

Texas Administrative Code

TITLE 37	PUBLIC SAFETY AND CORRECTIONS
PART 1	TEXAS DEPARTMENT OF PUBLIC SAFETY
CHAPTER 15	DRIVER LICENSE RULES
SUBCHAPTER C	EXAMINATION REQUIREMENTS
RULE §15.58	Medical Advisory Board Referrals

Persons applying for or holding a Texas driver license and having a physical or mental condition, the extent of which cannot be determined by the department, are referred to the Medical Advisory Board for further evaluation.

(1) The criteria for referral for physical conditions are as follows:

(A) Eye disorders:

(i) eye diseases: all applicants under the care of a physician, excluding the fitting of lenses when no disease is present;

(ii) telescopic lenses: all applicants requiring the use of telescopic lenses to pass the vision test must successfully complete a comprehensive road test before licensure and will only be referred the first time the applicant presents using telescopic lenses.

(B) Cardiovascular diseases:

(i) heart attack:

(I) if applicant for Class A, Class B, or any CDL license has had a heart attack within the past two years;

(II) if applicant for a non-CDL Class C or Class M license has had a heart attack during the past year.

(ii) angina pectoris, arrhythmia, arterial aneurysms, coronary bypass surgery, dyspnea, myocardial infarction: all applicants under the care of a physician.

(iii) hypertension:

(I) if applicant for a Class A, Class B, or any CDL has had any loss of consciousness or any alteration of consciousness within the past two years;

(II) if applicant for a non-CDL Class C or Class M has had any loss of consciousness or any alteration of consciousness within the past year.

(iv) blood vessel disorders: all applicants, if under the care of a physician and a qualifying road test has confirmed considerable interference with braking, steering, manipulation of controls or acceleration.

(v) syncope: all applicants with any loss of consciousness or any alteration of consciousness due to cardiovascular problems within the past year.

(C) Metabolic disorders:

(i) Diabetes mellitus:

(I) all applicants under the care of a physician or with hyperglycemia or hypoglycemia severe enough to cause neurological dysfunction (confusion, motor dysfunction or loss of consciousness) or result in any type or degree of vehicle accident within the past two years;

(II) if applicant for any cargo or property transport vehicles included in Class A, B, or C and is currently taking insulin.

(ii) chronic renal failure: if applicant for any cargo or property transport vehicles included in Class A, B, or C and uremia must be controlled by regular dialysis.

(D) Respiratory conditions: all applicants, if under the care of a physician and a qualifying road test has confirmed that shortness of breath or audible wheezing considerably affects safe driving ability.

(E) Neurological disorders:

(i) transient cerebral ischemic attack, stroke, narcolepsy, excess daytime sleeping or sleep apnea: all applicants under the care of a physician.

(ii) cerebral vascular accident (stroke): all applicants with any degree of persistent neurological deficit (applicant must take and pass a qualifying road test prior to referral) or if applicant has lost consciousness, "blacked out" or fainted within the past year.

(iii) convulsive disorders:

(I) if applicant for a cargo transport, passenger transport or emergency vehicle in Classes A, B or C and has history of recurrent seizures (those requiring medication therapy or has had any seizure activity within the past ten years if the applicant is not taking medication), epileptic or convulsive attacks;

(II) if applicant for a private vehicle in Class C or M and has had seizures or epileptic or convulsive attacks within the past year;

(iv) movement disorders (conditions including but not limited to Parkinsonism, Torticollis, myoclonus and choreoathetosis): all applicants if disorder is active and progressive (the applicant must also take and pass a qualifying road test prior to referral).

(2) The criteria for referral for psychiatric disorders are as follows:

(A) Mental, nervous or emotional patients. All applicants, as follows:

(i) involuntary psychiatric patient committed for indefinite hospitalization (applicant must pass all required tests prior to referral and must present a court restoration to competency or a certificate of discharge);

(ii) involuntary psychiatric patient with a guardian appointed (applicant must pass all required tests prior to referral and must present a court restoration to competency. A certificate of discharge is not acceptable);

(iii) all other psychiatric patients if under the care of a physician or if any significant behavioral problems or adverse drug therapy reactions exist (applicant must pass all required tests prior to referral).

(B) Alcohol-induced problems: All applicants, as follows:

- (i) three or more convictions for offenses involving drinking, the last offense occurring within past two years;
- (ii) involvement in two or more accidents while drinking, the last incident occurring within past two years;
- (iii) a reliable report that applicant has had an active drinking problem within the past two years;
- (iv) admits to an active drinking problem within the past two years;
- (v) under the care of a physician (exception: if there is no documented history of any episodes of alcohol abuse and applicant voluntarily enrolled in and successfully completed a recognized rehabilitation program, the applicant will not be referred).

(C) Drug-induced problems: All applicants, as follows:

- (i) addiction to any drug affecting safe driving ability;
- (ii) a reliable report that applicant has had an active drug problem in the past two years;
- (iii) admits to an active drug problem in the past two years;
- (iv) under the care of a physician.

(3) The criteria for referral for other conditions or disorders are as follows: All applicants, if under the care of a physician, and a qualifying road test has confirmed that safe driving ability is considerably affected by the condition. Examples of conditions that will be evaluated by testing rather than by referral include but are not limited to: amputation, back pain, cerebral palsy, congenital birth defects, fibromyalgia, hemiplegia, multiple sclerosis, osteoporosis, post polio disabilities, scoliosis, spina bifida, spinal cord injuries, spinal meningitis, Tourette's syndrome and/or traumatic brain injuries.

(4) Terms defined.

(A) Under the care of a physician--having been referred to for treatment or having received treatment from a physician for the medical condition or conditions indicated in the past 12 months without a release from further treatment. This does not apply to a condition(s) diagnosed over 12 months ago and treatment consisting of only periodic visits to a physician for check up and maintenance.

(B) Active drinking problem--use of alcoholic beverages to the extent of interfering with driving, working, social, or family responsibilities as confirmed by any one of the following occurring in the past six months:

- (i) an arrest involving alcohol;
- (ii) a reliable family report of excessive use of alcohol;
- (iii) a contact with a social agency because of the use of alcohol;
- (iv) demonstrated psychological dependence on alcohol.

(C) Active drug problem--use of drugs to the extent of interfering with driving, working, social, or family responsibilities as confirmed by any one of the following occurring in the past six months:

- (i) an arrest involving drugs;
- (ii) a reliable family report of use of drugs;
- (iii) a contact with social agencies because of use of drugs;
- (iv) demonstrated psychological dependence on drugs.

(5) Guidelines for referral of alcohol or drug dependency. An applicant whose presents a written statement from the attending physician, hospital administrator, or treatment center administrator verifying successful completion of a voluntary alcohol treatment program (except the DWI Education Program required under the Code of Criminal Procedure, Article 42.12, §6f) dated subsequent to the last known report or episode shall not be referred to the Medical Advisory Board if there is no documented history of any episodes of alcohol abuse.

Source Note: The provisions of this §15.58 adopted to be effective January 1, 1976; amended to be effective September 19, 1978, 3 TexReg 3109; amended to be effective May 23, 1980, 5 TexReg 1795; amended to be effective January 29, 1985, 10 TexReg 173; amended to be effective September 13, 1989, 14 TexReg 4472; amended to be effective December 25, 2003, 28 TexReg 11343