

(3) “\$17,363”; and

(2) by replacing the amounts in subparagraphs 1 to 3 of the third paragraph by the following amounts:

(1) “\$3,895”;

(2) “\$4,929”;

(3) “\$5,969”.

**15.** Section 51 is amended

(1) by replacing the amounts in subparagraphs 1 to 5 of the first paragraph by the following amounts:

(1) “\$202”;

(2) “\$222”;

(3) “\$308”;

(4) “\$409”;

(5) “\$409”;

(2) by striking out the third paragraph; and

(3) by replacing “\$315” in the fourth paragraph by “\$318”.

**16.** Section 52 is amended by replacing “\$950” by “\$960”.

**17.** Section 61 is amended by striking out the second paragraph.

**18.** Section 74 is amended by replacing “\$246” and “\$123” in the second paragraph by “\$249” and “\$124” respectively.

**19.** Section 82 is amended by replacing “\$2,956” and “\$2,214” in the third paragraph by “\$2,987” and “\$2,237” respectively.

**20.** Section 83 is amended by adding the following at the end of the third paragraph: “and by the amount transferred from a locked-in retirement account and for which a deduction has been made.”

**21.** Section 86 is amended

(1) by replacing the amounts in subparagraphs 1 to 3 of the first paragraph by the following amounts:

(1) “\$2.21”;

(2) “\$3.30”;

(3) “\$113.89”; and

(2) by replacing “\$10.94” in the second paragraph by “\$11.06”.

**22.** Section 87.1 is amended by replacing “\$374” by “\$378”.

**23.** This Regulation applies as of the 2015-2016 year of allocation.

**24.** This Regulation comes into force on the fifteenth day following the date of its publication in the *Gazette officielle du Québec*.

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## Draft Regulation

Highway Safety Code  
(chapter C-24.2)

### Health of drivers — Amendment

Notice is hereby given, in accordance with sections 10 and 11 of the Regulations Act (chapter R-18.1), that the Regulation respecting the health of drivers, appearing below, may be made by the Government on the expiry of 45 days following this publication.

Most of the medical standards contained in the Regulation respecting access to driving a road vehicle in connection with the health of drivers (chapter C-24.2, r. 8) to assess the ability to drive have not been substantially reviewed since approximately 30 years. The draft Regulation respecting the health of drivers reviews and updates those standards using the functional approach, which gives precedence to the effects of the medical condition over the diagnosis alone in order to assess the ability to drive. Those standards are based on a consensus among experts and on the latest scientific literature. They also take into consideration the standards that are promoted throughout North America.

The measures proposed in the draft Regulation have no particular impact on the public because the Société de l'assurance automobile du Québec has been able through the years, using the powers conferred on it by the Highway Safety Code, to adjust its practices to the evolution of medical standards and the resulting principles.

No particular impact on enterprises, including small and medium-sized businesses is foreseen, since the medical standards applicable to professional drivers are modeled after those already in force and recognized throughout Canada.

Further information may be obtained by contacting Jamie Dow, Société de l'assurance automobile du Québec, 333, boulevard Jean-Lesage, C-4-12, case postale 19600, Québec (Québec) G1K 8J6; telephone: 418 528-4984.

Any person wishing to comment on the matter is requested to submit written comments within the 45-day period to the Minister of Transport, 700, boulevard René-Lévesque Est, 29<sup>e</sup> étage, Québec (Québec) G1R 5H1.

ROBERT POËTI,  
*Minister of Transport*

## Regulation respecting the health of drivers

Highway Safety Code  
(chapter C-24.2, s. 619, pars. 2 and 8)

### DIVISION I GENERAL

**1.** In this Regulation, every reference to a licence class is made pursuant to the Regulation respecting licences (chapter C-24.2, r. 34).

**2.** A person who, by reason of a medical condition, must receive treatment to be able to drive, but fails to comply with the instructions or refuses treatment despite the physician's recommendations, places himself or herself in a situation essentially inconsistent with driving a road vehicle.

