

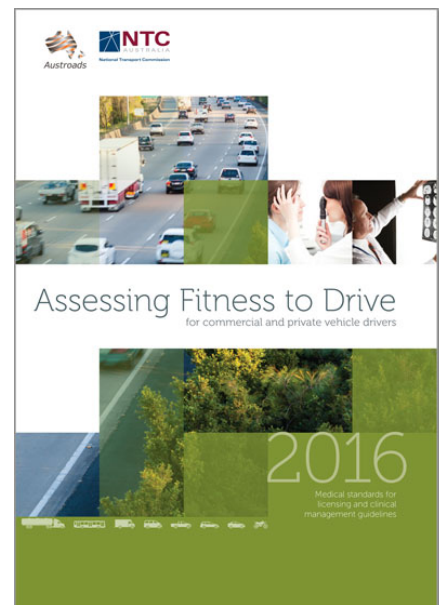


# Information Kit

## Assessing Fitness to Drive Revised 2016

### This kit contains:

- General media release
- Frequently asked questions
- A summary of the key changes resulting from the review
- Driver Licensing Authority contacts



For more information  
please visit  
[www.austroads.com.au](http://www.austroads.com.au)



September 2016

Thursday 1 September 2016

## Updated driver medical standards from 1 October 2016

Australians, their doctors and other health professionals will have better guidance on whether they are safe to drive thanks to updated medical guidelines contained in the new edition of *Assessing Fitness to Drive for commercial and private vehicle drivers*.

*Assessing Fitness to Drive* is a joint publication of the National Transport Commission (NTC) and Austroads, and includes standards for private and commercial drivers of heavy vehicles, light vehicles and motor bikes.

Chief Executive of the NTC, Paul Retter said the new edition would give health professionals the best available information to help them discuss driving with their patients and assess their patients' ability to drive safely.

"We have worked closely with health professionals, driver licensing authorities and consumer health groups to update the guidelines, which has resulted in some changes to the licensing criteria to account for developments in medical understanding and practice," Mr Retter said.

"The updates also include clearer guidance for health professionals to support consistent assessment and decision making.

"This includes new features such as flow charts to guide assessment of conditions such as epilepsy and dementia, a questionnaire to assist assessment of drivers with diabetes and more detailed information about determining and supporting functional driver capacity."

Nick Koukoulas, Chief Executive of Austroads, said doctors and other health professionals use *Assessing Fitness to Drive* to advise driver licensing authorities about how their patients' health and medical conditions might affect their ability to drive. The driver licensing authority considers this advice in their decision about an individual's licence status.

"Importantly, the new edition also includes links to information resources to assist health professionals in having conversations with their patients about driving," said Mr Koukoulas.

"This includes a number of excellent resources developed by Alzheimer's Australia.

"The new edition comes into effect on 1 October 2016, from which date all assessments conducted for the purpose of driver licensing should be undertaken according to the updated edition."

Austroads is responsible for publication and distribution of *Assessing Fitness to Drive*, and will host the electronic version on their [website](#) from today.

A summary of the changes in the new edition and other support materials will also become available on the [Austroads website](#) during September.

Hard copies will not be distributed to individual health professionals, although they can be purchased via the Austroads website.

Drivers or health professionals with any enquiries about how the new standards may affect them should contact the relevant driver licensing authority in their state or territory.

[Download an electronic PDF or purchase a hard copy of \*Assessing Fitness to Drive 2016\* on the Austroads website.](#)

-ends-

**Media contact:** Ron Grasso, Director Public Affairs and Communication, 03 9236 5039,  
[communications@ntc.gov.au](mailto:communications@ntc.gov.au)

**Notes to editors:** The NTC is an independent statutory body charged with improving the productivity, safety and environmental performance of Australia's road, rail and intermodal transport system.

Austrroads is the association of Australasian road transport and traffic agencies. Austrroads' purpose is to improve the safety, productivity and sustainability of Australasian road networks through research and collaboration.

