

Frequently Asked Questions

What is involved in the Driving Evaluation?

The Driving Evaluation generally involves a **two-part assessment** depending on the client's abilities and diagnosis. Results of the evaluation, including recommendations are sent to the client's family physician and/or referring physician. *Results cannot be sent to the Registry of Motor Vehicles without the client's consent.*

In-clinic Assessment

The first part of the assessment takes place in the hospital. It ranges from 1-1 ½ hours in length and family members are encouraged to attend.

This includes:

- An initial interview
 - Client's driving history (license status, experience, violations, vehicle)
 - Client's medical history
 - Client's current medication (some medications can impact driving)
 - Confirmation of client's visual status (vision test may be requested)
 - Client's driving routine (city/rural/highway, daily, night/day)
 - Client or family concerns with client's driving
- Physical Assessment
 - Manual Muscle Testing
 - Range of Motion
 - Reaction time (lower extremity)
 - Sensation/ Proprioception testing
- Cognitive Assessment (assessments administered vary)
 - Mini Mental Status Examination
 - Useful Field of View
 - Cognistat (block design)
 - Trails Test A & B
 - Sunnybrook Bedside Neglect
 - Motor Free Visual Perceptual Test
 - Road Signs Recognition Test
- Determination of adaptive aids (if required)
 - Spinner knob
 - Left foot gas pedal
 - Hand controls
 - Adaptation to vehicle (i.e., ramps for vehicle, modified van)
- Determination of further assessment or plan of action
 - On-road assessment (OT goes with client and driving school, \$40 fee)
 - On-road assessment through Registry of Motor Vehicles
 - Refer to Registry of Motor Vehicles medical review board
 - Driving Simulator session
 - Further testing (i.e., neuropsychological, visual field)