



D4 Medical Examination Report for a Group 2, bus or lorry licence



Information and useful notes

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When do you need a D4 Medical Examination Report

- If this is your first application for a Group 2 bus or lorry licence.
- If you are applying to renew your Group 2 entitlement at 45. From 45 on, a D4 will be needed every 5 years until you are 65 when you will need one annually.
- If you are under 70, hold a medically restricted car licence and held this licence before 1 January 1997 and wish to apply for C1 or C1/D1 entitlement (vehicles between 3500kg and 7500kg and/or a maximum of 16 passenger seats).
- If you are applying for a new Group 2 provisional licence and a D4 has not been submitted in the last 12 months.
- If you are an EU/EEA driving licence holder whose authority to drive Group 2 in Great Britain has run out.
- If you are 70 and still need C1 and D1 entitlement. You will need to have a D4 every 3 years.

Please note

You do not need to send in a D4 when you renew a medically restricted licence until you are 45. If you are over 45 and have a medically restricted licence, a D4 will be required every 5 years.

Further information is available at

www.gov.uk/driving-medical-conditions

Who can complete the D4

The medical examination includes a vision assessment which must be completed by a doctor or optician/optometrist. Some doctors will be able to complete both the vision and medical assessment. If your doctor is unable to fully answer all the questions on the vision assessment you must have it filled in by an optician/optometrist. Please note that the doctor must be GMC registered and licensed to practice in the United Kingdom or registered within the EU.

If your own doctor completes the medical assessment, it may speed up your application.

A. What you need to do

1. Check you meet the Group 2 medical standards
 - Read section D to find out if you can meet the medical standards needed for Group 2 driving **before** you make an appointment. If you have any doubts about whether you can meet the standards or not, ask a doctor, optician or get further advice at **www.gov.uk**
2. If you consider that you meet the standards needed for Group 2 driving, make an appointment to have the D4 medical report filled in.

When you make the appointment you should check that the doctor is able to measure your visual acuity to the 6/7.5 line of a Snellen chart. If you wear glasses to drive, the doctor must be able to confirm the strength of your glasses (dioptries) from your prescription.

If the doctor is unable to fully and accurately complete the vision assessment you must arrange for it to be completed by an optician/optometrist.

About your appointment

You should take to your appointment

- identification documents. A combination of the following can be accepted as identification: birth certificate, marriage certificate, medical card, driving licence, passport, local authority rent card, paid utility bills, bank/building society cards/statements, National Insurance number card, payslip, letter from Benefits Agency/benefit book/signing on card, papers from Home Office
- your driving glasses and your glasses prescription if you wear glasses (not contact lenses) to meet the eyesight standard needed for driving
- a copy of your prescription if the medical is being completed by a doctor other than your own GP
- this information booklet as it contains important information for the doctor, optician/optometrist.

At the appointment you should

- fill in pages 1 (Your details) and 8 (consent and declaration) of the D4 when you are with the doctor carrying out the medical examination
- **check all sections of the medical report have been fully filled in. If you send us an incomplete report your application will be returned.**

What to do with the completed report

- Send the completed D4 (vision and medical assessment) with your application form and driving licence to DVLA, Swansea, SA99 1BR. If you do not send all the forms together, the processing of your application will be delayed.

What you need to know

- The D4 is valid for a period of 4 months from the date the doctor and optician/optometrist signs and dates it.
- The eyesight examination must be undertaken using the prescription currently worn for driving.
- DVLA is not responsible for any fees you have paid to a doctor or optician/optometrist. This will also apply if you are unable to meet the medical standards of fitness to drive Group 2 vehicles and your application has to be refused.
- **If you develop a condition that could affect your ability to drive safely and you hold any type of driving licence, you MUST let DVLA know. Please see section D.**

B. Information for the doctor

The applicant is liable for any costs involved.

Please ensure you confirm the applicant's identity before the examination. You will find a list of acceptable identification documents on page 3. Also please ensure you complete you details and GMC number on page 1 and sign and date section 10 on page 7.

Only complete the vision assessment if you are able to fully and accurately complete all the questions. If you are unable to do this you must tell the applicant to have this part of the assessment completed by an optician/optometrist.

The applicant has been advised that if glasses are worn to meet the current eyesight standard for driving, they must bring their current prescription to the examination.

The eyesight examination must be undertaken using the prescription currently worn for driving.

If the applicant does not need glasses for driving, uses contact lenses or has a minus (-) dioptre prescription, question 5 of the vision assessment can be answered “No”.

