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## **SURVEY OF MEDICAL EXAMINERS WHO CERTIFY THE PHYSICAL QUALIFICATIONS OF COMMERCIAL MOTOR VEHICLE (CMV) DRIVERS**

### **Goal for Presenting this Survey:**

The Federal Motor Carrier Safety Administration (FMCSA) recognizes the very important role medical examiners play in ensuring the safety of our roads through CMV driver physical examinations.

### **Your Responses:**

Responses to the following questions will provide the only data available regarding the decision making and performance of medical examiners as well as medical examiner perceptions of difficulties or uncertainties associated with the examination process.

Your survey responses are extremely important. After data analysis is completed, all links between direct identifiers, including zip code, will be removed and destroyed so that all responses are anonymous. Data will be housed on a secure server and will only be reported in the aggregate; that is, only collective, rather than individual results, will be reported.

1) Do you currently conduct FMCSA-DOT CMV driver physical examinations? (Please select one)

- A. Yes
- B. No

*(If no,)* This survey is intended for medical examiners currently conducting FMCSA-DOT CMV driver physical examinations. As you are not conducting these examinations, you do not need to continue with the survey at this time.

Thank you for your time.

2)

Which of the following is your profession? (Please select one)

- A. Advanced Practice Nurse
- B. Doctor of Chiropractic
- C. Doctor of Osteopathic Medicine
- D. Medical Doctor
- E. Physician Assistant
- F. Other

*(If other,)* This survey is intended for medical examiners currently conducting FMCSA-DOT CMV driver physical examinations and who are from the following medical professions: advanced practice nurses, doctors of chiropractic, doctors of osteopathic medicine, medical doctors, and physician assistants. As you do not identify yourself as a member of one of these professional groups, you do not need to continue with the survey at this time.

Thank you for your time.

*(If yes, respondent begins survey with next question.)*

## Section 1: Case Studies

### Instructions

Six case descriptions of individuals presenting for FMCSA-DOT medical examinations will be presented. Depending on your responses, you may be asked to respond to up to four questions. These same questions are repeated for each case.

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**Case 1**

A 64-year-old male presents for FMCSA-DOT medical recertification with a post-operative full-duty release from his orthopedist. He had a left total knee replacement 90 days ago and now has a range of motion of 90-degrees flexion. He has COPD with an FEV<sub>1</sub> of 69% and uses a Flovent (fluticasone) inhaler and Proventil HFA (albuterol) inhaler as needed. A Snellen vision examination reveals 20/40 acuity in the right eye and 20/30 in the left eye without correction. His blood pressure is 139/89 mmHg. He has a hearing aide in the right ear and cannot hear a whisper at 5 feet. He can hear a whisper from his left ear at 5 feet. The physical examination was otherwise unremarkable.

Questions

3)  
Do you need to collect more information before making a decision? (Please select one)

- A. Yes
- B. No (skips to question 5)

4)  
If you think more information is needed to make a decision, which of the following would you seek? (Please select all that apply)

- A. Diagnostic tests
- B. Specialist's evaluation
- C. Medical records
- D. Medication lists

5)  
Which of the following is the most appropriate medical examiner decision in your opinion? (Please select one)

- A. Meets standards in 49 CFR 391.41; qualifies for 2 year certificate (skips to question 7)
- B. Does not meet standards (skips to question 7)
- C. Meets standards, but periodic monitoring required (e.g., 3 months, 6 months, 1 year, other)
- D. Temporarily disqualified due to condition or medication (skips to question 7)

6)  
If you think the driver should be qualified, but for a period less than two years, when would your qualification decision expire (Please select a number between 1 and 23 in months)?  
<drop-down item>

**Case 2**

A 55-year-old male who is 5' 10" tall and weighs 322 pounds presents for FMCSA-DOT examination. He identifies on his health history that he snores loudly at night. He relates his wife states he sometimes stops breathing at night. He denies day-time drowsiness, but he does say he will pull over while driving to nap during the day. His primary care provider has recommended a sleep study. He has had hypertension for five years with follow up every six months. He takes multiple medications for hypertension and continues to have difficulty controlling his blood pressure in spite of recent medication changes. His blood pressure is 140/92 mmHg today. His urine dipstick is negative for glucose or blood, but a trace of protein was noted.

