Medical Advisory Board

Minutes - DRAFT

April 2, 2021 12:00 – 2:20 PM

Meeting conducted via Zoom

1. Call to Order: MAB Chair, John Taylor
   1. Zoom Participants: John Taylor, Patrick Keaney, Robert Lodato, Thomas Morrione, Daniel Potenza, Linda Schumacher-Feero, Larry Boivin, Dawna Dostie, Thea Fickett
   2. Absent: Frederick Goggans, Eileen Fingerman, Alejandro Velasco, Linda Grant
2. Introductions Larry Boivin
   1. Secretary of State, Shenna Bellows
   2. Announcement: Deputy Director Secretary of State, Catherine Curtis
   3. New Member:
      1. Daniel Potenza, Psychiatrist, Clinical Director, Dorothea Dix Psychiatric Center
3. Approval of Minutes John Taylor
   1. November 1, 2019 meeting minutes were accepted as written
4. Old Business:
   1. Functional Ability Profile Revision Updates
      1. Cardiac Conditions Thea Fickett
         1. Unanimously approved as written
      2. Chronic Pulmonary Disease Patrick Keaney
         1. Subcommittee needs to meet
      3. Dementia Thomas Morrione
         1. Unanimously approved as written
      4. Hypoglycemia Thea Fickett
         1. Unanimously approved as written
      5. Medical Other John Taylor
         1. Needs work session next meeting, discuss the following:
            1. Members to bring sample cases for review
            2. Polypharmacy
            3. Multiple diagnosis with cumulative effect
      6. Mental Health Daniel Potenza
         1. Unanimously approved with changes
            1. Add footnote: See road test description in Appendix
            2. Clarify which diagnoses can be “Recovered”, per Profile Level 2
      7. Musculoskeletal & Neurological Thea Fickett
         1. A physician is needed to take the lead on this revision since Dr. Giunti resigned
      8. Narcolepsy Patrick Keaney
         1. In process
      9. Obstructive Sleep Apnea Patrick Keaney
         1. In process
      10. Prescription Medications and/or Opioid Replacement Therapy Thea Fickett
          1. Unanimously approved as written
      11. Seizures/Epilepsy John Taylor
          1. Unanimously approved as written
      12. Substance Use Disorder Thea Fickett
          1. Unanimously approved as written
      13. Unexplained Alteration/Loss of Consciousness John Taylor
          1. In process
      14. Vision Disorders Linda Schumacher-Feero
          1. Unanimously approved as written
          2. Dr. Schumacher-Feero requested that Esterman examples be e-mailed to members
   2. Crash history availability to clinicians completing CR-24 Thea Fickett
      1. BMV may discuss crash history with clinicians needing information to complete Driver Medical Evaluation (CR-24).
5. New Business:
   1. Board resignations Thea Fickett
      1. Eileen Fingerman, Family Medicine and Geriatrics
      2. Gene Giunti, Physical Medicine and Rehabilitation
      3. Alejandro Velasco, Cardiology
   2. Membership List Thea Fickett
      1. Reminder that member contact information is public
      2. Notify Thea Fickett of address or contact information changes by April 9
   3. Statistics Thea Fickett
      1. Medical statistics review and open discussion
         1. Note: 2020 statistics may possibly be skewed due to COVID restrictions and BMV closure for part of the year.
         2. Medical Review – number of reviews 2018, 2019, 2020
         3. Medical Review Summary for June 2020 – DRAFT
            1. Draft shows format of report and progress in compiling statistics
            2. Draft only shows a snapshot in time, but some interesting associations between diagnosis and crash history are noted
            3. 5-year crash history reflects total number of crashes during 5-year look back from June 2020, for drivers with reviews during that month.
            4. Crash history reflects total crashes and does not differentiate between “at fault” or “not at fault” crashes
         4. Need to obtain crash rate for ALL drivers for same time frame for comparison
            1. Obtain crash rate for new drivers (e.g. 16-18 year-old) and look at what medical conditions exceed that crash rate, since current public policy perceives the crash rate for this population as acceptable for licensure
            2. Obtain crash history with 5-year look back for ALL drivers and new drivers, for comparison with medical
            3. Find TOTAL number of drivers for comparable time
         5. BMV will continue to work on compiling medical statistics
         6. Dr. Morrione requested road test outcomes for dementia for June 2020
      2. Vision Summary review and discussion
         1. NOTE: Waivers of vision testing were granted during part of 2020 due to COVID.
         2. Obtain percentage of ALL drivers with crashes for the same time to compare with medical
      3. Statistics are needed to inform MAB regarding correlation between crashes and specific medical conditions
   4. Final MAB approval of rule revisions needs to be accomplished by November 2021.
      1. Members agreed that an Ad Hoc meeting will be needed to finish review of FAP’s not yet finalized, to allow final sign-off on all FAP’s at the November 5, 2021 meeting.
      2. An Ad Hoc meeting date was agreed upon by Doctors Keaney, Lodato, Morrione, Potenza, Schumacher-Feero, and Taylor. Those not present will be notified.
   5. Thomas Morrione is Medical Director of New England Rehabilitation of Portland. He volunteered to take the lead on the Musculoskeletal and/or Neurological Conditions FAP revision. The Associate Medical Director at NERH specializes in Physical Medicine and Rehabilitation and will participate in review and revision of the FAP as well. All members were supportive.
6. Assignments:
   1. Follow-up with SOS regarding MAB vacancies Thea Fickett
   2. FAP drafts to be completed prior to September 2021
      1. Chronic Pulmonary Disease Patrick Keaney
      2. Medical Other All Members
      3. Musculoskeletal & Neurological Thomas Morrione
      4. Narcolepsy Patrick Keaney
      5. Sleep Apnea Patrick Keaney
      6. Unexplained Alteration/Loss of Consciousness John Taylor
   3. Make changes to Mental Disorders FAP Daniel Potenza
   4. Scan Esterman Test result examples to Appendix Thea Fickett
   5. E-mail copies of Esterman examples to members Thea Fickett
   6. Update online member contact information Thea Fickett
   7. Continue to identify and request statistics needed to inform MAB regarding correlation between crashes and specific medical conditions All Members
      1. TOTAL number of drivers for comparable time
      2. Percentage of ALL drivers with crashes for same time, to compare with medical and vision populations
      3. Crash rate for ALL drivers for same time frame for comparison
      4. Crash rate for new drivers (e.g. 16-18 year-old) for comparison to medical and vision conditions
      5. Crash history with 5-year look back for ALL drivers and new drivers, for comparison with medical and vision
   8. BMV will continue to compile available medical and vision statistics Thea Fickett
   9. Forward road test outcomes for June 2020 dementia reviews to group Thea Fickett
   10. Determine if road test outcomes can be compiled for all diagnoses Thea Fickett
   11. Send notice of September 17, 2021 meeting to MAB at large Thea Fickett
7. Meeting Schedule:
8. Next Meeting Dates: Friday, September 17, 2021, 3:00 – 5:00 PM

