

MEMBER OF



# Medical Standards

Fitness to Compete

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# SECTION 1 - INTRODUCTION

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## 1. GENERAL

### 1.1. Introduction

The objective of these Motorsport Australia Medical Standards (**Standards**) is to guide medical examiners and Motorsport Australia in assessing the fitness and capacity of the individual to be issued and hold a Motorsport Australia Competition Licence and their fitness to compete.

Motorsport Australia aims to balance safety for all participants with inclusivity and support for those wishing to compete at all levels of motorsport.

Many enthusiasts in the past may have been denied participation in motorsport if their disabilities and conditions render them UNFIT to meet the requirements of long-distance high-speed competition. However, they may be quite capable of participation in short events, such as hill climbs, sprints, and club meetings.

A high standard is required in those areas of physical fitness which have a vital relationship to the safety of the individual's performance. However, in areas not considered vital these standards have been relaxed.

Motorsport Australia will endeavor to issue a licence to all applicants (where safe and appropriate) regardless of the resultant limitations of their condition, and where relevant, impose conditions on the applicant's licence limiting them to activity within their physical or cognitive capabilities subject to an appropriate medical clearance being provided.

The design of the modern helmet together with the hearing protection necessary, due to noise levels produced in racing, makes it unnecessary for a driver to rely on their hearing. Motorsport Australia therefore agrees that deafness should not exclude a driver from competing. Injuries or illness resulting in a disability must be reported, and a confidential medical report of the diagnosis and prognosis of the injury forwarded to Motorsport Australia as soon as possible. This in turn will be attached to the driver's medical history.

These Standards are reviewed periodically to ensure that they reflect current understanding and practice. The Standards are the result of several advisors, including the clinical members of the National Medical Advisory Committee (**NMAC**), Motorsport Australia management and, where deemed necessary, clinical specialists and expert organizations. The nature and wording of the Standards draw from several sources, including the updated FIA Medical Licensing Standards (Appendix L). It is important that applicants seeking a competitive license, whether for the first time or for renewal, regularly review the Motorsport Australia Medical Licensing Standards to ensure that they are working with the most recent version.

The FIA Medical Commission has introduced a mandatory requirement for competitors in International events, including rallies:

- an International Medical Card for recording details of an accident be required,
- a mandatory medical examination of those competitors who have been involved in an accident at the event.

The medical details should be forwarded to the Medical Assessor ([medical@motorsport.org.au](mailto:medical@motorsport.org.au)) to be attached to the competitor's medical history.

## **1.2. Assessment of fitness to compete**

These standards do not include detailed specifications to cover all individual medical conditions. Individuals may still not be issued a licence or may have it cancelled by Motorsport Australia on medical grounds, despite complying with the details specified in this standard.

Motorsport Australia may request a further report from an individual's treating Specialist in addition to their General Practitioner and though an opinion relating to the assessment of medical fitness may be given by an individual's medical examiner, Motorsport Australia retains unfettered discretion as to whether to issue or maintain a licence at all, in part or in full. Except where specific standards apply (e.g. visual acuity) the criteria used by Motorsport Australia in deciding whether an individual can hold a licence is whether the medical condition or disability is 'likely' to interfere with the individual's performance of those activities in respect to the grade of licence, or whether it presents a potential danger to that individual or others. The word 'likely' is to be interpreted as meaning 'something more than a remote possibility'. In all doubtful cases, refer to Motorsport Australia.

Motorsport Australia is entitled to request further information or to request further investigations at any stage in relation to the decision to issue or maintain a licence notwithstanding:

- (a) the stage of the application process;
- (b) whether or not a licence has been issued;
- (c) that the information has been asked for in these standards;
- (d) that Motorsport Australia may not have asked for that information in the past;
- (e) that an individual's medical examiner is of a certain opinion, including in relation to whether an individual is fit to compete;
- (f) that Motorsport Australia may have accepted certain information, or a lack of information, in previously granting a Competitor Licence; or
- (g) that the individual has already provided similar or the same information to Motorsport Australia.

Motorsport Australia is entitled to take into consideration an individual's failure to comply with this request in making a decision to issue a Competition Licence.

### **1.3. Statement by Applicants**

An applicant for a Competition Licence shall complete the Health Statement on the application, with a declaration as to its accuracy, on the application form. All such information shall remain confidential.

### **1.4. Classification of Standards**

An individual's medical fitness will be graded as 'International' or 'National' by Motorsport Australia on the evidence of the completed Medical Record form together with any other information provided, including specialist medical reports, relevant investigation reports, medical reports following injuries sustained during competition or Stewards' reports.

The medical requirements for an International Licence vary significantly from that of a National Licence.

National medical fitness qualifies the applicant medically for all motorsport events at national level, including Circuit Racing. Competency for the individual discipline is provided by the type of licence.

International medical fitness qualifies the individual medically for an International Licence. The holder of the licence is then eligible to compete in international and national events according to the grade of licence held.