Questions

7)  
Do you need to collect more information before making a decision? (Please select one)  
A. Yes  
B. No (skip to question 9)

8)  
If you think more information is beneficial to make a decision, which of the following would you seek? (Please select all that apply)  
A. Diagnostic tests  
B. Specialist's evaluation  
C. Medical records  
D. Medication lists

9)  
Which of the following is the most appropriate medical examiner decision in your opinion? (Please select one)  
A. Meets standards in 49 CFR 391.41; qualifies for 2 year certificate (skips to question 11)  
B. Does not meet standards (skips to question 11)  
C. Meets standards, but periodic monitoring required (e.g., 3 months, 6 months, 1 year, other)  
D. Temporarily disqualified due to condition or medication (skips to question 11)

10)  
If you think the driver should be qualified, but for a period less than two years, when would your qualification decision expire (Please select a number between 1 and 23 in months)?  
<drop-down item>

**Case 3**

An established patient presents for FMCSA-DOT medical certification. He is a 40-year-old male who had a mechanical aortic valve replacement at age 32. The driver is a nonsmoker with an otherwise negative history. He currently sees a cardiologist for echocardiograms and evaluation annually. The driver brings in a copy of his last echocardiogram with an ejection fraction of 57%. His medications include daily Coumadin (warfarin) with monthly coagulation times by International Normalized Ratio (INR) coordinated with his primary physician. The driver also brings in copies of his coagulation times and the INR values have been therapeutic. The driver reports no history of bleeding and is negative for pertinent symptoms. Physical findings include blood pressure 110/68 mmHg and pulse 68. Physical examination was otherwise unremarkable other than an S4 gallop.

Questions

11)  
Do you need to collect more information before making a decision? (Please select one)  
A. Yes  
B. No (skip to question 13)

12)  
If you think more information is beneficial to make a decision, which of the following would you seek? (Please select all that apply)  
A. Diagnostic tests  
B. Specialist's evaluation  
C. Medical records  
D. Medication lists

13)  
Which of the following is the most appropriate medical examiner decision in your opinion? (Please select one)  
A. Meets standards in 49 CFR 391.41; qualifies for 2 year certificate (skips to question 15)  
B. Does not meet standards (skips to question 15)  
C. Meets standards, but periodic monitoring required (e.g., 3 months, 6 months, 1 year, other)  
D. Temporarily disqualified due to condition or medication (skips to question 15)

14)  
If you think the driver should be qualified, but for a period less than two years, when would your qualification decision expire (Please select a number between 1 and 23 in months)?  
<drop-down item>

**Case 4**

A 49-year-old male presents for a new FMCSA-DOT medical certification. He has no history of hypertension, hyperlipidemia, or CAD. He has a history of insulin-treated diabetes mellitus for 33 years and he does not have a diabetes exemption. He is on Humalog (lispro) twelve units, twice a day and 50 units of Lantus (glargine) at bedtime. His last insulin reaction occurred three years ago and his HgbA1c was 6.2% one month ago. His last eye examination was reported as normal six months ago. He had no microalbuminuria on his last physical one year ago. He keeps glucose tablets in his personal vehicle and his glucometer records demonstrate daily blood sugars between 85 and 140 mg/dL.

Questions

15)

Do you need to collect more information before making a decision? (Please select one)

- A. Yes
- B. No (skip to question 17)

16)

If you think more information is beneficial to make a decision, which of the following would you seek? (Please select all that apply)

- A. Diagnostic tests
- B. Specialist's evaluation
- C. Medical records
- D. Medication lists

17)

Which of the following is the most appropriate medical examiner decision in your opinion? (Please select one)

- A. Meets standards in 49 CFR 391.41; qualifies for 2 year certificate (skips to question 19)
- B. Does not meet standards (skips to question 19)
- C. Meets standards, but periodic monitoring required (e.g., 3 months, 6 months, 1 year, other)
- D. Temporarily disqualified due to condition or medication (skips to question 19)

18)

If you think the driver should be qualified, but for a period less than two years, when would your qualification decision expire (Please select a number between 1 and 23 in months)?

