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Look who's driving now—Visual standards for driver licensing in the United States

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Abstract
The current visual standards for driver licensing of the general population in all 50 states and the District of Columbia are described. Minimum visual acuity standards range from 20/40 (73%) to vision less than 20/200 (Washington). The majority of states (92%) offer some type of restricted license which provide an opportunity for low vision drivers to keep their independence while at the same time affording society a high level of safety in the driving system. Tips for the ophthalmic nurse are provided.

Last fall, Newsweek magazine quoted a 73 year old man who drove a riding lawn mower 240 miles across Iowa to visit his sick brother. He explained his action by saying, "I can't drive cars anymore because if I get going past 20 mph, I can't even read the road signs." (Newsweek, 1994).

A week later, an Associated Press news release described an account of a legally blind woman from Annapolis, MD who was driving her children to school in a golf cart. The police officer ticketing the woman said, "It wasn't just the fact [she] was driving a golf cart ... but the various complaints from people over the last year were about the reckless way she drives [the cart]." (The Daily Iowan, 1994).

These humorous but poignant examples concerning driving with poor vision illustrate how very dependent our society has become on automobiles—the principal mode of transportation in the United States. It's interesting to note that in 1900 there were only 8000 motor vehicles in this country (Foster, 1983). At that time, the population wondered who would ever be able to learn to drive them. However, just twenty years later, the number of motor vehicles would grow to over 8 million (Foster, 1983). By 1992, the number of licensed drivers has mushroomed to over 173 million people (United States Bureau of the Census, 1994). In America, driving a car is not only a necessity but considered by most, an inviolable right (Lichter, 1989), a symbol of our freedom and independence (Odenheimer, 1993).

Visual function and driving ability
Vision is essential for safe driving. It is responsible for an estimated 90% of the total information input to the driver (Hills, 1980). A motor vehicle is operated in a visually cluttered environment. Primary and secondary visual demands as well as concurrent use of both central and peripheral vision make driving a highly complex behavior (Owsley & Ball, 1993).

Hills (1980) reported that often drivers are functioning at or near their visual limits while operating a motor vehicle. Due to the limitation in the small size of sharp central visual acuity and the swift rate of decreasing acuity toward the periphery, humans are by evolution, ill-equipped to drive. Mourant and Rockwell (1970) found the average driver capable of only three eye movements per second. So, being able to anticipate where to look and when is critical to safe driving.

In addition to visual acuity, other aspects of visual function such as field of vision, color vision, night vision, depth perception, glare recovery, and focusing ability are all important in the skill of driving (Colsher & Wallace, 1993). For example, a driver needs to be able to detect merging traffic from the periphery, distinguish the red, green, and yellow colors of traffic signals and road signs, and be able to judge the rate of oncoming traffic. Also, the driver must be able to quickly regain dark adaptation after on-coming headlight glare and be proficient at changing focus from the dashboard to the roadway and outside environment at a rapid pace.
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**Decreased vision**

Decreased vision is most common in the elderly population. Visual problems experienced by older drivers were reported in a survey conducted by Kline, et al., (1992). The most common complaints were difficulty seeing with glare or haze on the windshield, problems judging the speeds of their own and oncoming vehicles, being surprised by other vehicles in their peripheral vision or when merging, and trouble reading signs in enough time to react to them.

**Responsibilities for the ophthalmic nurse**

Know the visual standards and regulations for your own and surrounding states. Counsel, advise, be a patient advocate, educate. Often just hearing the rules from a person of authority makes a lasting impression.

Collect a driving history. Allow patients to complete a self-administered questionnaire, then check reliability with a close family member. If patients sense their privilege to drive may be threatened, honest answers may not be recorded. With the loss of driving privileges, patients lose independence, feel isolated, or believe they will become a burden to those taking care of them.

Keep state driver license forms in your office. Many elderly patients may see well enough to pass the visual requirements but become apprehensive, nervous and unable to perform in the DOT station. Having a completed form to take with them for license renewal will ease their fears and give them confidence.

