

COLLEGE STATEMENT REGARDING FITNESS TO DRIVE OF VISUALLY IMPAIRED PATIENTS

AIM

- a) Provide an overview of the visual requirements needed to meet driving standards in Singapore
- b) Provide recommendations on the medical and legal responsibilities of ophthalmologists in the assessment of fitness to drive concerning visually impaired patients

BACKGROUND

Review SMA- Medical Guidelines on Fitness to Drive (Annex A)

Vision Guidelines (Summary)

Group 1 Licence

Class 1 to 3 driving licence holders (except taxis) should have visual acuity of at least 6/12 in one eye. If the worse eye has a visual acuity of less than 6/36, or if the person has monocular vision, his horizontal field of vision should be tested.

Group 2 Licence

Drivers of taxis, buses and vehicles like lorries and trucks should have visual acuity of at least 6/12 in each eye.

Other Tests

Guidelines also list other tests required such as horizontal field of vision, colour vision, visual field defects, diplopia, night vision and eye conditions which require assessments at regular intervals.

**** Please refer to the applicable SMA guidelines in force at the time of assessment**

THE OPHTHALMOLOGIST'S RESPONSIBILITY CONCERNING VISUALLY IMPAIRED INDIVIDUALS AND THEIR FITNESS TO DRIVE

- All patients who drive and do not meet the vision guidelines for fitness to drive should be advised by their ophthalmologists NOT to drive unless and until further assessment confirms that they meet the vision requirements for their relevant class(es) of licence.
- This advice/discussion should be clearly documented in the medical records.
- After a patient recovers from an ocular or medical condition, only a medical professional is allowed to certify that a patient is fit to drive. If the ophthalmologist's assessment is confined to only the eye condition, he or she should be careful that his/her assessment on fitness to drive only relates to the eye condition.
- If the patient suffers from the following eye conditions as listed in the SMA guidelines: a) high myopia; b) macular degeneration; c) cataract; d) glaucoma; e) diabetic retinopathy, the SMA guidelines stipulate that patients with these conditions "require assessments at regular intervals". These patients should be referred for regular vision assessment and follow-ups. If, during any of these regular assessments/ follow-ups, the patient is assessed to not meet the visual requirements for fitness to drive, doctors should give clear advice that the patient is NOT to drive until further vision assessment is done.

(Recommendation: To insert a mandatory field on the electronic medical records to instruct the doctor to ask every patient with vision less than 6/12 in either eye if they drive. A standard template letter (Annex B) stating unfitness to drive can be given to every patient who does not meet the visual standards)

- In general, medical practitioners have NO legal obligation to report a patient who is unfit to drive to the authorities (such as LTA or the Traffic Police) or to the patient's employer.
- If a medical practitioner reports a patient who is unfit to drive to the authorities and/or the patient's employer without the patient's consent, the medical practitioner may be in breach of patient confidentiality under general law/ ethics and the Personal Data Protection Act.
- However, if the medical practitioner assesses that it is **clearly** in the interest of the patient and/or the public to report the patient to the authorities/ employer, this decision to report may be legally and/or ethically justified. This should be considered on a case by case basis.

(Recommendation: MOH is to work with SMA on the following: 1)To provide an email address to medical institutions/ practitioners to facilitate the of reporting of unfitness to drive to the relevant authorities 2)To update guidelines and specify how doctors should advise and handle patients who refuse to follow their doctor's advice to stop driving.)

If the driver is a vocational driver:

- An additional letter or conditional medical certificate may be given to the patient for the patient to submit to the employer and/or the authorities. This letter/ medical certificate should state the period for which the patient should not drive (*Annex B*)

- If the visual impairment is permanent, a letter stating permanent visual impairment affecting their fitness to drive should be provided for the patient to give to the employer or the authorities (*Annex B*)

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Date : 28TH MARCH 2018

SMA- Medical Guidelines on Fitness to Drive (Second Edition 2011 Page 34, 35)

VISION

Good vision is essential for the proper operation of a motor vehicle. Any marked loss of visual acuity or narrowing of the horizontal visual fields will diminish a person's ability to drive safely.