### **1.5. Mandatory frequency of examination**

Applications for renewal of a Competition Licence must be accompanied by a completed Medical Record form in the form requested by Motorsport Australia. The frequency of renewal and the medical requirements are as follows:

- (a) International Licence
  - (i) Annually, including a full clinical examination including in particular: a cardiovascular aptitude examination, an eye test and an evaluation of the musculoskeletal system.
  - (ii) Cardiac Aptitude
    - (A) 59yo and under - An ECG within the previous 36 months is required.
    - (B) 60yo and over - An ECG and an exercise tolerance test (ETT) within the previous 12 months is also applicable for individuals 60 years of age and over. Subsequently, an ECG should take place every year and an Exercise Tolerance test and cardiology consultation every two years.
    - (C) 50yo and over - additionally, a cardiologist review is required every three years
- (b) National Licence
  - (i) 16 - 44 years of age: On application, or more frequently if deemed necessary by Motorsport Australia.

- (ii) 45 years of age and over: Every two years, or more frequently if deemed necessary by Motorsport Australia which may include referral for specialist consultation.
- (c) At all times the frequency of examinations and the imposition of special requirements may be determined by Motorsport Australia.

Medical fitness for a national or an international licence may be granted subject to further medical specialists and/or Motorsport Australia Stewards' reports.

Reports from competition Chief Medical Officers or Motorsport Australia Stewards will suffice for immediate suspension of a Competition Licence on medical grounds. Where the license has been suspended on medical grounds, a medical doctor's review is required before an individual's license can be reinstated.

Motorsport Australia shall advise withholding the issue or renewal of the Competition Licence if there is any doubt as to whether a licence should be issued or maintained until any further information required by Motorsport Australia is received.

## SECTION 2 - MEDICAL STANDARDS

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### 2. PHYSICAL STATE

#### 2.1. Disability

(a) *Fitness to Compete*

Any individual with a disability or other impairment which may reasonably compromise their ability to safely handle an automobile under racing conditions will be permitted to participate, providing prior approval has been granted by Motorsport Australia.

(b) *Requirements*

Individuals with a disability or impairment which may reasonably compromise their ability to safely handle an automobile under racing conditions should contact Motorsport Australia. Depending on the nature of the disability, Motorsport Australia may request further information, including that the individual obtain a report from the individual's medical examiner for consideration by Motorsport Australia.

Where a report is requested by Motorsport Australia, the individual's medical examiner should give their opinion of the following:

- (i) Nature of individual's disability.
- (ii) Stability of the individual's condition.
- (iii) Functional impact of the applicant's disability.
- (iv) Medication, dosage, and date of last change of dosage (if any).
- (v) Opinion of the individual's fitness to compete in motorsport.

(c) *Note*

If Motorsport Australia considers that the individual's disability is likely to impair the individual's driving ability under racing conditions, they may be required to demonstrate their ability to Motorsport Australia in the context of medical, sporting, and technical criteria viz:

- (i) Medical: Evaluation of the physical capacity of the individual.
- (ii) Sporting: Evaluation of the driving ability of the individual and an evaluation of their ability to extract themselves from an automobile in case of immediate danger (accident, fire etc.).

- (iii) Technical: Where appropriate Motorsport Australia may be able to issue the individual with a certificate indicating the modifications which must be made to the automobile. In such circumstances, Motorsport Australia may request a report from the applicant's Club and Scrutineers on specialised equipment to assist driving (i.e. Hand controls, compliance of those devices with Australian Design Rules, etc.).
- (d) Further information can be found in the Motorsport Australia Adaptive Racing Policy

## 2.2. Obesity

### (a) *Fitness to Compete*

- (i) Although Body/Mass Index (BMI) should be interpreted within the context of the individual's overall physical condition, the measurement is valuable.
- (ii) An individual with a BMI (mass in kilos divided by the square of the height in metres) over 30 is UNFIT to compete unless approved by Motorsport Australia.

### (b) *Requirements*

- (i) Individuals who do not meet the fitness to compete requirements must obtain a report from the individual's medical examiner for consideration by Motorsport Australia.
- (ii) In that report, the individual's medical examiner should give their opinion on the individual's fitness to compete in motorsport due to their condition or any effects their condition may have on their body.

### (c) *Note*

If Motorsport Australia considers that the individual's obesity is likely to impair the individual's driving ability under racing conditions, they may be required to demonstrate their ability to Motorsport Australia in the context of medical, sporting, and technical criteria viz:

- (i) Medical: Evaluation of the physical capacity of the individual.
- (ii) Sporting: Evaluation of the driving ability of the individual and an evaluation of their ability to extract themselves from an automobile in case of immediate danger (accident, fire etc.).

- (iii) Technical: Where appropriate Motorsport Australia may be able to issue the individual with a certificate indicating the modifications which must be made to the automobile. In such circumstances, Motorsport Australia may request a report from the applicant's Club and Scrutineers on specialised equipment to assist driving (i.e., Hand controls, compliance of those devices with Australian Design Rules, etc.).

### 3. GENERAL MEDICAL AND SURGICAL

#### 3.1. All

##### (a) *Fitness to Compete*

An individual suffering from any wound, injury, recent surgery, having any part of their body immobilised by a cast or who uses any orthopaedic appliance which is likely to interfere with the safe handling of an automobile under racing conditions is UNFIT to compete unless approved by Motorsport Australia.

An individual who suffers from any disease or disability (congenital or acquired) which may render them likely to suddenly lose control of an automobile under speed or racing conditions is UNFIT to compete.

