



Information Manual for Training Organizations



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Table of Contents

INTRODUCTION 4

THE NATIONAL REGISTRY OVERVIEW 4

 THE NATIONAL REGISTRY 4

Objectives 4

Medical Examiner Training and Certification Test Development Process 5

Dissemination of National Registry Information 5

 FMCSA MEDICAL EXAMINER CERTIFICATION 5

Certification 6

Recertification 6

Reinstatement 6

BECOMING AN FMCSA TRAINING PROVIDER 7

 TRAINING PROVIDER ACCREDITATION 7

 NATIONAL REGISTRY TRAINING POLICIES AND PROCEDURES 7

Compliance with FMCSA’s Training Curriculum 7

Fees, Payment, Refunds, and Schedules 7

Submitting Training Provider Contact Information 8

Verification of Training Participants 8

MEDICAL EXAMINER RESPONSIBILITIES 8

TRAINING PROGRAM CRITERIA 8

TRAINING DEVELOPMENT AND DELIVERY 9

 TRAINING DEVELOPMENT 9

FMCSA Resources 9

Medical Association Best Practices 9

 TRAINING DELIVERY 10

Delivery Methodologies 10

Learning Strategies 10

 TRAINING MAINTENANCE 10

PERIODIC TRAINING 10

**APPENDIX A: NATIONAL REGISTRY OF CERTIFIED MEDICAL EXAMINERS
MEDICAL EXAMINER TRAINING, GUIDANCE FOR THE CORE
CURRICULUM SPECIFICATIONS..... 11**

Introduction

The National Registry of Certified Medical Examiners (hereinafter known as “National Registry”) was established in accordance with the final rule published by the Federal Motor Carrier Safety Administration (FMCSA) in the Federal Register on April 20, 2012. This rule requires that all medical examiners (ME) who conduct physical examinations for interstate commercial motor vehicle (CMV) drivers:

- Maintain a valid State license to conduct medical examinations;
- Complete required training on FMCSA’s physical qualification standards;
- Pass the ME Certification Test to demonstrate a sound understanding of FMCSA’s physical qualification standards; and
- Complete periodic training and recertification testing.

Beginning May 21, 2014, all medical certificates issued to interstate truck and bus drivers must come from MEs on the National Registry.

NOTE: The National Registry does not change any of the physical qualification standards for CMV drivers.

This *Information Manual for Training Organizations* explains:

- Requirements for becoming a National Registry training provider.
- Content that must be included in the ME training.
- Policies and procedures that apply to training providers.

The National Registry Overview

In August 2005, Congress enacted the Safe, Accountable, Flexible, Efficient Transportation Equity Act: A Legacy for Users (SAFETEA-LU), which authorized FMCSA to establish the National Registry of Certified Medical Examiners (49 U.S.C. 31149).

The National Registry

The National Registry is designed to improve highway safety by producing trained, certified MEs who can determine whether a CMV driver’s health meets FMCSA standards and guidelines.

Objectives

The objectives of the National Registry Program are:

- Improve highway safety and driver health;
- Ensure that MEs understand FMCSA medical standards and guidelines and how they apply to interstate CMV drivers;
- Maintain ongoing competency of MEs through training and recertification;
- Promote public confidence in the quality of the MEs who certify CMV drivers; and
- Establish an online list of certified MEs.

Medical Examiner Training and Certification Test Development Process

FMCSA performed an extensive role delineation study to identify the critical knowledge, skills, and abilities needed to perform CMV driver physical examinations in accordance with current FMCSA regulations and advisory criteria. A variety of methods were used to complete the study, including a literature review, direct observations of CMV driver physical examinations, a national survey of MEs, and ME expert Working Integrated Product Team meetings. The study results provided a blueprint for the ME Certification Test and the development of core curriculum specifications for the initial ME training that will be provided by private-sector training organizations.

Dissemination of National Registry Information

FMCSA developed the National Registry Web site and the National Registry Listserv to disseminate information including the latest National Registry developments and to facilitate communication with the program's primary stakeholders: medical professionals interested in becoming certified MEs; certified MEs; industry professionals; CMV drivers; employers; the general public; and all other interested parties.

The National Registry Web site (<http://nrcme.fmcsa.dot.gov>) provides information about FMCSA regulations and other requirements relevant to CMV driver physical examinations. The Web site will include a continually updated list of certified MEs who are authorized by FMCSA to perform physical examinations for interstate CMV drivers.

