Peripheral arterial disease





✓ - May drive and need not notify the DVLA.

There must be no other disqualifying condition.





X - May drive but must notify the DVLA.



May be relicensed/licensed only if:

- There is no symptomatic myocardial ischemia, and
- The exercise or other functional test requirements can be met.

Hypertension

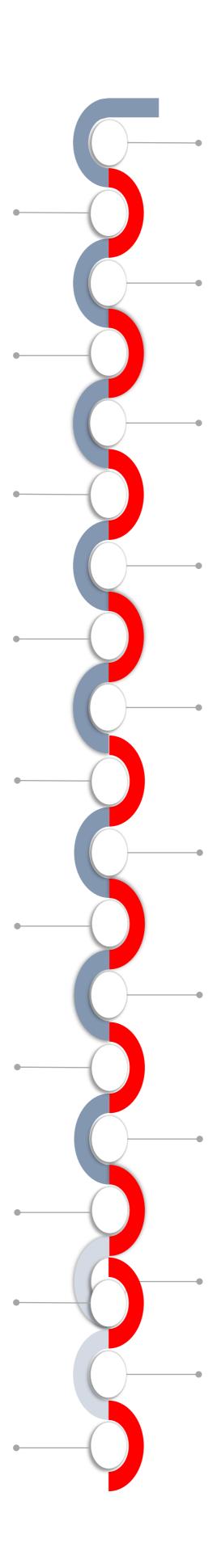


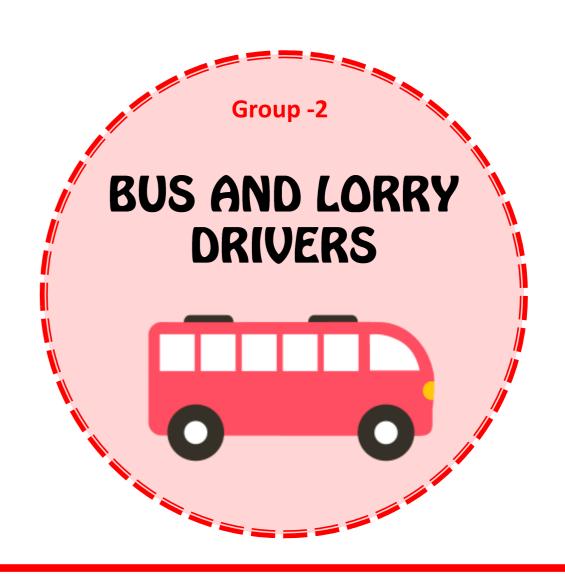


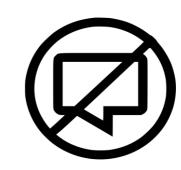
! - May drive and need not notify the DVLA, except:



X- Must not drive if diagnosed with malignant hypertension until condition has been effectively treated or controlled but need not notify DVLA. (Malignant hypertension: elevation in systolic blood pressure greater than or equal to 180 mmHg or diastolic blood pressure greater than or equal to 110 mmHg associated with evidence of progressive organ damage.)





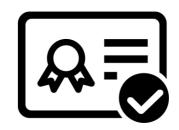


! - May drive and need not notify the DVLA, except:



X - Must not drive and must notify the DVLA if resting BP is consistently:

- 180 mm Hg or higher systolic and/or
- 100 mm Hg or more diastolic
- or if diagnosed with malignant hypertension.



May be relicensed/licensed after BP is controlled, provided there are no side-effects from treatment that affect or are likely to affect safe driving.

Cardiomyopathies

Note: the DVLA bars Group 2 bus and lorry licensing when left ventricular ejection fraction is less than 40%.

Also refer to the following sections in this document:

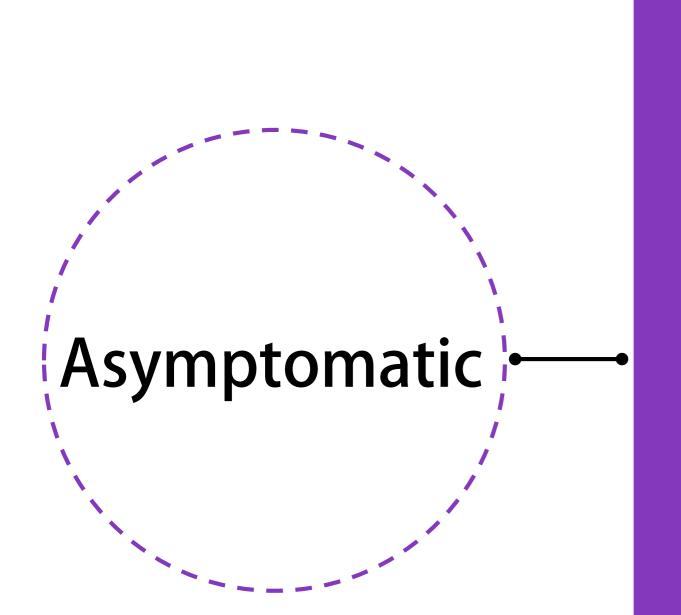
- arrhythmia
- pacemaker implant
- implantable cardioverter defibrillator

the European Society of Cardiology HCM Risk of Sudden Cardiac Death Calculator





Hypertrophic cardiomyopathy (HCM)





√- Must drive and need not to notify the DVLA.