##### (b) *Requirements*

Individuals who do not meet the fitness to compete requirements must obtain a report from the individual's medical examiner for consideration by Motorsport Australia.

In that report, the individual's medical examiner should give their opinion of the following:

- (i) Whether the impairment is likely to interfere with the safe handling of an automobile under racing conditions. Considerations will include, but not be limited to, limitations of mobility, dexterity, impairment due to pain, and the ability to safely exit a vehicle in the case of accident.
- (ii) If so, the likely duration of the impairment - that is, whether the condition is temporary or permanent.
- (iii) The cause (if known) and stability of the individual's condition.
- (iv) When the individual was first diagnosed.
- (v) In the case of temporary impairment, an estimate of when the impairment will resolve, and the individual can safely compete.
- (vi) In the case of permanent impairment or ongoing requirement to use an orthopaedic appliance, advice may be required from a specialist or occupational therapist. (See Section 2.1 above)

- (vii) Medication, dosage, and date of last change of dosage (if any).
- (viii) Opinion on the individual's exercise tolerance and fitness to compete in motorsport.

(c) *Note*

An individual on medication should also be assessed with reference to the Motorsport Australia Anti-Doping Policy. This applies to ALL medical, surgical and psychiatric conditions.

### 3.2. Locomotor System

(a) *Fitness to Compete*

Any active disease of the bones, joints, muscles or tendons, or gross anatomical defect, is UNFIT to compete unless approved by Motorsport Australia.

An individual with any condition causing progressive weakness or limitation of movement which is likely to interfere with the safe handling of an automobile under racing conditions is UNFIT to compete unless approved by Motorsport Australia.

An individual with a major anatomical defect which is likely to interfere with the safe handling of an automobile under racing conditions is UNFIT to compete unless approved by Motorsport Australia.

An individual with hemiplegia, quadriplegia or paraplegia is UNFIT to compete unless approved by Motorsport Australia.

(b) *Requirements*

Individuals who do not meet the fitness to compete requirements must obtain a report from the individual's medical examiner for consideration by Motorsport Australia.

In that report, the individual's medical examiner should give their opinion of the following:

- (i) The cause and stability of the individual's condition.
- (ii) When the individual was first diagnosed.
- (iii) Medication, dosage, and date of last change of dosage (if any).
- (iv) Opinion on the individual's fitness to compete in motorsport.

(c) *Note; Please also see the requirements under section 2.1*

### 3.3. Digestive System

(a) *Fitness to Compete*

An individual suffering from chronic disease or surgery of the digestive tract may be assessed as FIT provided that their general physical condition is satisfactory.

An individual with chronic liver disease causing portal hypertension, impaired protein synthesis or impaired blood clotting is UNFIT to compete unless approved by Motorsport Australia.

An individual with significant organomegaly (predominantly of the liver and/or spleen) is UNFIT to compete unless approved by Motorsport Australia.

An individual with gastro-intestinal dysfunction resulting in the requirement for ongoing parenteral replacement of fluid and/or electrolytes is UNFIT to compete unless approved by Motorsport Australia.

*(b) Requirements*

As per section 3.2 (b).

### **3.4. Renal and Urinary System**

*(a) Fitness to Compete*

An individual suffering from renal disease or surgery of the urinary tract may be assessed as FIT, provided that their general physical condition is satisfactory.

An individual suffering from chronic renal failure requiring peritoneal dialysis or haemodialysis is UNFIT to compete unless approved by Motorsport Australia.

An individual who has undergone renal transplant surgery is UNFIT to compete unless approved by Motorsport Australia.

*(b) Requirements*

As per section 3.2 (b)

### **3.5. Malignancy**

*(a) Fitness to Compete*

An individual with a current malignancy of any system, other than non-melanoma skin cancer, is UNFIT to compete unless approved by Motorsport Australia.

*(b) Requirements*

(i) As per section 3.2 (b), and:

(ii) Planned treatment, whether in the form of surgery, chemotherapy, radiotherapy or other modality.

If the individual's medical examiner cannot provide an opinion on their fitness to compete in motorsport or Motorsport Australia medical personnel request further information, the individual must obtain a report from their treating specialist(s) addressing the unanswered questions.

## 4. GENERAL MEDICAL CONSIDERATIONS

### 4.1. Medication

#### (a) *Fitness to Compete*

An individual may require medical treatment for an ongoing medical or surgical condition for it to be satisfactorily controlled. However, the side-effects of the medications may make the individual UNFIT or ineligible to hold a Competition Licence.

Individuals taking the following medication are UNFIT to compete without approval by the individual's medical examiner and Motorsport Australia:

- (i) Some anti-hypertensives.
- (ii) Some asthma preparations.
- (iii) Tranquillisers (major and minor).
- (iv) Cardiac medications including anti-arrhythmics.
- (v) Narcotics and sedatives.
- (vi) Oral hypoglycaemics.
- (vii) Insulin.
- (viii) Psychoactive drugs.
- (ix) Anti-epileptics.
- (x) Anticoagulants.
- (xi) Antiplatelet agents.
- (xii) Medications for movement disorders, e.g., Parkinsonism

#### (b) *Requirements*

- (i) As per section 3.2 (b), and:
- (ii) Any adverse medication reactions that have occurred

#### (c) *Note*

It is required that an applicant for a Competition Licence shall give full details of the nature and dose of any medication that they may be taking at the time of applying for their licence. They are also required to notify Motorsport Australia of any regular medication that may be prescribed or any other change in existing medication.