Visual acuity should be tested with a Snellen's Chart at 6 metres or equivalent and in good illumination. Spectacles and contact lenses are allowed. (If spectacles and/or contact lenses are needed to improve visual acuity, this should be stated on the licence. E.g. requires prescriptive lens for driving.) If corrective surgery has been done, license needs to be updated.

GROUP 1 LICENCE

Class 1 to 3 driving licence holders (except taxis) should have visual acuity of at least 6/12 in one eye. If the worse eye has a visual acuity of less than 6/36, or if the person has monocular vision, his horizontal field of vision should be tested.

GROUP 2 LICENCE

Drivers of taxis, buses and vehicles like lorries and trucks should have visual acuity of at least 6/12 in each eye.

HORIZONTAL FIELD OF VISION

It is unnecessary to test for this except in the case of a person who is "one-eyed", i.e. with visual acuity less than 6/36 in the worse eye. Such persons must have a horizontal field of at least 120°. They should only drive private vehicles. For Group 2 licence, binocular vision is required.

The horizontal field is tested with both eyes open. If spectacles are needed, they should be worn for the test. The test has to be measured with an instrument, e.g. perimeter or synoptophore, and should preferably be performed by an ophthalmologist.

COLOUR VISION

For all classes of driving, the driver should be able to identify red, green and amber lights.

This can be tested by showing the person the standard red, green and amber colours exhibited one at a time and in a random manner.

VISUAL FIELD DEFECTS

Persons with significant visual field defects like homonymous hemianopia or quadrantanopia are unfit to drive.

DIPLOPIA

Paralysis of the extraocular muscles giving rise to double vision would render the person unfit to drive. But strabismus is not a bar to driving unless it is accompanied by double vision.

NIGHT VISION

Night vision defect may cause difficulty with driving at night. But this condition usually occurs only in mild degrees. Marked defect in night vision occurs in disease like retinitis pigmentosa and advanced chorioretinitis and these conditions should be regarded as a bar to driving.

EYE CONDITIONS WHICH REQUIRE ASSESSMENTS AT REGULAR INTERVALS:

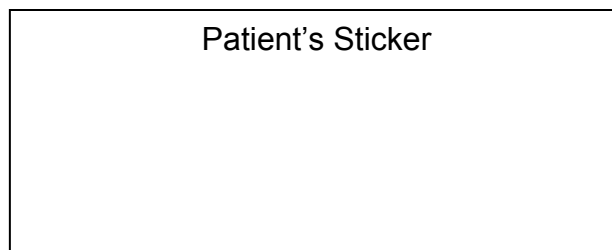
- (a) High myopia (above 10.00 dioptres)
- (b) Macular degeneration
- (c) Cataract
- (d) Glaucoma
- (e) Diabetic retinopathy

Drivers with such eye diseases should be referred to an ophthalmologist for treatment and follow-up.

Proposed Medical Certificate

Date:

To whom it may concern,



With reference to the Singapore Medical Association's Medical Guidelines on Fitness to Drive, in the section titled "Vision", the above patient has been found to have a visual acuity that does not meet the minimum standard for driving. Please refer to the said SMA guidelines in full, and for the visual requirements for Group 1 (private) and Group 2 (vocational) licence.

Please note:

- ☐ This patient has a guarded visual prognosis and will not likely ever meet the minimum visual requirement for *Group 2 license only / both Group 1 and 2 licence.

- ☐ This patient is not considered to meet the visual requirements for *Group 2 license only / both Group 1 and 2 licence for the next _____ *week(s) / month(s) until further assessment is made and he/she should be made to perform alternative duties at work that does not involve driving. This patient may be considered to meet the visual requirements for the licence above after he/she is certified at a later stage by an ophthalmologist after further follow up or investigations.

- ☐ This patient is considered fit to drive as at this date, *with/without visual aids with *Group 1 licence only / both Group 1 and 2 licence.

This memo only relates to an assessment of the patient's visual condition as at the date of this memo, and does not purport to certify or assess any other condition that the patient may have and/or have not reported to us, and which may also impact on the patient's ability to drive.

** please delete accordingly*

Kind regards
Signature/ Name stamp