Medical professionals interested in becoming certified MEs and being listed on the National Registry can find information about the ME training and certification process on the National Registry Web site.

FMCSA Medical Examiner Certification

The training and testing requirement for ME certification is intended to ensure the ME's ability to determine whether a CMV driver can safely meet the mental and physical demands of the job. FMCSA certification is granted to those MEs who:

- Meet the professional requirements established in 49 CFR 390.5: "Medical Examiner means a person who is licensed, certified, and/or registered in accordance with applicable state laws and regulations to perform physical examinations. The term includes, but is not limited to, doctors of medicine, doctors of osteopathy, physician assistants, advanced practice nurses, and doctors of chiropractic."
- Complete required initial ME training on the FMCSA physical qualification standards, guidance and related knowledge for CMV drivers.
- Pass the FMCSA ME Certification Test within 3 years of the taking the initial training.
- Maintain and demonstrate knowledge of the current Federal requirements through periodic training and recertification.
- Comply with administrative requirements including, submission of monthly reports, periodic monitoring/auditing, and responding promptly to requests for records from enforcement personnel.

All medical certificates issued on or after May 21, 2014, must be issued by MEs who are listed on the National Registry.

When the ME Certification credential is issued, it includes both the anniversary date of issuance and the unique ME identification number (National Registry Number). Each certification is issued for 10 years and may be renewed.

Certification

Certification means that a ME has 1) completed the initial FMCSA ME training, 2) passed the FMCSA ME Certification Test, 3) received the FMCSA ME certification credential, and 4) is listed on the National Registry.

Recertification

Certified MEs must keep their certification and knowledge of the regulations and advisory criteria current through periodic training and recertification. The periodic training must be completed every 5 years. Successful completion of the training is a prerequisite to taking the recertification exam in the tenth year. Completing recertification restarts the recertification cycle for the next 10 years. The requirements for maintaining the certification are summarized in Table 1.

To ensure uninterrupted certification status, the ME must complete the training requirements and pass the certification test within the calendar year prior to the certification expiration date. If successful recertification is not completed within that time frame:

- The ME’s certification expires and
- The ME is no longer certified to perform medical examinations but the ME’s name and contact information are still displayed on the National Registry Web site.

NOTE: FMCSA does not recognize physical examinations performed by a ME after his or her certification has expired.

Reinstatement

If a ME has been removed from the National Registry for any reason but desires to resume CMV driver physical examinations, reinstatement is required. The requirements for certification, recertification, and reinstatement are summarized in Table 1 below:

Table 1. Certification Requirements

Status	Description	Training Required	Certification Test
Certification	Initial approval to be a FMCSA ME.	Initial FMCSA ME training successfully completed for the first time.	Pass test within 3 years of completing the initial FMCSA ME training.
Recertification	Re-approval of FMCSA certified ME already listed in the National Registry.	Complete Periodic Refresher Training by fifth and tenth years.	Pass test prior to expiration of current certification.
Reinstatement	Re-approval of a prior FMCSA ME who has been removed from the National Registry for any reason.	FMCSA ME training is current (every 5 years).	Certification test is current (every 10 years).

Becoming an FMCSA Training Provider

This section describes the qualifications necessary to become a National Registry training provider for the FMCSA.

Training Provider Accreditation

FMCSA relies on a public-private partnership to deliver the required training program. FMCSA develops and provides the training curriculum specifications to private-sector professional associations, health care organizations, and other for other non-profit and for-profit training providers. Training providers may choose their preferred method of instruction as long as they are accredited by a nationally-recognized medical profession accrediting organization. To avoid a conflict of interest, training providers cannot also be test providers.

Examples of accrediting organizations include, but are not limited to the following:

- Accreditation Council for Continuing Medical Education (ACCME)
- Accreditation Review Commission on Education for the Physician Assistant, Inc. (ARC-PA)
- American Association of Occupational Health Nurses (AAOHN)
- American Medical Association (AMA)
- American College of Occupational and Environmental Medicine (ACOEM)
- American Academy of Physician Assistants (AAPA)
- American Academy of Nurse Practitioners (AANP)
- American Nurses Credentialing Center (ANCC)
- American Osteopathic Association (AOA)
- Colleges and universities accredited by the U.S. Department of Education Office of Postsecondary Education
- National Commission on Certification of Physician Assistants (NCCPA)
- Providers of Approved Continuing Education (PACE)

National Registry Training Policies and Procedures

This section summarizes additional FMCSA requirements, policies, and procedures for training providers.