Some medications will require a Therapeutic Use Exemption (for some levels of competition). Refer to the Motorsport Australia Anti-Doping Policy (available at [motorsport.org.au](http://motorsport.org.au)). The agency responsible for assessing the need for and issuing a T.U.E. in Australia is Sport Integrity Australia ([sportintegrity.gov.au](http://sportintegrity.gov.au)) on behalf of the Australian Sports Anti-Doping Agency (ASADA), which operates under the authority of the World Anti-Doping Agency (WADA).

For further information on Therapeutic Use Exemption applications see the Australian Sports Drug Medical Advisory Committee's website (available at [asdmac.gov.au](http://asdmac.gov.au)).

## 4.2. Cardiovascular System

### (a) *Fitness to Compete*

An individual with any abnormality of the cardiovascular system, likely to interfere with the safe handling of an automobile under competition conditions is UNFIT to compete unless approved by Motorsport Australia.

An individual with any arrhythmia which may indicate underlying cardiac disease or be associated with hypotension or syncope is UNFIT to compete unless approved by Motorsport Australia.

Any individual 45 years of age and over will need to have their cardiac risk assessed, with reference to the Australian CVD Risk Calculator: [cvdcheck.org.au/calculator](http://cvdcheck.org.au/calculator)

An individual with a resulting relative risk score of "High Risk" is UNFIT to compete unless approved by Motorsport Australia. Consideration should also be given to performing a 12-lead ECG and/or Exercise Tolerance Test.

An individual with coronary occlusion, ischaemic heart disease, valvular heart disease, coronary artery bypass grafting and Percutaneous Coronary Intervention (PCI) including placement of coronary artery stents is UNFIT to compete unless approved by Motorsport Australia.

### (b) *Requirements*

(i) As per section 3.2 (b), and:

(ii) Opinion on the individual's exercise tolerance and fitness to compete in motorsport.

If the blood pressure is noted to be above 150/90 and if it remains above this level in subsequent measurements during the examination, then further investigation to exclude significant cardiovascular disease is necessary.

## 4.3. Respiratory System

### (a) *Fitness to Compete*

Individuals with unstable respiratory conditions, including chronic obstructive pulmonary disease (COPD), acute and chronic asthma are UNFIT to compete unless approved by Motorsport Australia.

### (b) *Requirements*

As per section 3.2 (b)

#### 4.4. Diabetes

(a) *Fitness to Compete*

An individual with Diabetes Mellitus is UNFIT to compete unless approved by Motorsport Australia.

(b) *Requirements*

Motorsport Australia may issue a licence to an individual who does not meet the fitness to compete requirements where that individual:

- (i) has demonstrated a responsible and informed attitude towards the control of a diabetic condition that has been stabilised, provided that there is no evidence of any visual, cardiovascular, neurological, or other relevant physical changes attributable to diabetes; and
- (ii) provides Motorsport Australia with a report from the individual's Endocrinologist, Specialist or treating General Practitioner regarding the individual's diabetes which includes the following information:
  - (A) Stability of the individual's condition.
  - (B) Medication, dosage, and date of last change in dosage (if any).
  - (C) Recent monitoring blood test results. These must not be more than three months old.
  - (D) Individual's understanding of the condition and how well they handle hypoglycaemic episodes.
  - (E) Any evidence of diabetic complications.
  - (F) Is the individual aware that their sugar levels are dropping when they have a hypoglycaemic episode.
  - (G) Opinion on the individual's fitness to compete in motorsport.

#### 4.5. Central Nervous System

(a) *Fitness to Compete*

An individual shall have no significant mental illness. For individuals with epilepsy, see Section 6 - Epilepsy. An individual with a progressive or non- progressive disease of the nervous system which could interfere with the safe handling of an automobile under racing conditions is UNFIT to compete unless approved by Motorsport Australia.

(b) *Requirements*

Individuals who do not meet the fitness to compete requirements must obtain a report from the individual's medical examiner for consideration by Motorsport Australia.

In that report, the individual's medical examiner should give their opinion of the following:

- (i) Nature and functional impact of the condition.
- (ii) Stability of the individual's condition.
- (iii) When the individual was first diagnosed.
- (iv) Medication, dosage, and date of last change in dosage (if any).
- (v) Opinion on the individual's fitness to compete in motorsport.

#### **4.6. Head Injuries**

##### *(a) Fitness to Compete*

Individuals with concussion, traumatic brain injury, or fracture of the skull without associated intracranial injuries are UNFIT to compete until a satisfactory report, together with investigation results (X-rays, EEG, MRI and/or CT scan if indicated), is received and approved by Motorsport Australia.

Competitors with concussion should undergo a graduated 'Return to Sport' process and shall be declared unfit while remaining symptomatic. It is likely that individuals with concussion will remain UNFIT for seven days minimum while they progress through these Return to Sport procedures.

Individuals suffering multiple episodes of concussion over time are UNFIT to compete unless approved by Motorsport Australia and may require assessment by a neurologist/neuropsychologist. An individual may be assessed as unfit due to the increased risk of permanent injury based on the opinion of a specialist.

