Dear Applicant:

The Department of Transportation (DOT), Federal Motor Carrier Safety Administration (FMCSA) allows interstate commercial motor vehicle drivers with a history of epilepsy or any other condition likely to cause loss of consciousness or any loss of ability to control a commercial motor vehicle to apply for an exemption from federal regulation 49 CFR 391.41(b)(8). The process to determine if such an exemption should be granted includes a thorough review of documents and information that would support your request for an exemption from this regulation.

Before applying for a Federal seizure exemption, please review the following criteria.

- **Epilepsy/seizure disorder diagnosis.** If there is an epilepsy/seizure disorder diagnosis, the applicant should be seizure-free for **8 years, on or off medication.** If an applicant stops taking anti-seizure medication, he or she must be seizure free for 8 years from the date the medication was discontinued. If the individual is taking anti-seizure medication(s), the plan for medication should be stable for **2 years.** Stable means no changes in medication, dosage, or frequency of medication administration. Recertification for drivers with an epilepsy diagnosis should be performed every year.

- **Single unprovoked seizure.** If there is a single unprovoked seizure (i.e., there is no known trigger for the seizure), the individual should be seizure-free for **4 years, on or off medication.** If the individual is taking anti-seizure medication(s), the plan for medication should be stable for **2 years.** Recertification for drivers with a single unprovoked seizure should be performed every 2 years.

- **Single provoked seizure.** If there is a single provoked seizure (i.e., there is a known reason for the seizure), the Agency considers specific criteria that fall into the following two categories: low-risk factors for recurrence and moderate-to-high risk factors for recurrence.
  - Examples of low-risk factors for recurrence include seizures that were caused by a medication; by non-penetrating head injury with loss of consciousness less than or equal to 30 minutes; by a brief loss of consciousness not likely to recur while driving; by metabolic derangement not likely to recur; and by alcohol or illicit drug withdrawal.
  - Examples of moderate-to-high-risk factors for recurrence include seizures caused by non-penetrating head injury with loss of consciousness or amnesia greater than 30 minutes; penetrating head injury; intracerebral hemorrhage associated with a stroke or trauma; infections; intracranial hemorrhage; post-operative complications from brain surgery with significant brain hemorrhage; brain tumor; or stroke. Drivers who are to moderate to high risk factors for recurrence should be seizure-free for **8 years, on or off medication.**
To apply for a Federal seizure exemption, FMCSA requests submission of the following information:

1) Physician Statement on letterhead (this must be dated within 3 months of the date you have submitted your request) that includes:
   a. The diagnosis.
   b. The date of the last seizure (month/year or year).
   c. The anti-seizure medication(s) dosage and frequency you are taking.
   d. The date of the last change in each anti-seizure medication, dosage and frequency. (month/year or year). If you are not taking anti-seizure medication, the letter must indicate the date you stopped taking the medication.
   e. A sentence indicating the treating physician’s support for the applicant to drive a commercial motor vehicle in interstate commerce.

2) The most recent physical examination visit note from your treating physician, include any information about your condition, such as:
   a. Medical history.
   b. Laboratory tests.
   c. Diagnostic tests.
   d. Any medications you are taking.

3) A legible copy of your driver's license, front and back.

4) A legible copy of your driving record for the last 3 years. If you were involved in any crash or were convicted for any moving violation, provide additional official documentation (e.g., a copy of the crash report or the citation, or copies of court records). The driving record must be dated within 3 months of the date of your application.

5) An applicant statement indicating:
   a. Full name;
   b. Phone Number;
   c. Email Address;
   d. Confirmation that you drive, or intend to drive, a commercial motor vehicle in interstate commerce;
   e. Type of vehicle you will drive, including the gross vehicle weight, and the DOT # (if applicable).
   If you do not presently operate a commercial motor vehicle in interstate commerce, please submit a statement that indicates your intention to do so.

6) Completed and signed Authorization for Release of Medical Information Form.
   a. This form is available on FMCSA’s website at https://www.fmcsa.dot.gov/medical/driver-medicalrequirements/medical-release-info-12-2006
   b. A sample of a completed form is available on FMCSA’s website at https://www.fmcsa.dot.gov/medical/driver-medical-requirements/medical-release-info-seizure-sample
Your information may be e-mailed, mailed or faxed (PLEASE DO NOT DO MORE THAN ONE).

E-mail to:

FMCSAseizureexemptions@dot.gov

Mail to:
Department of Transportation
FMCSA Office of Medical Programs, W64-224
Seizure Exemptions
1200 New Jersey Avenue, SE
Washington, DC 20590
C/O Christine A. Hydock

Fax to: 877-764-6920 and title the document - ATTENTION SEIZURE EXEMPTIONS C/O Christine A. Hydock

The Exemption Process

To grant a Federal medical exemption, FMCSA must ensure that each exemption would maintain a level of safety equivalent to, or greater than, the level achieved without the exemption. In addition, the recipient must operate in interstate commerce.

To process an application, the Agency must carefully evaluate the information submitted and, as required by 49 CFR U.S.C. 31315(b), publish a Federal Register notice requesting public comment on the application for each exemption. The public is provided 30-days to comment and the Agency must consider and respond to all comments received when making a final determination whether to grant or deny the exemption. Once a decision has been made, you will be notified in writing of the decision.

If you have questions, please contact the Medical Programs Division at 202-366-4001 or fmcsamedical@dot.gov.

Sincerely,

Christine A. Hydock
Chief, FMCSA’s Medical Programs Division