet for up to 2 years.

## When is a Medical Certificate Required?

- **Before operating a Commercial Motor Vehicle.** Drivers who are attending driving school have a commercial learner's permit (CLP) and must have a valid medical certificate before being behind the wheel of CMV
- **At least every two years** or more often, as directed by the ME
- **Whenever the ability to drive has been impaired**, a new medical certificate may be required. This decision is a shared responsibility of the driver and the motor carrier. MEs are frequently contacted for guidance regarding whether the medical condition or injury warrants a new medical certificate be issued



Before first operating a commercial motor vehicle, the driver must have a valid medical certificate. This also applies to drivers who are attending driving school. Many driver medical conditions require the driver to obtain a new medical certificate more frequently. When the ability to drive has been impaired, the motor carrier determines whether the medical condition or injury warrants a new medical examination to be performed. The Medical Examiner may be contacted for guidance regarding whether the medical condition or injury warrants a new medical examination to be performed.



## Expiration dates of MEC are always based on the date the MEC was signed!

Once a medical examiner's certificate has been issued, that medical exam has been closed and cannot be amended.

If at any time, there are necessary alterations to be made:

- Medical history
- Physical exam findings
- Driving status determination

A completely new exam must be performed using a new blank form.

- A new medical certificate is issued with an expiration date based on the date this new certificate is signed

The expiration date of the medical examiners certificate is always based on the date the medical certificate was signed. So, if a medical certificate is going to be valid for two years, the expiration date will be two years from the date the medical certificate is signed. Once issued, that medical examination is closed and cannot be amended. If at any time there are necessary alterations to be made to the medical history, the physical exam findings, or the driving status determination, a completely new exam must be performed using a new blank form. If the driver is qualified to drive, a new medical certificate is issued with an expiration date based on the date this new certificate is signed.

## When can a Medical Examiner Reissue a Medical Certificate?

### Reissuing a MEC from a previously performed exam is allowed under the following instances:

- When issuing an **exact copy** of an existing MEC when requested by the driver, motor carrier, State or Federal government agency, or HIPAA-acceptable entity
- **Change of Name.** ME issues a MEC with the driver's new name but is otherwise identical to the previously issued MEC.
  - Although a new exam is not required, it **must be resubmitted to FMCSA**



There are four instances when a medical examiner may reissue an existing medical examiner's certificate from a previously performed exam. In each instance, the expiration date does not change. An exact copy of an existing medical certificate can be issued when requested by the driver, their employer, a State or Federal government agency, or a HIPPA-acceptable entity.

A new medical certificate can also be issued if the driver has had a change of name, but the certificate will otherwise be identical to the original. Although a new exam is not required, the Medical Examiner must resubmit the exam with the driver's new name to FMCSA.

## When can a Medical Examiner Reissue a Medical Certificate?



- If the driver's **address changes within the same state**, the ME can provide the driver with a duplicate MEC except for the change in address, without a new exam, if the ME is comfortable doing so
- When a **Non-CDL driver obtains a CDL license from the same SDLA**. The SDLA makes the appropriate changes to the driver's license

Medical Examiners **MUST NOT** reissue a medical certificate when a driver is obtaining a CDL license **in a different state**. A *new exam must be performed, and the driver must enter their new place of residence in that state.*

Another instance in which a Medical Examiner can reissue the original Medical Examiners Certificate is when a driver's address changes within the same state. The Medical Examiner can provide an updated Medical Examiner's Certificate that is identical to the old one, with exception of the address change. This can be done without performing a new exam, but only if the Medical Examiner is comfortable doing so.

Finally, when a non-CDL driver desires to obtain a CDL license from the same state in which they are already licensed. The State Drivers License Agency will make the appropriate changes to the driver's license and should accept the original Medical Examiners Certificate with the change from non-CDL to CDL.

Just like with a basic driver's license, when a driver moves to a different state, they must acquire a CDL license for that state. Drivers are required to first obtain a new medical examiners certificate before this license can be issued. Examiners must not reissue a medical certificate for a previously completed exam. An entirely new exam must be performed, and the driver must enter the address of their new place of residence in that state.

## **CMV DRIVER MEDICAL EXAMINATION RESULTS FORM (MCSA-5850)**

This is the electronic form located within your National Registry account that notifies FMCSA of physical qualification results.

