



# Information for optometrists assessing fitness to drive

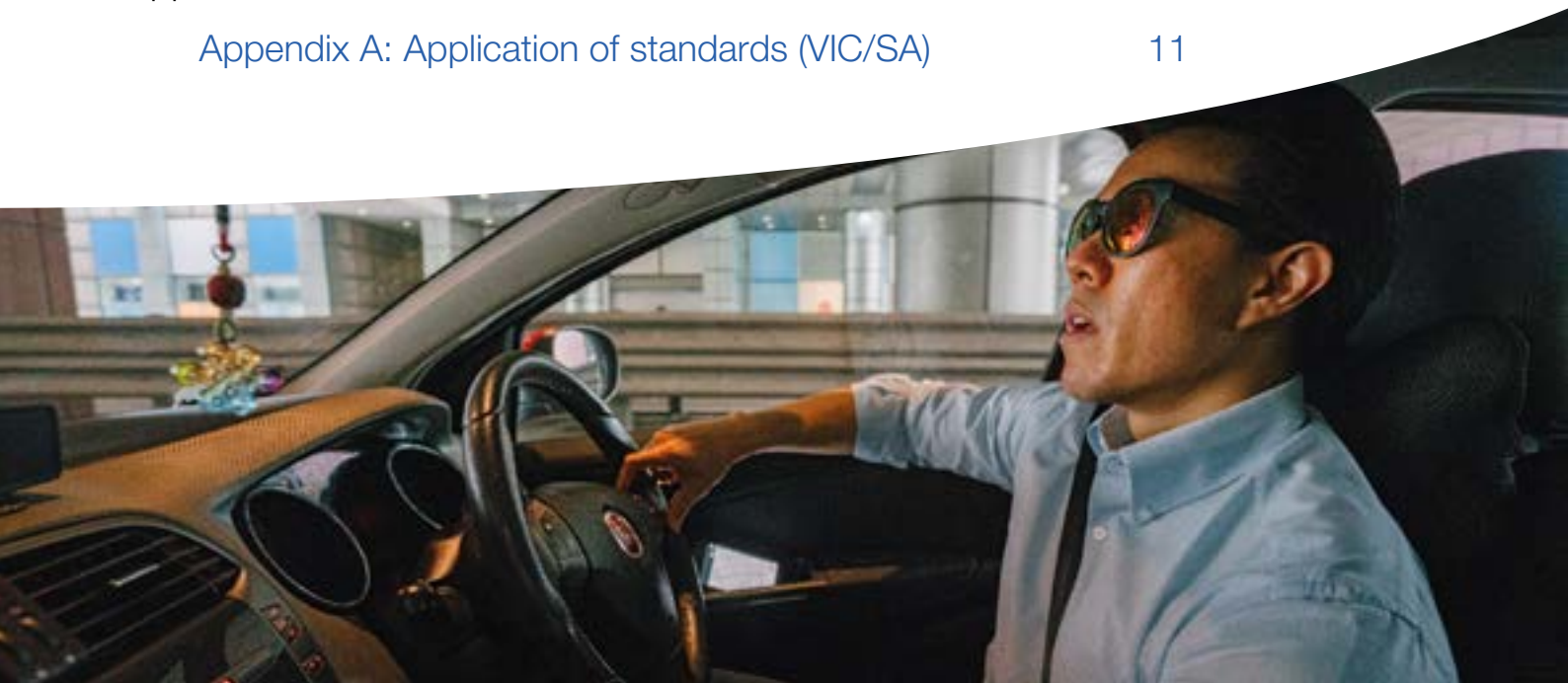
## Updated March 2023

Please note, while every effort has been made to ensure this information is accurate, current and complete, it is general in nature and must not be treated as advice, clinical or otherwise, because errors, omissions and changes to the law can occur. This member resource should be treated as an adjunct to, and not a substitute for, reading the latest version of [\*Assessing Fitness to Drive for Commercial and Private Vehicle Drivers\*](#) produced jointly by Austroads and the National Transport Commission Australia.

