

10 ITEM - DEMENTIA AND DRIVING CHECKLIST

<p>1. Dementia type: <input type="checkbox"/> AD <input type="checkbox"/> VaD <input type="checkbox"/> FTD <input type="checkbox"/> LBD <input type="checkbox"/> Mixed AD/VaD Other: _____</p> <p>**LBD – generally unsafe due to hallucinations.</p> <p>** FTD – if associated with judgment and behaviour issues.</p>			
<p>Cognitive function: MOCA ____ or MMSE ____</p> <p>**MMSE and MOCA by evidence show sensitivity in detecting dementia and cognitive impairment, but were not validated to detect driving safety.</p> <p><i>Therefore no cut-offs are offered and other variables need to be used to support the results of these tests.</i></p>			
<p>2. Severity: <input type="checkbox"/> Very mild <input type="checkbox"/> Mild <input type="checkbox"/> Moderate <input type="checkbox"/> Severe</p> <p>** Consensus guidelines recommend that older adults with moderate to severe dementia not drive.</p> <p>ADL problems: <input type="checkbox"/> Feeding <input type="checkbox"/> Dressing <input type="checkbox"/> Bathing <input type="checkbox"/> Toileting <i>*If one or more are selected, it is unsafe for the patient to drive.</i></p> <p>IADL problems: <input type="checkbox"/> Shopping <input type="checkbox"/> Housework <input type="checkbox"/> Finances <input type="checkbox"/> Food <input type="checkbox"/> Telephone/tools</p> <p><i>*If two or more are selected, it is unsafe for the patient to drive.</i></p>			
	OK	A PROBLEM:	DECISION MAKING/INTERPRETATION
<p>3. Family concerns</p> <p>(Family should be questioned separately from the patient).</p>	<input type="checkbox"/>	<input type="checkbox"/> _____	<ul style="list-style-type: none"> - Keep in mind that most families tend to under-report; - Ask if the family has noticed a change in the patient's driving; - Ask about collisions, tickets, getting lost, confusing the gas and brake, traffic tickets, missing lights/signs, missing lane changes, irritability, need for support in emergencies; - Ask the granddaughter question: <i>"Do you feel it is safe for a 5 year old granddaughter to be alone in the car with this person?"</i>
<p>4. Visu-spatial ability</p>	<input type="checkbox"/>	<input type="checkbox"/> Pentagon <input type="checkbox"/> Clock <input type="checkbox"/> Other _____	-Use marks from the MMSE pentagon drawing or clock drawing test.
<p>5. Vision/visual field</p>	<input type="checkbox"/>	<input type="checkbox"/> _____	-Significant visual loss including problems with visual acuity or vision field.

The items above are 'killer- blowers'; if one or more are abnormal the person is unsafe to drive and there is no need to continue.

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6. Reaction time Ruler test (Use a 30 cm ruler x 3 trials).	<input type="checkbox"/>	<input type="checkbox"/> _____	Normal: 6 to 9 inches / 15 to 22cm Abnormal: 2 failed trials (A failed trial means that the score is bigger than 6 to 9 inches/15 to 22 cm). YouTube demonstration video: http://www.youtube.com/watch?v=yn6WRm6TiPk	
7. Judgment/insight	<input type="checkbox"/>	<input type="checkbox"/> _____	Questions to assess judgment: - What would you do if you were driving and saw a ball roll out on the street ahead of you? - With your diagnosis of dementia, do you think at some time you will need to stop driving?	
8. Trails A/B	<input type="checkbox"/>	<input type="checkbox"/> Trails A _____	Normal: score < 2 min or ≤ 1 error	Abnormal: score ≥ 2 min or ≥ 2 errors
		<input type="checkbox"/> Trails B _____	Normal: score ≤ 2 min or ≤ 2 errors	Abnormal: score ≥ 3 min or ≥ 3 errors
9. Drugs	<input type="checkbox"/>	<input type="checkbox"/> _____	Any drugs associated with slow reaction time, drowsiness, lack of focus. E.g: alcohol, benzodiazepines, narcotics, neuroleptics, sedatives, anticonvulsants, anticholinergics — antiparkinsonian drugs, muscle relaxants, tricyclic, antidepressants, antihistamine (OTC), antiemetics, antipruritics, antispasmodics Other medications: antidepressants, antipsychotics, antihistamines, antipruritics, antiparkinsonian, antispasmodics, antiemetics. Drugs that add to anticholinergic load: Flexeril, Lomotil, Rythmodan, Tagamet, Digoxin, Lasix.	
10. Other medical /physical/ red flags	<input type="checkbox"/>	<input type="checkbox"/> _____	Musculoskeletal problems: E.g: limited ability to turn neck, inability to use steering wheel or pedals, inability to feel gas or break pedal, weakness. Other medical problems: level of consciousness, cardiac/ neurological problems (episodic spells).. Red flags: delusions, disinhibition, hallucinations, impulsiveness.	

* Given the results of this checklist, would you get into a car with this person? Yes No Uncertain

*** This tool was created by Einat Danieli –OT.Reg. Ont – Psychogeriatric Resource Consultant In primary care TC-LHIN at Reitman Centre, Mount Sinai Hospital in partnership with the PRC Program of Toronto. The tool is based on the work of W.B. Dalziel, Dr. F Molnar and Byzsewski A. et. al. A special acknowledgment to Dr. W.B. Dalziel – Division of Geriatric Medicine, University of Ottawa and Dr. Mark Rapoport – Department of Psychiatry University of Toronto; Sunnybrook Health Centre, for their feedback and input in creating this tool. In addition the following resources were used in creating this tool: Byzsewski A. et. al. (2009). The Driving and Dementia Tool Kit 3rd Edition. The Champlain Dementia Network and the RGP of Eastern Ontario; Dalziel WB. (2011). A Practical Safe Driving Checklist. Alzheimer Knowledge Exchange. (October, 1, 2012) <http://www.akeresourcecentre.org> ; Molnar FJ. (2009). Practical Experience-Based Approaches to Assessing Fitness to Drive in Dementia. *Geriatrics & Aging*. V.12/2 . (pp. 83-92); Molnar FJ, Rapoport MJ. (2012). Dementia and Driving: Maximizing the Utility of In-Office Screening and Assessment tools. *CGS Journal of CME*.V.2/2 (pp. 11-14).