<drop-down item>

**Case 5**

A 43-year-old driver presents for a FMCSA-DOT medical certification. History is remarkable for hypertension for three years, treated with Tenormin (atenolol) and Zestril (lisinopril). He has Type II Diabetes Mellitus for 10 months controlled with Glucophage (metformin) and hyperlipidemia for two years controlled with Zocor (simvastatin). He reports seeing his primary care provider every six months. His last HgA1c was three months ago and was 8.3%. He denies hypo- or hyperglycemic episodes. His vital signs are height 5'10", weight 286 pounds, blood pressure 146/96 mmHg, pulse is 86 and regular. Urine specific gravity is 1.030, protein is +30, and glucose and blood are negative. He reports increasing calf pain when walking in the last month that is relieved with rest. The physical examination finds decreased ankle pulses. He was evaluated in the emergency room one month ago for left arm pain.

Questions

19)  
 Do you need to collect more information before making a decision? (Please select one)  
 A. Yes  
 B. No (skip to question 21)

20)  
 If you think more information is beneficial to make a decision, which of the following would you seek? (Please select all that apply)  
 A. Diagnostic tests  
 B. Specialist's evaluation  
 C. Medical records  
 D. Medication lists

21)  
 Which of the following is the most appropriate medical examiner decision in your opinion? (Please select one)  
 A. Meets standards in 49 CFR 391.41; qualifies for 2 year certificate (skips to question 23)  
 B. Does not meet standards (skips to question 23)  
 C. Meets standards, but periodic monitoring required (e.g., 3 months, 6 months, 1 year, other)  
 D. Temporarily disqualified due to condition or medication (skips to question 23)

22)  
 If you think the driver should be qualified, but for a period less than two years, when would your qualification decision expire (Please select a number between 1 and 23 in months)?  
 <drop-down item>



**Case 6**

A 28-year-old male who has never been employed presents for a new FMCSA-DOT medical certification so he can be gainfully employed. He receives Social Security Disability support. He checks “no” for nervous or psychiatric disorders on the medical form, but is taking Lithobid (lithium) and Zyprexa (olanzapine). Further questioning revealed he has had six hospitalizations for “nerves.” His most recent hospitalization was two months ago “for depression and suicidal thoughts.” He brings no documentation for continuation of care, claims no follow up since discharge, and plans to discontinue his medications because he “doesn’t need them any longer.” He presented for the physical in his pajama bottoms and house shoes. He eventually admits to seeing people present whom others cannot see.

Questions

23)  
 Do you need to collect more information before making a decision? (Please select one)  
 A. Yes  
 B. No (skip to question 25)

24)  
 If you think more information is beneficial to make a decision, which of the following would you seek? (Please select all that apply)  
 A. Diagnostic tests  
 B. Specialist’s evaluation  
 C. Medical records  
 D. Medication lists

25)  
 Which of the following is the most appropriate medical examiner decision in your opinion? (Please select one)  
 A. Meets standards in 49 CFR 391.41; qualifies for 2 year certificate (skips to question 27)  
 B. Does not meet standards (skips to question 27)  
 C. Meets standards, but periodic monitoring required (e.g., 3 months, 6 months, 1 year, other)  
 D. Temporarily disqualified due to condition or medication (skips to question 27)

26)  
 If you think the driver should be qualified, but for a period less than two years, when would your qualification decision expire (Please select a number between 1 and 23 in months)?  
 <drop-down item>

## Section 2: Uncertainties Encountered During Medical Examinations

### Instructions

Some certification decisions require careful evaluation and judgment. You are encouraged to share your experiences about these cases as well as provide feedback about the current FMCSA-DOT medical certification process in this section.

Your responses will remain anonymous. This information is strictly sought to provide insight into changes that would improve the process.