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# 1. Introduction

Optometrists have a vitally important role to play in the assessment of vision as it relates to the task of driving. This guide has been developed to assist Optometry Victoria South Australia (OV/SA) members in the assessment of their patients' fitness to drive, and to offer guidance on the obligations of both optometrists and patients. It is designed to supplement *Austroad's* national driver medical standards **Assessing Fitness to Drive**.

This resource commences with a discussion of the roles and responsibilities of optometrists and patients in the context of fitness to drive. Attention is then given to the potentially complex question of which visual standard applies in what circumstances. Updates have been provided in order to reflect recent changes (2022) to legislation, including revisions around minimum visual standards for monocular commercial vehicle drivers, guidance on patients using orthokeratology, and clarification on patients with diplopia.

Where there are different requirements for Victorian and South Australian optometrists, these are clearly highlighted throughout the document.

Finally, a number of helpful links and resources are provided in order to assist OV/SA members in their assessment of visual fitness to drive.



## 2. Obligations of drivers and optometrists

Optometrists, drivers and driver licence authorities have specific roles and responsibilities. For a full discussion of these roles and responsibilities, it is recommended that members review Austroads' publication [Assessing Fitness to Drive for Commercial and Private Vehicle Drivers](#), Section 3.

### 2.1 Duty of drivers to self-report

| Table 1: duty of drivers to self-report   |  |
|---|--|
| <i>Road Safety (Drivers) Regulations 2009 (Vic) R 67(2)</i>   | <i>Motor Vehicles Act 1959 (SA) s 98AAF</i>  |
| Drivers who are affected by a permanent or long-term injury or illness that may impair their ability to drive safely must notify VicRoads as soon as possible after becoming aware of the injury/illness. | Drivers who, during the term of their licence or permit, suffer an illness or injury that may impair their competence to drive a motor vehicle without endangering the public must notify <i>mylicence</i> in writing within a reasonable time after the occurrence of the injury/illness. |

In both Victoria and South Australia, drivers can be fined for failing to report their condition to the relevant agency or agencies. Drivers should also be aware there may be long term financial, insurance and legal consequences if they fail to self-report to their driver licence authority.<sup>1</sup>

### 2.2 Reporting drivers to VicRoads (Vic) or mylicence (SA)

Sometimes drivers do not self-report when required. The first step in this case is to ensure the patient is aware of the legal duty to self-report and the potential consequences of failing to report. The patient should be fully informed as to why the information needs to be disclosed and should have an opportunity to consider this information.<sup>2</sup>

Although an optometrist cannot tell a patient's family about the patient's condition without the patient's consent, sometimes it can be helpful to have family in the room at the time of the eye test, as long as the patient has no objection. If the patient still chooses not to self-report, it is important for members to understand what to do next.

While members practising in Victoria can use their discretion as to whether to report a patient in these circumstances, when practising in South Australia, members are required by law to report a patient who is unfit to drive. For more information on the content of the duty in each state, please see table 2 (over page). The reporting requirement applies to both private and commercial drivers.

1. Austroads and the National Transport Commission, *Assessing Fitness to Drive 2016 (as amended up to August 2017)* (7 January 2017) Austroads <<https://austroads.com.au/publications/assessing-fitness-to-drive/ap-g56>> 17.

