

Waiver	Comments	Federal Requirements (NI)	Current State Requirements (NA drivers – subject to federal rules) (EI and EA when required by their employer or they have come to our attention for an issue)
<p>Missing or Impaired Limb – (SPE or Skills Performance Evaluation)</p> <p>Documents:</p> <p>Med 13 Road skills for first issue</p>	<p>Virginia DMV has received permission to continue this program for 5 more years</p>	<p>If a driver is in all other ways qualified to operate a commercial motor vehicle, the driver may submit a request for a Skills Performance Evaluation. The driver must submit to a physical evaluation to demonstrate strength, range of motion and proper fit and use of prosthesis (if applicable). With physician approval and an acceptable application, the driver will be given an opportunity to demonstrate the ability to operate a motor vehicle with road skills examiners certified by FMCSA.</p>	<p>The Commonwealth of Virginia DMV is administering Federal SPE waivers for all interstate and intrastate drivers</p>
<p>Vision</p> <p>Documents:</p> <p>Med 4 with a Graphic Visual Field Analysis</p>	<p>Virginia DMV has recently evaluated this waiver and made changes that are more restrictive than the Federal Standards</p>	<p>Effective 3/22/22, The DOT examiner will approve NI and NA drivers. NI and NA drivers will not need to submit vision reports or VFAs to Virginia unless their vision is under review for a base license.</p> <p>Drivers will be released for review by the DMV medical review services unless we have information that the driver has a progressive eye condition. In those cases, we will monitor for the base licensing requirements.</p> <p>In situations where the DOT examiners approval differs from the base licensing requirements established by the Code of Virginia, forward the case for review by compliance.</p>	<p>EI and EA only</p> <p>The driver must have a visual acuity of at least 20/40 (Snellen), corrected or uncorrected, in the better eye</p> <p>The driver must have a field of vision in each eye, including central and peripheral fields, of at least 70 degrees utilizing a testing modality which tests to at least 120 in the horizontal. Formal perimetry is required. The doctor must submit the formal perimetry for each eye and interpret the results in degrees of field of vision.</p> <p>The driver must have the ability to recognize the colors of traffic control signals and devices showing red, green, and amber.</p> <p>Whether sight is in one eye or both there must be a minimum horizontal field of 120 degrees. If the vision is in one eye only, there may be no other defects present.</p>

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<p>Insulin</p> <p>Documents:</p> <p>Med 2 with BS logs</p> <p>Med 30</p> <p>Med 4</p> <p>Driver agreement</p>		<p>Approval from DOT examiner</p>	<p>DOT examiner not required for drivers who are Excepted Important Note: The DOT examiner is approving insulin dependent drivers, so we will not issue a state waiver for these drivers.</p> <p>For excepted drivers (EI and EA)</p> <p>Endocrinologist must approve CDL operation and stability of condition verified by blood sugar logs.</p> <p>The driver must have a visual acuity of at least 20/40 (Snellen), corrected or uncorrected, in the better eye</p> <p>The driver must have a field of vision in each eye, including central and peripheral fields, of at least 70 degrees utilizing a testing modality which tests to at least 120 in the horizontal. Formal perimetry is required. The doctor must submit the formal perimetry for each eye and interpret the results in degrees of field of vision.</p> <p>The driver must have the ability to recognize the colors of traffic control signals and devices showing red, green, and amber.</p> <p>The required conditions include the following:</p> <p>I. Each individual must have a physical examination every year:</p> <p>The physical examination must first be conducted by an endocrinologist indicating the driver is:</p> <p>1. Free of insulin reactions. "Free of insulin reactions" in this context means that the individual has had:</p> <p>(A) No recurrent (two or more) hypoglycemic reactions resulting in a loss of consciousness or seizure within the past five years. A period of one year of demonstrated stability is required following the first episode of hypoglycemia,</p> <p>(B) No recurrent hypoglycemic reactions requiring the assistance of another person within the past five years. A period of one year of demonstrated stability is required following the first episode of hypoglycemia, and</p> <p>(C) No recurrent hypoglycemic reactions resulting in impaired cognitive function that occurred without warning symptoms within the past five years. A period of one year of demonstrated stability is required following the first episode of hypoglycemia,</p> <p>2. Able to and has demonstrated willingness to properly monitor and manage his/her diabetes, and</p>

