Driving

Alyssa Nolff, MS, OTR/L
November 2021
No relevant financial or nonfinancial relationships to disclose.
Objectives:

1. Review issues that may compromise driving ability for individuals with Parkinson’s Disease, PD.

2. Increase understanding of Clinic Based Occupational Therapy, OT, Driving Evaluation.

3. Review CA State Law about PD and driving

4. Describe the DMV Driver Medical Evaluation

5. Increase awareness to local and national level resources
Issues that may compromise driving ability

Cognitive Skills

Refers to one’s ability to receive and process incoming information by using:

- Perception
- Reasoning
- Judgement
- Memory

Visual Skills

Patient may experience changes in their VISUOSPACIAL SKILLS

- The ability to gauge the distance to a stop sign or other vehicles.
- Difficulty maintaining a safe lane position.
Motor Skills... not your car’s motor

- Motor Functioning... your movement may be slower
- Strength
- Balance
- Range of motion may be diminished
  - Neck
  - Shoulders
  - Trunk rotation

- Muscle tightness
- Rigidity
- Tremor

➤ May impair ability to react quickly to emergencies or changing traffic patterns
How to see the Stanford OT for a Clinic Based Driving Evaluation

- Make an appointment with your Neurologist
- Request your Stanford MD place a referral for an OT driving assessment.
- Check your insurance coverage
- Schedule an appointment in Outpatient Neuro Clinic, 213 Quarry Road, Palo Alto
Outpatient Neuro Rehab Clinic Driving Assessment

https://stanfordhealthcare.org/medical-treatments/d/driving-simulation-training.html

- May take 1-3 visits to complete the assessment
- OT’s are not the DMV
- Patient will be assessed using some of the following tests:
  - Useful Field of View, UFOV
  - STISIM Driving Simulator
  - Rookwood Driving Battery Assessment
  - Bioness Integrated Therapy System, BITS
  - Strength and Sensory
  - Snellen Visual Acuity
"Remember, the DMV has the ultimate determination of your driving status or potential. These evaluations in Occupational Therapy at Stanford do not replace those of the DMV. An in car driving evaluation is the ultimate gold standard of testing to determine driving safety. These Driving Simulator assessments as well as cognitive and perceptual tests provide a snapshot in the clinic setting and are meant to facilitate awareness of driving safety potential. Consult the DMV if you have questions about driving."
"Medical Conditions and Driving:

Certain medical conditions can affect your ability to drive safely but having a medical condition does not mean that your driving privileges will be restricted. Whether you have an illness, injury, or you take medication that causes certain side effects, if you are diagnosed with a medical condition that may affect your driving, you should let the Department of Motor Vehicles (DMV) know."
Medical Conditions

- Dementia
- Diabetes
- Lapses of Consciousness
- Vision Conditions
What qualifications does DMV use to investigate or reexamine drivers?


<table>
<thead>
<tr>
<th>Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical, Sensory, and Mental Requirements</td>
</tr>
<tr>
<td>Medical &amp; Emotional Requirements</td>
</tr>
<tr>
<td>Physical and Mental Condition</td>
</tr>
<tr>
<td>Compensating Factors</td>
</tr>
<tr>
<td>Driver Understanding and Awareness</td>
</tr>
<tr>
<td>Decision Options</td>
</tr>
<tr>
<td>Hearing Rights</td>
</tr>
</tbody>
</table>
Vision exam requirement

• A 20/40 visual acuity with or without glasses is the department's vision guideline.

• Visual acuity measurements are obtained for both eyes together and for each eye separately while both eyes remain open, as in normal driving. There are two methods of testing, a Snellen chart or Optec 1000 Vision Tester.

• Applicants who do not pass either exams may, depending on the circumstances, be referred to a vision specialist.
CA DMV Medical Evaluation Form

https://www.dmv.ca.gov/portal/file/drive-r-medical-evaluation-ds-326-pdf/

- DRIVER MEDICAL EVALUATION (Medical information is CONFIDENTIAL under Section 1808.5 CVC)
- INSTRUCTIONS TO THE DRIVER: Please take this form to the medical professional most familiar with your health history and current medical condition. Before giving this form to your medical professional, complete and sign Sections 1-3
- INSTRUCTIONS TO THE MEDICAL PROFESSIONAL: Please complete Sections 5-13, on pages 2 through 5. The Department of Motor Vehicles’ records indicate your patient may have a condition that could affect the safe operation of a motor vehicle.
**Driver Medical Evaluation**

