

## Drivers Health and Eyesight Testing Requirements.

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### Medical standards

Medical standards required for drivers of **Group 2 vehicles** (lorries, buses and minibuses) are higher than those required for Group 1 (car and motorcycle) drivers. These standards also apply when renewing categories C1 (small or medium lorries between 3500–7500kg) and **D1 (minibuses not for hire or reward)** which were given when a car driving test was passed before 1 January 1997.

#### 1. Eyesight

All drivers must be able to read in good light with glasses or contact lenses if worn, a car number plate from 20 metres (post 01.09.2001 font) and have eyesight (visual acuity) of 6/12 (decimal Snellen equivalent 0.5) or better.

Applicants for Group 2 entitlements must also have, as measured by the 6 metre Snellen chart.

- a visual acuity of at least 6/7.5 (decimal Snellen equivalent 0.8) in the better eye
- a visual acuity of at least 6/60 (decimal Snellen equivalent 0.1) in the worse eye.

This may be achieved with or without glasses or contact lenses.

- If glasses are worn, the distance spectacle prescription of either lens used must not be of a corrective power greater than plus 8 (+8) dioptres.

We may still issue a driving licence if:

- You are an applicant who first held a Group 2 driving licence after 1 March 1992 and also held that licence on 31 December 1996 and have an acuity of 6/9 (decimal Snellen equivalent 0.6) in the better eye and 6/12 (decimal Snellen equivalent 0.5) in the worse eye and an uncorrected acuity of 3/60 (decimal Snellen equivalent 0.05) in at least one eye.

or

If you cannot meet the eyesight standards above but were first licensed to drive Group 2 vehicles before 1 March 1992, you may still be considered for a licence provided you can still meet the eyesight standards which applied when you first held a Group 2 licence.

You must also be able to meet the eyesight standard for all drivers and you would not be able to apply for any new lorry or bus entitlements that you have not previously held.

You can get more information about the medical standards from Drivers Medical Group, DVLA, Swansea SA99 1TU or phone 0300 790 6807.

Car driving licence holders who are renewing category C1 (small or medium lorries between 3500 – 7500 kG) need to meet the number plate test and have eyesight (visual acuity) of 6/12 (decimal Snellen equivalent 0.5) or better. Category D1 (minibuses not for hire or reward) must meet the eyesight standard for Group 2 drivers.

### **Visual field**

The horizontal visual field should be at least 160 degrees, the extension should be at least 70 degrees left and right and 30 degrees up and down. No defects should be present within a radius of the central 30 degrees.

### **Monocular vision**

Drivers who have sight in one eye only or their sight in one eye has deteriorated to less than 0.05 (3/60) cannot normally be licensed to drive Group 2 vehicles. The exceptions are if:

- You were licensed to drive Group 2 vehicles before 1 April 1991 and the Traffic Commissioner who issued the licence knew that you had sight in only one eye before 1 January 1991. You must have a visual acuity of at least 6/12 (decimal Snellen equivalent 0.5) if you held a Group 2 licence on 1 April 1983 or 6/9 (decimal Snellen equivalent 0.6) if you were licensed after that date. A certificate of recent driving experience will also be required. DVLA will send this certificate to you for completion on receipt of a valid application. Drivers cannot apply for new vehicle category entitlements, only those you had previously held. or,
- You are applying to renew entitlement to drive category C1 (vehicles between 3500kg and 7500 kg) that was granted with your Group 1 (car and motorcycle) licence if you had passed a car driving test before 1 January 1997.

### **Uncontrolled symptoms of double vision**

If you have uncontrolled symptoms of double vision, or you have double vision treated with a patch, you will not be allowed to hold a Group 2 licence.

A new applicant or existing licence holder who is unsure about the medical eyesight standards to hold a Group 2 licence should check with Driver's Medical Group, DVLA, Swansea SA99 1TU or phone 0300 790 6807.

## Drivers Health Standards

### 2. Epilepsy or liability to epileptic attacks

If you have been diagnosed as having epilepsy, (this includes all events: major, minor and auras), you will need to remain free of seizures without taking anti-epilepsy medication for 10 years.

If you have a condition that causes an increased liability to seizures, for example a serious head injury, the risk of you having a seizure must have fallen to no greater than 2% per annum prior to application.

DVLA must refuse an application or revoke the licence if you cannot meet these conditions.

#### 2a. Isolated seizure

If you have had only an isolated seizure, you may be entitled to drive lorries and buses 5 years from the date of the seizure, provided that you are able to satisfy the following criteria:

- no relevant structural abnormality has been found in the brain on imaging
- no definite epileptic activity has been found on EEG (record of the brain waves)
- you have not been prescribed medication to treat the seizure for at least 5 years since the seizure
- you have the support of your neurologist
- your risk of a further seizure is considered to be 2% or less per annum (each year).

