

DOT PHYSICAL REQUIREMENTS

- If any of the following items or conditions applies to you, you must bring the referenced documentation with you to your appointment or we will not be able to process your DOT certification.
- Please note that any letters from specialists or primary care providers should always **include that they feel you are cleared to operate commercial vehicles.**
- Please be aware that if you have a major change in your medical status such as heart attack, surgery, major injuries, change in medications, etc., you will need to get another DOT exam for a new license.

MEDICATIONS

- You will need to provide a list of all your prescription medications with dosages and when it is taken. This includes over the counter medication, herbal medicines and diet supplements.

BLOOD THINNERS: Anticoagulation medication, such as Coumadin/Warfarin

- We need documentation from your physician of lab work (INR test) for the past 3 months. The documentation should state that you are consistent with getting tested and stable without frequent adjustments to dosages.

DIABETES

- You will need to provide a printed Hgb A1C lab result from the last 3 months. (Hemoglobin A1C must be less than 10)
- You will need to provide a copy of last office visit/physician letter summarizing your case, any restrictions, compliance with treatment and if there were any low blood sugar events and what the treatment was.
- If you are on insulin you will need to provide a waiver or you cannot be cleared.

HYPERTENSION/ HIGH BLOOD PRESSURE

- Have your regular check-ups with your doctor to insure your blood pressure is well controlled. Take the medication prescribed by your Doctor. If your blood pressure is well controlled (less than or equal to 140/90), no other information should be required.

OBSTRUCTIVE SLEEP APNEA/ OTHER SLEEP DISORDERS

- If you have had a sleep study done in the past, you will need to provide a copy of it to record the diagnosis and treatment recommended by the test. This may be a sleep study that doesn't show OSA so that we know treatment is not needed.
- You will need to provide current CPAP usage report for the past 9 months or if CPAP started after your last DOT physical, bring usage record from date it was started until present exam date. Adequate usage is at least 4 hours per night for 70% of the nights. If are a new user a minimum report of 90 days is recommended.

GLASSES, CONTACT LENSES, HEARING AIDS

- Bring your glasses, contacts and hearing aids with you for the DOT physical.
- If you have poor vision worse than 20/40 in one eye or both eyes together, you will not pass.

CARDIAC VALVE CONDITIONS OR VALVE REPLACEMENTS

- You will need to provide your last cardiology office visit note from within the last 12 months, results from any diagnostic testing performed within the last 12 months AND a letter from cardiologist summarizing your case and indicating activity restrictions and compliance with treatment. The letter needs to specifically state you are cleared to operate a CMV.
- If you are currently using blood thinners such as Coumadin/Warfarin that require laboratory checks, then please see the information on page 1 for blood thinners.

CARDIAC HISTORY OF HEART FAILURE, CORONARY ARTERY BYPASS/STENTS and/or HEART ATTACK

- You will need to provide your last cardiology office visit note within the last 12 months AND a letter from the cardiologist summarizing your case and indicating activity restrictions and compliance with treatment. The letter needs to specifically state you are cleared to operate a CMV.
- You will need to provide a copy of your last echocardiogram report AND/OR stress-test report with an ejection fraction greater than or equal to 40% and tolerance of > 6 METS
 - **For stents stress test has to be within 2 years**
 - **For Bypass stress test has to be within a year**

CARDIAC ARRHYTHMIA (abnormal heart rhythm like Atrial Fibrillation, etc.)

- You will need to provide your last cardiology office visit note within last 12 months AND/OR a letter from cardiologist summarizing your case and indicating activity restrictions and compliance with treatment. The letter needs to specifically state you are cleared to operate a CMV.
- If you are currently using blood thinners such as Coumadin/Warfarin that require laboratory checks, please see information on page 1 for blood thinners.
- If you have a pacemaker, you will need to provide copies of device checks, including battery life.
- If you have a defibrillator this is disqualifying for a DOT physical
- If you have atrial fibrillation and are not on blood thinners, the note from your cardiologist must state you are at low risk of stroke and are safe to operate a CMV.

SEIZURES/EPILEPSY, NEUROLOGICAL TUMORS/ILLNESSES, or STROKE, “Mini strokes” or TRANSIENT ISCHEMIA ATTACKS (TIA)

- These are complex medical conditions and some of them will be disqualifying but others are not. You will need to provide medical records in order to determine if you will be able to get certified. If you do not have the medical records you will not be seen.
- If you have a chronic neurological condition such as **MS** or **Parkinson’s Disease** you will be typically disqualified.
- You will need to provide your last Neurology or treating specialist involved office notes, results from any diagnostic testing performed within the last 12 months, AND a letter from Neurologist summarizing your case and indicating activity restrictions and compliance with treatment.
- If you are currently using blood thinners such as Coumadin/Warfarin that require laboratory, please see information on page 1 for blood thinners.
- If you have a Seizure Waiver you will need to provide it or you will not be able to be seen.

CHRONIC PAIN CONDITIONS

- You will need to provide a medication list including dose and frequency of use.
- You will need to provide office visit notes OR a letter from the treating provider summarizing the condition being treated to include complete history, current functional status, treatment plan, any recommended activity restrictions, medication side effects and prognosis

POTENTIALLY IMPAIRING MEDICATIONS (examples: narcotics, benzodiazepines, muscle relaxers, sedative, sleeping pills and hypnotics)

- You will need to provide a medication list including dose and frequency use.
- You will need to provide office visit notes OR a letter from the treating provider summarizing the condition being treated to include complete history, current functional status, treatment plan, any recommended activity restrictions, medication side effects and prognosis. The letter needs to specifically state you are cleared to operate a CMV.

MENTAL HEALTH CONDITIONS: Anxiety, Bipolar, Depression, Schizophrenia, etc.

- You will need to provide notes from Mental Health Provider stating medications you are taking, mental health stability and professional input as to whether medications or condition will interfere with safe commercial driving.

EYE CONDITIONS (other than those corrected by glasses or contact lenses)

- You will need to provide your last ophthalmology office visit note within the last 12 months, results from any diagnostic testing performed within the last 12 months AND/OR a letter from Ophthalmologist summarizing your case and indicating compliances with treatment and any recommended activity restrictions. The letter needs to specifically state you are cleared to operate a CMV.
- If you have a Vision Waiver, you will need to provide the document.

OTHER (INJURIES, SURGERIES, HOSPITALIZATIONS, etc.)

- If you have any other medical conditions that you see a doctor about on a routine basis, you will need to bring documentation of your last doctor visit summarizing your case regarding treatment and activity limitations.

This is a summary: additional information can be found at:

www.fmcsa.dot.gov/FAQ

Please call WorkFit at **(402) 934-4535** if you have questions.