Individuals with intracranial injuries resulting in permanent brain injury or residual neurological deficit are UNFIT to compete unless approved by Motorsport Australia.

An individual with any head injury or surgery resulting in loss of cranial bone is UNFIT to compete. However, if the deficit is repaired with a plate, an assessment as FIT may be made by Motorsport Australia if there is no neurological deficit and there is a satisfactory report from a neurologist or neurosurgeon. A Competition Licence may be issued or renewed, but not less than twelve months after the surgery.

##### *(b) Requirements*

As per section 3.2 (b)

##### *(c) Note*

Concussion affects athletes at all levels of sport from the part-time recreational athlete through to the full-time professional.

Excellent resources for medical practitioners regarding assessment, management and return-to-sport procedures are available from the Australian Institute of Sport at [concussioninsport.gov.au/medical\\_practitioners](http://concussioninsport.gov.au/medical_practitioners), as well as the Motorsport Australia Concussion Management Guidelines.

Competitors with concussion should undergo a graduated 'Return to Sport' process and shall be declared unfit while remaining symptomatic. Sport specific skills may include coordination exercises or simulation combined with aerobic activities, progressing to karting and/or low risk warm up/practice laps.

The Return to Sport procedures can be found here;

[Return to Sport - Adult](#)

[Return to Sport - 18yo and under](#)

[Return to Learn](#)

## 5. EAR, NOSE AND THROAT

### 5.1. Auditory and Vestibular Function

#### (a) *Fitness to Compete*

The design of the modern helmet together with the hearing protection necessary, due to noise levels produced in racing, makes it unnecessary for a driver to heavily rely on their hearing. Motorsport Australia therefore agrees that deafness should not necessarily exclude a driver from competing.

Individuals with long-standing hearing loss or deafness may be assessed as FIT to compete.

Individuals with acute hearing loss or deafness are UNFIT to compete unless approved by Motorsport Australia.

Individuals with severe, active, acute, or recent vestibular dysfunction, resulting in a disturbance of balance, vertigo, or nystagmus, including transient disturbance, are UNFIT to compete unless approved by Motorsport Australia.

#### (b) *Requirements*

As per section 3.2 (b).

### 5.2. Nasal, Pharyngeal and Laryngeal Disorders

#### (a) *Fitness to Compete*

Individuals with acute or chronic disease of the mouth or nose, other than malignancy, may be assessed as FIT by Motorsport Australia.

Individuals with acute or chronic disease of the pharynx or larynx resulting in compromise of the airway are UNFIT to compete unless approved by Motorsport Australia.

Individuals requiring a temporary or permanent surgical airway (tracheostomy) are UNFIT to compete unless approved by Motorsport Australia.

- (b) *Requirements*  
As per section 3.2 (b).

## **6. EPILEPSY**

### **6.1. Introduction**

There are several types of seizures which can manifest in a variety of ways. The common feature is a period of repetitive, involuntary, uncontrolled activity. This activity may range from repetitive twitching of an individual body part to more easily recognisable whole-body convulsions with loss of consciousness. Some seizure types are very subtle, manifesting as a brief vagueness only or a subjective sensation. The duration of an individual seizure is also highly variable, lasting from a few seconds to hours.

Seizures are termed generalised when there is loss of consciousness. Focal seizures affect a discrete neurological function, which may include an impairment of consciousness.

There are many causes of seizures, including previous head trauma, extremely low blood glucose levels, infections like meningitis or encephalitis, prescription and illicit drugs and tumours inside the skull pressing on, or developing within the brain. Some seizures have no identifiable cause and are termed idiopathic.

Many people (5-10% of the population) have a seizure at some time in their life, though they may never be aware of it. A tendency to experience repeated, unprovoked seizures is called epilepsy.

Anyone who has a seizure for the first time should be seen by a medical practitioner.

Motorsport is an inherently risky activity, and we are constantly warned about the danger in motorsport. Competitors develop their skills such that they can keep their vehicle under control, despite high speeds and track hazards. It follows that anything that impairs that control, even for a brief period, poses a serious risk to the competitor, as well as other competitors, event officials and spectators. Therefore, it is important to minimise the risk of harm as much as possible.

### **6.2. Criteria to be met for motorsport licence approval**

Except as provided for in section 6.3, an individual with any history of a seizure at any time is UNFIT to compete unless approved by Motorsport Australia.