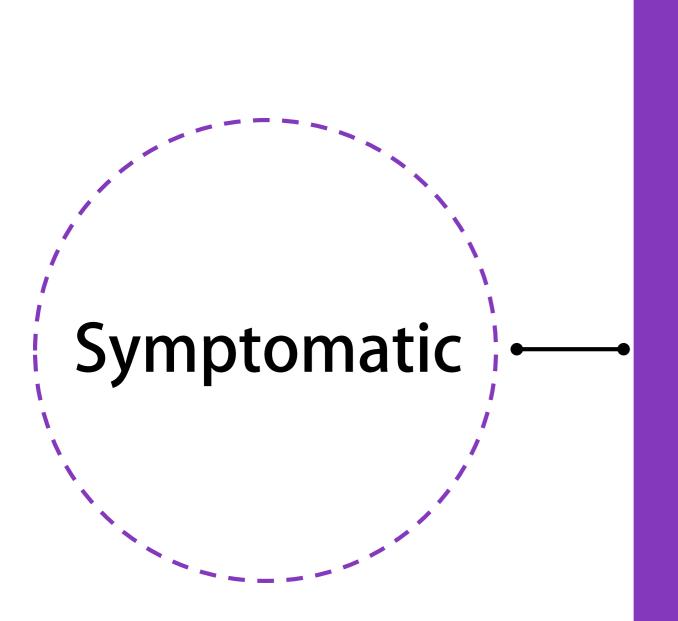
There must be no other disqualifying condition.



X - Must not drive and must notify the DVLA.



Must not drive if in the High Risk group (as per ESC HCM Risk-SCD calculator - see Appendix C for details) and/or if ICD is indicated/implanted. Licence will be refused/revoked. If in the Low Risk or Intermediate Risk group licensing will be permitted if the exercise tolerance test requirements are met with at least a 25mm Hg increase in systolic blood pressure during exercise testing (testing to be repeated every 3 years) (see Appendix C for details).





√- May drive and need not notify the DVLA.

There must be no other disqualifying condition (must meet all other relevant standards, eg angina, arrhythmia).



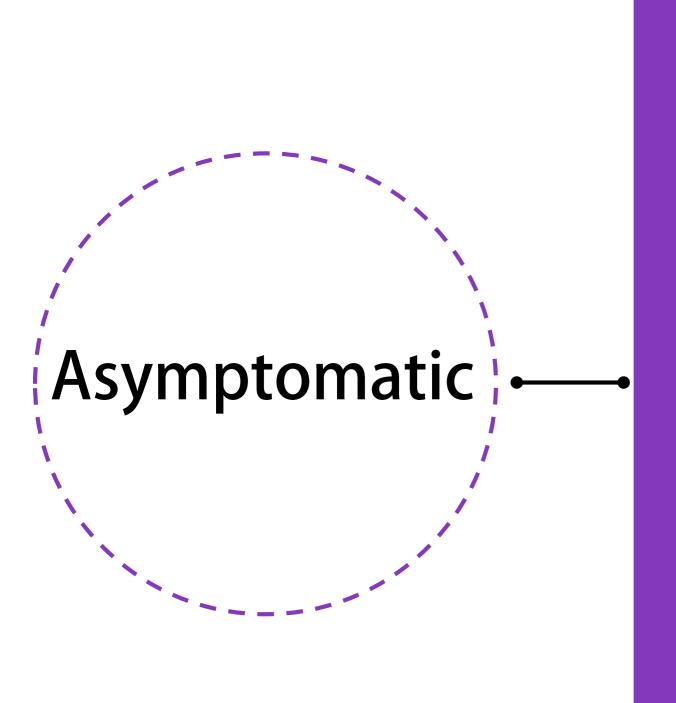
X - Must not drive and must notify the DVLA.



Licence will be refused or revoked.

Relicensing will be considered once symptoms are satisfactorily controlled and the criteria for asymptomatic HCM met as detailed above. If there is a history of associated syncope the standards for syncope need to be met in addition.

