



MEDICAL CONDITION REPORT

Patient's Surname			First Name			Initial		
Street Number and Name								
City, Town or Village						Postal Code		
Date of Birth (yy/mm/dd)			Sex (M/F)		Driver's Licence No. (optional)			

MINISTRY USE ONLY

Received
Checked
Doc. Type _____
Queue _____

This individual has the following condition(s) likely to significantly interfere with driving (partial list only):

- Alcohol or drug abuse
- Seizure(s) or loss of consciousness
Date(s) _____
- Vision impairment or field deficits
- Stroke or head injury with significant deficits
- Heart disease with pre-syncope, syncope
- Uncontrolled diabetes or hypoglycemia
- Unstable mental illness
- Dementia or Alzheimer's
- Uncontrolled or untreated sleep apnea or narcolepsy
- Other _____

Indicate if any apply (optional):

- Situation is a serious road safety risk.
- The threat to road safety is unknown.
- Condition is temporary, and likely to be resolved within 3 months.
- Patient is aware of this report.
- I wish to be notified if my patient requests a copy of this report, as releasing this report may threaten someone's safety.

Doctor's Comments (optional):

Signature of Doctor _____

Date _____

Telephone No. _____

Doctor's Name and Address (PRINT OR STAMP)

Mail or fax to:

Registrar, Motor Vehicles
 Medical Review Section
 Ministry of Transportation
 2680 Keele Street
 Downsview, Ontario
 M3M 3E6

Tel. No.: (416) 235-1773 or 1-800-268-1481

Fax No.: (416) 235-3400

REQUIREMENT TO REPORT PATIENTS

Section 203 of the Highway Traffic Act states:

- (1) Every legally qualified practitioner shall report to the Registrar the name, address, and clinical condition of every person sixteen years of age or over attending upon a medical practitioner for medical services, who, in the opinion of such medical practitioner is suffering from a condition that may make it dangerous for such person to operate a motor vehicle.
- (2) No action shall be brought against a qualified medical practitioner for complying with this section.
- (3) The report referred to in subsection (1) is privileged for the information of the Registrar only and shall not be open for public inspection, and such report is inadmissible in evidence for any purpose in any trial except to prove compliance with subsection (1). R.S.O. 1980, c. 198, s.203.

HOW TO COMPLETE THE FORM

Please provide patient's full name, address, date of birth and sex so that we can accurately identify the individual. We suggest you keep a copy for your records. If you send by fax, please do not mail the original.

WHAT CONDITIONS TO REPORT

The Canadian Medical Association publishes the "Physician's Guide to Driver Examination" to assist physicians in determining which conditions may make it dangerous to drive safely. The guide is available from the Canadian Medical Association.

HOW THE MINISTRY DETERMINES LICENCE STATUS

The ministry considers the details of the individual's condition reported by the attending physician, using guidelines established by the Canadian Medical Association, and advice from the Medical Advisory Committee, whose members are expert in neurology, cardiology, psychiatry, endocrinology, ophthalmology, internal medicine, and substance abuse.

The ministry relies on information provided on this form to help the ministry identify individuals who are at significant risk, so that immediate action may be taken to ensure they do not drive. In general, the ministry takes immediate action to suspend the licence of any individual reported to have a chronic or deteriorating condition that is likely to impair judgement or psychomotor skills or to be experiencing recurring or unexplained episodes of loss of consciousness.

If an individual is reported to have a condition that is well controlled and is under physician care, the ministry generally does not suspend the licence. Where stability may be questionable, the ministry may request follow-up medical information to confirm stability or request the individual undergo a driving examination or other appropriate assessments.

If an individual is reported to have a condition that is likely to be resolved within three months, the ministry generally does not suspend the licence nor request follow-up information or further assessments.

PATIENT'S RIGHT TO ACCESS THIS REPORT

The Freedom of Information and Protection of Privacy Act requires the ministry to provide your patient with a copy of this report if requested. It may be withheld only if there is evidence that its release would threaten the health or safety of yourself, the patient or another individual. *If you are concerned that the release of this report would threaten someone's health or safety, make sure you notify the ministry by checking the appropriate box on the front of this form or by calling the ministry.*