These exam results must be reported by midnight (local time) of the next calendar day following the examination.

The CMV Driver Medical Examination Results Form (MCSA-5850) is the electronic form located within your National Registry account that notifies FMCSA of physical qualification results. These exam results must be reported by midnight (local time) of the next calendar day following the examination.

MCSA-5870

U.S. Department of Transportation  
Federal Motor Carrier Safety Administration

Individual's Name: \_\_\_\_\_

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**INSULIN-TREATED DIABETES MELLITUS ASSESSMENT FORM**

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Driver's License Number (if applicable): \_\_\_\_\_ State: \_\_\_\_\_

This individual is being evaluated either to determine whether he/she meets the physical qualification standards of the Federal Motor Carrier Safety Administration (FMCSA) to operate a commercial motor vehicle or because the individual has recently experienced a severe hypoglycemic episode. A treating clinician should complete this form to the best of his/her ability based on his/her knowledge of the individual's medical history. Completion of this form does not imply that the treating clinician is making a medical certification decision to qualify the individual to drive a commercial motor vehicle. Any determination as to whether the individual is physically qualified to drive a commercial motor vehicle will be made by a certified medical examiner on FMCSA's National Registry of Certified Medical Examiners.

*FMCSA defines a treating clinician as a healthcare professional who manages, and prescribes insulin for, an individual's diabetes mellitus as authorized by the healthcare professional's applicable State license.*

**Instructions to the Individual:**

When you are being evaluated prior to a medical certification examination, the certifying medical examiner will provide you with the 15-minute assessment form.



## Insulin-Treated Diabetes Mellitus Assessment Form (MCSA-5870)

This form is required for individuals diagnosed with insulin-treated diabetes mellitus.

- The treating clinician of the individual must complete the form, attesting that the individual has a stable insulin regimen and properly controlled diabetes
- The completed form must be provided to the ME within 45 days of completion by the treating clinician
- The form then becomes part of the physical examination record

The Insulin-Treated Diabetes Mellitus Assessment Form, MCSA-5870, is required for individuals diagnosed with insulin-treated diabetes mellitus. The treating clinician of the individual must complete the form, attesting that the individual has a stable insulin regimen and properly controlled diabetes. Drivers must provide the completed form to the ME within 45 days of completion of the form by the treating clinician. The form then becomes part of the physical examination record.

Form MCSA-5871

U.S. Department of Transportation  
Federal Motor Carrier Safety Administration

A Federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failing to provide information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number for this information collection is 2126-0006. Public reporting for this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Project, Federal Motor Carrier Safety Administration, MC-RRR, 1200 New Jersey Avenue SE, Washington, DC 20590.

## VISION EVALUATION REPORT

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

### Information for the Individual:

The medical examiner must receive this report and begin the physical qualification examination not more than 45 calendar days after an ophthalmologist or optometrist signs this report.

### Information for the Ophthalmologist or Optometrist:

This individual is being evaluated as part of the process to determine whether the individual meets the vision standards of the Federal Motor Carrier Safety Administration (FMCSA) to operate a commercial motor vehicle in interstate commerce. This report is required to provide information for an individual who has "monocular vision," as defined by FMCSA, who did not meet FMCSA's vision standard at a physical qualification examination. An ophthalmologist or optometrist must complete this report to the best of the ophthalmologist's or optometrist's ability based on the evaluation, observation, and knowledge of the individual's medical history. The determination as to whether the individual meets the vision standard and is physically qualified to drive a commercial motor vehicle will be made by a medical examiner registered with the Registry of Certified Medical Examiners.

FMCSA defines monocular vision as:

(1) in the better eye, distant visual acuity of at least 20/40 (with or without correction)



