

PREPARING FOR YOUR DOT MEDICAL EXAM

Thank you for choosing West Family Medicine for your DOT Medical Exam.

We want to help you navigate the FMCSA exam process. Preparing ahead is the best way CDL drivers can help us provide you with an efficient exam process. Please note the following before your DOT/CDL exam:

Long form (Form MCSA-5875). Fill it out accurately and completely, and sign both pages 1 and 2. *The exam is not valid without the driver's signature on both pages.* Please read the page 2 signature portion carefully as it covers the potential for invalidating the exam, and/or civil and criminal penalties for inaccurate, false or missing information on the form. If you want to fill this out before coming in to save time the day of the exam, the form can be found on our website.

Be mindful of diet. Please keep in mind excess sugar, carbohydrates, and caffeine consumed prior to your exam may impact your blood sugar and blood pressure.

Hearing / vision. Bring hearing aids, glasses or contacts needed to meet standards.

Bring a list of all medications. If you are taking any medications that may affect your alertness or the ability to drive a commercial vehicle, consult your treating provider BEFORE your DOT exam. A letter from your provider may be necessary to clarify those medications that are current that you are no longer taking. Please note FMCSA has indicated some medications are not recommended when operating a commercial vehicle, so a letter from your provider may not in itself qualify you to operate a commercial vehicle.

Documentation of medical conditions. If you have any of the following medical conditions, bring the documentation indicated. Lack of required information may impact your clearance result.

Condition	Documentation Needed
Diabetes	Last HgA1C lab (within past 6 months) Letter from your primary care provider (PCP) confirming <i>no history of insulin use</i> , hypoglycemia episodes or complications
Sleep Apnea	1-CPAP compliance log (printed 90 day report) showing over 70% usage with over 4 hours usage / night. 2-Letter from your treating medical provider stating a) you are compliant with CPAP/APAP usage, b) that you do not suffer from narcolepsy, and c) that you are safe to operate a commercial vehicle given your diagnosis and treatment plan.
Heart Disease	Clearance letter from your cardiologist, and documentation of Ejection Fraction rate and possible Exercise Tolerance Test/Stress Treadmill
Depression/Anxiety	A letter from your primary care provider (PCP) confirming stable medication usage, no history of suicidal behavior or ideation, or recent hospitalization.
History of Alcohol or Substance Abuse/ Rehabilitation	Letter from your SAP (substance abuse counselor) stating no current clinical diagnosis and stable condition
Attention Deficit Disorder (ADD)	A letter from your primary care provider (PCP) confirming stable dosage, no history of abuse or misuse of medication
Medical condition treated w/Coumadin or Warfarin	For example, Atrial fibrillation. Documentation of stable INR labs for the past 90 days.

If you have any questions concerning the FMCSA exam process or medical requirements, please discuss these with your West Family Medicine certified medical examiner prior to your exam, or consult the FMCSA guidelines located on its website:

<https://www.fmcsa.dot.gov/regulations/medical/reports-how-medical-conditions-impact-driving> <https://www.fmcsa.dot.gov/faq/Medical-Requirements>
<https://www.fmcsa.dot.gov/medical/driver-medical-requirements/medication-issues>
<https://www.fmcsa.dot.gov/medical/driver-medical-requirements/driver-exemption-programs>