Point out that visual requirements are not definitive. Cognitive and motor capacity together with sensory abilities play an important role in the skill of driving. All three go hand in hand, a deficit in one area alone may technically pass the test but a deficit in two or more areas of ability can accumulate to create a patient who may not be a candidate for a license to drive.

Educate the patient about individual visual handicaps and impairments. Better informed patients with vision problems might voluntarily self-impose restrictions in their driving behavior thus reducing their crash risk (Owsley & Ball, 1993).

This information concurs with the findings of Keltner and Johnson (1987) who examined the types of accidents involving the elderly, state by state. Typically, the accidents included failure to yield the right-of-way, oncoming traffic collisions, trouble involving intersections and traffic signs, and accidents due to inattention. These types of accidents could most likely be due to visual field deficits, for which, the elderly population is at a greater risk and often unaware of the problem (Keltner & Johnson, 1987). Currently, only 33 states (65%) require visual field testing. Refer to individual state standards listing, Appendix A.

**Visual acuity**

Since most states (73%) use 20/40 as the minimum visual acuity standard, the Department of Transportation’s (DOT) Bureau of Public Roads and the National Committee on Sign, Signals and Markings have standardized freeway control signs (Keeney, 1976). Using the 20/40 guideline, highway engineers design roadway and traffic signs with the intention that a driver with a vision of at least 20/40, while driving at an average speed under normal weather, road and vehicle conditions, would have enough time to see and interpret the signs, react and follow its instructions (Low Vision Committee of the American Academy of Ophthalmology, 1994).

If a driver is unable to reach a visual acuity of 20/40, it could be indicative of some type of ocular pathology (Keeney, 1993). In addition to protecting our society by ensuring a safer driving system, vision screening by driver licensing agencies can provide timely detection of early pathology. By referring an applicant to an eye care specialist at this point, otherwise unnoticed visual impairments and ocular disease could thereby be treated and possibly cured.

In 1994, the American Academy of Ophthalmology (AAO) outlined the capabilities required in the complex task of driving.

- **Sensory**—driver must recognize through vision and hearing, multiple changes at once in an environment that is constantly being altered.
- **Mental**—driver must rapidly discern incoming information from the environment and formulate appropriate decisions for a response.
- **Motor**—driver must act upon these decisions then respond by operating the motor vehicle accordingly.
- **Compensatory factors**—drivers must compensate for loss in any one or combination of the previously described areas (Low Vision Committee of the AAO, 1994).

**Other factors**

Many of the patients seen in ophthalmology are elderly. Age causes a general slowing of behavior. It takes longer to obtain information, process it, and follow through with a response. Traffic engineers use the term driver perception-reaction time (PRT) to describe this
DRIVING HISTORY

1. Are you currently driving a car? _____ Yes _____ No
2. How many times a week do you drive? __________
3. Have you changed your driving patterns recently? _____ Yes _____ No
   If yes, how? (Check all that apply)
   a. Do you have difficulty driving at night
   b. Do you have trouble seeing the instrument panel on the dashboard at night because it is too dim?
   c. Are you able to drive in inclement weather such as rain or fog?
   d. Do you have your driving to avoid rush hour?
   e. Do you limit your driving to avoid freeways?
   f. Do you limit your driving to only areas in which you are familiar?
   g. Do you drive only when someone else is with you?
   h. Are you uncomfortable driving with passengers?
   i. Do you drive only when it is absolutely necessary (e.g., to the grocery store, bank or work)?
4. Do you have trouble reading traffic, road and street signs because they move by so quickly and you can’t read them in time? _____ Yes _____ No
5. When you are looking straight ahead, do objects, vehicles, or pedestrians come into your peripheral vision suddenly? _____ Yes _____ No
6. Have you experienced any accidents or “near-misses” while driving in the past year? _____ Yes _____ No
7. Do you have any of the following problems with your general health?
   a. Vision or visual field loss
   b. Hearing loss
   c. Memory problems
   d. Parkinson's disease
   e. Arthritis, what joints?
   f. Heart disease
   g. Diabetes
   h. Falling/blackouts
   i. Stroke
8. List all medications (both prescription and over-the-counter) you are using?
<table>
<thead>
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<th>Drug Name</th>
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<th>How often it is taken</th>
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Compiled from the following references:

Figure 1

check motion when changing lanes of traffic), elbows and wrists (turning the steering wheel), hips, knees, and ankle joints (using the brake and/or manual transmission clutch pedals) (Colsher & Wallace, 1993).

Driving history and limitations
Driving histories may point out medications, motor handicaps, as well as visual disturbances. Periodically, a driving history for driving performance should be collected. See Figure 1. This self-administered questionnaire, or something similar, might prove to be the

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To provide patients with information on AAA, and NSC and to supply pamphlets from the AOTA on safe driving skills, contact the individual associations at the following addresses.

American Association of Retired Persons (AARP)
601 E Street, NW
Washington, DC 20049
(202) 434-2277

American Automobile Association
(AAA)
1000 AAA Drive
Heathrow, FL 32746-5063
(407) 444-7000

American Occupational Therapy Association (AOTA)
1383 Piccard Drive
PO Box 1725
Rockville, MD 20849-1725
(301) 948-9626

quickest solution to evaluate your patient's driving needs, concerns and abilities. Remember, patients may be hesitant to provide factual answers if they perceive their driving privileges may be threatened. It is always a good idea to check with family members to ensure accuracy.

It is important for eye care specialists to recognize and evaluate driver limitations (Keeney, 1976). Often, eye care specialists follow their patients for a number of years and become familiar with their capabilities other then visual function alone. They must initiate and perform basic visual evaluations that will certify visual competence. Licenses are not granted, restricted, or denied by the eye care specialist, that is the final responsibility of the driver licensing authority (Keeney, 1993). But they do have a professional duty to warn patients whose vision may hinder safe driving.

If physicians fail to warn patients, family members, or the public about an impaired driver, the courts, with increasing frequency, are finding them liable (Retchin & Anapolle, 1993). Their function should be that of assisting patients to obtain a license whose visual acuity limitations might be safe for driving under certain conditions, and preventing those whose vision is jeopardous from acquiring a license (Lichter, 1989).

Comparisons
It's been hard to find a strong correlation between motor vehicle crashes and poor vision (Bell, Owsley, Sloane, Roenker, & Bruni, 1993). This is possibly due to the fact that people with poor vision tend to modify their driving patterns by avoiding driving at night, on express ways, during rush hour traffic, or in challenging roadway conditions (Owsley & Ball, 1993).

When age groups are broken down to compare the rate of motor vehicle crashes and number of miles are taken into account, a U-shaped distribution is formed with teens and elderly at each end and 40 year olds in the center. Elderly drivers drive 30-50% fewer miles than younger drivers (Retchin & Anapolle, 1993). Taking fewer risks, they drive slower, over shorter distances, less at night, and avoid challenging driving situations such as adverse weather and rush hour traffic areas. But statistically, for the elderly population up to age 78, the leading cause of accidental death is due to motor vehicle crashes (MVC). After age 79, MVC are second only to falls (National Safety Council: Accident Facts, 1989).

Functional ability and performance
It should be emphasized that age-related changes in performance occur differently for each individual. Limitation and restrictions should be based on functional abilities and driving performance, not age or vision requirements (Keltner & Johnson, 1992). For example, in Washington, it can be acceptable to drive with a vision worse than 20/200. Take for instance, an applicant born with congenital cataracts that has only 20/200 vision. If during a special examination they are able to demonstrate acceptable driving ability, a license will be issued. And it could be issued with restrictions, if the applicant proves they are capable to drive without them.