### DIVISION II ILLNESSES AND DEFICIENCY OF THE EYE

**3.** Distance vision is assessed according to the Snellen chart without corrective lenses, or with corrective lenses if they are required to drive. The field of vision is measured using the Goldmann III/4e technique with scotoma screening, the Esterman technique or a technique recognized as equivalent.

Despite the foregoing, visual acuity may not be assessed with the telescopic part of glasses.

**4.** Visual acuity of less than 6/9 with both eyes open and examined together is essentially inconsistent with driving a road vehicle of Class 1 to Class 4.

**5.** Visual acuity of less than 6/15 with both eyes open and examined together is essentially inconsistent with driving a road vehicle of Class 5, Class 6 or Class 8.

**6.** A field of vision of less than 150 continuous degrees along the horizontal meridian and less than 10 continuous degrees above fixation and less than 20 continuous degrees below fixation, with both eyes open and examined together, is essentially inconsistent with driving a road vehicle of Class 1 to Class 4.

**7.** A field of vision of less than 100 continuous degrees along the vertical meridian and less than 10 continuous degrees above fixation and less than 20 continuous degrees below fixation or less than 30 degrees on each side of the vertical meridian, with both eyes open and examined together, is essentially inconsistent with driving a road vehicle of Class 5, Class 6 or Class 8.

**8.** The incapacity to distinguish traffic lights is essentially inconsistent with driving a road vehicle.

**9.** Uncorrected diplopia within the central 40 degrees is essentially inconsistent with driving a road vehicle.

**10.** Diplopia within the central 40 degrees corrected by occlusion of an eye is essentially inconsistent with driving a road vehicle of Class 1 to Class 4.

Despite the foregoing, diplopia corrected by wearing prismatic glasses is consistent with driving a road vehicle of any of those classes if, while wearing those glasses, the visual standards applicable under the provisions of this Division for the classes held are complied with.

**11.** Sudden loss of the use of an eye or occlusion of an eye because of diplopia within the central 40 degrees is essentially inconsistent with driving a road vehicle for a period of 3 months following the beginning of monocular vision.

**12.** An ocular condition, a visual deficiency or a situation affecting vision other than those referred to in sections 4 to 11 causing a reduction in visual function is relatively inconsistent with driving a road vehicle.

### DIVISION III ILLNESSES AND DEFICIENCY OF THE EAR

**13.** A corrected or uncorrected average loss of hearing greater than 40 decibels in the better ear at frequencies of 500, 1,000 and 2,000 hertz, is essentially inconsistent with driving a road vehicle of Class 2 and Class 4 or a road vehicle that requires the display of safety placards in accordance with the provisions of Division IV of the Transportation of Dangerous Substances Regulation

(chapter C-24.2, r. 43), unless the affected person is able to perceive a forced whispered voice at not less than 1.5 metres with or without the use of a hearing aid.

#### **DIVISION IV** ILLNESSES AND DEFICIENCIES OF THE CARDIOVASCULAR SYSTEM

**14.** For the purposes of this Division, the following functional cardiac classification is established:

(1) Class I: no limitation of activity and no symptoms during daily activities;

(2) Class II: slight limitation of activity but comfortable at rest or during mild physical activity;

(3) Class III: marked limitation of activity and comfortable only at rest;

(4) Class IV: the person should be at complete rest, confined to bed or chair and any physical activity brings on discomfort and symptoms may occur even at rest.

**15.** A cardiac disorder that places a person in Class IV is essentially inconsistent with driving a road vehicle.

**16.** A cardiac disorder that places a person in Class III or an ejection fraction for the left ventricle of less than 35% is essentially inconsistent with driving a road vehicle of Class 1 to Class 4.

**17.** The presence of an implantable defibrillator is essentially inconsistent with driving a road vehicle of Class 1 to Class 4, unless the cardiac disorder that justified the installation of the defibrillator no longer exists.

**18.** A person who had an implantable defibrillator installed following a cardiac rhythm event with decreased state of consciousness is authorized to drive a road vehicle of Class 5, Class 6 or Class 8 provided that no cardiac rhythm disorder affecting the state of consciousness has occurred for at least 6 months and that the person has been under medical supervision during that period. If these requirements are not satisfied, the presence of such defibrillator is essentially inconsistent with driving a road vehicle of any of those classes.