# Frequently asked questions

---

## About the review

- Why revised medical standards?
- When do the revised standards come into effect?
- What are the key changes to the standards resulting from this review?
- Who has been involved in reviewing the standards?
- How will the revisions affect health professionals' practice?
- How will the revisions affect Driver Licensing Authorities?
- How will the revisions affect private vehicle drivers?
- Who should drivers speak to about how the changes might affect them?
- Will hard copies of the publication be distributed to health professionals?
- How will Austroads communicate any future changes or issues relevant to health professionals and drivers?
- Where can I access a detailed report of the review?

## About the standards

- What is the purpose of the standards?
- What type of health conditions might affect ability to drive safely?
- What are the legal and ethical responsibilities of health professionals, drivers and Driver Licensing Authorities?
- Where can drivers and health professionals get more information about health and driving?
- Which standards (private or commercial) should be applied?
- What is a conditional licence?
- What happens if drivers don't follow their doctor's advice?
- Where do you find out more information?

## More information and education

- Where can I find information about driving and dementia?
- Where can I find information about driving and diabetes?
- How do I find a provider for a practical driver assessment?
- Where can I find information about helping people transition to non-driving?

## FAQs about the review

---

### Q. Why revised driver medical standards?

- A. The driver medical standards *Assessing Fitness to Drive* have been revised to reflect current medical knowledge and the current transport environment. Reviews are conducted regularly to ensure currency and to respond to feedback from health professionals, drivers and other stakeholders.

### Q. When do the standards come into effect?

- A. The standards are effective from the 1 October 2016. From that date, all drivers should be assessed using the new standards. Driver Licensing Authorities will manage the transition to the new standards, including communication with drivers on conditional licences who may be affected by the changes.

### Q. What are the key changes to the standards resulting from this review?

- A. *Assessing Fitness to Drive* was extensively revised in 2012, resulting in a simplified structure with 10 chapters (instead of 22) and focusing on conditions likely to affect fitness to drive. These changes have been well received.

The current review has resulted in some changes to the licensing criteria to account for developments in medical understanding and practice. The changes to the medical criteria are in the following chapter:

- Cardiovascular conditions
- Diabetes
- Hearing
- Epilepsy
- Vestibular conditions
- Vision and eye disorders.

These changes are described briefly in this information kit (refer pages 12 – 15), and are described in more detail in the [Summary Report](#) on the Austroads website.

The updates to the standards also include clearer guidance for health professionals to support consistent assessment and decision making. This includes new features such as flow charts to guide assessment of conditions such as epilepsy and dementia, a questionnaire to assist assessment of drivers with diabetes and more detailed information about determining and supporting functional driver capacity.

### Q. Who has been involved in reviewing the standards?

- A. The standards have been produced through an extensive consultation process involving medical and health experts and consumer groups, as well as all State and Territory Licensing Authorities, the transport industry and unions. This process has been overseen by the National Transport Commission and Austroads. A [report describing the process of the review](#) is available on the Austroads website.

### Q. How will the revisions to *Assessing Fitness to Drive* affect health professionals' practice?

- A. The clarity of the new standards and improved guidance will facilitate assessment of fitness to drive by health professionals and ensure greater consistency in such assessments. It is not anticipated that the standards will impact on health professionals' workload in undertaking assessments.

**Q. How will Assessing Fitness to Drive 2016 affect Driver Licensing Authorities?**

- A. The clarity of the new standards will also facilitate licensing management by Driver Licensing Authorities and support greater consistency in licensing decisions. Driver Licensing Authorities will need to manage the changes to the standards in terms of the impact on drivers with existing medical conditions, including those on existing conditional licences.

**Q. How will the revised standards affect drivers?**

- A. The new standards do not mean a change in responsibility for drivers. They must continue to ensure that they do not drive if they have a condition that is likely to affect their ability to drive safely, and they must report such conditions to the Driver Licensing Authority.