2. Ibid 18.



**Table 2: Reporting drivers to VicRoads or mylicence**

|                                  | <b>Victoria (Discretionary reporting)</b>   | <b>South Australia (Mandatory reporting)</b>  |
|----------------------------------|---|---|
|                                  | <i>Road Safety Act 1986 (Vic) ss 27(4)–(5)</i>  | <i>Motor Vehicles Act 1959 (SA) s 148</i>   |
| Content of duty                  | If a patient is unfit to drive, or it may be dangerous to allow the patient to drive, the optometrist must weigh patient confidentiality against public safety considerations. Ordinarily, OV/SA and OA advise that if a patient continues to drive despite being fully aware of the duty to self-report and the reasons for the existence of this duty, the optometrist should report the patient to VicRoads (preferably with patient consent or at least knowledge). | s 148(1): If a health professional has ‘reasonable cause’ to believe that a patient who drives has a ‘physical or mental illness, disability or deficiency’ which would be ‘likely to endanger the public’ if the patient drove, the health professional has a duty to inform the Registrar in writing of the patient’s name and address, as well as the illness, disability or deficiency. |
| Duty to tell the patient         | All reporting should ideally be done with the knowledge, and preferably the consent, of the patient. However, for various reasons, this may not always be possible.   | s 148(2): When a health professional makes a report in these circumstances, the health professional must notify the patient, and tell the patient the nature of the information given to the Registrar.   |
| Legal protection for optometrist | s 27(5): No action may be taken against a person who, in good faith, reports to VicRoads any information suggesting a person is unfit to drive or that it may be dangerous to allow that person to drive.   | s 148(3): A health professional incurs no civil or criminal liability when they carry out their duty to mandatorily report a patient.   |

To report the holder of a **South Australian** driver’s licence, send the report by fax to the ‘Medical Review Team - Driver Licences’ at the Department of Planning, Transport and Infrastructure. Their fax number is (08) 8402 1977. Optometrists may also wish to refer older drivers to DPTI’s ‘Moving Right Along’ fact sheet and/or to the ‘Moving Right Along’ webpage (see ‘Key Resources’ at the end for webpage addresses).

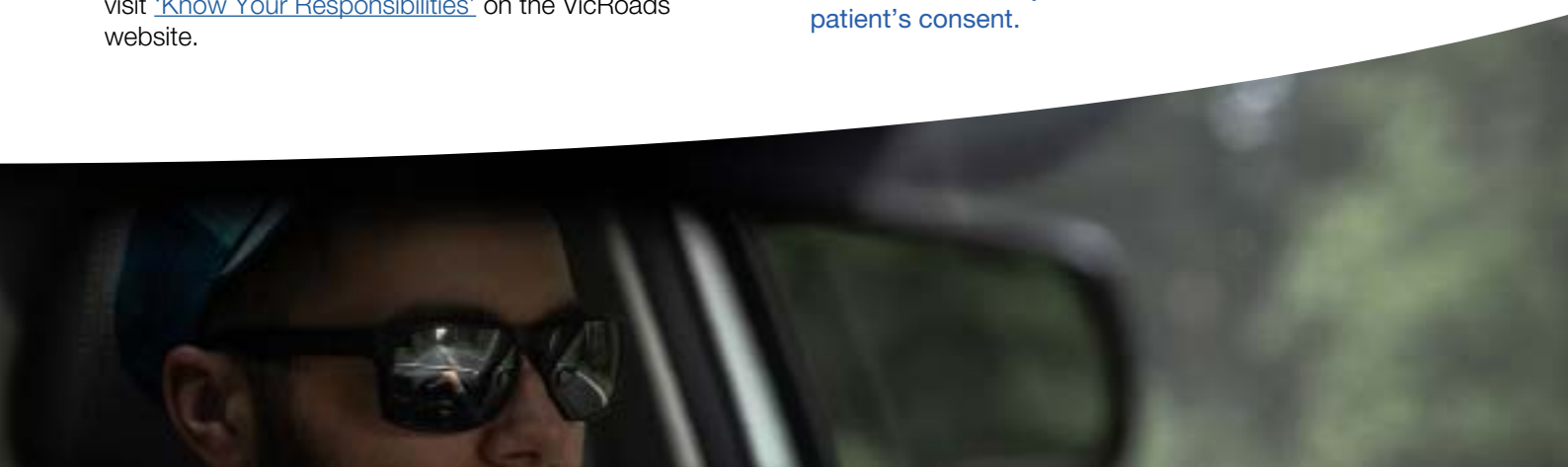
To report the holder of a **Victorian** driver’s licence, contact VicRoads’ Medical Review Team by telephone on (03) 8391 3226 or via email at [medicalreview@roads.vic.gov.au](mailto:medicalreview@roads.vic.gov.au).