Any disturbance of consciousness resulting from the action of a defibrillator is essentially inconsistent with driving a road vehicle for a period of 6 months following the event.

**19.** A surgically indicated aortic aneurysm is essentially inconsistent with driving a road vehicle.

**20.** A cardiac or vascular condition medically recognized as causing angina, rhythm disorder, syncope, embolisms or ischemia is relatively inconsistent with driving a road vehicle.

#### **DIVISION V** ILLNESSES OF THE MUSCULOSKELETAL SYSTEM AND MOTOR DEFICIENCY

**21.** Anatomical or functional loss of a limb or a limb joint or limb immobilization is essentially inconsistent with driving a road vehicle unless the person shows, to the satisfaction of the Société de l'assurance automobile du Québec, that the person can safely drive a road vehicle corresponding to the class of licence concerned or to the class the person wishes to obtain.

**22.** A disease or deficiency of the musculoskeletal system other than those mentioned in section 21, which may impair safe driving, is relatively inconsistent with driving a road vehicle.

#### **DIVISION VI** PSYCHIATRIC DISORDERS

**23.** Psychiatric disorders that result in marked impairment of judgment or behaviour, pronounced aggressiveness, pronounced difficulty in perception or a pronounced slowing down or acceleration of psychomotor activity, in particular, are essentially inconsistent with driving a road vehicle.

Despite the foregoing, an affected person is authorized to drive after the disappearance of the symptoms described in the first paragraph, provided that the person medically demonstrates that his or her emotional and psychic state is consistent with the safe driving of a road vehicle.

**24.** A recurrent major psychiatric disorder is essentially inconsistent with driving a road vehicle of Class 1 to Class 4, unless the person has been asymptomatic for at least 12 months and is under medical supervision.

A major psychiatric disorder is considered recurrent when 2 episodes or more occur within 1 year, or when 3 episodes or more occur within 3 years.

**25.** A recurrent major psychiatric disorder is essentially inconsistent with driving a road vehicle of Class 5, Class 6 or Class 8, unless the person has been asymptomatic for at least 6 months and is under medical supervision.

Recurrence is established in accordance with the second paragraph of section 24.

**26.** Mild or moderate psychiatric disorders are relatively inconsistent with driving a road vehicle.

#### **DIVISION VII**

##### **DISORDERS RELATED TO THE CONSUMPTION OF ALCOHOL OR OTHER SUBSTANCES**

**27.** The consumption of any drug, medication or substance medically recognized as causing psychomotor disorders or impaired alertness that may constitute a safety hazard is relatively inconsistent with driving a road vehicle.

**28.** A minor disorder related to the consumption of alcohol or drugs, established according to the criteria of the current edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM), is relatively inconsistent with driving a road vehicle, unless the person is in sustained remission or otherwise demonstrates by providing a health assessment required by the Société pursuant to section 73 of the Highway Safety Code (chapter C-24.2) that his or her rapport with alcohol or drugs does not compromise the safe driving of a road vehicle.

**29.** A moderate or severe disorder related to the consumption of alcohol or drugs, established according to the criteria of the current edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM), is essentially inconsistent with driving a road vehicle, unless the person is in sustained remission or otherwise demonstrates by providing a health assessment required by the Société pursuant to section 73 of the Highway Safety Code, including a supervision plan, that his or her rapport with alcohol or drugs does not compromise the safe driving of a road vehicle.

#### **DIVISION VIII**

##### **ILLNESSES AND IMPAIRMENTS OF THE NERVOUS SYSTEM**

**30.** Neurological disorders resulting in serious disturbances of cognitive functions, alertness, consciousness, motor or sensory functions, equilibrium or coordination are essentially inconsistent with driving a road vehicle.

**31.** Neurological disorders resulting in slight disturbances of cognitive functions, alertness, consciousness, motor or sensory functions, equilibrium or coordination are relatively inconsistent with driving a road vehicle.

