

VANDERBILT HEALTH AT MNPS HEALTH CARE CENTERS

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COMMERCIAL DRIVER CERTIFICATION DETERMINATION – DIABETES MELLITUS

Exam Date _____
 DOT Driver _____
 DOB _____

The above individual has presented to the clinic for a Commercial Driver Fitness Determination in accordance with U.S. Code of Federal regulation 49 CFR 391.41. During the examination, the following was noted:

Driver Consent for Release of Medical Information

I, _____, hereby authorize the release to MNPS Health Care Centers for the following information.

- ___ All medical records and reports
- ___ Most recent HbA1c
- ___ Most recent blood sugar readings
- ___ Other _____

Patient Signature _____ Date _____
 Patient Print Name _____

Statement of Personal Physician

According to the U.S. Code of Federal Regulation Title 49 part CFR 391.41 (b)(3) states "A person is physically qualified to drive a commercial motor vehicle if that person: *Has no established medical history or clinical diagnosis of diabetes mellitus currently requiring insulin for control*".

According to the current guidelines, acceptable levels of control include a fasting blood glucose of < 200mg, a 2 hour postprandial blood sugar <235mg%, and a glycosylated hemoglobin level < 10%.

I have read the above and understand the regulation and guidelines pertaining to diabetic disease. I verify that the individual has diabetes that is controlled without the use of insulin and is neither at risk for sudden incapacitation nor has a medical condition that makes driving a commercial vehicle unsafe.

Physician Signature _____ Date _____
 Physician Print Name _____
 Specialty _____
 Phone _____
 Address _____

PLEASE FAX TO OUR _____ LOCATION AT FAX NUMBER _____