

HOW TO REPORT DOT MEDICAL CARD

ONLINE

FLORIDA CDL LICENSE ONLY

FIRST STEP

Enter FL-DMV
Website select
option **I AGREE**

Welcome to Florida's CDL Self-Certification System

This system allows Commercial Driver License (CDL) holders to meet the new federal requirements for self-certification without needing to go to a driver license office.

Driver Privacy Protection Act Warning

The personal information contained within this site is protected by 18 U.S.C. 2721-2725, et seq., ([the Driver Privacy Protection Act](#)) and Section 119.0712(2), Florida Statutes. You are not authorized to access personal information for anyone other than yourself through this web site unless you have specific written permission to do so. Any access or attempted access to personal information of others may subject you to criminal prosecution or civil liability.

☐ I Agree

A Florida Commercial Driver License (CDL) holder may use this system only if they have a valid Florida Commercial Driver License.

If you are not sure if your CDL is valid, please visit our [Driver License Check](#) first.

We are concerned about your privacy and the security of your information. Pressing **Continue** will transfer you to our secure site. Please review our [privacy policy](#).

Continue

SECOND STEP

Enter:

- Florida Driver license information
- Last four digits of SSN
- Date of birth

FLHSMV SERVICE • INTEGRITY • COURTESY • PROFESSIONALISM • INNOVATION • EXCELLENCE Dave Kerner
Executive Director

Locate Your Records

Please enter the following information to locate your Driver Record.

Florida Driver License number

Last Four Digits of Social Security Number(SSN)

Date of Birth

1 - January 1 - Year (yyyy)

Continue

THIRD STEP

Check your previous
CDL Medical
certification and then
click **Self-Certify**

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Florida CDL Medical Self-Certification System

Current CDL Medical Certification on record

Posted Date: 5/4/2022

Expiration Date: **11/16/2023**

Certification Category: (C) Non-excepted intrastate.

[View Receipt](#)

Self-Certify

4 STEP

Select **NO** if you do not
need waiver or SPE

Florida CDL Medical Self-Certification System

National Registry of Certified Medical Examiners

Medical exams performed on or after May 21, 2014 must be performed by a medical examiner that is listed on the National Registry of Certified Medical Examiners. Medical Examiner's Certificate issued on or after May 21, 2014 require a National Registry Number. If your Medical Examiner's Certificate does not have the National Registry Number, cancel submission and return to your medical examiner to obtain their National Registry Number and to correct the Medical Examiner's Certificate. If your Medical Examiner is not listed on the National Registry of Certified Medical Examiners you may locate a medical examiner at: <https://nationalregistry.fmcsa.dot.gov/NRPublicUI/home.seam> to perform the medical exam.

Waivers/exemptions or Skills Performance Evaluation Certificate

Federal Motor Carrier Safety Administration allows medical exemptions for vision, diabetes, or a loss of limb. Federal Motor Carrier Safety Administration will issue waivers or Skills Performance Evaluation Certificates in these cases.

Do you currently hold a valid medical waiver/exemption or Skills Performance Evaluation Certificate issued by the Federal Motor Carrier Safety Administration?

☐ Yes ☒ No

Cancel Submission Next

FLORIDA CDL DRIVER'S STATEMENT OF MEDICAL CERTIFICATION

All CDL holders must declare for the record whether their commercial motor vehicle (CMV) operation is in a category that requires medical certification. To be eligible for a CDL, drivers must operate or expect to operate a vehicle requiring a CDL in one of the four categories of interstate or intrastate commerce listed below. Drivers whose CMV operation is in a category requiring medical certification must show proof of valid medical certification to be issued a CDL or to retain a CDL after the previously issued medical certificate has expired. Drivers self-certifying in a category exempt from medical certification requirements (B or D) and later changing to a non-exempt type of operation (A or C), must recertify in the appropriate category and provide proof of valid medical certification to avoid potential enforcement actions.

☒ **(A) Non-excepted interstate.** I operate or expect to operate in interstate commerce and am required to maintain federal medical certification.

☐ **(B) Excepted interstate.** I operate or expect to operate in interstate commerce, but engage exclusively in operations that qualify me for exception from the requirement to maintain medical certification.

☐ **(C) Non-excepted intrastate.** I operate or expect to operate only in intrastate commerce and am required to meet State medical certification requirements.

☐ **(D) Excepted intrastate.** I operate or expect to operate only in intrastate commerce but engage exclusively in operations that qualify me for exception from State medical certification requirements.

Cancel Submission

Back

Next

5 STEP

Select **(A)** if you're
certified to operate
intersate

Select **(C)** if you're
certified to operate only
intrastate

Enter your phone
number and email
*To receive notification about your
self-certification.*

7 STEP

Medical Examiner's Certificate Detail

Please enter the following information exactly as it appears on your medical card.

☐ Wearing corrective lenses

☐ Wearing hearing aid

☐ Accompanied by a waiver or exemption

☐ Driving within an exempt intracity zone (49 CRF 391.62)

☐ Accompanied by a Skill Performance Evaluation Certificate (SPE)

☐ Qualified by operation of (49 CFR 391.64)

- 2 Medical Examiner Phone Number:
- 3 Certificate Issue Date: 1 - January 1 Year (yyyy)
- 4 Medical Examiner First Name:
- Medical Examiner Middle Name:
- 4 Medical Examiner Last Name:
- Suffix: None
- 5 Medical Examiner Specialty: -Select One-
- 6 Medical Examiner License:
- 7 Medical Examiner's State: -Select One-
- 8 National Registry Number:
- 9 Certificate Expiration Date: 1 - January 1 Year (yyyy)

Cancel Submission

Back Next

Take a picture of your medical card and then select it and then click next and finally click submit.

CDL Medical Certificate Image Upload (DOT Medical Card)

Here are the instructions for uploading a digital image:

Scan or take a picture with a digital camera. Save the image to a location on the computer you are using that will be easy to remember. Name the file something that will be easy to recognize. Click the browse button below. A dialog screen will open. Choose the image and click the open button on the dialog screen.

NOTE: Send the medical card only, please do not send the long medical form.

Upload digital image: IMG_0083

TAKE A PICTURE OF YOUR TRANSACTION # AS A
CONFIRMATION OF SUBMISSION.

**UPLOADING YOUR MEDICAL CARD MAY TAKE UP TO 7
DAYS. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT
DMV.**