Compliance with FMCSA's Training Curriculum

Training providers must display either in the classroom or online an affirmation of training curriculum compliance that states: "This ME training course conforms to FMCSA's training curriculum modules and topics on regulations and guidelines for conducting CMV driver medical examinations. FMCSA regulations and guidelines are reviewed regularly, and the training is updated as required. This course was last updated on _____."

It is the ME's sole responsibility to ensure that the training program he/she completes meets the curriculum specifications and administrative requirements established by FMCSA for ME training.

Fees, Payment, Refunds, and Schedules

FMCSA does not establish, or regulate the fees established and collected by training organizations, and does not receive any monies collected by training organizations or providers. Training providers are not reimbursed by the Federal government and may charge fees they deem appropriate for training delivery. The training provider is responsible for the entire process of fee determination, collection, and refund, if warranted. The training provider is also responsible for the advertising of the training service, determining the training schedule, and managing applications.

Submitting Training Provider Contact Information

For listing on the National Registry Web site as a training provider, training organizations should submit their name and contact information to FMCSA. This allows MEs to easily find a training provider. Listing on the Web site is voluntary and does not constitute endorsement by FMCSA.

Verification of Training Participants

To ensure the integrity of the National Registry training and certification program, training providers must verify the identification for all training participants prior to issuing a certificate of completion. Training organizations providing online or web-based training must include a page where the training participant can verify and confirm his or her identity prior to printing a certificate.

Medical Examiner Responsibilities

It is the ME's sole responsibility to ensure that the training program he/she completes meets the curriculum specifications and administrative requirements established by FMCSA for ME training. The FMCSA *Guidance for the Core Curriculum Specifications* is included in this document as Appendix A. Once a medical examiner has completed all training requirements, he/she will receive a certificate of completion to be used in the testing application process.

Training Program Criteria

It is the ME's responsibility to ensure that the training program meets the criteria defined in FMCSA's National Registry regulation.

The training program must:

- Be conducted by a training provider that is accredited by a nationally-recognized medical profession accrediting organization to provide continuing education units.
- Presents course content that meets or exceeds the eight topics outlined in FMCSA's current core curriculum specifications.
- Provides the ME candidate with proof of training. FMCSA recommends providing ME candidates with a certificate of completion. The training certificate may include the following information:
 - ME candidate's name and professional title.
 - Date training was completed.
 - Training provider name and contact information.
 - Title of training program.
 - Training program accreditation information, including:
 - Name of accrediting body.
 - Affirmation of accreditation in accordance with the requirements of the accrediting body.
 - Accrediting body contact information.

NOTE: The ME candidate can attend a training program accredited by any medical profession accrediting organization (e.g., a physician can complete a training program accredited by a nurse practitioner accrediting organization).

Training Development and Delivery

This section provides recommendations on how to develop, deliver, assess, and update the National Registry ME training.

Training Development

Training organizations determine the content of their training, as long as it covers, at a minimum, the following eight topics defined in FMCSA's National Registry regulation (see Appendix A: *FMCSA Guidance for Core Curriculum Specifications*).

1. Background, rationale, mission, and goals of the FMCSA ME's role in reducing crashes, injuries, and fatalities involving CMV.
2. Familiarization with the responsibilities and work environment of CMV operation.
3. Identification of the operator and obtaining, reviewing, and documenting operator medical history, including prescription and over-the-counter medications.
4. Performing, reviewing, and documenting the operator's medical examination.
5. Performing, obtaining, and documenting additional diagnostic tests or medical opinion from a medical specialist or treating physician.
6. Informing and educating the operator about medications and non-disqualifying medical conditions that require remedial care.
7. Determining operator certification outcome and period for which certification should be valid.
8. FMCSA reporting and documentation requirements.

NOTE: It is the ME's responsibility to ensure that the training program they complete covers, at a minimum, all of the above topics.

FMCSA Resources

FMCSA has resources available to assist training providers with development of the ME training.