**32.** Epilepsy, if less than 5 years have elapsed since the last seizure, is essentially inconsistent with driving a road vehicle of Class 1 to Class 4, unless the affected person

(1) has had partial simple seizures, somatosensory seizures or motor seizures involving one anatomical area having no impact on driving; the seizures are always of the same type and do not perturb the person's state of consciousness, and a period of not less than 3 years has elapsed without any other type of seizure;

(2) has had one or more seizures resulting from an interruption or change in the treatment for epilepsy prescribed by a physician while epilepsy was well controlled, and the person had no seizure during the 5 preceding years if a period of not less than 6 months has elapsed since the last seizure resulting from the interruption or change in the treatment and treatment has resumed;

(3) has had one or more seizures in a brief period of time due to exceptional circumstances or an intercurrent disease whose cause has been clearly established, which are unlikely to recur in a person who is usually well controlled and closely follows the treatment, provided that the person had no seizure during the 5 preceding years and a period of not less than 6 months has elapsed since the last seizure; or

(4) has had seizures occurring while sleeping or shortly after waking up and a period of not less than 5 years has elapsed without any other type of seizure.

**33.** Epilepsy, if less than 6 months have elapsed since the last seizure, is essentially inconsistent with driving a road vehicle of Class 5, Class 6 or Class 8, unless the affected person

(1) has had focal seizures, excluding partial complex and partial simple seizures with adverse symptoms, limited to one anatomical area, without perturbing the person's state of consciousness and where a period of not less than 12 months has elapsed without any other type of seizure,

(2) has had one or more seizures resulting from an interruption or change in the treatment for epilepsy prescribed by a physician while epilepsy was well controlled, where a period of not less than 3 months has elapsed since the last seizure and treatment has resumed;

(3) has had one or more seizures in a brief period of time, due to exceptional circumstances or an intercurrent disease whose cause has been clearly established, which are unlikely to recur in a person who is usually well controlled and closely follows the treatment, and where a period of not less than 3 months has elapsed since the last seizure; or

(4) has had seizures occurring while sleeping or shortly after waking up and a period of not less than 12 months has elapsed without any other type of seizure.

**34.** Convulsive seizures or loss of consciousness provoked by toxic substances or alcohol are essentially inconsistent with driving a road vehicle of Class 1 to Class 4 if a period of less than 12 months has elapsed since the last seizure or loss of consciousness, during which period the person abstained from the substance that caused the seizures or the loss of consciousness.

**35.** Convulsive seizures or loss of consciousness provoked by toxic substances or alcohol are essentially inconsistent with driving a road vehicle of Class 5, Class 6 or Class 8 if a period of less than 6 months has elapsed since the last seizure or loss of consciousness, during which period the person abstained from the substance that caused the seizures or the loss of consciousness.

**36.** A single convulsive seizure without evident cause after a neurological and cardiac investigation, including an electroencephalogram showing no epileptic activity, is essentially inconsistent with driving a road vehicle of Class 1 to Class 4 if a period of less than 12 months has elapsed without any seizure or loss of consciousness.

**37.** A single convulsive seizure without evident cause after a neurological and cardiac investigation, including an electroencephalogram showing no epileptic activity, is essentially inconsistent with driving a road vehicle of Class 5, Class 6 or Class 8 if a period of less than 3 months has elapsed without any seizure or loss of consciousness.

**38.** One or more episodes of non-convulsive loss of consciousness or one or more episodes of syncope the cause of which remains unknown after medical investigation or for which there is no efficient treatment are essentially inconsistent with driving a road vehicle of Class 1 to Class 4 if a period of less than 12 months has elapsed without any loss of consciousness or syncope.

**39.** Episodes of non-convulsive loss of consciousness or syncope the cause of which remains unknown after medical investigation or for which there is no efficient treatment are essentially inconsistent with driving a road vehicle of Class 5, Class 6 or Class 8 if a period of less than 3 months has elapsed without any loss of consciousness or syncope.

