

Background Information for Driver Evaluations

Rosamond Gianutsos, PhD, Certified Driver Rehabilitation Specialist:
information as you can.

Please fill in as much

Driver's Name

First

Last

Name of person completing this form

First

Last

Contact information: Phone

Email

Preferred mode of contact

Phone E-mail Text

How did you hear about Dr. Gianutsos' services?

Where do you (driver to be evaluated) live?

Who lives at home?

Educational background

Hobbies and favorite activities

Vocational

Working Student Retired

Describe what you do / did

Do you have any physical limitations?

No Yes

If, yes, describe

Do you take any medications?

No Yes

If yes, list all.

Diagnoses (list all)

Hospitalizations and Surgeries

History and current use of mind-altering substances (alcohol and drugs)

History of seizures and losses of consciousness (include date of most recent)

Vision - When was your last eye exam?

Do you wear glasses or contacts? For what purpose?

Do you see clearly (with glasses if nec,)?

- Yes - near and far Yes - distance, need reading glasses No - need glasses

Are you sensitive to light / glare?

- No Yes

Have you been diagnosed with glaucoma?

- Yes No

Retinal condition (retinopathy, detached)?

- No Yes

If yes, describe retinal condition.

Cataracts?

- No Yes, but not operated Yes, operated

Do you see well at night?

- No Yes

Do you have limitations in your visual awareness?

- No Yes

Describe pattern of visual loss

Do you have neuropathy? Altered sensation, numbness, tingling or pain in feet or hands?

No Yes

Driving License: State, Type, Restrictions, Expiration date

Are you driving currently?

No Yes

Highest annual mileage (approximate)

Describe where and when you drive.

Has your driving changed and, if so, how? Are you confident in your ability to drive safely?

Crash / collision history - please give details

Moving violations (including automated tickets)

Prior driving evaluations?

Non-driving mobility

Public transit Rides with others For hire vehicles (taxi, Uber / Lyft) Bikes / micromobility

Family / others opinion of your driving

Your doctor's opinion of your driving

Anything else I should know?