Dilated cardiomyopathy





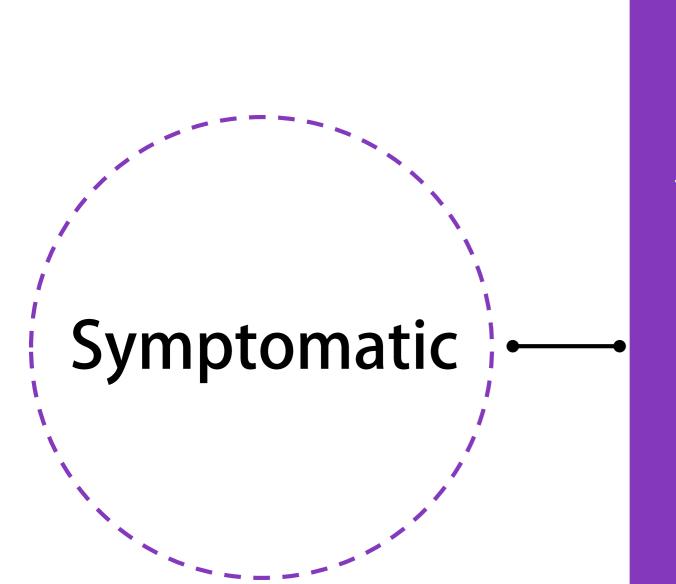
✓- May drive and need not notify the DVLA.

There must be no other disqualifying condition.



!- May drive but must notify the DVLA.

LV ejection fraction must be at least 40% and there must be no other disqualifying condition.





✓- May drive and need not notify the DVLA.

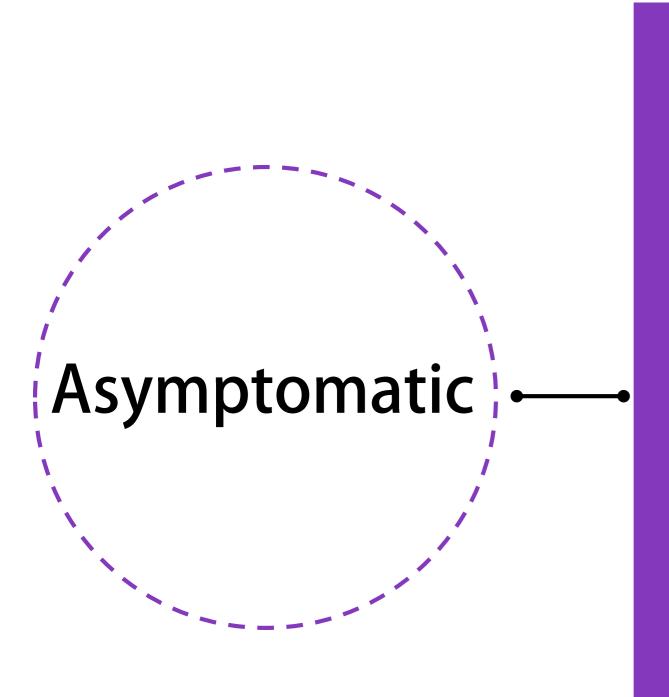
There must be no other disqualifying condition.



X - Must not drive and must notify the DVLA.

Licence may be issued/renewed once asymptomatic, if LV ejection fraction is at least 40% and there is no other disqualifying condition.

Arrhythmogenic right ventricular cardiomyopathy and allied disorders





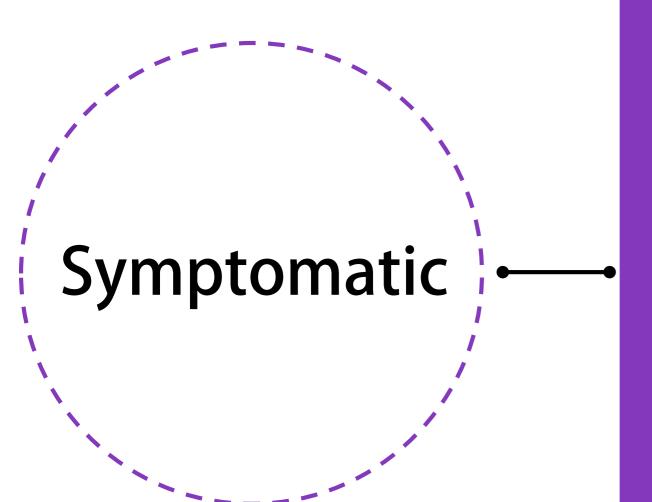
✓- May drive and need not notify the DVLA.

There must be no other disqualifying condition.



X - May drive but must notify the DVLA.

May be relicensed/licensed following specialist electrophysiological assessment, provided there is no other disqualifying condition.





X - Must not drive and must notify the DVLA if arrhythmia has caused or is likely to cause incapacity.

May be relicensed/licensed once arrhythmia is controlled, provided there is no other disqualifying condition



X - Must not drive and must notify the DVLA.



Licence will be refused or revoked.

Relicensing may be permitted if:

- the applicant is on treatment
- the applicant has remained asymptomatic for a period of 1 year and
- the applicant remains under regular specialist electrophysiological review.

A 1-3 year licence may be considered if the specialist electrophysiological review is satisfactory.