Where an applicant has had a seizure occurrence, whether generalised, complex, or simple, or the diagnosis of epilepsy, a conditional motorsport license may be approved if the applicant can provide either of:

- (a) Documentary evidence from a neurology or neurosurgical specialist of having been completely seizure free for 10 consecutive years, a recent EEG that shows no epileptiform activity and a statement that the applicant is compliant with medical advice including adherence to prescribed anti-seizure medication.
- (b) Documentary evidence from a neurology or neurosurgical specialist that any seizure activity is restricted to nighttime only for a period of ten consecutive years, a recent EEG that shows no daytime epileptiform activity and a statement that the applicant is compliant with medical advice including adherence to prescribed anti-seizure medication.
- (c) In the event that a previously stable seizure pattern changes, a conditional motorsport license may be approved if the applicant can provide one of:
  - (i) documentary evidence from a neurology or neurosurgical specialist that the change in seizure activity is due to a change in medication dose or frequency and apply the medication change criteria outlined below where anti-seizure medication has been started for the first time; or
  - (ii) documentary evidence from a neurology or neurosurgical specialist that the change in seizure activity is due to the competitor's decision to discontinue their own anti-seizure medication, in which case the competitor should either restart their medication and remain seizure free for ten years with periodic drug level monitoring and a normal EEG, OR, remain off their anti-seizure medication and be completely seizure free with no evidence of seizure activity on 3 EEGs over ten consecutive years.
- (d) If the change in seizure pattern is not related to a medication change, then it is to be treated as a new seizure as outlined above where an applicant has had a seizure occurrence; i.e. 6.2.(i).(a) or 6.2.(i).(b).
- (e) Where anti-seizure medication has been started for the first time, the applicant must provide either of:
  - (i) documentary evidence from a neurology or neurosurgical specialist of having been completely seizure free for ten consecutive years; or
  - (ii) documentary evidence from a neurology or neurosurgical specialist that any seizure activity is restricted to night time only for a period of ten consecutive years, with a recent daytime EEG that shows no evidence of epileptiform activity.
- (f) Where the dose or frequency of an established anti-seizure medication has been reduced in a person who currently holds a Motorsport Australia licence, that person shall be UNFIT to compete until the person can provide one of the following:
  - (i) documentary evidence from the neurology or neurosurgical specialist of having been completely seizure free for twelve consecutive months after the most recent dose reduction;

- (ii) documentary evidence from the neurology or neurosurgical specialist that any seizure activity is restricted to night time only for a period of twelve consecutive months, where this is a NOT new feature; i.e. there is no change in the seizure pattern; or
- (iii) documentary evidence from the neurology or neurosurgical specialist that any seizure activity is restricted to night time only for a period of ten consecutive years, where this is a new feature.

Note: Certain prescribed medications may render the applicant ineligible. Referral should also be made to the Motorsport Australia Anti-Doping Policy.

In some cases, there may be individual circumstances that need to be referred to the Motorsport Australia National Medical Advisory Council for further consideration. While every attempt will be made to use the information supplied as above, there may be a request for a specific piece of additional information in order to make a deliberation.

A conditional license requires that the individual have an annual medical assessment of their seizure disorder with their neurology or neurosurgical specialist.

There may be tailored restriction to the conditional license, for instance, an applicant with night time-only seizures may be restricted from competing in endurance events and night races.

### 6.3. Febrile seizures in children

#### (a) *Introduction*

In this section, a reference to a 'child' is to a person under 16 years of age at the time of applying for a license.

Seizure activity in the setting of a febrile illness, with no other cause identified, is called a febrile seizure. These usually take the form of a generalised seizure with whole body convulsions or shaking and typically occur on or shortly before the fever's upswing.

Febrile seizures may only happen once in a child's life (2-5% of the paediatric population) or may occur with subsequent febrile illnesses. They typically first occur in toddlers and usually fade away as the child gets older and usually cease beyond 11 years of age. Their occurrence does not automatically mean the child will develop epilepsy.

A child who has a first febrile seizure should be seen by a medical practitioner.

#### (b) *Criteria to be met for junior competitor licence approval*

For any seizures in a child other than febrile seizures, the criteria are the same as for an adult competitor (section 6.2).

A child with any history of a febrile seizure at any time is UNFIT to compete unless approved by Motorsport Australia.

For a child who has been diagnosed at any time with one or more febrile seizures, the applicant must supply documentary evidence from a neurology or neurosurgical specialist or a paediatrician of having been completely free of febrile seizures for three consecutive years immediately before the date of applying for a licence.

In some cases, there may be individual circumstances that need to be referred to the Motorsport Australia National Medical Advisory Council for further consideration.

While every attempt will be made to use the information supplied as above, there may be a request for a specific piece of additional information in order to make a deliberation.

#### **6.4. Documentation**

Any letter from your family practitioner, paediatrician, neurology, or neurosurgical specialist, submitted in support of a motorsport licence application, must include the following information:

- (i) Stability of your condition.
- (ii) When you were first diagnosed.
- (iii) The underlying cause of your seizure(s), if known.
- (iv) When you had your last seizure.
- (v) The date and result of your most recent EEG.
- (vi) What medication you are currently taking, including the frequency and dosage.
- (vii) When was the last time your medication dose or frequency was altered.
- (viii) An opinion on your fitness to compete in motorsport which should be of the order that your condition is so well controlled, either with or without medication that the risk of a seizure is of the same order as that of the general population.

#### **6.5. General principles for licence holders with a seizure disorder or epilepsy**

- (a) Take all anti-seizure medication when and as prescribed.
- (b) Ensure adequate sleep and do not drive when sleep deprived.
- (c) Avoid circumstances or the use of substances that are known to increase the risk of occurrence of seizures.
- (d) Keep in regular contact with your treating medical practitioner.

## 7. EYE

A full eye examination should occur on first application for an international or national licence. It should be repeated on the first licence application over the age of 18 as well as any change in vision stability including eye injury, new or change in corrective lenses, eye surgery or acute change in vision from any cause.