Fonda (1989) concluded that some legally blind (20/200) people with a peripheral field of 120° can drive safely in the daylight hours while under 40 mph. However, this study used stationary sign recognition in determining ability to see well enough to drive safely. Would this vision permit the driver to spot the sudden darting of a child into the street? It's being prepared to deal with the unexpected that creates a safe driver. Is 20/200 vision good enough for that? That's something only a road test with an examiner can prove.

States differ
This highlights the need for states to offer restricted or graduated licenses based on capabilities, "because all 20/200 vision is not the same" (Lichter, 1989). Most states (73%) require a minimum of 20/40 vision to obtain a license with full driving privileges. However, 10 states will issue an unrestricted license with vision less than that with visual acuity ranging from 20/50 to 20/70. See Table I.

Restrictions or limitations on driving have a wide range from state to state. The most com-
mon restricted license recognizes a minimum visual acuity of 20/70 (27%), followed by 20/100 (18%). See Table II. Ordinarily, restrictions include some or part of the following limitations: time of day, specific area and speed, use of outside rearview mirrors, and type of road and vehicle driven. Seventeen states (33%) allow bioptic/telescopic lenses in driver licensing. Only four states (Hawaii, New Jersey, Rhode Island and Vermont) do not recognize a restricted drivers license. Refer to individual state standards listing, Appendix A.

Retraining

It may be helpful for your patients to have information available in your office for contacting driver retraining programs. Many older drivers have been driving for over 50 years and may never have had a driving lesson. They may be unfamiliar with new road and safety rules. Following my 77 year old grandmother while merging from an interstate on-ramp is a perfect illustration.

While looking back over my left shoulder, I accelerated to join the flow of traffic on the interstate, only to look in front of me—just in the nick of time—to avoid rear-ending her. She had come to a complete stop at the top of the on-ramp, and I'm sure, was unaware that she had done anything wrong. She is a cautious driver, however, a retraining program was just what she needed to remain safe on the current roadway system. There are several refresher courses available to offer your patients.

The American Association of Retired Persons (AARP) sponsors a two part, four hour session called “55 Alive/Mature Driving Program.” The National Safety Council (NSC) offers two types of courses, both called “Defensive Driving Course Program.” One course is a four hour session, the other is an eight hour session which qualifies drivers for a reduction on their auto insurance. Also, the American Automobile Association (AAA) sponsors a continuing education program called “Safe Driving for Mature Operators Program” which tests drivers for night vision, glare conditions, and reaction time (Hunt, 1993).

The pamphlet, “Able Driving is Safe Driving,” published by the American Occupational Therapy Association (AOTA) would also be handy to have available in your office to provide information on how driving skills may be affected by aging or illness (Hunt, 1993).

If you have any questions concerning the visual standards for driver licensing in your state, contact the individual state’s Department of Transportation (DOT). A complete listing of addresses and phone numbers can be found in Appendix B.

<table>
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Table I. States Issuing Full Driving Privileges with Vision Less than 20/40

References


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Bibliography


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Table II. States Issuing Restricted Licenses Showing Most Lenient Visual Standards

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Appendix A - Driver's License Visual Standards

**ALABAMA**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in at least one eye
- Vision better than 20/50 OU or in the better eye, with/without corrective lenses
- No telescopic lenses are recognized.
- Board can restrict to daylight driving, 25 mile radius from home. A good driving record for the previous three years. Specific restrictions of daylight driving or outside rearview mirrors may be placed as recommended by an eye care specialist.

**Visual Acuity - Restricted:**
- Graduated licenses are offered which contain one or more of the following limitations:
  - a) Daylight driving only = 1/2 hr before sunrise, 1/2 hr after sunset.
  - b) Daylight driving only, no telescopic lenses.
  - c) Daylight driving only, no telescopic lenses, no outside rearview mirrors required for hearing aid.
- If one eye is worse than 20/200 or blind, the other eye must be 20/40 or better, with/without corrective lenses. Applicant must have the 140° binocular and 70° temporal/35° nasal visual field requirements with telescopic lenses in place.