Sample Training

A *Sample Training* is posted on the National Registry Web site. It is an example that demonstrates one way to cover the eight training topics in the core curriculum required by FMCSA. A training provider may choose to use this resource as is, or modify it to suit the chosen delivery methodology.

Web site (www.nationalregistry.fmcsa.dot.gov)

The National Registry Web site has a wealth of information regarding the National Registry program and its various components. It includes the *Medical Examiner Handbook*, which provides information and guidance for medical examiners who perform the CMV driver medical examination.

Medical Association Best Practices

In addition to FMCSA's resources, training providers are free to augment the training with information regarding their own industry's best practices.

Training Delivery

Delivery Methodologies

Training can be presented using any method of delivery, including, but not limited to:

- Instructor-led classroom: including instructor presentations that prompt participants to interactively explore information.
- Self-paced e-learning: including providing learners with a menu of content topics and options to meet learning objectives.
- Blended learning (a combination of modes): including break-out groups, polls, and games.
- Guided literature review: including question and answer sessions at the end of reading assignments.

Training providers can adapt the FMCSA core curriculum specifications for the chosen delivery method. Regardless of the delivery method, all eight topics must be addressed in the training. FMCSA does not specify the duration of training.

Learning Strategies

Training providers may use whatever learning strategies they find most effective. These may include:

- Self-reflection exercises
- Self-checks
- Clinical-based scenarios
- Questions and answer sessions/activities

Training Maintenance

FMCSA will update the National Registry Web site on all changes relating to ME training. It is recommended that training organizations take the following steps:

- Monitor the Web site to ensure that the course remains current with the FMCSA ME training requirements.
- Join the National Registry listserv to ensure receipt of communication regarding any changes.

Periodic Training

Periodic training is required every 5 years to renew the FMCSA ME certification credential. It must be completed 3 years from the date a ME is certified. Periodic training is intended to keep MEs current with the latest FMCSA information. FMCSA may develop and offer online periodic training to MEs. More specific information about periodic training will be disseminated via the National Registry Web site and listserv.

Appendix A: National Registry of Certified Medical Examiners Medical Examiner Training, Guidance for the Core Curriculum Specifications

The guidance for the core curriculum specifications is intended to assist training organizations in developing programs that would be used to fulfill the proposed requirements in the Federal Motor Carrier Safety Administration's (FMCSA) final rule for the National Registry of Certified Medical Examiners (National Registry). The final rule states that a medical examiner must complete a training program. FMCSA explained in the preamble to the final rule that training providers and organizations must follow the core curriculum specifications in developing training programs for medical examiners who apply for listing on the Agency's National Registry. This training prepares medical examiners to:

- Apply knowledge of FMCSA's driver physical qualifications standards and advisory criteria to findings gathered during the driver's medical examination; and
- Make sound determinations of the driver's medical and physical qualifications for safely operating a commercial motor vehicle (CMV) in interstate commerce.

The rule, 49 CFR 390.105(b), lists eight topics which must be covered in the core curriculum specifications. The core curriculum specifications are arranged below by numbered topic, followed by guidance to assist training providers in developing programs based on the core curriculum specifications.

Guidance for Each of the Core Curriculum Specifications

(1) Background, rationale, mission and goals of the FMCSA medical examiner's role in reducing crashes, injuries and fatalities involving commercial motor vehicles.

Mission and Goals of Federal Motor Carrier Safety Administration (FMCSA)

- Discuss the history of FMCSA and its position within the Department of Transportation including its establishment by the Motor Carrier Safety Improvement Act of 1999 and emphasize FMCSA's Mission to reduce crashes, injuries and fatalities involving large trucks and buses.

Role of the Medical Examiner

- Explain the role of the medical examiner as described in 49 CFR 391.43.

(2) Familiarization with the responsibilities and work environment of commercial motor vehicle (CMV) operations.

The Job of CMV Driving

- Describe the responsibilities, work schedules, physical and emotional demands and lifestyle among CMV drivers and how these vary by the type of driving.
- Discuss factors and job tasks that may be involved in a driver's performance, such as:
 - Loading and unloading trailers;
 - Inspecting the operating condition of the CMV; and
 - Work schedules:
 - Irregular work, rest, and eating patterns / dietary choices.

(3) Identification of the driver and obtaining, reviewing, and documenting driver medical history, including prescription and over-the-counter medications.