The standards reflect developments in medical science and improvements in diagnosis and treatment of various health conditions. They therefore provide scope for drivers with well-managed health conditions to continue to drive safely.

There are a small number of significant changes that will affect drivers. These are summarised in pages 12 – 15 of this kit.

**Q. Who should drivers speak to about how the changes might affect them?**

- A. Drivers who have an existing medical condition and who are on a conditional licence, or have other driving restrictions, should refer to the Austroads website for an explanation of the changes. They may also speak to their local Driver Licensing Authority about how the new standards will affect them.

**Q. Will health professionals receive hard copies of the publication?**

- A. The standards can be downloaded for free from the [Austroads publications website](#). They will not be distributed in hard copy to health professionals as previously, but hard copies may be ordered for \$25 including postage and handling.

Drivers can also download the standards on the Austroads website.

**Q. How will Austroads communicate any future changes or issues relevant to health professionals and drivers?**

- A. Health professionals and drivers can subscribe to receive emailed updates about Assessing Fitness to Drive. Go to the Austroads website: <https://austroads.com.au/drivers-and-vehicles/assessing-fitness-to-drive>

**Q. Where can I access a report of the review?**

- A. A [Summary Report](#) of the review may be downloaded from the Austroads website.

## FAQs about the standards

---

### Q. What is the purpose of the standards?

- A. The purpose of *Assessing Fitness to Drive* is to improve road safety in Australia by assisting health professionals to:
- Assess the fitness to drive of their patients in a consistent and appropriate manner, based on current medical evidence
  - Promote the responsible behaviour of their patients having regard to their medical fitness
  - Conduct medical examinations for the licensing of drivers as required by State and Territory Driver Licensing Authorities
  - Make recommendations regarding conditional licences
  - Recognise the extent and limits of their professional and legal obligations with respect to reporting fitness to drive.

The publication also aims to provide guidance to driver licensing authorities in making licensing decisions.

### Q. What type of health conditions might affect ability to drive safely?

- A. Driving a motor vehicle is a complex task requiring perception, good judgment, responsiveness and reasonable physical capability. A range of medical conditions, as well as treatments, may therefore impair driving ability. Common examples include:
- Blackouts
  - Cardiovascular conditions
  - Diabetes
  - Dementia and cognitive impairment
  - Seizures and epilepsy
  - Other neurological conditions
  - Musculoskeletal conditions
  - Psychiatric conditions
  - Sleep disorders
  - Alcohol and other substance misuse
  - Vision and eye disorders

Just because people have a disease or condition that might affect their driving, doesn't mean that they won't be able to drive at all. It might mean that they have to see their doctor more often to check that their illness is well managed and it might mean that there are some restrictions placed on their driving.

### Q. What are the legal and ethical roles and responsibilities of health professionals, drivers and licensing authorities?

- A. *Assessing Fitness to Drive 2016* clearly outlines the responsibilities of drivers, examining health professionals and licensing authorities.

All States and Territories in Australia have laws about reporting health conditions that might affect a person's ability to drive safely. These laws have been created to protect public safety. The laws require drivers to report to the Driver Licensing Authority any permanent or long-term illness that is likely to affect their ability to drive safely.

As the relationship between patient and health professional is a confidential one, the health professional will not normally communicate directly with the Driver Licensing Authority. He or she will provide the patient with advice about their ability to drive safely as well as a letter or report to take to the authority. **It is the licensing authority not the health professional that makes the final decision about whether a person will be able to hold a licence.** (Note that in South Australia and the Northern Territory, legislation currently requires the health professional to report directly to the licensing authority if they are concerned about the impact of the patient's health on their ability to drive safely).

Health professionals also have an obligation to public safety so if a health professional believes that a patient is not heeding advice to cease driving he or she may report directly to the Driver Licensing Authority.