#### **DIVISION IX** **COGNITIVE IMPAIRMENTS**

**40.** Severe dementia is essentially inconsistent with driving a road vehicle.

**41.** Mild or moderate dementia is essentially inconsistent with driving a road vehicle of Class 1 to Class 4.

**42.** Mild or moderate dementia is relatively inconsistent with driving a road vehicle of Class 5, Class 6 or Class 8.

**43.** A cognitive deficit without a diagnosis of dementia is relatively inconsistent with driving a road vehicle.

#### **DIVISION X** **ILLNESSES AND DEFICIENCIES AFFECTING** **METABOLISM**

**44.** Diabetes is essentially inconsistent with driving a road vehicle, unless the person affected meets the following conditions:

(1) the person has had no hypoglycemic episode while awake resulting in altered consciousness and requiring the intervention of a third person for 3 months;

(2) the person shows a good understanding of the disease;

(3) the person is under regular medical supervision for diabetes.

**45.** Diabetes treated with hypoglycemic drugs is essentially inconsistent with driving a road vehicle of Class 1 to Class 4, unless the person affected meets the following conditions:

(1) the person has had no hypoglycemic episode while awake resulting in altered consciousness and requiring the intervention of a third person for 6 months;

(2) the person shows a good understanding of the disease;

(3) the person is under regular medical supervision for diabetes.

**46.** Diabetes treated with insulin is essentially inconsistent with driving a road vehicle of Class 1 to Class 4, unless the person affected meets the following conditions:

(1) the person has had no hypoglycemic episode while awake resulting in altered consciousness and requiring the intervention of a third person for 6 months;

(2) the person shows a good understanding of the disease;

(3) the person's glycosylated hemoglobin is less than twice the normal limit;



- (4) self-monitoring of glycemia is conducted properly;
- (5) the person's condition is subject to an annual medical follow-up.

**DIVISION XI**  
ILLNESSES AND DEFICIENCIES OF THE  
RESPIRATORY SYSTEM

**47.** For the purposes of this Division, the following functional respiratory classification is established:

- (1) Class I: presence or absence of dyspnea. If dyspnea is present, it is attributable to non-respiratory causes;
- (2) Class II: presence of dyspnea while walking briskly on flat ground or while climbing a slope;
- (3) Class III: presence of dyspnea while walking on flat ground as compared to a person of the same age or while climbing stairs;
- (4) Class IV: presence of dyspnea after a 100-metre walk on flat ground at the person's own rhythm;
- (5) Class V: presence of dyspnea while dressing, undressing or speaking.

**48.** A respiratory illness that warrants the attribution of Class V is essentially inconsistent with driving a road vehicle of Class 1 to Class 4.

**49.** A respiratory illness that warrants the attribution of Class III or IV is relatively inconsistent with driving a road vehicle of Class 1 to Class 4.

**50.** A respiratory illness that warrants the attribution of Class V is relatively inconsistent with driving a road vehicle of Class 5, Class 6 or Class 8.

**51.** A sleep disorder other than narcolepsy is essentially inconsistent with driving a road vehicle of Class 1 to Class 4 in the following cases:

- (1) the assessment of sleep apnea shows an apnea-hypopnea index greater than 30 and apnea is not adequately treated;
- (2) the sleep disorder is accompanied by important daytime drowsiness that is not adequately treated;
- (3) the sleep disorder is not treated adequately and the person has already had an accident after falling asleep while driving;

(4) the manifestations related to the sleep disorder do not, in the opinion of a physician, allow the driving of a road vehicle in those classes.

**52.** A sleep disorder other than narcolepsy is essentially inconsistent with driving a road vehicle of Class 5, Class 6 or Class 8 in the following cases:

- (1) the sleep disorder is not treated adequately and the person has already had an accident after falling asleep while driving in the last 3 years;
- (2) the manifestations related to the sleep disorder do not, in the opinion of a physician, allow the driving of a road vehicle in those classes.

**53.** Narcolepsy is essentially inconsistent with driving a road vehicle in the presence of episodes of significant disabling cataplexy or important daytime drowsiness that is not adequately treated unless a period of at least 12 months has elapsed since the last episode.