Driver Identification and Medical History:

- Discuss the importance of driver identification and review of the following elements of the driver's medical history as related to the tasks of driving a CMV in interstate commerce.
- Inspect a State-issued identification document with the driver's photo to verify the identity of the individual being examined; identify the commercial driver's license or other types of driver's license.
- Identify, query and note issues in a driver's medical record and/or health history as available, which may include:
 - specific information regarding any affirmative responses in the history;
 - any illness, surgery, or injury in the last five years;
 - any other hospitalizations or surgeries;
 - any recent changes in health status;
 - whether he/she has any medical conditions or current complaints;
 - any incidents of disability / physical limitations;
 - current medications and supplements, and potential side effects, which may be potentially disqualifying;
 - his/ her use of recreational/addictive substances (e.g., nicotine, alcohol, inhalants, narcotics or other habit-forming drugs);
 - disorders of the eyes (e.g., retinopathy, cataracts, aphakia, glaucoma, macular degeneration, monocular vision);
 - disorders of the ears (e.g., hearing loss, hearing aids, vertigo, tinnitus, implants);
 - cardiac symptoms and disease (e.g., syncope, dyspnea, chest pain, palpitations, hypertension, congestive heart failure, myocardial infarction, coronary insufficiency, or thrombosis);
 - pulmonary symptoms and disease (e.g., dyspnea, orthopnea, chronic cough, asthma, chronic lung disorders, tuberculosis, previous pulmonary embolus, pneumothorax);
 - sleep disorders (e.g., obstructive sleep apnea, daytime sleepiness, loud snoring, other);
 - gastrointestinal disorders (e.g., liver disease, digestive problems, hernias);
 - genitourinary disorders (e.g., kidney stones and other renal conditions, renal failure, hernias);
 - diabetes mellitus:
 - current medications (type, potential side effects, duration on current medication);
 - complications from diabetes; and
 - presence and frequency of hypoglycemic / hyperglycemic episodes/reactions;
 - other endocrine disorders (e.g., thyroid disorders, interventions / treatment);
 - musculoskeletal disorders (e.g., amputations, arthritis, spinal surgery);
 - neurologic disorders (e.g., loss of consciousness, seizures, stroke / transient ischemic attack, headaches/ migraines, numbness / weakness) ; or
 - psychiatric disorders (e.g., schizophrenia, severe depression, anxiety, bipolar disorder, or other conditions) that could impair a driver's ability to safely function.

(4) Performing, reviewing and documenting the driver's medical examination.

Physical Examination (Qualification/Disqualification Standards (§ 391.41 and 391.43))

- Explain the FMCSA physical examination requirements and advisory criteria in relationship to conducting the driver's physical examination of the following:
 - Eyes (§ 391.41(b)(10))
 - equal reaction of both pupils to light;
 - evidence of nystagmus and exophthalmos;
 - evaluation of extra-ocular movements.
 - Ears (§ 391.41(b)(11))
 - abnormalities of the ear canal and tympanic membrane;
 - presence of a hearing aid.
 - Mouth and throat (§ 391.41(b)(5))
 - conditions contributing to difficulty swallowing, speaking or breathing;
 - Neck (§ 391.41(b)(7))
 - range of motion;
 - soft tissue palpation / examination (e.g., lymph nodes, thyroid gland).
 - Heart (§ 391.41(b)(4) and (b)(6))
 - chest inspection (e.g., surgical scars, pacemaker / implantable automatic defibrillator);
 - auscultation for thrills, murmurs, extra sounds, and enlargement;
 - blood pressure and pulse (rate and rhythm);
 - additional signs of disease (e.g., edema, bruits, diaphoresis, distended neck veins).
 - Lungs, chest, and thorax (§ 391.41(b)(5))
 - respiratory rate and pattern;
 - auscultation for abnormal breath sounds;
 - abnormal chest wall configuration / palpation.
 - Abdomen (§ 391.41(a)(3)(i) and 391.43(f))
 - surgical scars;
 - palpation for enlarged liver or spleen, abnormal masses or bruits / pulsation, abdominal tenderness, hernias (e.g., inguinal, umbilical, ventral, femoral or other abnormalities).
 - Spine (§ 391.41(b)(7))
 - surgical scars and deformities;
 - tenderness and muscle spasm;
 - loss in range of motion and painful motion;
 - spinal deformities.
 - Extremities and trunk (§ 391.41(b)(1), (b)(4) and (b)(7))
 - gait, mobility, and posture while bearing his/her weight; limping or signs of pain;
 - loss, impairment, or use of orthosis;
 - deformities, atrophy, weakness, paralysis, or surgical scars;
 - elbow and shoulder strength, function, and mobility;
 - handgrip and prehension relative to requirements for controlling a steering wheel and gear shift;
 - varicosities, skin abnormalities, and cyanosis, clubbing, or edema;
 - leg length discrepancy; lower extremity strength, motion, and function
 - other abnormalities of the trunk.