**Q. Where can drivers and health professionals get more information about health and driving?**

**A.** The Driver Licensing Authorities and various health organisations produce information about driving and specific health conditions, as well as about issues such as driving assessments and the transition to not driving for older people. These resources are usually available for free. Many of these resources are referred to in *Assessing Fitness to Drive*, but can also be accessed directly from the Driver Licensing Authority websites. The Austroads website hosts a [general fact sheet](#) about medical fitness to drive.

**Q. Which standards (private or commercial) should be applied?**

**A.** *Assessing Fitness to Drive* contains two sets of medical standards – private vehicle driver standards and commercial vehicle driver standards.

The choice of which standards to apply when examining a patient for fitness to drive is guided by both the type of vehicle and the purpose for which the driver is being authorised to drive.

The private standards should be applied to:

- Drivers applying for or holding a licence class C (Car), R (Motorcycle) or LR (Light Rigid) UNLESS the driver is also applying for an authority or is already authorised to use the vehicle for carrying public passengers for hire or reward or for the carriage of bulk dangerous goods or in some jurisdictions for a driver instructor's licence.

The commercial standards should be applied to:

- Drivers of 'heavy vehicles' i.e. those holding or applying for a licence of class MR (Medium Rigid), HR (Heavy Rigid), HC (Heavy Combination) or MC (Multi-combination).
- Drivers applying for an authority /already authorised to carry public passengers for hire or reward (bus drivers, taxi drivers, chauffeurs, drivers of hire cars and small buses etc).
- Drivers applying for an authority / already authorised to carry bulk dangerous goods.

**NOTE:** A person who does not meet the commercial vehicle medical criteria may still be eligible to retain a private vehicle driver licence. In such cases, both sets of standards may need to be consulted.

**Q. What is a conditional licence?**

**A.** In most cases, having a medical condition will not stop people from driving, as the licensing authority is able to issue a conditional licence. This means that the person may continue to drive as long as certain conditions or restrictions are met. Conditions may include driving during daylight hours only, the wearing of glasses or corrective lenses when driving or attending the doctor for a periodic review and providing a report to the Driver Licensing Authority. A doctor may make recommendations to the Driver Licensing Authority about a conditional licence but the authority will make the final decision.

If people are issued with a conditional licence, it is their responsibility to comply with any driving restrictions or other conditions and to be reviewed by their doctor as required.



Q. What happens if a driver doesn't follow their doctor's advice?

A. If a person continues to drive despite their doctor's advice and they do not report their condition to the Driver Licensing Authority, they are not fulfilling their legal responsibility. If they are involved in a crash under these circumstances and it is found that their health condition was a contributing factor, they may be prosecuted and their insurance may not be valid.

If a person's doctor is aware that they are continuing to drive and feels that their driving is a serious risk to them and other road users, the doctor may feel obliged to notify the Driver Licensing Authority directly.

Q. Where can you find out more information?

A. Further information is available from the Austroads website <https://austroads.com.au/drivers-and-vehicles/assessing-fitness-to-drive>

## FAQs about more information and education

---

### Q. Where can I find information about driving and dementia?

- A. Alzheimer's Australia contributed significantly to the current review of Assessing Fitness to Drive and has a number of excellent resources to help people with dementia and their families, as well as resources to guide health professionals.

Health professional resources include:

- a short animation explaining the important aspects of driver assessment and management  
[https://www.youtube.com/watch?v=zJON12dC\\_lo](https://www.youtube.com/watch?v=zJON12dC_lo)
- a pathway for management  
[https://fightdementia.org.au/sites/default/files/VIC/documents/HP%20QUICK%20REFERENCECARD\\_FINAL.pdf](https://fightdementia.org.au/sites/default/files/VIC/documents/HP%20QUICK%20REFERENCECARD_FINAL.pdf)
- information about having conversations with patients and carers  
[https://fightdementia.org.au/sites/default/files/VIC/D%26DHelp%20Sheet\\_2015\\_FINAL.pdf](https://fightdementia.org.au/sites/default/files/VIC/D%26DHelp%20Sheet_2015_FINAL.pdf)