**DIVISION XII**  
IMPAIRMENT OF GENERAL CONDITION AND  
MULTIPLE IMPAIRMENTS

**54.** Severe vertigo is relatively inconsistent with driving a road vehicle.

**55.** Morbid obesity resulting in functional limitations is relatively inconsistent with driving a road vehicle.

**56.** The presence of one or more medical conditions resulting in a deterioration of functional abilities is relatively inconsistent with driving a road vehicle.

**DIVISION XIII**  
LICENCES TO WHICH CONDITIONS  
ARE ATTACHED

**57.** A licence may have conditions attached to it in the following cases:

- (1) its holder suffers from a medical condition covered by this Regulation;
- (2) reports and information held by the Société concerning the licence holder indicate that road safety depends on that licence having a condition attached to it.

**58.** A licence may have a condition attached to it on the basis of any of the following criteria:

(1) the purpose of the condition is to facilitate the licence holder's ability to drive a road vehicle by requiring the installation of special equipment or controls adapted to the holder's functional capability;

(2) the purpose of the condition is to restrict the licence holder's driving of a road vehicle to a certain period, duration or territory, taking into account the effects of the holder's functional capability on his or her driving;

(3) the purpose of the condition is to restrict the classes, subclasses or types of road vehicle that the licence holder may drive, taking into account the effects of the holder's functional capability on his or her driving and general public safety;

(4) the purpose of the condition is to improve the licence holder's functional capability by observing the prohibitions and restrictions applicable to the driving of a road vehicle set forth in this Regulation;

(5) the purpose of the condition is to provide for another person giving immediate assistance in the driving of a road vehicle to the licence holder, taking into account the licence holder's functional capability;

(6) the purpose of the condition is to prescribe periodic examinations and health assessments of the licence holder;

(7) the purpose of the condition is to allow the person to drive a road vehicle if the vehicle is equipped with a device, approved by the Société, that is designed to measure the rate of alcohol in the driver's body and to prevent the vehicle from being started.

**59.** This Regulation replaces the Regulation respecting access to driving a road vehicle in connection with the health of drivers (chapter C-24.2, r. 8).

**60.** This Regulation comes into force on 18 October 2015.

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## Draft Regulation

Highway Safety Code  
(chapter C-24.2)

### Licences

#### — Amendment

Notice is hereby given, in accordance with sections 10 and 11 of the Regulations Act (chapter R-18.1), that the Regulation to amend the Regulation respecting licences, appearing below, may be made by the Government on the expiry of 45 days following this publication.

The draft Regulation rewrites the provision concerning the declaration of health to be provided by a person when applying for a driver's licence or its renewal to establish his or her ability to drive in accordance with the health standards prescribed by regulation.

The measure proposed by the draft Regulation has no particular impact on the public, because it does not change the nature of a person's obligation to declare a disease or medical condition likely to affect the person's ability to drive safely.

No significant impact is foreseen for enterprises, including and small and medium-sized businesses.

Further information may be obtained by contacting Jamie Dow, Société de l'assurance automobile du Québec, 333, boulevard Jean-Lesage, C-4-12, case postale 19600, Québec (Québec) G1K 8J6; telephone 418 528-4984.

Any person wishing to comment on the matter is requested to submit written comments within the 45-day period to the Minister of Transport, 700, boulevard René-Lévesque Est, 29<sup>e</sup> étage, Québec (Québec) G1R 5H1.

ROBERT POËTI,  
*Minister of Transport*

## Regulation to amend the Regulation respecting licences

Highway Safety Code  
(chapter C-24.2, s. 619, par. 6)

**1.** The Regulation respecting licences (chapter C-24.2, r. 34) is amended by replacing section 7 by the following:

“**7.** The declaration of illness or functional impairment that a person must provide to obtain or renew a licence or when paying the amounts prescribed in section 93.1 of the Highway Safety Code (chapter C-24.2) must refer to the health problems described in the Regulation respecting the health of drivers (*insert the number and the date of the Order in Council*).”

**2.** This Regulation comes into force on 18 October 2015.

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