

Last Name: Pagan First Name: Ricardo DOB: 10/23/1966 Exam Date: 02/07/2023

TESTING

Pulse Rate: 92 Pulse rhythm regular: Yes No Height: 6 feet 0 inches Weight: 199 pounds

Blood Pressure		Systolic	Diastolic	Urinalysis		Sp. Gr.	Protein	Blood	Sugar
Sitting		136	80	Urinalysis is required. Numerical readings must be recorded.		1.020	negative	negative	negative
Second reading (optional)									

Other testing if indicated

Protein, blood, or sugar in the urine may be an indication for further testing to rule out any underlying medical problem.

Vision

Standard is at least 20/40 acuity (Snellen) in each eye with or without correction. At least 70° field of vision in horizontal meridian measured in each eye. The use of corrective lenses should be noted on the Medical Examiner's Certificate.

Acuity	Uncorrected	Corrected	Horizontal Field of Vision	Yes	No	Check if hearing aid used for test:	<input type="checkbox"/> Right Ear	<input type="checkbox"/> Left Ear	<input checked="" type="checkbox"/> Neither
Right Eye:	20/20	20/	Right Eye: 85 degrees			Whisper Test Results		Right Ear	Left Ear
Left Eye:	20/20	20/	Left Eye: 85 degrees			Record distance (in feet) from driver at which a forced whispered voice can first be heard	7	7	
Both Eyes:	20/20	20/				OR			
Applicant can recognize and distinguish among traffic control signals and devices showing red, green, and amber colors				<input checked="" type="radio"/>	<input type="radio"/>	Audiometric Test Results			
Monocular vision				<input type="radio"/>	<input checked="" type="radio"/>	Right Ear:		Left Ear:	
Referred to ophthalmologist or optometrist?				<input type="radio"/>	<input checked="" type="radio"/>	500 Hz	1000 Hz	2000 Hz	
Received documentation from ophthalmologist or optometrist?				<input type="radio"/>	<input checked="" type="radio"/>	Average (right):		Average (left):	

Hearing

Standard: Must first perceive whispered voice at not less than 5 feet OR average hearing loss of less than or equal to 40 dB in better ear (with or without hearing aid).

PHYSICAL EXAMINATION

The presence of a certain condition may not necessarily disqualify a driver, particularly if the condition is controlled adequately, is not likely to worsen, or is readily amenable to treatment. Even if a condition does not disqualify a driver, the Medical Examiner may consider deferring the driver temporarily. Also, the driver should be advised to take the necessary steps to correct the condition as soon as possible, particularly if neglecting the condition could result in a more serious illness that might affect driving.

Check the body systems for abnormalities.

Body System	Normal	Abnormal	Body System	Normal	Abnormal
1. General	<input checked="" type="radio"/>	<input type="radio"/>	8. Abdomen	<input checked="" type="radio"/>	<input type="radio"/>
2. Skin	<input checked="" type="radio"/>	<input type="radio"/>	9. Genito-urinary system including hernias	<input checked="" type="radio"/>	<input type="radio"/>
3. Eyes	<input checked="" type="radio"/>	<input type="radio"/>	10. Back/spine	<input checked="" type="radio"/>	<input type="radio"/>
4. Ears	<input checked="" type="radio"/>	<input type="radio"/>	11. Extremities/joints	<input checked="" type="radio"/>	<input type="radio"/>
5. Mouth/throat	<input checked="" type="radio"/>	<input type="radio"/>	12. Neurological system including reflexes	<input checked="" type="radio"/>	<input type="radio"/>
6. Cardiovascular	<input checked="" type="radio"/>	<input type="radio"/>	13. Gait	<input checked="" type="radio"/>	<input type="radio"/>
7. Lungs/chest	<input checked="" type="radio"/>	<input type="radio"/>	14. Vascular system	<input checked="" type="radio"/>	<input type="radio"/>

Discuss any abnormal answers in detail in the space below and indicate whether it would affect the driver's ability to operate a CMV.
Enter applicable item number before each comment.

Exams while driver is able to drive

(Attach additional sheets if necessary)