Resources for people with dementia and carers include:

- Information for people with dementia – Driving  
[https://fightdementia.org.au/sites/default/files/helpsheets/Helpsheet-InformationForPeopleWithDementia04-DrivingAndDementia\\_english.pdf](https://fightdementia.org.au/sites/default/files/helpsheets/Helpsheet-InformationForPeopleWithDementia04-DrivingAndDementia_english.pdf)
- Caring for someone with dementia – Driving  
[https://fightdementia.org.au/sites/default/files/helpsheets/Helpsheet-CaringForSomeone07-Driving\\_english.pdf](https://fightdementia.org.au/sites/default/files/helpsheets/Helpsheet-CaringForSomeone07-Driving_english.pdf)
- Dementia and driving – Guide for families and carers  
<https://vic.fightdementia.org.au/sites/default/files/VIC/documents/Dementia-and-Driving-guide-for-family-carers.pdf>

### Q. Where can I find information about driving and diabetes?

- A. The National Diabetes Services Scheme (NDSS) is an initiative of the Australian Government administered by Diabetes Australia. The NDSS provides information and support services to people with diabetes, including information about driving. Refer to <https://www.ndss.com.au/>

The 'Above 5 to Drive' resources are also available through Diabetes Australia  
<https://www.diabetesaustralia.com.au/driving>

### Q. How do I find a provider for a practical driver assessment?

- A. The impact of a medical condition or multiple conditions on driving is not always clear, thus a practical driver assessment may be useful. Such assessments are to be distinguished from the tests of competency to drive that are routinely conducted by driver licensing authorities for licensing purposes. Practical driver assessments are suitable only for persistent impairments. The assessments may be initiated by the health professional, others such as the police, a family member or the driver themselves, or the driver licensing authority. There are a number of options available. For advice contact your driver licensing authority or see the contact details for Specialist driver assessors in Appendix 10 of Assessing Fitness to Drive

Q. Where can I find information about helping people to transition to non-driving?

A. The resources described above can be helpful for providing general guidance about transitioning to non-driving. In all states and territories there are also resources applicable to older drivers.

Australian Capital Territory

- Seniors Moving Safely [www.seniorsmovingsafely.org.au](http://www.seniorsmovingsafely.org.au)

New South Wales

- Roads and Maritime Services – Older drivers  
<http://www.rms.nsw.gov.au/roads/licence/older-drivers/index.html>
- NRMA older drivers <http://www.mynrma.com.au/motoring-services/education/older-drivers.htm>

Northern Territory

- NT Department of Transport, Information for Senior Drivers  
<http://www.transport.nt.gov.au/mvr/driving-to-your-capability/information-for-senior-drivers>

Queensland

- Medical certificates for older drivers <http://www.qld.gov.au/seniors/transport/safe-driving/>
- Royal Automobile Club of Queensland (RACQ) Older Drivers  
[www.racq.com.au/motoring/roads/road\\_safety/older\\_road\\_users](http://www.racq.com.au/motoring/roads/road_safety/older_road_users)

South Australia

- South Australian Seniors Transport <http://www.sa.gov.au/topics/seniors/transport>

Tasmania

- Tasmanian Older Drivers website  
[http://www.transport.tas.gov.au/licensing/information/older\\_drivers](http://www.transport.tas.gov.au/licensing/information/older_drivers)

Victoria

- TAC – older drivers <http://www.tac.vic.gov.au/road-safety/safe-driving/older-drivers>
- VicRoads – older drivers  
<https://www.vicroads.vic.gov.au/safety-and-road-rules/driver-safety/older-drivers>
- VicRoads – dementia <https://www.vicroads.vic.gov.au/licences/medical-conditions-and-driving/medical-conditions/dementia>
- How safe is your car? — older drivers [www.howsafeisyourcar.com.au/Driving-Safely/Older-Drivers/](http://www.howsafeisyourcar.com.au/Driving-Safely/Older-Drivers/)

Western Australia

- Senior driver licence renewals  
<http://www.transport.wa.gov.au/licensing/renew-my-drivers-licence-seniors-85-plus.asp>

# Summary of changes

---

## Improved general guidance

The current review of *Assessing Fitness to Drive* has resulted in improved guidance regarding the principles of assessing fitness to drive contained in Part A of the publication. This is essential reading for all those involved in conducting fitness to drive assessments (refer Section 2, page 6 to 14).