**ARKANSAS**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses. Applicant must pass all driving tests. Applicant must demonstrate compensation for low vision with special driving test while wearing the telescopic lenses.

**Visual Acuity - Restricted:**
- Graduated licenses are offered which contain one or more of the following limitations:
  - a) Daylight driving only = 1/2 hr before sunrise, 1/2 hr after sunset.
  - b) Daylight driving only, no telescopic lenses.
  - c) Daylight driving only, no telescopic lenses, no outside rearview mirrors required for hearing aid.
- If one eye is worse than 20/200 or blind, the other eye must be 20/40 or better, with/without corrective lenses. Applicant must have the 140° binocular and 70° temporal/35° nasal visual field requirements with telescopic lenses in place.

**CALIFORNIA**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in at least one eye, with/without corrective lenses
- At least 200 ft. to the rear.
- 140° horizontal binocular vision or 120° monocular vision.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist. There is no law, only a recommended policy, that could be followed.

**Visual Acuity - Restricted:**
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are recognized.

**COLORADO**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in at least one eye.
- Vision better than 20/50 in one eye, with/without corrective lenses, including biopic lenses.
- 140° horizontal in one eye or 120° monocular visual field.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist. There is no law, only a recommended policy, that could be followed.

**Visual Acuity - Restricted:**
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are recognized.

**CONNECTICUT**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in at least one eye.
- Vision better than 20/50 in one eye, with/without corrective lenses.
- 140° horizontal binocular vision or 120° monocular vision.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist. There is no law, only a recommended policy, that could be followed.

**Visual Acuity - Restricted:**
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**DISTRICT OF COLUMBIA**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- 140° horizontal binocular vision or 120° monocular vision.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**DULWARE**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- 140° horizontal binocular vision or 120° monocular vision.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**FLORIDA**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- At least 200 ft. to the rear.
- 140° horizontal in one eye or 120° monocular visual field.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are recognized.

**GEORGIA**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses, including biopic lenses.
- 140° horizontal in one eye or 120° monocular visual field.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**HAWAII**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- 140° horizontal binocular vision, 70° for monocular.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**IDAHO**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- 140° horizontal in one eye or 120° monocular visual field.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**ILLINOIS**

**VISUAL FIELD:**

- Visual acuity - Full Driving Privileges:
  - 20/40 in one eye with/without corrective lenses.
  - 140° horizontal binocular vision or 120° monocular vision.

**INDIANA**

**Visual Acuity - Full Driving Privileges:**
- 20/30 in one eye and 20/100 through blind in the other eye.
- Vision worse than 20/200 or blind in both eyes, outside mirrors required for hearing aid.
- 20/50 OU or in the better eye, with/without corrective lenses.

**Visual Acuity - Restricted:**
- 20/30 in one eye and 20/100 through blind in the other eye.
- Vision worse than 20/200 or blind in both eyes, outside mirrors required for hearing aid.
- 20/50 OU or in the better eye, with/without corrective lenses.

**IOWA**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- No telescopic lenses are recognized.
- At least 200 ft. to the rear.
- 140° horizontal in one eye or 120° monocular visual field.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**KANSAS**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- 140° horizontal binocular vision, 70° for monocular.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**KENTUCKY**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- At least 200 ft. to the rear.
- 140° horizontal binocular vision, 70° for monocular.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**LOUISIANA**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- 140° horizontal binocular vision, 70° for monocular.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**MAINE**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- 140° horizontal binocular vision, 70° for monocular.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**MASSACHUSETTS**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- 140° horizontal binocular vision, 70° for monocular.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.

**MINNESOTA**

**Visual Acuity - Full Driving Privileges:**
- 20/40 in one eye with/without corrective lenses.
- 140° horizontal binocular vision, 70° for monocular.
- Restrictions of daylight driving, no express way driving, and/or right and left outside rearview mirrors are placed depending on recommendation of eye care specialist.
- No telescopic lenses are not permitted.
Visual Field:

- **Visual Acuity - Full Driving Privileges:**
  - 20/40 OU or in the better eye, with/without corrective lenses.

