

I recognize my physical and mental abilities may decline as I age or that I may temporarily suffer medical conditions that will affect my ability to drive safely. I know aging and having pre-existing medical conditions can affect my ability to recover from a crash, no matter who is at fault. I want to keep myself and any passengers, including my grandchildren and pets, safe. This document details my wishes regarding driving.

I will limit or stop driving when:

- A doctor advises me to limit or stop driving
- I am prescribed a medication or decide to take an over-the-counter medication or herbal supplement (including sleep aids and pain relievers) whose side effects affect my ability to drive safely (blurred vision, dizziness, drowsiness, etc.)
- I find that my eyesight is affected by cataracts, a reduced range of peripheral vision, altered depth perception, or a reduced ability to see road signs due to blurriness.
- I notice a decreased ability to hear sirens, horns, engine noises, or my turn signals
- I am affected by a decreased range of motion in my arms, shoulders, knees, legs, or neck (which may be the result of a joint replacement, back surgery, arthritis, etc.)
- Friends or family members express concern about my ability to drive safely
- I have an increased number of crashes, close calls, or traffic citations
- I find that driving is overwhelming or causes irritation, agitation, anxiety, or anger
- I am diagnosed with dementia or Alzheimer's
- I experience confusion on familiar roads
- I have trouble staying within lane markings
- I confuse the brake and gas pedals
- I drive the wrong way down a street or highway
- I have trouble with assessing the space between my vehicle and one in front of me or coming towards me
- I unintentionally hit fixed objects such as curbs, mailboxes, garage doors, etc.
- I miss stopping at a stop sign or red light
- I often or regularly find my mind wandering or I become distracted as I drive
- I move and do not feel comfortable navigating new roads

I will tell my employer immediately if I have concerns about my ability to drive safely.

If any of these conditions are temporary, I pledge to have my safe driving ability evaluated by a doctor, occupational therapist, or other professional before driving again.

When I can no longer drive safely, I will give my keys and/or my vehicle to _____ or sell my vehicle within _____ days.

What can you do to drive safer for longer?

- Self-impose limits
 - Limit driving at night
 - Limit left turns
 - Limit driving on highways
 - Limit driving in heavy traffic
 - Limit driving in inclement weather
 - Limit driving to a range of ____ miles from my home
 - Limit driving with extra passengers
 - Limit driving large vehicles
- Research alternative transportation resources
 - Bus
 - Taxi
 - Rideshare
 - Friend, family member, or neighbor
 - Local free or low-cost ride services
- Attend a CarFit event to learn how the technology in my vehicle can keep me safer
- Take a Smart Driver class or other defensive driving course
- Plan ways to reduce trips:
 - Arrange for medication/grocery delivery
 - Look into in-home services (hairdresser, barber, etc.)
 - Use video chats to socialize
 - Schedule regular times for you and a safe driver to run errands, attend church, get to the gym, or go to social functions (they may barter for homemade meals, babysitting/pet sitting, or other skills you can share)

The benefits of letting someone else drive include not worrying about finding parking, leaving navigation duties to someone more familiar with an area, not having to drive at night, in heavy traffic, or in construction zones; and saving money on car payments, maintenance, and other related costs.

Evaluation sites: Audrey Imhoff, MOTr/I, Driving Rehab Specialist, [913-967-5232](tel:913-967-5232)

To report concerns about an individual's ability to drive safely, go to <https://www.ksrevenue.gov/pdf/DriverEvalRequest.pdf>.

Find more safe driving resources at KTSRO.org.

Signed: _____ Date: _____