

Appendix 1
Jefferson Parish Medical Authorization Form
MEDICATION QUESTIONNAIRE

Re: _____ S.S. Number and/or Employee ID # _____ Date: _____

Dear Doctor:

The above employee is being evaluated to determine whether he/she meets the medical standards necessary to perform a safety sensitive job for Jefferson Parish. We have 2 groups of employees who are safety sensitive. Group I includes drivers that need a CDL mandated by the Federal Department of Transportation Regulations. Group II includes all other employees that drive smaller vehicles and/or operate equipment or machinery or employees that work in Juvenile Justice or Fire Protection or Fleet Management and are covered by the Jefferson Parish Personnel Rules and Substance Abuse Policy.

All of our safety sensitive employees are required to get prior authorization from their personal physicians before using prescription medication at work.

This is especially relevant in the commercial driver who is held to a higher standard because they may operate larger vehicles, passenger-carrying vehicles, or vehicles carrying hazardous materials. The commercial driver also is 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 potential impairing side effects. It is important not only to review the medication and its side effects, but also the status of the underlying disease process.

Group I Safety 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, an amphetamine, a narcotic, or any other habit-forming drug.
- (ii) Exception. A driver or safety 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 sensitive employee's medical history and assigned duties; and
 - (B) Has advised the driver and/or safety 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 Sensitive Employees

All safety 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 or operating equipment or machinery or making decisions about the safety and welfare of other employees or the public. Certain classes of medications, including benzodiazepines, anxiolytics, narcotics, and 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 they are impaired and therefore may not be able to adequately assess their 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 “not to drive or operate machinery”. This precaution is found with both prescription and over-the-counter medications.

Additional information to consider when considering prescribing prescription medication to safety 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 do 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 c/o Dr. Bourgeois, 107 Wall Blvd., Suite A, Gretna, LA 70056
Phone#: (504) 433-5070/Fax#: (504) 433-5077*

Employee Physician Certification

Provide the following information:

Employee/Patient Name: _____ *Employee ID# and/or SS#:* _____

Employee Date of Birth: _____ *Department:* _____

1. How long have you been treating this patient?

2. Please list medications, dosage, and duration of treatment at the current dose.

3. Have there been any side effects such as sedation or decreased concentration?

Yes No

If so, please explain _____

4. Will use of this (these) medication(s) likely interfere with safe operation of a commercial motor vehicle?

Yes No

If so, please explain and discuss whether alternate medications have been considered:

5. Is the condition(s) that the patient is being treated for with these medications likely to affect his ability to perform his job in a safe manner? _____

Are these conditions likely to interfere with the safe operation of a commercial motor vehicle and/or other vehicles, equipment, or machinery? Yes No

6. Considering the complex mental requirements of operating a commercial motor vehicle (CMV) and/or performing other safety sensitive duties, and after reviewing the included federal regulations and conference report recommendation, do you believe your patient can safely operate a CMV or operate other vehicles, machinery or equipment, or otherwise perform his/her safety sensitive duties and responsibilities in a safe manner while taking the medications?

Yes No

Additional Comments: _____

Physician Information

Physician Name: _____ Signature: _____

(Print and/or Stamp)

Phone #: _____

Date: _____

Employee Release of Communication
CONSENT TO RELEASE OF MEDICAL INFORMATION

I hereby authorize _____, M.D. to furnish medical information concerning _____ (employee name & id) to Dr. Brian Bourgeois and/or his designee @ West Jefferson Industrial Medicine Center, 107 Wall Blvd., Suite A, Gretna, Louisiana 70056. I also authorize communication between the above named doctors 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 Dr. Andrew Mayer will be only used to assist in determining that I can safely perform my daily job duties. This decision will be released to Jefferson Parish Official through Appendix 5 of the Jefferson Parish Substance Use Policy Manual.

I (Dr. Bourgeois) am required by law to maintain the privacy of your protected health information. This information included any identifiable information that related to your physical and/or mental health. All information provided by you or your medical provider will be kept in a separate file from your general medical file. This information will remain under locked security. The medical information received from your medical provider(s) will only be released in response to a court subpoena or administrative order as mandated by Federal, State or Local Law.

I have read and understand the above information.

Employee's Name (Print)	Employee's Signature/ Date	Employee ID # and/or SS#:
Medical Provider's Name (Print)	Medical Provider's Signature	Date

Please affix Prescription here



Disclaimer:

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 Abuse Program Manager, and/or the Jefferson Parish Physician(s). Jefferson Parish's Appointed and Elected Officials, Supervisors, Human Resource Managers, Substance Abuse 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.