There is also improved guidance regarding information resources available to support driver and carer education. These are included in Part A as well as in relation to specific conditions such as dementia and diabetes.

## Changes to the standards – by chapter

### Blackouts

There have been no changes to the medical criteria in this chapter.

### Cardiovascular conditions

There have been a small number of changes:

#### Aneurysms

The review of *Assessing Fitness to Drive* in 2008 introduced specific criteria for aneurysm diameter, with aneurysms greater than or equal to 50 mm in diameter considered not to meet the requirements for a conditional licence for both private and commercial drivers.

In the current review, stakeholders requested that this be reviewed, the main concern being that the current cut-off was generally below that at which surgery is normally indicated.

Drawing on recent international practice and local expert opinion, the revised standard now makes a distinction based on risk stratification between degenerative and bicuspid aortic valve associated aneurysm (55 mm) compared with genetic forms of aneurysm (50 mm) for a conditional licence (Canadian Cardiovascular Society 2014).

#### Implantable cardioverter defibrillator (ICD)

Criteria contained in *Assessing Fitness to Drive* have precluded drivers holding a commercial vehicle licence if they have an ICD implanted for ventricular arrhythmias. During the previous review (2012), several submissions were received proposing relaxation of this standard in cases where the device was implanted for prophylaxis rather than treatment of a diagnosed arrhythmia. This was considered by the expert committee at the time and it was determined that the restriction should remain because the discharge of an ICD could cause a driver to lose control of the vehicle.

Further submissions were received in the current review, again seeking relaxation of the prohibition of an ICD in a commercial vehicle driver, if inserted for prophylaxis.

The advice of the CSANZ confirmed that the restriction should remain in keeping with the recent statement from the European Heart Rhythm Association and other international standards. Additional wording has been included to emphasise that the standard applies in cases of prophylactic ICD use.

There may be cases where a conditional licence may be considered under exceptional circumstances, depending on the underlying condition and the nature of the driving task. Drivers may discuss this with the Driver Licensing Authority.

## Ventricular assist devices (VADs)

A small number of people receive therapy with these devices for heart failure. New criteria have been developed to cover VADs. A conditional licence may be considered for a private driver requiring a left ventricular assist device (LVAD) subject to meeting several criteria. They may not drive if they require a combined LVAD / RVAD or an artificial heart. A VAD of any sort is not acceptable for commercial vehicle driving.

## New valvular procedures

New procedures for valve repair have also been introduced including a mitral valve procedure (mitra clip) and an aortic valve procedure (TAVI). These have been included as examples in the existing section on valvular replacement, but there are no changes to the licensing criteria.

## Diabetes

The focus of this chapter continues to be on the main risks to safety including hypoglycaemia and end organ effects.

For the purposes of the standard the definition of severe hypoglycaemic event now encompasses hypoglycaemic seizures, so that such seizures are no longer managed as per the epilepsy and seizure standard.

Reduced awareness of hypoglycaemia by drivers is a particular risk as it means that they cannot take steps to cease driving and take remedial measures. A new questionnaire (Clarke Questionnaire) has been included to help identify drivers who may have reduced awareness of hypoglycaemia.

With regard to the criteria for reduced hypoglycaemia awareness, for private vehicle drivers, the criterion *“the person experiences early warning symptoms of hypoglycaemia”* is qualified to also include *“or has a documented management plan for lack of early warning symptoms”*.