You must be able to

- confirm the strength of glasses (dioptres) from a prescription
- measure the applicant’s visual acuity to at least 6/7.5 (decimal 0.8) of a Snellen chart (you may need to purchase a new chart to do this). We will not accept a Snellen reading shown with a plus (+) or minus (-) e.g. 6/6-2 or 6/9+3.

Examining the applicant

- The eyesight standards are explained in section D, point 1.
- You must examine the applicant fully and complete sections 1-10 of the medical assessment.
- Please obtain details of the applicant’s medical history.
- Ensure you complete all sections.
- Section 2 – please note that if diabetes is treated with oral/non-insulin hypoglycaemia agents or diet, questions 2a-d do not need to be answered.
- Any amendments must be signed and dated.
- Details of any condition not covered by the report should be provided in section 6.
- If the applicant has a medical condition affecting their visual field, DVLA will commission formal visual field testing at a later date.

C. Information for the optician/optometrist

Anyone applying for a Group 2 licence must now provide a vision assessment as part of their D4 medical examination report. The vision assessment can be completed by a doctor, optician or optometrist. In some cases the doctor may not be able to fully complete the report and will have advised the applicant to arrange an appointment with an optician/optometrist. The applicant is liable for any costs involved.

Please ensure you confirm the applicant’s identity before the examination. You will find a list of acceptable identification documents on page 3.

Examining the applicant

- The eyesight standards are explained in section D, point 1.
- You must examine the applicant fully and complete questions 1-10 of the vision assessment and provide any additional information in the box provided for details. This must not be done from patient records.

- If glasses are worn to meet the current eyesight standard for driving, the eyesight examination must be undertaken using the prescription currently worn for driving.
- The applicant's visual acuity should be measured in terms of the 6 metre Snellen chart but we will also accept the LogMAR equivalent. We cannot accept a Snellen reading shown with a plus (+) or minus (-)
- If the applicant has a medical condition affecting their visual field, DVLA will commission formal visual field testing at a later date.

Help for medical professionals

You may find it helpful to read DVLA's 'Assessing Fitness to Drive' booklet. This can be downloaded from www.gov.uk/dvla/fitnesstodrive Alternatively you can speak to one of the medical advisers by phoning 01792 782337 (10.30am to 1pm) or email medadviser@dvla.gov.uk Unless you have the applicant's consent we will only be able to discuss the medical standards in general.

D. Group 2 medical standards

Medical standards required for drivers of Group 2 vehicles (lorries, buses and minibuses) are higher than those required for Group 1 (car and motorcycle) drivers.

These standards also apply when renewing categories C1 (small or medium lorries between 3500–7500kg) and D1 (minibuses not for hire or reward) which were given when a car driving test was passed before 1 January 1997.

1. Eyesight

Visual acuity

All drivers must be able to read in good light with glasses or contact lenses if worn, a car number plate from 20 metres (post 01.09.2001 font) and have eyesight (visual acuity) of 6/12 (decimal Snellen equivalent 0.5) or better.

Applicants for Group 2 entitlements must also have, as measured by the 6 metre Snellen chart:

- a visual acuity of at least 6/7.5 (decimal Snellen equivalent 0.8) in the better eye
- a visual acuity of at least 6/60 (decimal Snellen equivalent 0.1) in the worse eye.
- This may be achieved with or without glasses or contact lenses.
- If **glasses** (not contact lenses) are worn for driving, the spectacle prescription of either lens used must not be of a corrective power greater than **plus 8 (+8)** dioptres in any meridian.

If you cannot meet the above standard we may still be able to issue a Group 2 licence if:

- you held a Group 2 licence on 31 December 1996
 - have a corrected visual acuity of at least 6/9 (decimal Snellen equivalent 0.6) in the better eye and 6/12 (decimal Snellen equivalent 0.5) in the worse eye, and
 - an uncorrected visual acuity of 3/60 (decimal Snellen equivalent 0.05) in at least one eye
- or
- you held a Group 2 licence on 1 March 1992
 - you have a corrected visual acuity of at least 6/12 (decimal Snellen equivalent 0.5) using both eyes together
 - have an uncorrected visual acuity of at least 3/60 (decimal Snellen equivalent 0.05) in at least one eye.

You will also need to complete a certificate about your recent Group 2 driving experience. DVLA will send this certificate for you to fill in once they get a valid application. You will not be able to apply for any new lorry or bus entitlements that you have not previously held.

You can get more information about the medical standards from:

Drivers Medical Group
DVLA, Swansea SA99 1TU
Or, phone 0300 790 6807.

