

## CCMTA Standards with BC Specific Guidelines Revisions List

The title of Chapter 15 has been changed from: “Psychotropic Drugs and Driving” to: Drugs, Alcohol and Driving.

15.6.3 changed from: “Substance Abuse and Dependence” to: “Substance Use Disorder” in order to reflect revision made to the DSM-V.

15.6.5 changed from: “Alcohol and Driving” to: “Alcohol, Cannabis and Driving”.

17.6.3 changed from: “Alcohol related seizures” to: “Alcohol Withdrawal Seizures”.

17.6.10 “Surgery for Epilepsy—Commercial Drivers” is a NEW section added as there were no guidelines provided previously for these circumstances.

17.6.10 -17.6.15 have been re-ordered to accommodate new section (Surgery for Epilepsy-Commercial Drivers).

1.3.2 Screening Flow Chart updated to accurately reflect business process.

1.3.3 Clarification of ICBC licencing process.

2.1.1 “Screening, Assessment and Determination” flow charts deleted due to redundancy. The same charts exist 15 pages prior.

2.2.1 Screening Flow Chart updated to accurately reflect business process.

2.2.2 “RoadSafetyBC will not make licencing determinations based on anonymous reports.” This was added under “credible report”.

2.2.5 Transient conditions; CMA reference removed as not relevant to 9<sup>th</sup> edition.

2.3.3 Section title changed to Requesting medical assessments and additional information.

2.3.5 Table revised to remove trails A and Simard and add GDS. On-road “test” changed to assessment.

2.3.6 “Requesting assessments of cognitive function” text revisions to reflect current processes.

2.3.9 “Time limits for drivers to complete assessments” additional wording for clarity. “Assessment procedures” flow chart adjusted to reflect process.

2.4.4 “Making driver fitness determinations for individuals whose cognitive ability to drive may be persistently impaired” revisions to reflect current and future process.

2.4.14. “Determination procedures” flow chat revised for cognitive impairment section.

2.5 “Reconsideration Policies and procedures” Flagged for review post Rankin. It seems to all still fit, but should be reviewed by additional eyes.

6.1 "Dementia" descriptions and multiple references revised based on DSM-5 update.

7.6.4 "Episode of severe hypoglycemia – Non-commercial drivers" revised to include "Applies to severe hypoglycemia while sleeping" and National Standard revised per CCMTA revisions.

7.6.6 Reassessment interval revised to reflect reduced follow up requirements.

7.6.7 "Episode of severe hypoglycemia – Commercial drivers" revised to include "Applies to severe hypoglycemia while sleeping" and National Standard revised per CCMTA revisions.

9.6.2 "Hearing-Loss Commercial Drivers"; Rationale revised per CCMTA update.

11.6.1 "Loss of upper or lower extremities-All Drivers"; BC guidelines around restriction application updated for cl5 drivers to reduce churn.

14 "Psychiatric disorders", multiple revisions per CCMTA via DSM 5.

15 "Drugs, alcohol and driving"; multiple revisions per CCMTA.

17.6.2 "Provoked seizures with no structural brain abnormality"; revised per CCMTA.

17.6.6 "Epilepsy-Non-commercial drivers" National Standard revised per CCMTA.

17.6.9 "Surgery for Epilepsy-Non-commercial drivers. National Standard revised per CCMTA.

17.6.10 "Surgery for Epilepsy-Commercial driver" new section per CCMTA.

18.6.3 "Narcolepsy-Commercial drivers" revised per CCMTA.

"Lasik and PRP" removed from vision pre-amble per CCMTA.

22.6.3 Visual Field Loss-Non-commercial driver's reassessment revised for clarity.

22.7 EVF and VFT sample documents updated.