You are strongly advised to discuss your eligibility to apply for your driving licence with your doctor(s) before getting a (D4) medical examination report filled in.

### 3. Insulin treated Diabetes

If you have insulin-treated diabetes you may be eligible to apply for a Group 2 licence. An annual assessment by a hospital consultant specialising in the treatment of diabetes is required and you will have to meet strict criteria for controlling and monitoring your diabetes. This includes having at least 3 months of blood glucose readings available for inspection on a blood glucose meter(s) with a memory function.

For further information, please refer to leaflet INS186 – A guide for drivers with diabetes who wish to apply for vocational entitlement. This is available to download from [www.gov.uk/diabetes-driving](http://www.gov.uk/diabetes-driving)

#### **4. Other medical conditions**

An applicant or existing licence holder is likely to be refused a Group 2 licence if they cannot meet the recommended medical guidelines for any of the following:

- within 3 months of a coronary artery bypass graft (CABG)
- angina, heart failure or cardiac arrhythmia which remains uncontrolled
- implanted cardiac defibrillator
- hypertension where the blood pressure is persistently 180 systolic or more and/or 100 diastolic or more
- a stroke or transient ischemic attack (TIA) within the last 12 months
- unexplained loss of consciousness with liability to recurrence
- Meniere's disease, or any other sudden and disabling vertigo within the past year, with a liability to recurrence
- major brain surgery and/or recent severe head injury with serious continuing after-effects or a likelihood of causing seizures
- Parkinson's disease, multiple sclerosis or other chronic neurological disorders with symptoms likely to affect safe driving
- psychotic illness in the past 3 years
- serious psychiatric illness
- if major psychotropic or neuroleptic medication is being taken
- alcohol and/or drug misuse in the past 1 year or alcohol and/or drug dependence in the past 3 years
- dementia
- cognitive impairment likely to affect safe driving
- any malignant condition in the last 2 years, with a significant liability to metastasise (spread) to the brain
- any other serious medical condition likely to affect the safe driving of a Group 2 vehicle
- cancer of the lung.

#### **5. Facts Drivers should know about excessive sleepiness/tiredness and driving**

There is no excuse for falling asleep at the wheel and it is not an excuse in law.

- Up to one fifth of accidents on motorways and other monotonous types of roads may be caused by drivers falling asleep at the wheel.
- 18 – 30 year old males are more likely to fall asleep at the wheel when driving late at night.
- Modern life styles such as early morning starts, shift work, late and night socialising, often lead to excessive tiredness by interfering with adequate rest.
- Drivers who fall asleep at the wheel have a degree of warning.
- Natural sleepiness/tiredness occurs after eating a large meal.
- Changes in body rhythm produce a natural increased tendency to sleep at two parts of the day; Midnight – 6am    2pm – 4pm

- Although no one should drink and drive at any time, alcohol consumed in the afternoon may be twice as potent in terms of producing sleepiness and driving impairment as the same amount taken in the evening.
- Prescribed or over-the-counter medication can cause sleepiness as a side effect. Always check the label if you intend to drive.

### **Medical Conditions causing sleepiness**

All drivers are subject to the pressures of modern life, but many drivers are unaware that some medical conditions also cause excessive sleepiness/tiredness. These, alone or in combination with the factors mentioned previously, may be sufficient to make driving unsafe. A road traffic accident may be the first clear indication of such a sleep disorder.

### **Obstructive Sleep Apnoea (OSA)**

- OSA is the most common sleep-related medical disorder.
- OSA significantly increases the risk of traffic accidents.
- OSA occurs most commonly, but not exclusively, in overweight individuals.
- Partners often complain about snoring and notice that the sufferers have breathing pauses during sleep.
- OSA sufferers rarely wake from sleep feeling fully refreshed and tend to fall asleep easily when relaxing.
- Long distance lorry and bus drivers affected by OSA are of great concern as most will be driving on motorway type of roads and the size or nature of the vehicle gives little room for error.
- At least four in every hundred men have OSA.
- Sleep problems arise more commonly in older people.
- Lifestyle changes, for example weight loss or cutting back on alcohol, will help ease the symptoms of OSA.
- The most widely effective treatment for OSA is Continuous Positive Airway Pressure (CPAP). This requires the patient to wear a soft face mask during sleep to regulate breathing. This treatment enables patients to have a good night's sleep, so reducing daytime sleepiness and improving concentration.

### **Other sleep related conditions**

Illnesses of the nervous system, such as Parkinson's disease, multiple sclerosis (MS), motor neurone disease (MND) and narcolepsy may also cause excessive sleepiness or fatigue although sometimes these illnesses alone may cause drivers to be unfit for driving.

Tiredness or excessive sleepiness can be a non-specific symptom of Parkinson's disease, MS, MND or may also be related to prescribed medication.

Narcolepsy also causes daytime sleepiness/tiredness as well as other symptoms that may be disabling for drivers.