The definition of ‘satisfactory control’ and its inclusion as a licensing criterion was the subject of particular scrutiny during the review. Ultimately it was agreed that, while satisfactory control should be a target of general management of people with diabetes, it did not have a direct impact on road safety. It has therefore been removed from the licensing criteria.

For both private and commercial vehicle drivers, a suitable specialist is defined as an endocrinologist / consultant physician specialising in diabetes.

It was apparent that there remains poor awareness of the circumstances under which a treating doctor, rather than a specialist, may undertake commercial driver reviews for a conditional licence. This information has been further emphasised in the revised chapter.

Comment was received from the Royal Australian and New Zealand College of Ophthalmology (RANZCO) that some patients with diabetes were being referred routinely for perimetry of visual fields. Wording has been revised to emphasise that such a referral should be made only when clinically indicated.

## Hearing

There remains a hearing standard for commercial vehicle drivers.

While the 2012 standard provided some flexibility for persons with hearing loss or deafness to drive commercial vehicles, this appears not to have been well understood in the community and the hearing threshold has been taken as pass or fail. The description of the two step assessment process has been expanded to provide greater clarity and support consistency in application. The standard retains the existing hearing threshold and then allows for meeting the standard by hearing aids. It goes on to detail how individualised assessments should be made to determine licensing status, and addresses circumstances where wearing of hearing aids may impair safety due to distraction caused by amplification. The procedure is equally applicable to congenital or acquired hearing loss and thus simplifies the assessment. A new flow chart illustrates the process.

A list of specific considerations for the individualised assessment is included to guide the assessment process and driver licensing decision-making.

It was noted that drivers with stable conditions were being required to attend review assessments for conditional licences. The revised criteria clarify that periodic review is not required in cases where hearing loss is stable.

## Musculoskeletal conditions

There have been no changes to this chapter.

## Neurology: Dementia and cognitive impairment

There have been no changes to the medical criteria, however the resources for management developed by Alzheimer's Australia have been included. Links to the driver and carer resources have also been included.

## Neurology: Seizures and epilepsy

The management of seizures and epilepsy in relation to driving is a complicated matter. At the last review, the introduction of a 'default standard' provided a framework to facilitate the process. In the current review, flow charts have been included to further illustrate the decision-making process.

A number of additional changes have been made to provide clarification, but should have no or limited impact on drivers. For example, for commercial vehicle drivers, where EEG demonstrating no epileptiform activity is required, timeframes for the EEG are now provided. For example, in the default standard, for a conditional licence an EEG conducted in the last six months must have shown no epileptiform activity, and no other EEG conducted in the last 12 months must have shown epileptiform activity.

For drivers with epilepsy under treatment who have been seizure-free for an extended period (10 years for private drivers and 20 years for commercial), the driver licensing authority may consider a longer review period on the advice of an independent specialist. Ongoing review for commercial vehicle drivers will continue to be by a specialist in epilepsy.

## Neurology: Vestibular conditions

Consultation identified that acute vertigo is of minor importance in road safety. There is usually a prodrome in Ménière's disease, which enables cessation of driving. Benign paroxysmal positional vertigo (BPPV) usually affects vertical movement of the head, which is minimal when driving. A literature search found little evidence that vertigo contributes to crashes. Therefore, the section was deleted and an advisory-only paragraph was added to 'Other neurological and neurodevelopmental conditions'.

## Neurology: Other conditions

A limited number of changes have been made to the criteria in this chapter:

### Stroke

For private vehicle drivers, the requirement for a conditional licence and periodic review has been removed if the driver has recovered adequate neurological function. This reflects the non-progressive nature of stroke. The standard cross refers to management of treatable causes of stroke. There has been no change in the criteria for commercial vehicle drivers.

### Risk of post-traumatic epilepsy

The head injury standard for commercial vehicle drivers now includes criteria relating to risk of post-traumatic epilepsy. A non-driving period of 12 months (without seizures) applies if they are determined to have a high risk of seizures following a head injury. There is not a similar standard for private vehicle drivers.