Reports can be made anonymously and the protections described above are applicable. For more information, visit ‘[Know Your Responsibilities](#)’ on the VicRoads website.

**In Victoria**, VicRoads recommends that optometrists submit a report to the patient’s GP whenever visual fitness for driving is specifically assessed. This should be done with the patient’s consent.

**In SA**, the Australian Medical Association (SA) Road Safety committee request that in existing communications, optometrists also assess a patient’s fitness to drive based on the patient’s eye condition at that point in time and convey this to the patient’s general practitioner using the format:

**‘Mr X has condition Y, and the examination results today indicate he is fit/not fit to drive (with/without corrective lenses).’** This should be done with the patient’s consent.



## 3. The applicable vision standard

There are two different vision standards for driving: private and commercial.

The applicable standard depends on the type of vehicle (e.g. car) as well as the purpose for which it will be driven (e.g. for remuneration or privately). The commercial standard is more stringent than the private standard.

For more information on when to apply each standard, including how to treat taxi and 'Uber' drivers, please see Appendix A. The table in Appendix A provides detailed information that will assist OV/SA members in determining whether the private or commercial standard applies to their patients.

### 3.1 Emergency services, defence, aviation and other occupational vision standards

In response to regular member enquiries regarding occupational vision standards, Optometry Australia has compiled a list of various occupational standards on its website. For more information, please visit [Optometry Australia's occupational standards webpage](#).



## 4. Vision standards for driving

### 4.1 Visual acuity

Visual acuity should be tested using a Snellen or LogMAR chart or equivalent with five letters on the 6/12 line.

More than two errors in reading the letters of any line is regarded as a failure to read that line.

#### 4.1.1 Private license visual acuity considerations

In the case of a private vehicle driver, a person is not fit to hold an unconditional licence if the person's uncorrected visual acuity in the better eye or with both eyes together is worse than 6/12.

A conditional licence may be considered by the driver licensing authority subject to periodic review if the standard is met with corrective lenses\*.

If the person's visual acuity is just below that required by the standard but the person is otherwise alert, has normal reaction times and good physical coordination, an optometrist can recommend the granting of a conditional licence. The use of contrast sensitivity or other tests may help in the assessment. However, a driver licence will not be issued when visual acuity in the better eye is worse than 6/24 for private vehicle drivers.

#### 4.1.2 Commercial license visual acuity considerations

For commercial licenses, a person is not fit to hold a unconditional licence if the person's uncorrected visual acuity is worse than 6/9 in the better eye or if the person's uncorrected visual acuity is worse than 6/18 in either eye.

Like private conditional licences, commercial conditional licenses may be considered by the driver licensing authority subject to periodic review if the standard is met with corrective lenses\*.

If the person's vision is worse than 6/18 in the worse eye, a conditional licence may be considered by the driver licensing authority subject to periodic review, provided

the visual acuity in the better eye is 6/9 (with or without corrective lenses or orthokeratology therapy) according to the treating optometrist, or ophthalmologist. The driver licensing authority will take into account the nature of the driving task and the nature of any underlying disorder and any other restriction advised by the optometrist or ophthalmologist.

#### 4.1.3 Orthokeratology

Orthokeratology lenses are considered safe to use when driving as long as treatment allows a person to meet the relevant visual acuity standard. Corrective lenses must be worn as per the existing standards if uncorrected visual acuity cannot be achieved through this treatment. Individual driver licensing authorities have different requirements in terms of demonstrating appropriate use of the therapy and review periods for conditional licensing.