- **Visual Acuity - Restricted:**
  - 20/40 OU in one eye and blind in the other = unrestricted license.
  - 20/40 OU with/without corrective lenses = no license issued.

- **Visual Acuity - Restricted:**
  - 20/40 OU or in the better eye, with/without corrective lenses.

- **Visual Field:**
  - 140° horizontal (without the use of expanders in the case of telescopic lenses).
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**WASHINGTON**

Visual Acuity - Full Driving Privileges: 20/40 OU or in the better eye, with/without corrective lenses.

Visual Field: -110° horizontal visual field in one or both eyes.

Visual Field: -110° but >70° horizontal vision = daylight driving only.

Visual Field: -50° peripheral horizontal vision = daylight driving only.

Visual Acuity: 20/20; the test must be performed in one eye or better eye = daylight driving only.

Biopic telescopic lenses acceptable with special visual requirements. Recommendations from eye care specialists will be evaluated by the medical review department to determine if licenses is issued.

**SOUTH DAKOTA**

Visual Acuity - Full Driving Privileges: 20/40 OU or in the better eye with/without corrective lenses.

Visual Field: Not required.

Visual Acuity - Restricted: -20/20/60 OU with/without corrective lenses = daylight driving only.

>110° horizontal visual field in one or both eyes.

Telescopic lenses are not permitted.

**OHIO**

Visual Acuity - Full Driving Privileges: 20/40 OU or 20/30 monocular, with/without corrective lenses.

Visual Field: - At least 70° temporal in each eye = unrestricted license.

-70° temporal in both eyes, but at least 70° temporal and 45° nasal in the best eye (monocular vision) = right or left outside rearview mirror.

>70° nasal in the best eye (monocular vision) = recommended to eye care specialist for horizontal field test results.

Visual Acuity - Restricted: 20/30/20/60 OU with/without corrective lenses = daylight driving only.

20/20 or better vision with/without corrective lenses = daylight driving only.

20/40 OU or better vision with/without corrective lenses = daylight driving only.

20/50 OD and 20/100 OS = must have left outside rearview mirror if glasses are not worn or can just wear corrective lenses.

20/60 OU or in the better eye, with/without corrective lenses = daylight driving only.

20/40 OU or in the better eye, with/without corrective lenses = daylight driving only.

20/60 OU or in the better eye, with/without corrective lenses = daylight driving only.

20/40 OU or in the better eye, with/without corrective lenses = daylight driving only.

**OKLAHOMA**

Visual Acuity - Full Driving Privileges: 20/40 OU or 20/30 monocular, with/without corrective lenses.

Visual Field: - At least 70° temporal in each eye = unrestricted license.

-70° temporal in both eyes, but at least 70° temporal and 45° nasal in the best eye (monocular vision) = right or left outside rearview mirror.

>70° nasal in the best eye (monocular vision) = recommended to eye care specialist for horizontal field test results.

Visual Acuity - Restricted: 20/30/20/60 OU with/without corrective lenses = daylight driving only.

20/40 OU or better vision with/without corrective lenses = daylight driving only.

20/50 OD and 20/100 OS = must have left outside rearview mirror.

20/60 OU or in the better eye, with/without corrective lenses = daylight driving only.

20/40 OU or in the better eye, with/without corrective lenses = daylight driving only.

>110° horizontal visual field in one or both eyes.

Telescopic lenses are not permitted.

**OREGON**

Visual Acuity - Full Driving Privileges: 20/40 OU or in the better eye, with/without corrective lenses.

Visual Field: - 120° horizontal and 20° vertical.

- 90° total OU = no license issued.

- 120° horizontal.

- 180° vertical.

- 120° horizontal.

**PENNSYLVANIA**

Visual Acuity - Full Driving Privileges: 20/40 OU or in the better eye, with/without corrective lenses.

