

DRIVING AFTER A BRAIN INJURY

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Because of our highly motorized society and the independence driving provides, one of the more commonly asked questions after a person has a brain injury is, “When can I start driving again?” This question can raise concerns for people who have brain injuries, family members, physicians, and therapists. Not all persons with brain injury have the necessary problem solving, judgment, reaction time and emotional stability to return to driving. Statistics show that approximately 50 percent of all people with brain injury do have the necessary skills and abilities to drive safely and independently. The intent of this article will be to answer some questions commonly asked by persons with brain injury, physicians, family members, and therapists concerning returning to driving.

Q. Are driving privileges or the actual driver’s license automatically taken away after a person has a brain injury and what are the legal implications of returning to driving?

A. Because a person has a brain injury, driving privileges are not automatically terminated. (Unless the person was involved in a motor vehicle crash and a traffic violation was issued at that time warranting termination of driving privileges.) It is the doctor’s responsibility and decision to determine whether the Department of Public Safety should be notified with a request for cancellation of driving privileges. (A doctor is not required by law to report that a person’s driver’s license be cancelled. Thus a person may still possess a valid driver’s license even though the individual would not be a safe driver. Family members often become the initiators of placing restrictions on driving privileges.)

Q. If a person’s driver’s license is taken away after a brain injury, what is required to get it back?

A. In order to get a driver’s license back, the following is required:

1. A medical statement must be submitted in writing to the Department of Public Safety by the physician who requested cancellation stating that the individual is medically safe to resume driving and request that driving privileges be re-instated. Each case is reviewed by the Department of Transportation Medical Review Board consisting of physicians and transportation specialists.
2. The Medical Review Board may require that driving skills and abilities be assessed by a driving program that specializes in working with people who have disabilities.
3. The Medical Review Board may also require that the person take and pass the State written and/or road test.

Q. If a person currently possesses a valid license, what then?

A. Legally the driver’s license is still valid until its renewal date. Most state renewal applications ask the question, “Have you ever had a convulsive disorder, blackout, stroke, paralysis, diabetes or other type of physical or mental impairment.” It is suggested that a person answer the question honestly. If a person answers “yes” they may be required to meet all or part of the requirements listed in question

two. If adaptive driving equipment is needed (such as a steering device, turn signal extender, left foot accelerator pedal, hand controls, etc.), the individual must take a State Road Test to demonstrate ability to use the equipment safely. All adaptive equipment will be listed as a restriction on the driver's license (the same as corrective lenses).

Q. What if I have had a seizure?

A. In November of 2010 Minnesota changed their seizure rules to allow people to resume driving three months after a seizure. It is the individual's responsibility to report seizure activity to the Department of Motor Vehicles at the time of driver license application, or within 30 days of episode if the person has a valid driver license. Report must be in writing with physician signature. Reporting will result in a temporary cancellation of driving privileges. A release from the physician is required to reinstate driving privileges.

Q. How is it determined that a person is ready to drive?

A. Having a driver assessment is the best way to determine whether or not a person has reached the point of being a safe and independent driver. Generally, a driving assessment will consist of the following:

PHYSICAL, VISUAL AND COGNITIVE EVALUATION

Physical skills will be assessed to identify need for modifications to the vehicle such as a steering device, left foot accelerator or hand controls and determine reaction time (ability to get from gas to brake in the event of an emergency). Vision will be screened for acuity (20/20), depth perception (identify gap distance) and peripheral (ability to see out the corner of your eye), and other skills. Cognition will be assessed to identify areas that may be challenging for the individual such as memory, making quick decisions, organization, and ability to divide attention.

IN-VEHICLE/ON-STREET ASSESSMENT

(Before an on-street assessment can take place, the driver must have a valid driver's license, permission from the state to test with the organization in the event that the driver license has been cancelled due to medical reasons or a valid learner's permit.) It is felt that this portion of the assessment gets to the heart of whether or not a person can safely drive on public streets. During the on-street assessment the following areas are observed and assessed while driving:

- cognitive ability - to identify traffic control and road markings, attention span and ability to respond to changing road and traffic conditions;
- depth perception - judging gap distance
- spatial relationships - being able to tell how far to drive behind or next to another car, curb, pedestrian, etc.;
- ability to accurately interpret visual information – identify potential risk situations, read social signs from other motorists (being waved on at a stop), find landmarks;



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RECOMMENDATIONS

Once the assessment has been completed, the results are compiled from all components of the driving assessment to determine strengths and weaknesses as related to the person's driving. If adaptive driving equipment is recommended equipment specifics will be listed on the report. A vendor resource for purchase and installation information will be provided. Behind-the-wheel lessons may be recommended if the evaluator believes that the individual has the potential to become a safe driver with further practice and instruction. Lessons may also be recommended if adaptive equipment is prescribed. At the end of the assessment, it should be clearly stated in writing whether or not the person can return to independent driving with or without restrictions (i.e. daytime only, no freeway, familiar routes, etc.).

OTHER REASONS WHY YOU MAY NEED A DRIVING ASSESSMENT

- If you apply for a handicapped parking sticker, the Department of Public Safety may require you to prove driving ability.
- Cancellation of driver license due to medical status. To get a license reinstated a physician may require verification from a driver assessment report for validation of safe driving.
- The state may require a new driver with a disability to obtain a letter from the physician stating that you are medically stable for operation of a motor vehicle. You will not be issued a permit until you submit a medical report from your doctor.
- Physical limitation may require adaptive driving equipment. Many vendors require a driver assessment as a prescription to verify that the individual has been assessed and trained to use the modifications.
- The physician is unwilling to submit a medical report stating ability for safe driving. Many physicians, due to liability issues, will require a driver assessment for verification of driving ability.

If you have further questions, such as where driving assessments are offered or where to get adaptive driving equipment, contact Courage Center's Driver Assessment and Training Program at 763-520-0425. To schedule an appointment, please call 763-520-0312 or 888-846-8253.

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