In Victoria, patients using orthokeratology lenses are subject to annual reviews.

In South Australia, after the driving authority has been notified of the therapy by the treating optometrist and the eyesight section of a certificate of fitness or an eyesight certificate for the driver has been completed, thereby recording the condition, further review is not required unless the driver also has another medical condition or eyesight disorder requiring ongoing review.

**It is important to remember that the decision to grant a conditional licence ultimately rests with the driver licence authority. The role of the optometrist is to suggest to the driver licence authority whether a conditional licence might be suitable and why. However, the final decision belongs to VicRoads (in Victoria) or mylicence (in SA).**

\*Refer to 4.1.3 Orthokeratology for information on meeting the standard using orthokeratology therapy

## 4.2 Visual Fields

If there is no indication of a visual field impairment or a progressive eye condition, then it is satisfactory to screen for any defects by confrontation field testing, although optometrists should remember that this is an inexact test. Any person who has, or is suspected of having, a visual field defect should have a formal perimetry-based assessment; in the first instance, it is appropriate to perform monocular automated static perimetry. If monocular automated static perimetry shows no defects, this information is sufficient to confirm the standard is met.

**All automated static perimetry testing must be performed with fixation monitoring. For results to be regarded as valid, the false positive score must be  $\leq 20\%$ .**

All patients with any significant field defect and/or a progressive eye condition require either the Medmont Binocular Driving Test or the binocular Humphrey Esterman test regardless of whether they reside in Victoria or South Australia.

**VicRoads (Victoria only) will not accept the Medmont Binocular Driving Test unless optometrists have ensured that:**

- 1- Under the 'Display' tab, the 'Level' map type is selected, as well as 'numeric' data view; and
- 2- They have checked the boxes 'Numeric Tick Marks' and 'Annotations'.

**When these parameters are specified, the 'seen points' attribute will be displayed, as preferred by VicRoads. Note that results printed in grayscale format are not ordinarily accepted by VicRoads.**

### 4.2.1 Horizontal visual field extent for private and commercial unconditional licences

A person is not fit to hold an unconditional commercial vehicle licence if the person has any visual field defect.

To meet either the private or commercial visual standard for an unconditional licence, the horizontal extent of the visual field must be  $\geq 110$  degrees with no significant significant field loss (scotoma) of more than four contiguous spots within 20 degrees radius from fixation.

The following defects are regarded as **insignificant** and therefore do not preclude an unconditional licence:

- a single cluster of up to three adjoining missed points, unattached to any other area of defect, lying on or across the horizontal meridian;
- a vertical defect of only a single point width but of any length, unattached to any other area of defect, which touches or cuts through the horizontal meridian.

### 4.2.2 Central visual field requirements for private and commercial unconditional licences

Again, a person is not fit to hold an unconditional commercial vehicle licence if the person has any visual field defect.

For unconditional private vehicle licences, the general principle is that there must be no significant defect in the binocular field coming within a 20 degree radius of foveal fixation.

The following defects are regarded as **significant** and therefore not acceptable:

- a cluster of four or more adjoining points that is either completely or partly within the central 20 degree area;
- loss consisting of both a single cluster of three adjoining points up to and including 20 degrees from fixation, and any additional separate missed point/s within the central 20 degree area;
- any central loss that is an extension of a hemianopia or quadrantanopia of size greater than three missed points.

The following defects are regarded as **insignificant** and therefore do not preclude an unconditional licence:

- scattered single missed points; or
- a single cluster of up to three adjoining points (but a loss of three adjoining points up to and including 20 degrees from fixation plus any additional separate missed points in the central 20-degree area is unacceptable – see below)

One of the upshots of this is that homonymous and bitemporal defects coming close to fixation are not normally acceptable for driving, regardless of whether the defect is hemianopic or quadrantanopic.