Visual Field: - 160° horizontal.

- 90° vertical.

- 90° total OU = no license issued.

- 170° horizontal.

- 180° vertical.

- 180° horizontal.

- 180° vertical.

- 120° horizontal.

- 120° vertical.

- 180° horizontal.

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Appendix B - Address Listing for Departments of Transportation

Alabama Department of Public Safety
Drivers License Division
500 Dexter Avenue
Montgomery, AL 36102-1471
(334) 242-4142

Alaska Department of Public Safety
Division of Motor Vehicles
Director's Office
570 Tudor Road
Anchorage, AK 99507
(907) 269-5551

Arizona Department of Transportation
Motor Vehicle Division - Medical Review Program
1801 W. Jefferson S12M
Phoenix, AZ 85007
(602) 255-7059

State of Arkansas
Department of Finance and Administration
Drivers License Issuance
7th & Wolf Room 126
Little Rock, AR 72203
(501) 682-7059

State of California
Department of Motor Vehicles
Public Inquiry Unit
P.O. Box 932345
Sacramento, CA 94232-3450
(916) 657-6560

State of Colorado
Department of Revenue - Driver License Division
140 West 6th Avenue Room 104
Denver, CO 80204
(303) 572-5630

State of Connecticut
Department of Motor Vehicles
Branch Operation Division
60 State Street
Wethersfield, CT 06109
(203) 566-3090

State of Delaware
Department of Public Safety
Division of Motor Vehicles
P.O. Box 698
Dover, DE 19903
(302) 739-4872

State of District of Columbia
Department of Motor Vehicles
301 C Street, N.W.
Washington, D.C. 20001
(202) 727-6693

State of Florida
Department of Highway Safety and Motor Vehicles
Vision Section - Room B260
Neil Kirkman Building
Tallahassee, FL 32399-0500
(904) 488-8982/(904) 488-9145

Georgia Department of Public Safety
Drivers License Department
P.O. Box 1456
Atlanta, GA 30371
(404) 624-7478

State of Hawaii
Driver Licenses Section
1580-B Kaahumanu Avenue
Wailuku, HI 96793
(808) 243-7766

Georgia Department of Public Safety
Drivers License Department
P.O. Box 1456
Atlanta, GA 30371
(404) 624-7478

State of Illinois
Secretary of State
2701 South Dirksen Parkway
Springfield, IL 62723
(217) 782-6612

State of Indiana
Bureau of Motor Vehicles
100 North Senate Avenue
Indianapolis, IN 46204
(317) 232-2899

Iowa Department of Transportation
Office of Driver Motor Vehicles
Park Fair Mall
100 Euclid Avenue
P.O. Box 9204
Des Moines, IA 50306-9204
(515) 237-3079

State of Kansas
Department of Revenue - Vehicle Director's Office
Topeka, KS 66626-0001
(913) 296-3601

State of Kentucky
Division of Driver Licensing
State Office Building
Frankfort, KY 40622
(502) 564-6800

Louisiana Department of Public Safety and Correction
Office of Motor Vehicles
P.O. Box 64886
Baton Rouge, LA 70896-4886
(504) 925-6335

State of Maine
Secretary of State
Bureau of Motor Vehicles
101 Hospital Street
Augusta, ME 04333
(207) 287-5446

State of Maryland
Motor Vehicle Administration
6601 Ritchie Highway, N.E.
Glen Burnie, MD 21062
(301) 729-4550

The Commonwealth of Massachusetts
Registry of Motor Vehicles - Medical Affairs
1135 Tremont Street
Boston, MA 02120
(617) 351-9222

Michigan Department of State
7064 Crowner Drive
Lansing, MI 48918
(517) 322-1166

State of Minnesota
Department of Public Safety
Driver and Vehicle Services Division
395 John Ireland Blvd.
Transportation Building
St. Paul, MN 55155
(651) 296-2001