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			<p>3. Will not likely suffer any diminution in driving ability due to his/her diabetic condition; and</p> <p>Secondly, the physical examination must be conducted by a medical professional</p> <p>II. Each individual must agree to and must comply with the following conditions:</p> <p>(a) Carry a source of rapidly absorbable glucose at all times while driving;</p> <p>(b) Self-monitor blood glucose levels prior to driving and every two to four hours while driving using a portable glucose monitoring device equipped with a computerized memory;</p> <p>(c) Submit blood glucose records to both the endocrinologist and medical examiner at the annual examinations or when otherwise directed by an authorized agent of FMCSA; and</p> <p>(d) Provide a copy of the endocrinologist's report to the medical examiner or provider at the time of the annual medical examination; and</p> <p>III. Each individual must provide a copy of the optometrist's or ophthalmologist's report indicating that there is no diabetic retinopathy and the individual meets the current vision standards as required by Virginia Code or qualify for a vision waiver. If there is any evidence of diabetic retinopathy the individual does not qualify for a diabetes waiver if they have unstable proliferative diabetic retinopathy or severe nonproliferative diabetes waiver.</p>
<p>Epilepsy and Seizure Disorders</p> <p>Documents:</p> <p>Med 2 Med 30</p>		<p>On October 15, 2007, the MEP issued the following recommended criteria for evaluating whether an individual with epilepsy or a seizure disorder should be allowed to operate a CMV.</p> <p>Epilepsy diagnosis. If there is an epilepsy diagnosis, the applicant should be seizure-free for 8 years, on or off medication. If the individual is taking anti-seizure medication(s), the plan for medication should be stable for 2 years. Stable means no changes in medication, dosage, or frequency of medication administration. Recertification for drivers with an epilepsy diagnosis should be performed every year.</p>	<p>If there is an epilepsy diagnosis, the applicant should be seizure-free for 8 years, on or off medication. If the individual is taking anti-seizure medication(s), the plan for medication should be stable for 2 years. Stable means no changes in medication, dosage, or frequency of medication administration. Recertification for drivers with an epilepsy diagnosis should be performed every year.</p> <p>Single unprovoked seizure. If there is a single unprovoked seizure (i.e., there is no known trigger for the seizure), the individual should be seizure-free for 4 years, on or off medication. If the individual is taking anti-seizure medication(s), the plan for medication should be stable for 2 years. Stable means no changes in medication, dosage, or frequency of medication administration. Recertification for drivers with a single unprovoked seizure should be performed every 2 years.</p>

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		<p>Single unprovoked seizure. If there is a single unprovoked seizure (i.e., there is no known trigger for the seizure), the individual should be seizure-free for 4 years, on or off medication. If the individual is taking anti-seizure medication(s), the plan for medication should be stable for 2 years. Stable means no changes in medication, dosage, or frequency of medication administration. Recertification for drivers with a single unprovoked seizure should be performed every 2 years.</p> <p>Single provoked seizure. If there is a single provoked seizure (i.e., there is a known reason for the seizure), the Agency should consider specific criteria that fall into the following two categories: low-risk factors for recurrence and moderate-to-high risk factors for recurrence. Examples of low-risk factors for recurrence include seizures that were caused by a medication; by non-penetrating head injury with loss of consciousness less than or equal to 30 minutes; by a brief loss of consciousness not likely to recur while driving; by metabolic derangement not likely to recur; and by alcohol or illicit drug withdrawal.</p> <p>Examples of moderate-to-high-risk factors for recurrence include seizures caused by non-penetrating head injury with loss of consciousness or amnesia greater than 30 minutes, or penetrating head injury; intracerebral hemorrhage associated with a stroke or trauma; infections; intracranial hemorrhage; post-operative complications from brain surgery with significant brain hemorrhage; brain tumor; or stroke.</p> <p>The MEP report indicates individuals with moderate to high-risk conditions should not be certified. Drivers with a history of a single provoked seizure with low risk factors for recurrence should be recertified every year</p>	<p>Single provoked seizure. If there is a single provoked seizure (i.e., there is a known reason for the seizure), DMV will consider specific criteria that fall into the following two categories: low-risk factors for recurrence and moderate-to-high risk factors for recurrence.</p> <p>Examples of low-risk factors for recurrence include seizures that were caused by a medication; by non-penetrating head injury with loss of consciousness less than or equal to 30 minutes; by a brief loss of consciousness not likely to recur while driving; by metabolic derangement not likely to recur; and by alcohol or illicit drug withdrawal.</p> <p>Examples of moderate-to-high-risk factors for recurrence include seizures caused by non-penetrating head injury with loss of consciousness or amnesia greater than 30 minutes, or penetrating head injury; intracerebral hemorrhage associated with a stroke or trauma; infections; intracranial hemorrhage; post-operative complications from brain surgery with significant brain hemorrhage; brain tumor; or stroke.</p> <p>Individuals with moderate to high-risk conditions should not be certified. Drivers with a history of a single provoked seizure with low risk factors for recurrence should be recertified every year</p>

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Hearing		Submit an application for a waiver, have a clean driving record for 3 years, have a physician certify that the driver is in all other ways qualified	<p>Waiver not offered since hearing is not monitored by the Virginia DMV.</p> <p>Individuals who are totally deaf are disqualified from operating a commercial vehicle. Individuals who have hearing with a hearing aid must be able to hear the skills examiner's instructions in order to be issued a CDL.</p>