### 4.2.3 Private conditional licences

If the private standard applies but the above visual fields standards are not satisfied, the optometrist **may** support the granting of a conditional licence as long as the horizontal extent of the visual field is  $\geq 90$  degrees.



Additional testing may help inform the recommendation/s. The driver licence authority is required to consider results from any of the following tests (if supplied):

- kinetic fields conducted on a Goldmann;
- ‘roving’ binocular visual field test (i.e. a binocular visual field test performed without fixation monitoring; the Medmont Binocular Driving Test or the Binocular Esterman test are acceptable); two consecutive tests must be performed with  $\leq 1$  false positive on each, and results should be supplied in the numeric field format; and
- contrast sensitivity and glare susceptibility.

The driver licence authority is additionally required to consider the following:

- **Relevant health history** including the following about any condition/s present: duration, prognosis, nature (progressive / not progressive), rate of progression if applicable and effectiveness of treatment and management;
- **Driving history** prior to and since the occurrence of the defect;
- **Nature of the driving task** (e.g. type of vehicle, distances to be travelled etc.);
- **Concomitant medical conditions** including cognitive impairment or impaired rotation of the neck.

#### 4.2.4 Commercial conditional licences

In cases where the commercial visual standard for driving applies, the flexibility discussed under 4.2.3 in relation to visual fields does **not** apply.

