



DOT Medical Clearance Request

Abdominal Aortic Aneurysm (AAA)

In accordance with Federal Motor Carrier Safety Administration (FMCSA) guidelines, we respectfully request your professional opinion regarding this driver's ability to safely operate a commercial vehicle given their history of **Abdominal Aortic Aneurysm (AAA)**.

PATIENT NAME	DATE OF BIRTH

FMCSA Guidelines — Abdominal Aortic Aneurysm

Size-Based Certification Criteria:

- **AAA between 4–5 cm** and asymptomatic — requires cardiovascular specialist clearance prior to certification
- **Minimum 3-month waiting period** following surgical AAA repair before certification

Post-Repair & Ongoing Monitoring:

- If endovascular repair was performed, the driver must demonstrate compliance with all follow-up imaging protocols
- Annual cardiovascular re-evaluation is required including ultrasound surveillance and cardiologist review

The following findings are disqualifying regardless of aneurysm size:

- AAA is currently symptomatic
- Surgical repair has been recommended
- AAA diameter is **5.0 cm or greater**
- AAA has grown more than **0.5 cm within any 6-month period**
- AAA is between 4–5 cm and the driver does not have cardiovascular specialist clearance

Commercial Driver Physical Demands

Commercial motor vehicle operation places substantial physical demands on drivers that extend well beyond the act of driving. Drivers are routinely required to load and unload cargo, couple and uncouple trailers requiring full range of motion to climb, grip, and pull, lift and install tire chains weighing between 35 and 90 pounds, and tarp open trailers requiring lifting motions of 50 to 100 pounds — often after extended periods of sitting without a stretching period. In addition to these labor demands, drivers must maintain sustained perceptual alertness, control an oversized steering wheel, operate manual transmissions, maneuver large vehicles in confined spaces, and safely enter and exit the cab, which is physically comparable to climbing a ladder. These combined physical and cognitive demands should be carefully considered when determining this driver's fitness for commercial driving duties.



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Provider Certification

- ☐ **CLEARED** — The driver meets the above requirements and in my clinical opinion is medically cleared to safely operate a commercial motor vehicle.
- ☐ **NOT CLEARED** — The driver does not meet the above requirements and in my clinical opinion cannot safely operate a commercial motor vehicle at this time.
- ☐ **CLEARED WITH DISCRETION** — The driver does not meet one or more guidelines; however, in my clinical opinion the driver is safe to operate a commercial motor vehicle for the following reason(s):

PROVIDER NAME (PRINT)

SPECIALTY / TITLE

DATE

PROVIDER SIGNATURE

ADDRESS (CITY, STATE, ZIP)

PHONE / FAX

This form must be completed and signed prior to the scheduled examination date. A physician office stamp is strongly recommended to validate the authenticity of this document. Incomplete or unstamped forms may delay the certification process. Thank you for your cooperation in supporting the safe operation of commercial motor vehicles on our nation's roadways.

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