- Neurologic status (§ 391.41(b)(7), (b)(8) and(b)(9))
 - impaired equilibrium, coordination or speech pattern (e.g., ataxia);
 - sensory or positional abnormalities;
 - tremor;
 - radicular signs;
 - reflexes (e.g., asymmetric deep-tendon, normal / abnormal patellar and Babinski).
- Mental status (§ 391.41(b)(9))
 - comprehension and interaction;
 - cognitive impairment;
 - signs of depression, paranoia, antagonism, or aggressiveness that may require follow-up with a mental health professional.

(5) Performing, obtaining and documenting diagnostic tests and obtaining additional testing or medical opinion from a medical specialist or treating physician.

Diagnostic Testing and Further Evaluation

- Describe the FMCSA diagnostic testing requirements and the medical examiner's ability to request further testing and evaluation by a specialist.
 - Urine test for specific gravity, protein, blood and glucose (§ 391.41(a)(3)(i));
 - Whisper or audiometric testing (§ 391.41(b)(11));
 - Vision testing for color vision, distant acuity, horizontal field of vision and presence of monocular vision (§ 391.41(b)(10));
 - Other testing as indicated to determine the driver's medical and physical qualifications for safely operating a CMV.
 - Refer to a specialist a driver who exhibits evidence of any of the following disorders (§ 391.43(e) and (f)):
 - vision (e.g., retinopathy, macular degeneration);
 - cardiac (e.g., myocardial infarction, coronary insufficiency, blood pressure control);
 - pulmonary (e.g., emphysema, fibrosis);
 - endocrine (e.g., diabetes);
 - musculoskeletal (e.g., arthritis, neuromuscular disease);
 - neurologic (e.g., seizures);
 - sleep (e.g., obstructive sleep apnea);
 - mental / emotional health (e.g., depression, schizophrenia); or
 - other medical condition(s) that may interfere with ability to safely operate a CMV.

(6) Informing and educating the driver about medications and non-disqualifying medical conditions that require remedial care.

Health Counseling

- Inform course participants of the importance of counseling the driver about:
 - possible consequences of non-compliance with a care plan for conditions that have been advised for periodic monitoring with primary healthcare provider;
 - possible side effects and interactions of medications (e.g., narcotics, anticoagulants, psychotropics) including products acquired over-the-counter (e.g., antihistamines, cold and cough medications or dietary supplements) that could negatively affect his/her driving;
 - the effect of fatigue, lack of sleep, poor diet, emotional conditions, stress, and other illnesses that can affect safe driving;

- if he/she is a contact lens user, the importance of carrying a pair of glasses while driving;
- if he/she uses a hearing aid, the importance of carrying a spare power source for the device while driving;
- if he/she has a history of deep vein thrombosis, the risk associated with inactivity while driving and interventions that could prevent another thrombotic event;
- if he/she has a diabetes exemption, that he/she should:
 - carry a rapidly absorbable form of glucose while driving;
 - self-monitor blood glucose one hour before driving and at least once every four hours while driving;
 - comply with each condition of his/her exemption;
 - plan to submit glucose monitoring logs for each annual recertification;
- corrective or therapeutic steps needed for conditions which may progress and adversely impact safe driving ability (e.g., seek follow-up from primary care physician);
- steps needed for reconsideration of medical certification if driver is certified with a limited interval, e.g., the return date and documentation required for extending the certification time period.

(7) Determining driver certification outcome and period for which certification should be valid.