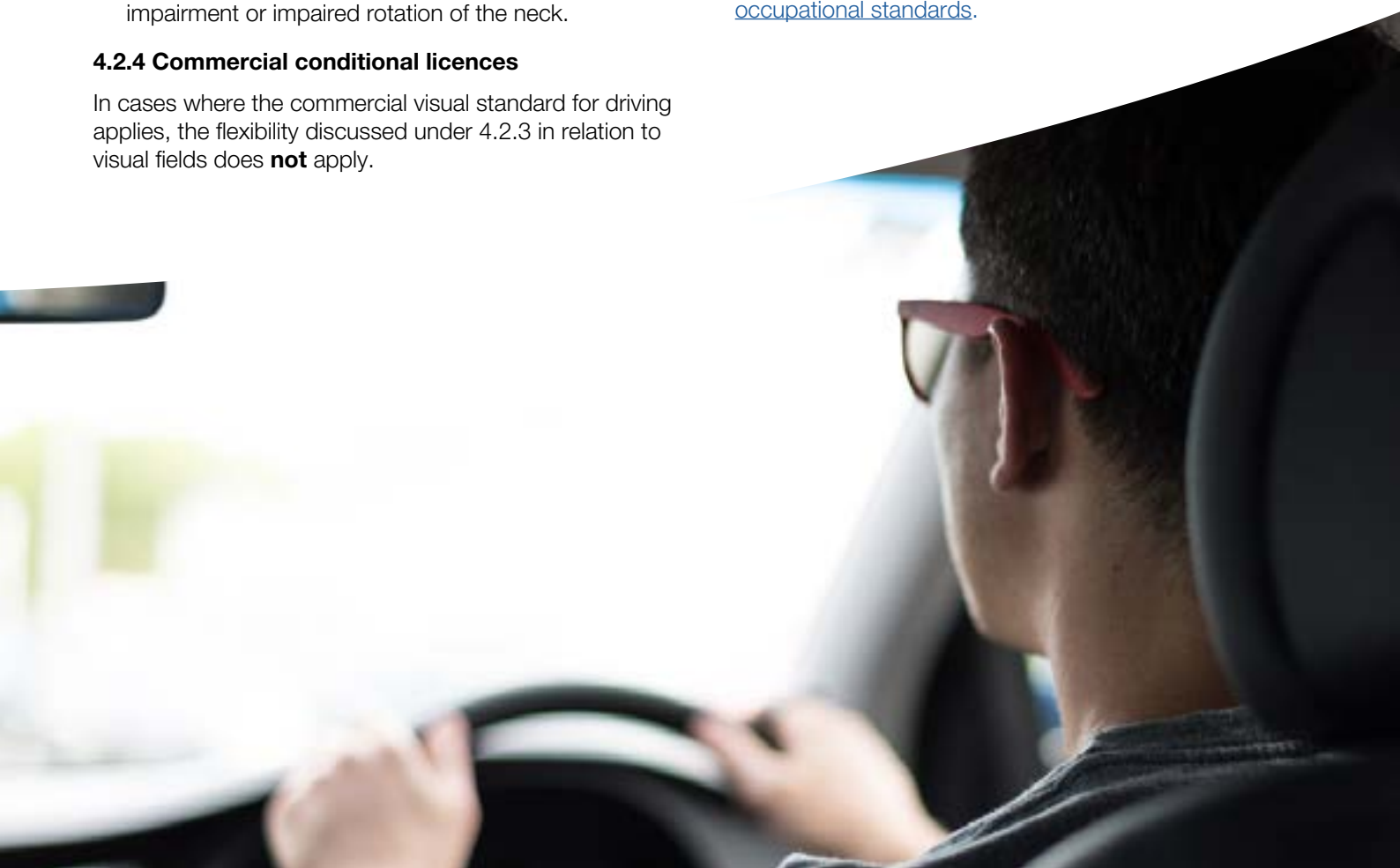
### 4.3 Monocular drivers

For private vehicle drivers, a conditional licence may be considered if the horizontal visual field extent is  $\geq 110$  degrees and the visual acuity is satisfactory in the better (or only) eye. The health of the better (or only) eye must be reviewed every year.

**In a monocular patient with no symptoms, family history or risk factors for visual field loss, it is appropriate in the first instance to conduct monocular automated static perimetry. If the result is not suggestive of any defects, this information may be sufficient to confirm the standard is met. If monocular testing suggests a defect then binocular visual field testing should be conducted.**

### 4.4 Colour Vision

There is not a colour vision standard for drivers, either private or commercial. Optometrists should, however, advise drivers who have a significant colour vision deficiency about how this may affect their responsiveness to signal lights and the need to adapt their driving accordingly. Any advice given to patients should be documented in the patient record. Note that some occupations may have a colour vision standard; for more information see Optometry Australia's [list of occupational standards](#).



## 4.5 Progressive Conditions

Optometrists should monitor progressive eye conditions regularly and advise the patient in advance of any potential future impact on driving ability. All advice given to patients should be documented in the patient record. Progressive conditions include, for example, cataract, glaucoma, optic neuropathy and retinitis pigmentosa.

## 4.6 Diplopia

A person is not fit to hold a commercial licence, either unconditional or conditional, if they have diplopia (other than physiological diplopia) when looking up to 20 degrees from fixation. Diplopia within the central 20 degrees refers to 20 degrees from central fixation and not 20 degrees across fixation.

If they have double vision when looking beyond 20 degrees of fixation they may be considered for a conditional licence.

### 4.6.1 Private Conditional Licenses

A conditional licence may be considered by the driver licensing authority, subject to annual review, taking into account the nature of the driving task and information provided by the treating optometrist, or ophthalmologist as to whether the following criteria are met:

- the condition is managed satisfactorily with corrective lenses or an occluder; and
- the person meets other criteria as per this section, including visual fields.

The following licence condition may apply if corrective lenses or an occluder prevents the occurrence of diplopia.

Corrective lenses or an occluder must be worn while driving. A 3-month non-driving period applies for use of occluders, in order to re-establish depth perception.

### 4.6.2 Commercial Conditional Licenses

A person is **not** fit to hold an unconditional licence or a conditional licence if the person experiences any diplopia (other than physiological diplopia) within 20 degrees from central fixation.