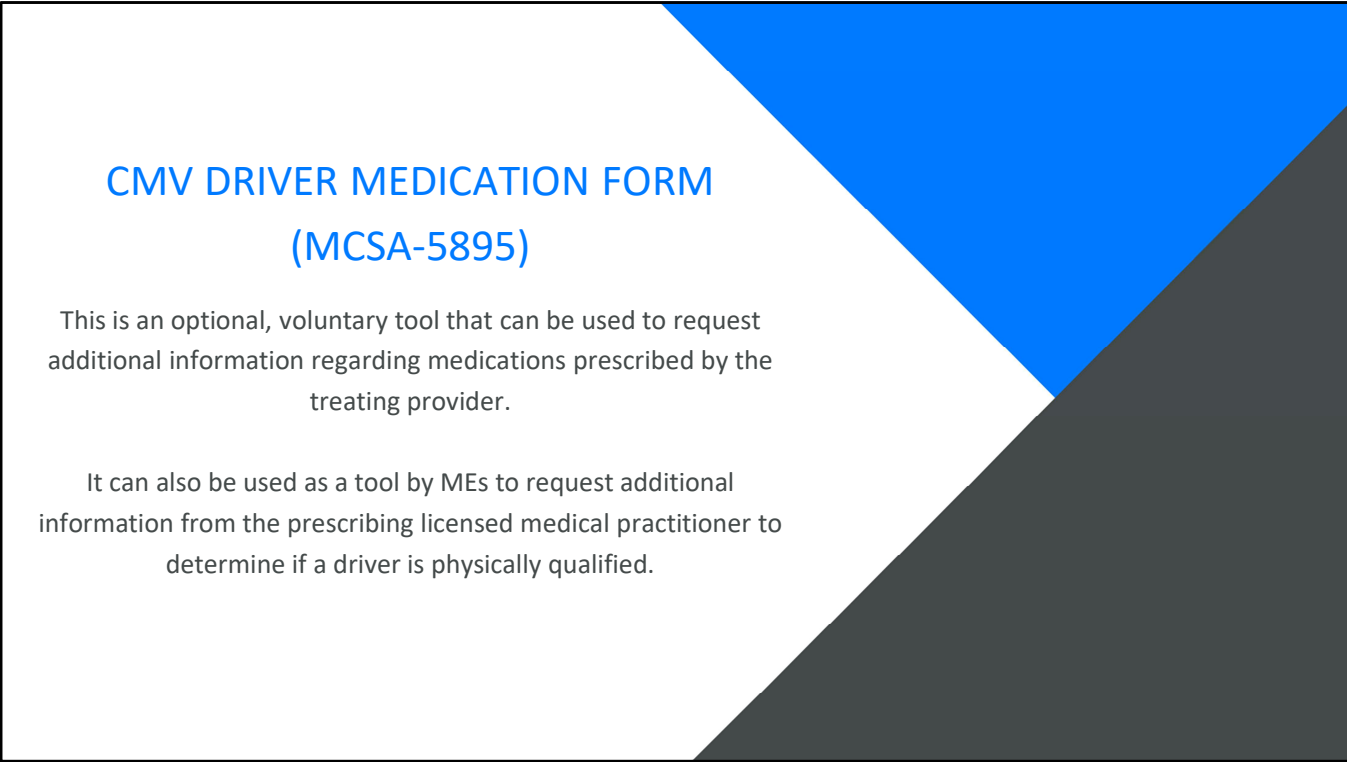
## Vision Evaluation Report, Form (MCSA-5871)

This form is required for individuals who do not satisfy, with the worse eye, either the distant visual acuity standard with corrective lenses, or the field of vision standard, or both.

- An ophthalmologist or optometrist must complete the form prior to the individual's physical qualification examination
- The examination conducted by the ME must begin not more than 45 days after an ophthalmologist or optometrist signs and dates the form
- The form then becomes part of the physical examination record

The Vision Evaluation Report, Form MCSA-5871, is required for individuals who do not satisfy, with the worse eye, either the distant visual acuity standard with corrective lenses or the field of vision standard, or both. An ophthalmologist or optometrist must complete the form prior to the individual's physical qualification examination. The examination conducted by the ME must begin not more than 45 days after an ophthalmologist or optometrist signs and dates the form. The form then becomes part of the physical examination record.





## CMV DRIVER MEDICATION FORM (MCSA-5895)

This is an optional, voluntary tool that can be used to request additional information regarding medications prescribed by the treating provider.

It can also be used as a tool by MEs to request additional information from the prescribing licensed medical practitioner to determine if a driver is physically qualified.

The CMV Driver Medication Form (MCSA-5895) is an optional, voluntary tool that can be used to request additional information regarding medications prescribed by the treating provider. It can also be used as a tool by MEs to request additional information from the prescribing licensed medical practitioner to determine if a driver is physically qualified.



This is the end of Module 1.