Car driving licence holders who are renewing category C1 (small or medium lorries between 3500 – 7500kg)

- need to meet the number plate test, and
- have eyesight (visual acuity) of 6/12 (decimal Snellen equivalent 0.5) or better.

Category D1 (minibuses not for hire or reward) must meet the eyesight standard for Group 2 drivers.

Visual field

The horizontal visual field should be at least 160 degrees, the extension should be at least 70 degrees left and right and 30 degrees up and down. No defects should be present within a radius of the central 30 degrees.

Monocular vision

Drivers who have sight in one eye only or their sight in one eye has deteriorated to a corrected acuity of less than 3/60 (decimal Snellen equivalent 0.05) cannot normally be licensed to drive Group 2 vehicles. The exceptions are:

1. You were licensed to drive Group 2 vehicles before 1 April 1991 and the Traffic Commissioner who issued the licence knew that you had sight in only one eye before 1 January 1991. You must have:
 - a visual acuity of at least 6/12 (decimal Snellen equivalent 0.5) if you held a Group 2 licence on 1 April 1983, or

- 6/9 (decimal Snellen equivalent 0.6) if you were licensed after that date, and
- a certificate of recent driving experience.

DVLA will send this certificate for you to fill in once they get a valid application. You cannot apply for new vehicle category entitlements only those you had previously held.

2. You are applying to renew entitlement to drive category C1 (vehicles between 3500kg and 7500kg) that was granted with your Group 1 (car and motorcycle) licence if you had passed a car driving test before 1 January 1997.

Uncontrolled symptoms of double vision

If you have uncontrolled symptoms of double vision, or you have double vision treated with a patch, you will not be allowed to hold a Group 2 licence.

A new applicant or existing licence holder who is unsure about the medical eyesight standards to hold a Group 2 licence should check with **Driver's Medical Group, DVLA, Swansea SA99 1TU** or phone **0300 790 6806**.

2. Epilepsy or liability to epileptic attacks

If you have been diagnosed as having epilepsy, (this includes all events: major, minor and auras), you will need to remain free of seizures without taking anti-epilepsy medication for 10 years.

If you have a condition that causes an increased liability to seizures, for example a serious head injury, the risk of you having a seizure must have fallen to no greater than 2% per annum prior to application.

DVLA must refuse an application or revoke the licence if you cannot meet these conditions.

If you have had only an isolated seizure, you may be entitled to drive lorries and buses 5 years from the date of the seizure, provided that you are able to satisfy the following criteria:

- No relevant structural abnormality has been found in the brain on imaging.
- No definite epileptic activity has been found on EEG (record of the brain waves).
- You have not been prescribed medication to treat the seizure for at least 5 years since the seizure.
- You have the support of your neurologist.
- Your risk of a further seizure is considered to be 2% or less per annum (each year).

You are strongly advised to discuss your eligibility to apply for your driving licence with your doctor(s) before getting a D4 report filled in.

3. Insulin treated diabetes

If you have insulin-treated diabetes you may apply for a Group 2 licence as long as you can meet the strict criteria for controlling and monitoring diabetes. This includes having at least 3 continuous months of blood glucose readings available for inspection on a blood glucose meter(s) with a memory function. Drivers must undertake blood glucose (sugar) monitoring at least twice daily (even on days when not driving) and at times relevant to driving (no more than 2 hours before the start of the first journey and every 2 hours while driving).

If you are able to meet all the criteria (see leaflet INS186) you will be required to undertake an annual assessment by a hospital consultant specialising in the treatment of diabetes. This will be arranged by DVLA.

Leaflet INS186 (A guide for drivers with diabetes who wish to apply for vocational entitlement) is available to download from **www.gov.uk/diabetes-driving**

4. Sulphonylurea/glinide treated diabetes

If you have diabetes treated with a sulphonylurea or glinide e.g. Gliclazide, you must undertake blood glucose (sugar) monitoring at least twice daily and at times relevant to driving (no more than 2 hours before the start of the first journey and every 2 hours while driving).