Assessing the Driver's Qualifications and Disposition

- Explain how to assess the driver's medical and physical qualification to operate a CMV safely in interstate commerce using the medical examination findings weighed against the physical and mental demands associated with operating a CMV by:
 - Considering a driver's ability to
 - move his/her body through space while climbing ladders; bend, stoop, and crouch; enter and exit the cab;
 - manipulate steering wheel;
 - perform precision prehension and power grasping;
 - use arms, feet, and legs during CMV operation;
 - inspect the operating condition of a tractor and/or trailer;
 - monitor and adjust to a complex driving situation; and
 - consider the adverse health effects of fatigue associated with extended work hours without breaks;
 - Considering identified disease or condition(s) progression rate, stability, and likelihood of gradual or sudden incapacitation for documented conditions (e.g., cardiovascular, neurologic, respiratory, musculoskeletal and other).

Medical Certificate Qualification/Disqualification Decision and Examination Intervals

- Discuss the medical examiner's obligation to consider potential risk to public safety and the driver's medical and physical qualifications to drive safely when issuing a Medical Examiner's Certificate, when to qualify/disqualify the driver and how to determine the expiration date of the certificate by:
 - using the requirements stated in the FMCSRs, with nondiscretionary certification standards to disqualify a driver
 - with a history of epilepsy;
 - with diabetes requiring insulin control (unless accompanied by an exemption);
 - when vision parameters (e.g., acuity, horizontal field of vision, color) fall below minimum standards unless accompanied by an exemption;
 - when hearing measurements with or without a hearing aid fall below minimum standards;

- currently taking methadone;
- with a current clinical diagnosis of alcoholism; or
- who uses a controlled substance including a narcotic, an amphetamine, or another habit-forming drug without a prescription from the treating physician;
- using clinical expertise, disqualify a driver when evidence shows a driver has a medical condition that in your opinion will likely interfere with the safe operation of a CMV;
- certifying a driver for an appropriate duration of certification interval;
- if he/she has a condition for which the medical examiner is deferring the driver's medical certification or disqualifying the driver, informing the driver of the reasons which may include:
 - a vision deficiency (e.g., retinopathy, macular degeneration);
 - the immediate post-operative period;
 - a cardiac event (e.g., myocardial infarction, coronary insufficiency);
 - a chronic pulmonary exacerbation (e.g., emphysema, fibrosis);
 - uncontrolled hypertension;
 - endocrine dysfunctions (e.g., insulin-dependent diabetes);
 - musculoskeletal challenges (e.g., arthritis, neuromuscular disease);
 - a neurologic event (e.g., seizures, stroke, TIA);
 - a sleep disorder (e.g., obstructive sleep apnea); or
 - mental health dysfunctions (e.g., depression, bipolar disorder).

(8) FMCSA reporting and documentation requirements.

Documentation of Medical Examination Findings

Demonstrate the required FMCSA medical examination report forms, appropriate methods for recording the medical examination findings and the rationale for certification decisions including:

- Medical Examination Report Form
 - identification of the driver;
 - use of appropriate Medical Examination Report form;
 - assurance that driver completes and signs driver's portion of the Medical Examination Report form;
 - specifics regarding any affirmative response on the driver's medical history;
 - height/weight, blood pressure, pulse;
 - results of the medical examination, including details of abnormal findings;
 - audiometric and vision testing results;
 - presence of a hearing aid and whether it is required to meet the standard;
 - if obtained, funduscopy examination results;
 - the need for corrective lenses for driving;
 - presence or absence of monocular vision and need for a vision exemption;
 - if driver has diabetes mellitus and is insulin dependent, the need for a diabetes exemption;
 - other laboratory, pulmonary, cardiac testing performed; and
 - the reason(s) for the disqualification and/or referral.
- Other supporting documentation
 - if driver has current vision exemption, include the ophthalmologist's or optometrist's report;
 - if a driver has a diabetes exemption, include the endocrinologist's and ophthalmologist's/optometrist's report;
 - treating physician's work release;
 - if obtained, specialist's evaluation report;
 - if the driver has a current Skill Performance Evaluation Certificate, include it; and

- results of Substance Abuse Professional evaluations for alcohol and drug use and/or abuse for a driver with
 - alcoholism who completed counseling and treatment to the point of full recovery.
- Medical Examiner's Certificate
 - certification status, which may require:
 - waiver / exemption;
 - wearing corrective lenses;
 - wearing a hearing aid; or
 - a Skill Performance Evaluation Certificate;
 - complete and accurate documentation on medical certification card including:
 - the examiner's name, examination date, office address, and telephone number and Medical Examiner signature; and
 - the driver's signature.