

Assessments (alcohol & drugs) under the RTA

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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 any clinical assessment including taking samples to be video recorded.

1. General details

Name	Preliminary Impairment Test (PIT) results
Address	
Date of birth	
Occupation	
Police station	Information from Police/Risk assessment
Custody record No	
PNC Warning	
Arrest date	
Arrest time	
Time called	2 Concort (for Costing A DTA Assessment)
Time arrived	3. Consent (for Section 4 RTA Assessment)
Time examination started	Consent witnessed by
Time examination completed	"My name is HCP and I have been asked to examine you to ascertain whether in my
Time case completed	opinion, you have a condition which might be due to drink or drugs. You should be aware that any conversation with
2. Background information	me might not be treated confidentially, as I may have to give a report to police and the court. You may decline this examination."
Roadside breath test	"Do you agree to this examination?" YES NO
Evidential breath readings	If NO, make observations of accused's behaviour
Drugwipe result	
Information from arresting officer (PC)	
	If YES, consider written consent I consent to this examination as explained to me above:
	Signed



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4. Medical consultation

Consultation commenced at hour History of recent events												
			Weekly alc	ohol intake		Units per week						
Current medical proble	ems		Time last a	te								
			Time last s	lept								
			Past psychiatric history									
Past medical history _												
Hearing problems Visual problems Diabetes Renal impairment Balance problems Asthma		Previous self-harm attempts										
		Social history										
						Epilepsy						
						Hepatic impairment						
Medication	Dose	Duration		Route	Last take	en .						
Prescribed												
OTC and disions												
OTC medicines												
Non-prescribed												



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5. Medical examination

Examined in presence of		Specimen of handwriting					
General demeanour				Areas of b	ody examined for inji t see body diagrams,	uries photographs)	
State of clothing							
				Breath			
				_ Moutn			
Physical signs (as appropriate)	Vital signs		Chest		GIT	CNS	
Needle marks	RR		HS		Soft	Power	
Shivering	Sp02		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 (I Eye examination Use this gauge or a printed laminate card to assess pupil size			•		6.0 6.5 7.0	7.5 8.0 8.5 9.0	
				1			
Eye signs	Right	Left		Converger	ice	YES NO	
Conjunctiva				Spectacles	i	YES NO	
Pupil size				Contact le	ns	YES NO	
Direct reflex							
Indirect reflex				otner abn	ormal eye findings _		
Visual acuity							
Visual fields							
Horizontal gaze nystagmus	5						
Vertical gaze nystagmus							
Lack of smooth pursuit							



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6. Conclusions	8. Consent for blood sample			
Is the person fit to be detained? YES NO	(Section 4 or Section 5A)			
If NO, make note of reasons and subsequent action	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"			
Level of observation	"Do you agree to a blood test?" YES NO			
Is the person fit to be interviewed? YES NO	If NO ask "Is there any medical reason why I should not obtain a sample of blood from you?"			
If NO, make note of the reasons and advice provided	Make notes of accused's reasons			
AA required YES NO				
"Is there a condition due to a drug?" YES NO	If YES, details as below			
If YES, make note of the findings in the history and examination which supports this	Blood specimen successfully taken at hours Site			
	Blood specimen given to			
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	athours If venepuncture unsuccessful give reasons			
If there is a condition present that might be due to a drug, the police officer will proceed as on Form MG DD/B to request a sample.	(Police can still proceed with a urine requirement under Section 4 RTA 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.			
7. Subsequent procedures	For more information see Department for Transport Code of Practice for Preliminary Impairment Tests			
Blood or urine decision				
Are there medical reasons for the sample not to be blood?				
YES NO (Officer will then proceed to require urine)				
	Produced by Prof Ian Wall and updated by Dr Margaret Stark on behalf of the of the Faculty of Forensic & Legal Medicine Faculty of Forensic & Legal Medicine, Jun 2019, Review date: Jun 2022			

Send any feedback and comments to forensic.medicine@fflm.ac.uk $\,$