



## Section 4 RTA Assessment

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This form has been designed by Prof Ian Wall and updated by Dr Margaret Stark on behalf of the Faculty of Forensic and Legal Medicine (FFLM) for use by Healthcare Professionals who have been trained to the *quality standards of drug driving competencies* as defined by the FFLM.

The form is provided to assist HCPs in determining whether a person has a condition, which may be due to drink or drugs. It is very important to try and establish the type of drug that has been used and whether this drug is prescribed (statutory medical defence). There is no requirement to establish impairment but if competent the HCP may provide an opinion.

The form is to be regarded as an aide-mémoire and it is therefore not necessary for all parts of the form to be completed. Some details are included so as to aid possible subsequent assessment of fitness for detention in custody. Where a test is abandoned the reason should be recorded in Additional particulars at 7. On completion this form is the property of the examining HCP. It is not appropriate for a section 4 RTA assessment to be video recorded.

### 1. General details

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Date of birth \_\_\_\_\_

Occupation \_\_\_\_\_

Police station \_\_\_\_\_

Custody record No \_\_\_\_\_

PNC Warning \_\_\_\_\_

Arrest date \_\_\_\_\_

Arrest time \_\_\_\_\_

Time called \_\_\_\_\_

Time arrived \_\_\_\_\_

Time examination started \_\_\_\_\_

Time examination completed \_\_\_\_\_

Time case completed \_\_\_\_\_

### 2. Background information

Roadside breath test \_\_\_\_\_

Intoximeter readings \_\_\_\_\_

Drugwipe result \_\_\_\_\_

Information from arresting officer (PC \_\_\_\_\_)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Preliminary impairment test results \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Information from Police/Risk assessment \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### 3. Consent

Consent witnessed by \_\_\_\_\_

*"My name is HCP \_\_\_\_\_ and I have been asked to examine you to ascertain whether in my opinion, you have a condition which might be due to drink or drugs. You should be aware that any conversation with me might not be treated confidentially, as I may have to give a report to police and the court. You may decline this examination."*

*"Do you agree to this examination?"* YES  NO

If NO, make observations of accused's behaviour \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If YES, consider written consent

I consent to this examination as explained to me above:

Signed \_\_\_\_\_



### 4. Medical consultation

Consultation commenced at \_\_\_\_\_ hours      Alcohol intake and times in last 24 hours \_\_\_\_\_

History of recent events \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Current medical problems \_\_\_\_\_      Weekly alcohol intake \_\_\_\_\_ Units per week

\_\_\_\_\_      Time last ate \_\_\_\_\_

\_\_\_\_\_      Time last slept \_\_\_\_\_

Past medical history \_\_\_\_\_      Past psychiatric history \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_      Previous self-harm attempts \_\_\_\_\_

Hearing problems \_\_\_\_\_

Visual problems \_\_\_\_\_

Diabetes \_\_\_\_\_      Social history \_\_\_\_\_

Renal impairment \_\_\_\_\_

Balance problems \_\_\_\_\_

Asthma \_\_\_\_\_      Relevant educational history (to assess if learning disability etc)

Epilepsy \_\_\_\_\_  
 \_\_\_\_\_

Hepatic impairment \_\_\_\_\_

Medication	Dose	Duration	Route	Last taken
<b>Prescribed</b>				
<b>OTC medicines</b>				
<b>Non-prescribed</b>				



## 5. Medical examination

Examined in presence of \_\_\_\_\_

Specimen of handwriting \_\_\_\_\_

General demeanour \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Areas of body examined for injuries  
(if relevant see body maps, photographs) \_\_\_\_\_

State of clothing \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mental state \_\_\_\_\_

Speech \_\_\_\_\_

\_\_\_\_\_

Breath \_\_\_\_\_

\_\_\_\_\_

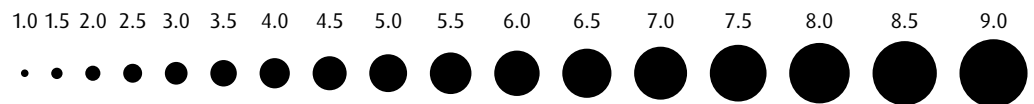
Mouth \_\_\_\_\_

Physical signs (as appropriate)	Vital signs	Chest	GIT	CNS
Needle marks	RR	HS	Soft	Power
Shivering	SpO2	PN	Tender	Tone
Yawning	Temp	BS	LKKS	Reflexes
Rhinorrhoea	BP	Added sounds	Bowel sounds	Co ordination
Gooseflesh	HR	VR	Blood glucose	Gait
Lachrymation	AVPU	PEFR		Romberg's
COWS (score)	NEWS Total:			
CIWA (score)				