Mississippi Department of Public Safety
Driver Services Bureau
P.O. Box 958
Jackson, MS 39205
(601) 987-1212

Missouri Department of Revenue
Drivers License Bureau
P.O. Box 200
Jefferson City, MO 65102-0200
(314) 751-2730

State of Montana
Department of Justice
Motor Vehicle Division
303 North Roberts
Helena, MT 59620-1419
(406) 444-3292

State of Nebraska
Department of Motor Vehicles
P.O. Box 49789 - State Office Building
Lincoln, NE 68509
(402) 471-3861

State of Nevada
New Hampshire Department of Safety
Division of Motor Vehicles
16 Hazen Drive
Concord, NH 03305
(603) 271-2371

State of New Hampshire
Division of Motor Vehicles
225 East State Street
Trenton, NJ 08696
(609) 292-6500

New Mexico Motor Vehicle Division
Driver Services Bureau
P.O. Box 1028
Santa Fe, NM 87504-1028
(505) 827-2241

State of New York
Department of Motor Vehicles Call Center
Swan Street, Room 310
Albany, NY 12228
(800) 225-5368

State of North Carolina
North Carolina Division of Motor Vehicles
Attn.: Drivers License Section
1100 New Bern Avenue
Raleigh, NC 27697
(919) 733-1032

North Dakota Department of Transportation
Drivers License and Traffic Safety Division
608 East Boulevard Avenue
Bismarck, ND 58505-0700
(701) 328-2600

Ohio Bureau of Motor Vehicles
4300 Kimberly Parkway
Columbus, OH 43266
(614) 752-7700

Oklahoma Department of Public Safety
Medical Desk of Driver Improvement
P.O. Box 11415
Oklahoma City, OK 73136-0145
(405) 423-2009

Oregon Department of Transportation
Motor Vehicle Division
Attn.: Drivers Safety Case Management
1905 Lapa Avenue N.E.
Salem, OR 97314
(503) 945-5086

Pennsylvania Department of Transportation
Bureau of Driver Licensing, Room 321
P.O. Box 68682
Harrisburg, PA 17106
(717) 783-6246

State of Rhode Island
Division of Motor Vehicles
License Division
286 Main Street
Pawtucket, RI 02860
(401) 277-2970

State of South Carolina
Department of Public Safety
Driver Improvement/ Classified License Program
P.O. Box 100178
Columbia, SC 29202-3178
(803) 737-1236

South Dakota Department of Commerce and Regulation
Drivers Licensing
118 West Capitol Avenue
Pierre, SD 57501
(605) 773-0883

State of Tennessee
Department of Safety
Attn.: Driver Improvement
1150 Foster Avenue
Nashville, TN 37210
(615) 251-5317

Texas Department of Public Safety
Drivers Licensing and Control Services
5805 S. Lamar Blvd.
Austin, TX 78773-0001
(512) 468-2086

Utah Driver License Division
P.O. Box 30560
Salt Lake City, UT 84130-0560
(801) 965-4437

State of Vermont
Agency of Transportation
Department of Motor Vehicles
120 State Street
Montpelier, VT 05603-0001
(802) 828-2000

Commonwealth of Virginia
Department of Motor Vehicles
P.O. Box 27412
Richmond, VA 23269-0001
(804) 367-0538

State of Washington
Department of Licensing
Highways Licensing Building #14
P.O. Box 9030
Olympia, WA 98507-9030
(360) 902-9900

State of West Virginia
Division of Motor Vehicles, Building 3
1800 Kanawha Boulevard East
Charleston, WV 25317
(304) 558-3556

Wisconsin Department of Transportation
Bureau of Driver Services
4802 Sheboygan Avenue, Room 351
P.O. Box 7920
Madison, WI 53707-7920
(608) 266-2237

Wyoming Department of Transportation
5300 Bishop Boulevard
P.O. Box 1708
Cheyenne, WY 82003-1708
(307) 777-4800 or (307) 777-4810

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