**Instructions to the Driver:** Please take this form to the medical professional most familiar with your health history and current medical condition. Before giving this form to your medical professional, complete and sign Sections 1-3. **PLEASE PRINT LEGIBLY.**

**Instructions to the Medical Professional:** Please complete Sections 5-13, on pages 2 through 5. The Department of Motor Vehicles (DMV) records indicate your patient may have a condition that could affect the safe operation of a motor vehicle. In this case, the department is concerned about the following condition:

**Physician Return Form to:**

**Section 1 — Driver Information**

<table>
<thead>
<tr>
<th>Name (Last, First, Middle)</th>
<th>Driver License No.</th>
<th>Birth Date</th>
<th>Field File</th>
</tr>
</thead>
</table>

**Driver Must Complete Health History Below. (Please explain any "YES" answers)**

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Head, neck, spinal injury or disorders</td>
<td>Kidney disease, stones, blood in urine, or dialysis</td>
</tr>
<tr>
<td>Seizure, convulsion or epilepsy</td>
<td>Muscular disease</td>
</tr>
<tr>
<td>Dizziness, throbbing, or frequent headaches</td>
<td>Any permanent impairment</td>
</tr>
<tr>
<td>Eye problem (except correctable lenses)</td>
<td>Nervous or psychiatric disorder</td>
</tr>
<tr>
<td>Cardiovascular (heart or blood vessel) disease</td>
<td>Regular or frequent alcoholic use</td>
</tr>
<tr>
<td>Heart attacks, stroke, or paralysis</td>
<td>Problems with the use of alcohol or drugs</td>
</tr>
<tr>
<td>Lung disease (include tuberculosis, asthma or emphysema)</td>
<td>Other disorders or diseases</td>
</tr>
<tr>
<td>Nervous system, skin, or digestive problems</td>
<td>Any major illness, injury, or operations in last 5 years</td>
</tr>
<tr>
<td>Diabetes or high blood sugar</td>
<td>Currently taking medications</td>
</tr>
</tbody>
</table>

**Explanation:** Include onset date, diagnosis, medication, doctor's name and address, and any current condition or limitation. Attach additional sheet, if needed.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I further certify that all information concerning my health is true and correct.

Section 2 — Driver's Advisory Statement

Medical information is required under the authority of Sections 6 and 7 of the California Vehicle Code (CVC). Failure to provide the information is cause for refusal to issue a license or to withdraw the driving privilege.

All records of the DMV, relating to the physical or mental condition of any person, are confidential and not open to public inspection (CVC §1808.5). Information used in determining driving qualifications is available to you and/or your representative with your signed authorization.

The department has sole responsibility for any decision regarding your driving qualifications and licensure. The department will also consider non-medical factors in reaching a decision.

Section 3 — Medical Information Authorization

**Medical Professional, Hospital, or Medical Facility Name and Address**

I hereby authorize my medical professional or hospital to answer any questions from the DMV, or its employees, relating to my physical or mental condition, and/or drug and/or alcohol use, and to release any related information or records to the DMV or its employees. Any expense involved is to be charged to me and not to the DMV.

I hereby authorize the DMV to receive any information relating to my physical or mental condition, and/or drug and/or alcohol use or abuse, and to use the same in determining whether I have the ability to operate a motor vehicle safely.

**Note:** You may wish to make a copy of the completed Driver Medical Evaluation for your records.
ADED: The Association for Driver Rehabilitation Specialists

- ADED.NET
- Private on the road assessment.
- Generally, not covered by insurance
- Can cost $500-$800 for a 2-hour assessment
**Driving Instructors**

<table>
<thead>
<tr>
<th>CDRS</th>
<th>DRS</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Certified Driver Rehabilitation Specialist (CDRS) is a Driver Rehabilitation Specialist (DRS) with additional training and certification.</td>
<td>A Driver Rehabilitation Specialist generally has a health professional degree with additional training specific to driver evaluation and rehabilitation.</td>
</tr>
</tbody>
</table>

[https://www.aded.net/page/consumer](https://www.aded.net/page/consumer-page)
The National Mobility Equipment Dealers Association is an advocate for mobility and accessibility for drivers with disabilities. If you need help with converting or buying a handicap accessible van, car or truck, please consider one of a Quality Assurance Program dealers.

Every NMEDA QAP dealer and technician has been trained and accredited in the highest best practice standards of quality and service to ensure safe and reliable transportation.
Questions?

Thank you!