Other abnormal findings \_\_\_\_\_

### Eye examination

Use this gauge or a printed laminate card to assess pupil size



Eye signs	Right	Left
Conjunctiva		
Pupil size		
Direct reflex		
Indirect reflex		
Visual acuity		
Visual fields		
Horizontal gaze nystagmus		
Vertical gaze nystagmus		
Lack of smooth pursuit		

Convergence YES  NO

Spectacles YES  NO

Contact lens YES  NO

Other abnormal eye findings \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



The following tests are performed in some jurisdictions by police at the roadside. These tests do not constitute a definitive medical assessment but may be useful evidence taken with the overall history and examination. Indicate whether any test is not done and state the reason why it was not felt to be appropriate.

### 6. Impairment tests

"I would like you to perform a series of tests to enable me to ascertain whether you have a condition which might be due to drink or drugs, or whether your ability to drive is impaired by drink or drugs. The tests are simple and part of my evaluation will be based on your ability to follow instructions. If you do not understand any of the instructions, please tell me so that I can clarify them."

#### a. Romberg test

"Stand up straight with your feet together and your arms down by your sides. Maintain that position while I give you the remaining instructions. Do not begin until I tell you to do so. When I tell you to start, you must tilt your head back slightly and close your eyes (demonstrate but do not close your eyes). Keep your head tilted backwards with your eyes closed until you think that 30 seconds have passed, then bring your head forward and say 'Stop'."

"Do you understand?" YES  NO

Able to stand still during instructions YES  NO

Excessive body sway seen YES  NO

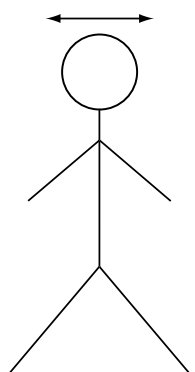
Internal body clock 30 seconds at \_\_\_\_\_ secs  
"How long was that?"

Able to complete test YES  NO

Comments \_\_\_\_\_

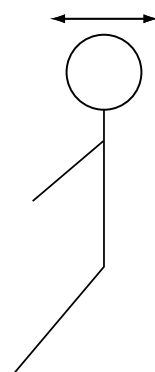
#### Front/back view

indicate direction & degree of sway)



#### Side view

indicate direction & degree of sway)



#### b. Walk and turn test

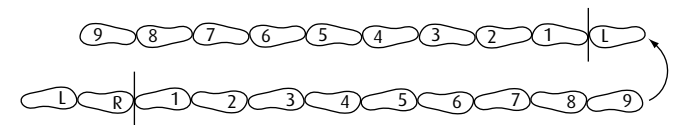
##### Identify a real or imaginary line.

"Place your left foot on the line. Place your right foot on the line in front of your left touching heel to toe (demonstrate). Put your arms down by your sides and keep them there throughout the entire test. Maintain that position whilst I give you the remaining instructions."

"Do you understand?" YES  NO

"When I say start, you must take nine heel-to-toe steps along the line. On each step the heel of the foot must be placed against the toe of the other foot (demonstrate). When the ninth step has been taken, you must leave the front foot on the line and turn around using a series of small steps with the other foot. After turning you must take another nine heel-to-toe steps along the line. You must watch your feet at all times and count each step out loud. Once you start walking do not stop until you have completed the test".

"Do you understand?" YES  NO



Any deviation from the instructions and any observations should be indicated below and on the diagram above.

Able to stand still during instructions YES  NO

Start too soon YES  NO

Stops walking YES  NO

Turn Correct  Incorrect

Misses heel/toe YES  NO

Steps off line YES  NO

Raises arm YES  NO

Correct step count YES  NO

Notes \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**c. One leg stand test**

“Stand with your feet together with your arms by your sides. Maintain that position while I give you the remaining instructions. Do not begin until I tell you to start.”