## 5. Key resources

### National resources

[\*Assessing Fitness to Drive for Commercial and Private Vehicle Drivers\*](#)

[Optometry Australia's webpage on occupational vision standards](#)

### Victorian resources

- [Health and Driving](#) (VicRoads) including:
- [Medical Review Process](#) (including reporting driving conditions that could affect driving safety)
- [Medical Conditions and Driving](#) (including vision impairments, diabetes and neurological conditions)
- [How Ageing Can Affect Your Driving](#)
- [Information for Health Professionals](#)  
Click 'Know Your Responsibilities' and click on 'Fitness to drive information for Ophthalmologists and Optometrists' to view VicRoads' latest fact sheet

[Online EyeSight Report](#) and [Patient Fact Sheets](#) (including Diabetes and Driving, Glaucoma and Driving, Getting Around Without a Car, Medical Review Driving Test)

[Licence Categories](#) (VicRoads)

[Eyesight Report](#) (VicRoads)

### South Australian resources

[MyLicenceSA](#)

[MyLicenceSA Drivers' Handbook – Fitness to Drive](#)

[MyLicenceSA Safe Driving Tips – Older Drivers](#)

[MyLicenceSA Drivers' Handbook – Drugs, Medicine and Driving](#) (including prescription drugs)

['Moving Right Along' webpage](#)

## 6. Contact information

### Optometry Victoria South Australia

(03) 9652 9100

[office.vicsa@optometry.org.au](mailto:office.vicsa@optometry.org.au)

### Optometry Australia

(03) 9668 8500

[national@optometry.org.au](mailto:national@optometry.org.au)

### Government of South Australia Department of Planning, Transport and Infrastructure

13 10 84

### VicRoads Medical Review

(03) 9854 2390

[medicalreview@roads.vic.gov.au](mailto:medicalreview@roads.vic.gov.au)

### Commercial Passenger Vehicles Victoria

1800 638 802 (toll-free for fixed landlines only)

[contact@cpv.vic.gov.au](mailto:contact@cpv.vic.gov.au)

South Australian Driver [Accreditation webpage for commercial passenger vehicles](#)

# Appendix A: Application of standards (Vic/SA)

| National licence class  | Vehicle/s  | Context  | Vision standard                          |
|---|--|--|--|
| Motorcycle (R)  | Motorbikes or motortrikes  | Vehicle to be ridden privately and not for remuneration  | Private                                  |
|   |  | Vehicle to be ridden commercially, conveying food and/or other items for reward (e.g. Uber Eats)   | Private                                  |
|   |  | Vehicle to be ridden commercially, carrying passengers for hire or reward (e.g. Scooti)  | Commercial                               |
| Car (C)   | Any vehicle $\leq$ 4.5t Gross Vehicle Mass (GVM) and seating $\leq$ 12 adults incl. driver (including cars, minivans meeting these criteria) | Vehicle to be driven privately and not for remuneration  | Private                                  |
| Light Rigid (LR)  | Any rigid vehicle with GVM $>$ 4.5t and/or which seats $>$ 12 adults, that has GVM $\leq$ 8t (plus trailer of $\leq$ 9t)                     |  |  |
| Car (C)   | Any vehicle $\leq$ 4.5t Gross Vehicle Mass (GVM) and seating $\leq$ 12 adults incl. driver (including cars, minivans meeting these criteria) | (i) Carrying passengers for hire or reward (incl. taxis, rideshare vehicles including 'Uber', vehicles driven by chauffeurs); and/or   | Commercial                               |
| Light Rigid (LR)  | Any rigid vehicle with GVM $>$ 4.5t and/or which seats $>$ 12 adults, that has GVM $\leq$ 8t (plus trailer of $\leq$ 9t)                     | (ii) Driver is undertaking a medical assessment as a requirement under an accreditation scheme; and/or<br>(iii) Driver holds or is applying for authority to hold a dangerous goods licence. |  |
| Medium & heavy rigid (MR and HR) and Heavy and Multiple Combination (HC and MC) | Various heavy vehicles $>$ 8t GVM – includes larger buses & coaches  | Any  | Commercial standard applies at ALL times |