



## DOT Physical Policy & Information

Due to recent governmental changes in reporting and DOT physical examination policies, we want to assure that you understand the updated protocols and our recommendations.

- \_\_\_\_\_ Once you are checked in for your DOT physical, the physical will be completed, you will be charged and there are no refunds; whether you pass or not.
- \_\_\_\_\_ If you are suffering from chronic medical conditions, we ask that you receive a statement from your treating physicians detailing your medical conditions and stating that it is safe for you to drive a commercial vehicle, and bring that document to your exam. We recommend that your treating physician reference the FMCSA website for details.
- \_\_\_\_\_ If you do not pass your physical or you receive a limited medical certificate, you may be instructed to follow-up with your treating physician. Federal policies recommend that the examiner defer to your treating physician any evaluation and/or referrals to specialists so as to minimize conflicts of interest regarding our granting or denial of your medical certificate. We are happy to assist in this process if you desire.
- \_\_\_\_\_ If you receive a limited medical certificate due to limiting medical conditions, the fee for your second medical certificate will be at a discounted rate of at least \$50.00, but may be more depending on the complexity of the evaluation.
- \_\_\_\_\_ Your DOT physical examination appointment is for your DOT physical only. If during your DOT physical examination appointment, you need to be seen for a medical condition, you will be charged in addition to your physical.
- \_\_\_\_\_ DOT physicals are considered “Cash Pay” appointments. Your Care will provide you with a receipt that you may submit to your insurance.
- \_\_\_\_\_ If you have had any major surgery in the past 3 to 6 months, please be advised that the federal government may require a mandatory waiting period and we may not be able to issue your medical certificate.

Federal guidelines are stated on the FMCSA website, and may or may not be consistent with information obtained at the DMV. The following are two links that may be helpful:

<http://www.fmcsa.dot.gov/medical/driver-medical-requirements/driver-medical-fitness-duty>  
<http://www.fmcsa.dot.gov/faq/Medical-Requirements>

Thank you for choosing Your Care. Please do not hesitate to ask if you have any questions.

Please sign below confirming your understanding of the above information.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_