Friday, November 5, 2021, 12:00 – 3:00 PM

1. Location: BMV, Executive Conference Room
2. Adjournment: 2:20 PM

Meeting Handouts:

1. Agenda

2. Minutes: November 1, 2019

3. FAP Drafts

Cardiovascular Conditions

Dementia

Hypoglycemia

Other Medical

Mental Disorders

Prescription Medications and/or Opioid Replacement Therapy

Seizures and Epilepsy

Substance Use Disorder

Visual Disorders

4. Updated membership list

5. Medical Review Statistics 2018, 2019, 2020

6. June 2020 Medical Summary DRAFT

7. Vison Statistics

Parking Lot:

* 1. Consider outside resources such as UNE or MaineGeneral to assist in compiling and analyzing statistics
     1. Considerations for using outside resource to review statistics:
        1. Confidentiality agreements would be needed
        2. Students would need training in internal BMV systems
        3. Arrangements should be sustainable
        4. Determine if data is qualitative or quantitative
        5. Considerations should include what data are available, what are the processes involved, what data are valued, how can data be linked to outcomes
        6. Research needs to educate BMV regarding specific medical conditions and risk for driving
        7. Communication is needed between investigators and MAB to inform FAP revisions
        8. Awareness of competing interests between Highway Safety, Public Safety, BMV which complicate data
        9. Availability of NHTSA funds (Missouri utilized NHTSA funds)
  2. Consider trial of DOSCI at time of license renewals