### 7.1. Visual acuity

#### (a) *General*

Visual acuity should be measured with a Snellen letter chart located six metres from the individual being tested. The chart should be well illuminated either by artificial room lighting or by internal illumination.

Each eye must be tested separately. The eye not being tested must be covered with an occluder or by the palm (not the fingers) of the hand.

Spectacle correction or contact lenses may be worn if needed to meet the visual acuity standard. It is not authorised to wear contact lenses during the first vision examination for an international license. If visual correction is required, the driver must wear their spectacles for this control.

The smallest line that can be read should be recorded and the number of errors made in reading the line must be counted.

The result must be expressed in terms of metric Snellen notation with a note of the number of errors made. The recording notation should be in the form 6/6 -3, where the 6/6 is the Snellen notation of the smallest line read and -3 is the number of mistakes in reading that line of letters.

Whether spectacles or contact lenses were worn must be recorded as 'with correction' or 'unaided'.

International Licence applicants must be assessed by an ophthalmologist or medical practitioner qualified to perform visual assessments

#### (b) *Standard*

An individual who meets these standards only with the aid of spectacles or contact lenses must wear those spectacles or contact lenses during any competition. An individual who does not meet the above standard (spectacles or contact lenses permitted) is UNFIT to compete unless approved by Motorsport Australia.

A reduction in visual acuity is most often due to uncorrected refractive errors (short sight or myopia, long sight or hypermetropia or astigmatism) which can be corrected with spectacles or contact lenses usually restoring visual acuity to normal. Sometimes lowered visual acuity is the result of an eye disorder or disease. Those who fail to meet the visual acuity standard should be advised to have an eye examination.

An individual with less than 6/18 in the worse eye may be issued with a national license that limits the type of competition in which that individual may participate. An individual with less than 6/18 vision in the worse eye may be limited to single car start events such as hill climbs, sprints, and rallying. If the driver is monocular, they must use a full-face helmet with the visor in the closed position when driving.

## 7.2. Visual fields

### (a) *General*

Visual fields are assessed in the general medical examination by the confrontation method for each eye separately.

The eye not under test must be covered with an eye occluder or with the palm (not the fingers) of the patient's hand.

If the confrontation test shows any indication of loss of visual field in either eye, the individual must be referred for a full eye examination and full automated perimetry.

Individuals with a history of serious head injury or a past or present history of any ocular disease that may be associated with visual field loss should also be referred for full perimetric examination of their visual fields. An individual with only one eye does not have a full visual field and is UNFIT to compete unless approved by Motorsport Australia.

### (b) *Standard*

<b>FIA International Licence:</b>	Static field of vision: at least 120°; the central 20° must be free from any alteration. A perimetry test must be carried out.
<b>Motorsport Australia National Licence:</b>	Visual fields shall be normal.

Stereoscopic Vision: must be functional. In case of doubt it must be assessed using Wirth, Bagolini (striated lenses) or similar tests.

An individual who does not meet the above standard is UNFIT to compete unless approved by Motorsport Australia.

Note: For Motorsport Australia National Licenses, if there is any visual field loss, including a limitation of visual field due to monocular vision, a conditional national license restricting the individual to single car start events such as hill climbs, sprints and rallying may be issued provided:

- (i) the underlying cause of the loss is entirely stable, and, in the opinion of an ophthalmic practitioner, any further loss of visual field is unlikely, and

- (ii) the binocular visual field has a horizontal extent of at least 140 degrees within at least 15 degrees above and below the horizontal meridian.

Individuals who cannot meet the requirements noted above may be issued with a license under the conditions below.

*(c) Race Licence Applicants with Restricted Visual Fields*

Individuals who do not meet the requirements of these standards in respect to visual fields may be permitted to participate in motor races provided they:

- (i) meet certain additional pre-licence conditions (see (d) below);
- (ii) comply with specific requirements in respect to mirrors on vehicles;
- (iii) utilise specific controls regarding helmets and visors;
- (iv) demonstrate a compulsory amount of experience and be successfully observed in at least two specified events; and
- (v) participate in on-going monitoring in respect of their driving performance when competing.

Individuals who meet these standards, save for the standards relating to individuals for racing licenses mentioned in clause 7.2 (a) and (b) (Visual Fields), may apply for a Provisional Circuit license, however Motorsport Australia requires additional reports and assessment certification on each individual to demonstrate that the additional risk which is considered to exist through the inability to meet the requirements of clause 7.2 (a) and (b) is balanced out (controlled) by additional assessment criteria and confirmed experience in other events.

*(d) Additional pre-licence conditions*

Motorsport Australia requires individuals for a provisional circuit license who do not meet the standards for Visual Fields mentioned in clause 7.2 (a) and (b) are to be assessed as follows:

- (i) Provide evidence that the individual has experienced the condition which has led to the reduced visual field for a minimum of 24 months (two years).
- (ii) Minimum visual acuity (corrected or uncorrected) of at least 6/6 in one eye.
- (iii) Colour vision: normal - tested using the Ishihara test. A Flag Test is not acceptable
- (iv) Static field of vision: Confirmation by an Optometrist or Ophthalmologist of the individual's visual field, in the form of Computerised Perimetry (Driving test) or Goldman Perimetry, demonstrating a visual field of at least 120 degrees along the horizontal meridian and within 10 degrees above and below the horizontal. A "Confrontation" field test is not sufficient.
- (v) Sight correction: the wearing of contact lenses is permitted provided that:
  - (A) contact lenses have been successfully worn for at least 12 months;

- (B) they are worn daily;
- (C) the lenses can be worn throughout the average day without the development of any major symptoms or signs and without any loss of visual acuity during the day; and
- (D) the visual acuity standard is met while wearing the contact lenses.

