

6.0 ARTERIAL ANEURYSM

An arterial aneurysm is potentially dangerous if it is expanding and there is a possibility of a sudden rupture or if it contains a thrombus that may throw off emboli. A patient with an aortic aneurysm should have the benefit of the opinion of a vascular surgeon and the physician, when completing the Driver's Medical Examination Report for the Office of the Superintendent of Motor Vehicles, should provide an estimate of the size of the aneurysm. Ongoing review of the patient is required and at the present time it seems to be generally accepted that an aneurysm that is larger than 6.5 cm in a class 5-8 driver and 5.5 cm in a Class 1-4 driver should be treated by surgery in order for the patient to be licensed to drive. When there has been satisfactory recovery following surgery the patient may drive any type of vehicle, assuming that no other medical conditions exists.

A symptomatic cerebral aneurysm that has not been surgically repaired is an absolute barrier to driving any class of motor vehicle. Following successful treatment the individual may drive a class 5 vehicle after a period of three months and be eligible to drive commercial vehicles after being symptom free for six months.

6.1 PERIPHERAL ARTERIAL VASCULAR DISEASES

Reynaud's Disease, Buerger's Disease and Arteriosclerotic Occlusions, if of sufficient severity to cause claudication, may preclude driving and always requires careful evaluation and regular ongoing surveillance.

6.2 DISEASES OF THE VEINS

Patients with deep venous thrombosis, with or without evidence of infection, should not drive because of the danger of embolization and pulmonary infarction. Following appropriate treatment with an anticoagulant and with approval of the patient's physician any type of motor vehicle may be driven.