MVD-10125 REV. 05/15



NEW MEXICO TAXATION & REVENUE DEPARTMENT, MOTOR VEHICLE DIVISION

VISION REPORT



Please be advised that the decision contingent upon the information pr	Medical Advisory Board Use Only								
and the motoring public, that all qu of physicians, who may request add confidential use of the physician, pa	Approved								
ALL INFORMATION MUS		Denied							
Applicant Information									
Applicant's Name (Last, First, Middle Initial)						Date of Birth			
Mailing Address				City, State ZIP Code					
Telephone Number	E-mail Address		So	ocial Sec	urity Number	Driver's License Number			
			I						
1. Give date of last examination		TT			3. Visual Fields – Full? If	not normal, in			
2. VISUALACUITY	O.D.	O.S.	0.0	J.					
Without glasses						+++-7	Stri-		
With glasses or contact lenses (state which/both)									
4. DIPLOPIA		If present, is it corrected?							
5. Describe conditions impairing	patient's vision								
6. Are any of the patient's vision defects/disabilities progressive?						No			
7. List the kind, quantity and freq	uency of any m	nedication with w	hich the	patien	t is being treated.				
8. From a vision standpoint only,		apable of safe an	d compe	etent dr	iving? (Please refer to stand	lards on next	page.)		

9.Recommended restrictions:								
10. Recommended renewal interval:				2				
□ 1 year □ □ 8 years □ □		issue driver's license		3 years	4 years			
Physician's name (print clearly)		Office telephone number						
Office Address	City, State ZIP Code							
Physician's Signature	Date Signed		License Number					
Vision Report Form - Instructions for Physicians								
The Motor Vehicle Division's Medical Advisory Board may review the Medical Report and make recommendations with respect to the patient's application for a new or renewal driver's license or permit.								
The final decision to accept or deny an application is the responsibility of the MVD.								
Physicians are asked to type or print all information carefully and legibly, to complete every section, and to follow these instructions when completing the Medical Report form:								

Applicant Information:

Please start with the applicant's LAST NAME and print all information neatly. Complete all items, including Social Security Number (SSN). The SSN is confidential and will NOT be printed on the driver's license or permit.

• Physician's Report:

- #5 Describe ALL diseases or conditions that apply and could affect the patient's ability to drive safely and competently. Do NOT include diagnoses if they do not actually affect the applicant's ability to drive safely. Be sure to indicate treatment details, including dosage and level of control. Continue on another sheet of paper if necessary.
- #6 Indicate by checking yes or no whether the disease or condition is progressive.

#8 If the applicant is NOT capable of driving safely, please explain, continuing on the reverse or on a separate sheet of paper.

- #9 Specify any driving restrictions that are appropriate based on the patient's disease or vision condition.
- #10 Indicate recommended time period to next license renewal date based on the patient's disease or vision condition and the appropriate frequency of reevaluation.

• Vision standards:

Visual acuity must be at least 20/40 in the better eye, with or without corrective lenses. Vision between 20/50 and 20/80 reports reviewed by medical board, may receive license but with restrictions. Minimum vision must be 20/80 in the better eye to be licensed. Drivers must have a visual field of 120 degrees in the horizontal meridian, with at least 30 degrees in the nasal field of one eye.

- Physician's name, contact information, signature, date and license number: Please complete ALL sections NEATLY.
- Return completed form to MVD Driver Services Bureau:

Please return the completed Vision Report to Attn: Drivers Services Bureau, Motor Vehicle Division, P.O. Box 1028, Santa Fe, NM 87504-1028.

Otherwise, the driver may take the Vision Report to a MVD field office for issuance of a permit or driver's license based on the physician's recommendations.