5. Other medical conditions

An applicant or existing licence holder is likely to be refused a Group 2 licence if they cannot meet the recommended medical guidelines for any of the following:

- within 3 months of a coronary artery bypass graft (CABG)
- angina, heart failure or cardiac arrhythmia which remains uncontrolled
- implanted cardiac defibrillator
- hypertension where the resting blood pressure is consistently 180 mm/Hg systolic or more and/or 100 mm/Hg diastolic or more
- a stroke or transient ischemic attack (TIA) within the last 12 months
- unexplained loss of consciousness with liability to recurrence
- Meniere's disease, or any other sudden and disabling dizziness or vertigo within the past year, with a liability to recurrence
- major brain surgery and/or recent severe head injury with serious continuing after-effects or a likelihood of causing seizures

- Parkinson's disease, multiple sclerosis or other chronic neurological disorders with symptoms likely to affect safe driving
- psychotic illness in the past 12 months
- serious psychiatric illness
- if major psychotropic or neuroleptic medication is being taken
- alcohol and/or drug misuse in the past 1 year or alcohol and/or drug dependence in the past 3 years
- dementia
- cognitive impairment likely to affect safe driving
- any malignant condition in the last 2 years, with a significant liability to metastasise (spread) to the brain
- any other serious medical condition likely to affect the safe driving of a Group 2 vehicle
- cancer of the lung.

6. Facts you should know about excessive sleepiness/tiredness and driving

There is no excuse for falling asleep at the wheel and it is not an excuse in law.

- Up to one fifth of accidents on motorways and other monotonous types of roads may be caused by drivers falling asleep at the wheel.
- 18-30 year old males are more likely to fall asleep at the wheel when driving late at night.
- Modern life styles such as early morning starts, shift work, late and night socialising, often lead to excessive tiredness by interfering with adequate rest.
- Drivers who fall asleep at the wheel usually have a degree of warning.
- Natural sleepiness/tiredness occurs after eating a large meal.
- Changes in body rhythm produce a natural increased tendency to sleep at two parts of the day:
Midnight – 6am
2pm – 4pm.
- Although no one should drink and drive at any time, alcohol consumed in the afternoon may be twice as potent in terms of producing sleepiness and driving impairment as the same amount taken in the evening.
- Prescribed or over-the-counter medication can cause sleepiness as a side effect. Always check the label if you intend to drive.

Medical conditions causing sleepiness

All drivers are subject to the pressures of modern life, but many drivers are unaware that some medical conditions also cause excessive sleepiness/tiredness. These, alone or in combination with the factors mentioned previously, may be sufficient to make driving unsafe. A road traffic accident may be the first clear indication of such a sleep disorder.

If you know you have uncontrolled sleepiness you MUST not drive.

Obstructive Sleep Apnoea (OSA) and Obstructive Sleep Apnoea Syndrome (OSAS)

Obstructive Sleep Apnoea Syndrome (OSAS) is a condition which often goes undiagnosed. If it is not fully assessed and treated, this can cause sleepiness and other symptoms which can be a serious risk factor in road traffic accidents. For further details about how to recognise symptoms go to **www.gov.uk/obstructive-sleep-apnoea-and-driving**

You must tell us immediately if you are diagnosed with Obstructive Sleep Apnoea Syndrome.

- OSAS is the most common sleep-related medical disorder.
- OSAS increases the chances of a vehicle crash by about five times.
- OSAS occurs most commonly, but not exclusively, in overweight individuals.
- Partners often complain about snoring and notice that the sufferers have breathing pauses during sleep.
- OSAS sufferers rarely wake from sleep feeling fully refreshed and tend to fall asleep easily when relaxing.
- Long distance lorry and bus drivers affected by OSAS are of great concern as most will be driving on motorway type of roads and the size or nature of the vehicle gives little room for error.
- Sleep apnoea affects on average about 25% of men and 10% of women.
- OSAS affects on average 4% of men and 2% of women.
- Sleep problems arise more commonly in older people.
- Lifestyle changes, for example weight loss or cutting back on alcohol, will help ease the symptoms of OSA.
- The most widely effective treatment for OSAS is Continuous Positive Airway Pressure (CPAP). This requires the patient to wear a soft face mask during sleep to regulate breathing. This treatment enables patients to have a good night's sleep, so reducing daytime sleepiness and improving concentration.

Other sleep related conditions

Illnesses of the nervous system, such as Parkinson's disease, multiple sclerosis (MS), motor neurone disease (MND) and narcolepsy may also cause excessive sleepiness or fatigue although sometimes these illnesses alone may cause drivers to be unfit for driving.

Tiredness or excessive sleepiness can be a non-specific symptom of Parkinson's disease, MS, MND or may also be related to prescribed medication.

Narcolepsy also causes daytime sleepiness/tiredness as well as other symptoms that may be disabling for drivers.

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Driver Services

**D4 Medical Examination Report for a Group 2,
bus or lorry licence – Information and useful notes**

DVLA
Longview Road
Morrison
Swansea
SA6 7JL

[gov.uk/dvla/driving-medical-conditions](https://www.gov.uk/dvla/driving-medical-conditions)