“Do you understand?” YES  NO

“When I tell you to start you must raise your right foot six to eight inches off the ground, keeping your leg straight and your toes pointing forward, with your foot parallel to the ground (**demonstrate**). You must keep your arms by your sides and keep looking at your elevated foot while counting out loud in the following manner, ‘one thousand and one, one thousand and two’ and so on until I tell you to stop.”

“Do you understand?” YES  NO

**Repeat procedure with each foot**

**SWAYS**

**Left** YES \* NO

**Right** YES \* NO

**HOPS**

**Left** YES \* NO

**Right** YES \* NO

**PUT FOOT DOWN**

**Left** YES \* NO

**Right** YES \* NO

**RAISES ARMS**

**Left** YES \* NO

**Right** YES \* NO

\*If YES – record at what point(s) in the count that it occurred, i.e. one thousand and six (1006)

**d. Finger and nose test**

“Stand with your feet together and your arms in this position. (Demonstrate extending both hands out in front, palms side up and closed with the index finger of both hands extended). Maintain that position while I give you the remaining instructions. Do not begin until I tell you to start. When I tell you to start you must tilt your head back slightly (demonstrate) and close your eyes. When I tell you which hand to move, you must touch the tip of your nose with the tip of that finger and lower your hand once you have done so (demonstrate).”

“Do you understand?” YES  NO

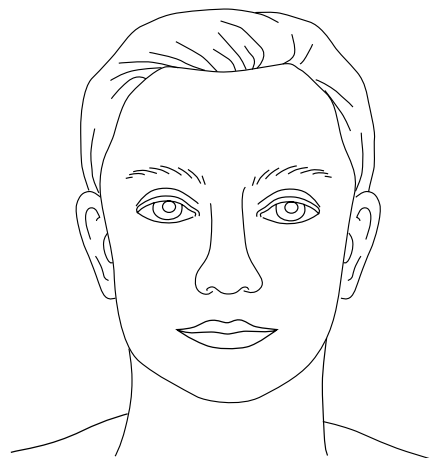
**Call out the hands in the following order, left, right, left, right, right, left.**

Excessive body sway YES  NO

Correct hand use YES  NO

Additional comments \_\_\_\_\_

\_\_\_\_\_



Draw lines to spots touched

**7. Additional particulars**

(See notes at top of page 1) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Final pulse \_\_\_\_\_ Consultation ended at \_\_\_\_\_ hours



### 8. Conclusions

Is the person fit to be detained? YES  NO

If NO, make note of reasons and subsequent action \_\_\_\_\_

\_\_\_\_\_

Level of observation \_\_\_\_\_

Is the person fit to be interviewed? YES  NO

If NO, make note of the reasons and advice provided \_\_\_\_\_

\_\_\_\_\_

AA required YES  NO

*"Is there a condition due to a drug?"* YES  NO

If YES, make note of the findings in the history and examination which supports this \_\_\_\_\_

\_\_\_\_\_

**Police officer advised that a condition present that might be due to a drug at \_\_\_\_\_ hours**

Is there evidence of impairment? YES  NO

If YES, make note of this evidence \_\_\_\_\_

\_\_\_\_\_

**If there is a condition present that might be due to a drug, the police officer will proceed as on Form MG DD/B at B24.**

### 9. Subsequent procedures

#### Blood or urine decision

Are there medical reasons for the sample not to be blood?

YES  NO

If YES, make note of reason (Officer will then proceed to require urine) \_\_\_\_\_

\_\_\_\_\_

### 10. Consent for blood sample

Consent witnessed by \_\_\_\_\_

*"My name is HCP \_\_\_\_\_ and I have been asked to take a sample of blood from you which will be tested for alcohol and/or drugs"*

*"Do you agree to a blood test?"* YES  NO

If NO ask *"Is there any medical reason why I should not obtain a sample of blood from you?"*

Make notes of accused's reasons \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If YES, details as below

Blood specimen successfully taken at \_\_\_\_\_ hours

Site \_\_\_\_\_

Blood specimen given to \_\_\_\_\_

at \_\_\_\_\_ hours

If venepuncture unsuccessful give reasons \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Police can still proceed with a urine requirement on form MG DD/B).

It is also useful to assist the Police Officer in completion of Form MG DD/E Drugs Sample Information Form.