#### If the Above Conditions Are Met

If the above conditions are met, the individual may be considered as eligible for a Motorsport Australia Observed Licence Test (OLT), which must be carried out by an independent official pre-approved by Motorsport Australia.

#### Additional Conditions

If the OLT is passed, the driver is eligible for a Provisional Circuit Licence. Normal Motorsport Australia upgrading process will then commence.

The individual must use a full-face helmet with the visor in the closed position when driving.

The individual's vehicle must be fitted with two external rear vision mirrors, and if a two-seat car, also an "interior" rear vision mirror.

The individual will be provided with a letter by Motorsport Australia which is to be given to the Stewards of the Meeting before competing at each event which is undertaken when competing with a Provisional Circuit Licence. This letter will introduce the individual and request the driver be observed by the Stewards during the Meeting. Should they have any concerns, they are to advise the driver and Motorsport Australia. If the driving is satisfactory, an acknowledgement is required, and this is to be advised to the driver and Motorsport Australia. This will be required to be completed at each event and on at least two occasions prior to renewal of the license each year.

### **7.3. Eye movements**

#### *(a) General*

An individual with a past or present history of diplopia (double vision) shall be referred for a full eyesight examination and full assessment of their ocular motility. The purpose of the full eye examination is to establish whether diplopia does or may occur, when it occurs, the reason for it occurring and the extent to which it may be a risk in motor racing.

(b) *Standard*

<b>FIA International Licence:</b>	Normal binocular vision
<b>Motorsport Australia National Licence:</b>	An individual who experiences diplopia only in extreme lateral gaze may be issued with a conditional national licence limiting them to single car racing and rally driving.

An individual who does not meet the above standard is UNFIT to compete unless approved by Motorsport Australia.

Strabismus is not a reason for refusing a national license provided visual acuity requirements are met.

#### 7.4. Colour vision

(a) *General*

Colour vision is tested only at the time of the first applying for a racing license since inherited abnormal colour vision does not change through life. Colour vision deficiencies that may be acquired later in life as a result of eye disease will almost always be associated with loss of visual acuity and/or loss of visual fields which are always tested at annual or biennial Motorsport Australia medical examinations.

(b) *Standard*

<b>FIA International Licence:</b>	Normal colour vision. There must be no risk of any errors in the perception of the colours of the flags used in international competitions
<b>Motorsport Australia National Licence:</b>	Normal colour vision, or if colour vision is not normal:
	<ul style="list-style-type: none"> <li>- the ability to arrange the colours of the Farnsworth D15 test with no more than one diametrical crossing</li> </ul>

(c) **Requirements**

Individuals who do not meet the above standard are UNFIT to compete unless approved by Motorsport Australia.

The following process shall be used to determine if an individual is FIT to compete:

- (i) Colour vision screening test with the Ishihara Test for Colour Blindness under "daylight" fluorescent light using the 38 plate series. The plates should be shown in random order to reduce the chance of an erroneous result because the correct answers have been learned.
- (ii) More than three errors (Four or more) is a FAIL.
- (iii) An individual who fails, or if there is any doubt, should be referred to an optometrist or ophthalmologist for further assessment of their colour vision.
- (iv) The further assessment of colour vision shall be via
  - (A) the Farnsworth D15 test, to test the severity of the colour vision defect,
- (v) An individual who fails the Farnsworth D15 test by making two or more diametrical crossings is assessed as UNFIT.

### **7.5. Spectacles, sunglasses and contact lenses**

Spectacles should be fitted with CR39 or polycarbonate lenses. Glass lenses even if heat or chemically treated to enhance impact resistance are not acceptable.

Sunglass lenses should be fitted with CR39 or polycarbonate lenses. They must be tagged at the time of purchase as complying with Australian Standard AS 1067-1990 Sunglasses and Fashion Spectacles.

Contact lenses may be worn during racing provided the prescribing optometrist or ophthalmologist certifies in writing that the requirements stated in clause 7.2(d)(v) are met.

### **7.6. Refractive surgery**

A licensed driver must not undertake competitive driving for three months after refractive surgery and is UNFIT to compete during this time.

Following this period, the individual remains UNFIT to compete until the individual provides to Motorsport Australia for its consideration and approval a report from the attending surgeon which certifies in writing that:

- (a) the eye is stable;
- (b) the risk of rupture of the globe of the eye as a result of crash impact is minimal and that the risk has been discussed with the driver;
- (c) the visual acuity standard is met and whether or not spectacles or contact lenses must be worn to meet the visual acuity standard; and
- (d) there is no other post surgical impairment of vision such as topographic irregularity, reduced low contrast sensitivity or exaggerated susceptibility to glare that may impede vision to an extent that may be a risk in competitive driving.