## <u>Appendix 1</u> - Jefferson Parish Medical Authorization Form Medication Questionnaire

Re: _		S.S. Number a	nd/or Employee	ID#	_Date:	
Door	Doctor					

#### Dear Doctor:

The above employee is being evaluated to determine whether he/she meets the medical standards necessary to perform a Safety & Security Sensitive job for Jefferson Parish. There are 2 groups of Jefferson Parish employees who are designated Safety & Security Sensitive. Group I includes drivers that must have a CDL as mandated by the Federal Department of Transportation (DOT) Regulations. Group II includes all other employees that drive smaller vehicles and/or operate equipment or machinery; or employees who work in Juvenile Justice, Fire Protection, or Fleet Management and are covered by the Jefferson Parish Personnel Rules and Substance Use Policy.

### All of our Safety & Security Sensitive employees are required to get prior authorization from their personal physicians before using prescription medication at work.

This is especially important in the commercial driver, who is held to a higher standard because he/she may operate larger vehicles, passenger-carrying vehicles, or vehicles carrying hazardous materials. The commercial driver is also on the road more hours each day, exposing the public to a greater risk if the driver becomes impaired. Whenever possible, medications should be utilized that do not have potentially impairing side effects. It is important not only to review medication and its side effects but also the status of the underlying disease process.

#### **Group I Safety & Security Sensitive Employees**

The Federal Regulations that address the use of medications which may impair the safe operation of a commercial motor vehicle state:

A person is physically qualified to drive a commercial motor vehicle if that person:

- (i) Does not use a controlled substance identified in 21 CFR 1308.11 Schedule I; namely, an amphetamine, a narcotic, or any other habit-forming drug.
- (ii) An exception to (i) above is as follows: A driver or Safety & Security Sensitive employee may use such a substance or drug, if the substance or drug is prescribed by a licensed medical practitioner who:
  - (A) Is familiar with the driver's and/or Safety & Security Sensitive employee's medical history and assigned duties; and
  - (B) Has advised the driver and/or Safety & Security Sensitive employee that the prescribed substance or drug will not adversely affect the driver's ability to safely operate a commercial motor vehicle; and
  - (C) Has no current clinical diagnosis of alcoholism.

#### **Group II Safety & Security Sensitive Employees**

All Safety & Security Sensitive employees must have the perceptual skills to monitor a sometimes complex driving situation and the judgment skills to make quick decisions. There is increasing recognition that both prescription and nonprescription medications can impair the performance of tasks requiring concentration, such as driving, operating equipment or machinery, or making decisions about the safety and welfare of other employees and/or the public. Certain classes of medications, including benzodiazepines, anxiolytics, narcotics, some nonnarcotic analgesics, sedating antihistamines, and sedatives, can impair performance on tasks such as driving or operating equipment and/or machinery to as great a degree as alcohol. Similar to alcohol, the individual using these medications may not be aware that he/she is impaired, and therefore, may not be able to adequately assess his/her ability to perform

safely. It is important to consider potential side effects, such as sedation or dizziness, especially when the medication carries a precaution such as "do not drive or operate machinery." This precaution is found with both prescription and over-the-counter medications.

Below is some additional information to consider when prescribing prescription medication to Safety & Security Sensitive employees.

The Federal Highway Administration has sponsored several conferences to address medical conditions and commercial driving. In the conference on Psychiatric Disorders and the Commercial Driver, participants recommended that:

- Individuals requiring anxiolytic medications should be precluded from commercial driving. This recommendation would not apply to patients treated effectively with nonsedating anxiolytics, such as buspirone.
- Individuals requiring hypnotics should only use drugs with half-lives of less than 5 hours for less than 2 weeks under medical supervision and only at the lowest effective dose.
- Some antidepressants produce impairment that can be mitigated over time but not
  completely removed with chronic use. Individuals on antidepressants that may interfere
  with performance should not be allowed to drive commercial vehicles. Amitriptyline
  was specifically mentioned as an antidepressant to be avoided due to its sedating
  effects.
- Given strong evidence of impaired psychomotor performance associated with the use of all antipsychotic drugs, drivers should only be qualified after the effects of the illness and the neuroleptic have been reviewed by a psychiatrist familiar with the regulations and safety risks associated with medications and commercial driving.
- Lithium, in a stable, chronic dose and plasma level, is permissible for regularly monitored asymptomatic drivers.
- CNS stimulants in therapeutic doses impair driving by a variety of mechanisms. A person using these drugs should not be medically qualified to drive commercially. Legitimate medical use (ADHD, for example) with no demonstrable impairment or dosage escalation tendency may receive an exemption after expert review.

Directions: This form should be completed by employee's physician and can be hand delivered or faxed to West Jefferson Industrial Medicine, ATTN: Dr. Brian Bourgeois, 107 Wall Blvd., Suite A, Gretna, LA 70056

Phone#: (504) 433-5070 Fax#: (504) 453-5077

#### **Employee's Physician Certification**

Please provide information for the following Jefferson Parish employee:					
En	nployee/Patient Name:	Employee ID# and/or SS#:			
En	nployee Date of Birth:	Department:			
1.	How long have you been treating this pat	ient?			
2.	Please list medications, dosage, and durat	ion of treatment at the current dose.			
3.	Have there been any side effects such as s  Yes No	sedation or decreased concentration?			
4.	Yes No	ly interfere with safe operation of a commercial motor vehicle?  mer alternate medications have been considered:			
5.		treated for with these medications likely to affect his ability to			
	Are these conditions likely to interfere wivehicles, equipment, or machinery? Yes	th the safe operation of a commercial motor vehicle and/or other  No			
6.	performing other Safety & Security Sensiti and conference report recommendations, of	nents of operating a commercial motor vehicle (CMV) and/or tive duties, and after reviewing the included federal regulations do you believe your patient can safely operate a CMV or operate or otherwise perform his/her Safety & Security Sensitive duties and ting the medications? Yes No			
		Physician Information			
	Physician Name:	Signature:			
	(Print and/or Stamp) Phone #:	Date:			

# Employee Release of Communication Consent to Release Medical Information

I hereby authorize	, M.D.	to furnish medical information					
concerning		(employee name & ID) to <b>Dr.</b>					
	gnee @ West Jefferson Industrial N						
	6. I also authorize communication b						
and my medical provider(s) via telephone/fax should there be any questions or concerns regarding my medical information. I understand that the information provided to Dr. Brian Bourgeois and/or his designee will only be used to assist in determining that I can safely perform my daily job duties. This							
	erson Parish Officials through App	pendix 5 of the Jefferson Parish					
Substance Use Policy Manual.							
your protected health information. physical and/or mental health. All infile from your general medical file. T		able information that relates to your cal provider will be kept in a separate ed security. The medical information					
Employee's Name (Print)	Employee's Signature/ Date						
Employee ID # and/or SS# E	mployee's Phone						
Medical Provider's Name (Print)	Medical Provider's Signature	Date					
	Please affix Prescription here						
	riease armx rrescription here						
	<u>+</u>						
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Any adverse effects from either taking or not taking prescription and/or over-the-counter medication is not the responsibility of Jefferson Parish, Jefferson Parish's Appointed and Elected Officials, Supervisors, Human Resource Managers, Substance Use Program Manager, and/or the Jefferson Parish Physician(s). Jefferson Parish's Appointed and Elected Officials, Supervisors, Human Resource Managers, Substance Use Program Manager, and/or the Jefferson Parish Physician(s) do not assume any responsibility for any adverse effects that an employee may have from either taking or not taking prescription and/or over-the-counter medications.