

### Patient Questionnaire

This questionnaire addresses historical features with Level A, Level B, or Level C evidence of relevance to driving competency, as well as selected items from the Manchester Driver Behavior Questionnaire. It is only intended to be used in the qualitative determination of driving risk in elderly patients and patients with dementia, and has not been validated for use in the quantitative determination of driving risk.

1. How many times have you been stopped or ticketed for a traffic violation in the last three years?      0      1      2      3      4 or more

2. How many accidents have you been in, or caused, within the last three years?      0      1      2      3      4 or more

3. In how many accidents were you at fault in the last three years?      0      1      2      3      4 or more

Strongly Disagree	No Opinion	Strongly Agree

1. I have concerns about my ability to drive safely.      1      2      3      4      5

2. Others have concerns about my ability to drive safely.      1      2      3      4      5

3. I have limited the amount of driving that I do.      1      2      3      4      5

4. I avoid driving at night.      1      2      3      4      5

5. I avoid driving in the rain.      1      2      3      4      5

6. I avoid driving in busy traffic.      1      2      3      4      5

7. I will drive faster than the speed limit if I think that I won't be caught.      1      2      3      4      5

8. I will run a red light if I think that I won't be caught.      1      2      3      4      5

9. I will drive after drinking more alcohol than I should.      1      2      3      4      5

10. When I get angry with other drivers, I will honk my horn, gesture, or drive up too closely to them.      1      2      3      4      5

How many miles a week do you drive? \_\_\_\_\_

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