### Intellectual disability

The standard for intellectual disability has been removed, including reference to IQ. This is covered in 'Other neurological conditions'. It is noted that people with intellectual and other disabilities are given the opportunity to undertake the usual testing for driver licensing, including knowledge testing, which is sufficient to determine their suitability to hold a licence.

## Psychiatric conditions

There have been no changes to the medical criteria for psychiatric conditions.

The Tourette Syndrome Association of Australia's submission advised that Tourette's syndrome is classified as a neurological condition. It has therefore been moved to the neurological conditions chapter.

## Sleep disorders

There have been no changes to the licensing criteria for sleep disorders. The limitations of the Epworth Sleepiness Scale has been emphasised to ensure that it is not relied on alone for the screening and monitoring of sleep disorders.

## Substance misuse

There have been no changes to the licensing criteria for substance misuse disorders.

More detailed information about the application of driver interlocks has been included in an Appendix.

## Vision and eye disorders

### Visual fields

The standard for private vehicle drivers has been clarified by including the additional criterion to define when a driver no longer meets the requirements for an unconditional licence:

- if there is any significant field loss (scotoma) with more than four contiguous spots within 20 degrees radius from fixation.

The text has been revised to provide clarity around the assessment of visual fields.

### Monocular vision

In 2012, a more strict approach to managing commercial vehicle drivers with monocular vision was introduced, requiring individual assessment. Licensing authorities and industry stakeholders reported some difficulties with the introduction of this change as it was not clear what criteria should be considered in this assessment. The text now includes a detailed checklist of factors to be considered in licensing monocular drivers (and visual field defects in general).

For commercial vehicle drivers, the review period for drivers with a conditional licence has changed from one year to two years.

# Need more information?

---

See the Austroads website <https://austroads.com.au/drivers-and-vehicles/assessing-fitness-to-drive> or contact the driver licensing authority in your state or territory. See contact details below.

## Australian Capital Territory

Road User Services  
Phone: 13 22 81  
Email: [rus@act.gov.au](mailto:rus@act.gov.au)  
Web: [www.rego.act.gov.au](http://www.rego.act.gov.au)

## New South Wales

Roads and Maritime Services  
Phone: 13 22 13  
Email: [info@service.nsw.gov.au](mailto:info@service.nsw.gov.au)  
Web: [www.rms.nsw.gov.au](http://www.rms.nsw.gov.au)

## Northern Territory

Department of Transport  
Phone: 1300 654 628  
(08) 8999 3111 (outside NT)  
Email: [mvr@nt.gov.au](mailto:mvr@nt.gov.au)  
Web: [www.nt.gov.au/transport/](http://www.nt.gov.au/transport/)

## Queensland

Department of Transport and Main Roads  
Phone: 13 23 80  
Web: [www.tmr.qld.gov.au](http://www.tmr.qld.gov.au)

## South Australia

Department for Planning, Transport and Infrastructure  
Phone: 13 10 84  
Email: [dpti.enquiriesadministrator@sa.gov.au](mailto:dpti.enquiriesadministrator@sa.gov.au)  
Web: [www.sa.gov.au](http://www.sa.gov.au)

## Tasmania

Department of State Growth  
Phone: 1300 135 513  
Email: [dlu@stategrowth.tas.gov.au](mailto:dlu@stategrowth.tas.gov.au)  
Web: [www.transport.tas.gov.au](http://www.transport.tas.gov.au)

## Victoria

VicRoads Medical Review  
Phone: 13 11 71  
Email: [medicalreview@roads.vic.gov.au](mailto:medicalreview@roads.vic.gov.au)  
Web: [www.vicroads.vic.gov.au/licences/medical-conditions-and-driving/medical-review](http://www.vicroads.vic.gov.au/licences/medical-conditions-and-driving/medical-review)

## Western Australia

Department of Transport  
Phone: 13 11 56  
Web: [www.transport.wa.gov.au](http://www.transport.wa.gov.au)