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27)  
Please describe cases that presented situations about which your medical certification decision was uncertain or could be debated.  
<free response item>

28)  
How would you improve the current FMCSA-DOT medical certification process?  
<free response item>

29)  
When needed, which of the following resources do you typically refer to when performing a physical exam for CMV drivers? (Please select all that apply)

- A. Consensus reports from specialty organizations
- B. Federal Register notices
- C. Hartenbaum: The DOT Medical Exam
- D. Professional colleagues
- E. Wittels: Concentra Guide

**FMCSA**

- F. Medical Examination Report form
- G. Federal Motor Carrier Safety Regulations
- H. Internet sites
- I. Medical guidelines including Advisory Criteria
- J. Telephone support
- K. Other \_\_\_\_\_ <free response option>

### **Section 3: Role of Medical Examiner Delegates**

#### **Instructions**

Support personnel may perform some tasks associated with the CMV driver physical examination. This section is intended to collect information about tasks performed by your support staff.

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30)

Please indicate the tasks that are performed by members of your support staff.

	Verify the driver's identity	Take a medical history	Measure vital signs	Evaluate visual acuity	Evaluate color recognition	Evaluate hearing	Screen urine by dip stick	Conduct the physical exam
<b>Advanced Practice Nurse</b>								
<b>Licensed Practical Nurse</b>								
<b>Registered Nurse</b>								
<b>Physician Assistant</b>								
<b>Medical Assistant</b>								
<b>Clerical Staff</b>								

## Section 4: Medical Examiner Demographics

### Instructions

Please answer the following questions about your background. Select only one response to each item unless otherwise directed. Your responses will remain anonymous.

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31)  
For how many years have you been performing CMV driver physical examinations? (Please select a response in number of years)  
<drop-down item>

32)  
Which of the following best describes your primary job function? (Please select one)  
A. Administration  
B. Clinical Practice  
C. Education  
D. Research  
E. Other \_\_\_\_\_ <free response option>

33)  
How is your practice based? (Please select one)  
A. Academia  
B. Group Practice  
C. Hospital  
D. Military  
E. Private practice

34)  
What is your primary practice structure? (Please select one)  
A. Industrial / Occupational Medicine  
B. Primary care  
C. Urgent care

35)  
Have you had advanced specialized training in occupational medicine (e.g., fellowship, board certification, master's degree, ABOHN)? (Please select one)  
A. Yes  
B. No

36)  
Have you completed a training course for CMV driver physical examinations? (Please select one)  
A. Yes  
B. No

37)  
In what zip code do you primarily practice? (Please enter your five-digit zip code)  
<free response item>

38)  
In your practice, how many hours per week on average are you available to perform FMCSA-DOT medical examinations? (Please select one from dropdown)

- A. 1-10
- B. 11-20
- C. 21-30
- D. 31-40
- E. 41-50
- F. 51-60
- G. 61-70
- H. 71-80
- I. 81-90
- J. 91-100
- K. 101+

In the future, FMCSA may require medical examiners to transmit the name of the applicant and a numerical identifier as determined by FMCSA for each completed medical examination report.

39)  
Are your FMCSA-DOT medical examination reports stored electronically? (Please select one)

- A. Yes
- B. No

40)  
In which of the following electronic formats do you have the capacity to transmit any data? (Please select all that apply)

- A. Facsimile
- B. E-mail
- C. Web-based form
- D. Other <free response>

41)  
Do you complete a medical examination form for each CMV driver physical examination conducted? (Please select one)

- A. Yes
- B. No



42)  
 What was the year of your birth? (Please enter year only)  
 <free response item>

43)  
 What is your gender? (Please select one)  
 A. Female  
 B. Male

44)  
 With which of the following ethnic and racial groups do you most closely identify?

***Please select one or more***

	<b>Hispanic or Latino</b>	<b>Not Hispanic or Latino</b>
American Indian or Alaska Native	<input type="checkbox"/>	<input type="checkbox"/>
Asian	<input type="checkbox"/>	<input type="checkbox"/>
Black or African American	<input type="checkbox"/>	<input type="checkbox"/>
Native Hawaiian or Other Pacific Islander	<input type="checkbox"/>	<input type="checkbox"/>
White	<input type="checkbox"/>	<input type="checkbox"/>

45)

Are you interested in being contacted about participating in a follow-up observational study?

A. Yes

B. No (skip to closing)

(If yes,) Please enter your email address so that we may contact you with more information:

<free response item>

Please enter your phone number so that we may contact you with more information:

<free response item>

This concludes the survey. Please click the Submit Survey button to submit your responses.

**Thank you for your time and participation!**