



DEPARTMENT OF TRANSPORTATION
DRIVER AND MOTOR VEHICLE SERVICES
1905 LANA AVE NE, SALEM OREGON 97314

IGNITION INTERLOCK DEVICE (IID) MEDICAL EXEMPTION



Driver:

- Complete all information in Section 1.
- Provide the form to your health care provider to complete Section 2.
- Submit the form to the appropriate agency (court or DMV). If approved, the appropriate agency will provide you a copy.

Health Care Provider:

- Read the information on the back of this form.
- Complete all information in Section 2.
- Submit the form to the appropriate agency or give it to the patient to submit to the appropriate agency.
- Retain a copy for your records.

Court:

- If you are the court requiring the IID as a condition of a DUII Diversion Agreement, complete all information in Section 3.
- If approved, provide the driver a copy of this form indicating the court approved the exemption.
- If approved, submit a copy to DMV and retain a copy for your records.

SECTION 1 DRIVER INFORMATION

DRIVER LICENSE / CUSTOMER NUMBER	DATE OF BIRTH
NAME (Print: last, first, middle)	
ADDRESS (street, city, state, zip code)	

I am required to install and utilize an ignition interlock device by:

- _____ Court as a condition of a DUII Diversion Agreement.
(court name)
- DMV as a result of a conviction for driving under the influence of intoxicants (DUII).

Note: This exemption is not valid until approved by the agency requiring the IID. IF APPROVED, you must carry this exemption, *in addition to a valid driver license or valid hardship/probationary permit*, at all times when operating a vehicle. Failure to do so may result in a citation for operating a vehicle without an IID and/or revocation of your DUII Diversion Agreement.

SECTION 2 HEALTH CARE PROVIDER

HEALTH CARE PROVIDER NAME (PLEASE PRINT)	SPECIALTY	LICENSE or CERTIFICATE #
MAILING ADDRESS	FAX #	TELEPHONE # (and EXT.)
CITY, STATE, ZIP CODE	COUNTY	

List the condition(s) or impairment(s) you treat the person for:

How does the patient's impairment/condition prohibit the person from operating the IID?

The person's condition or impairment is: Permanent Temporary until _____ (DATE)

The information I have provided is true and complete. I have read the information regarding IID's on the back of this form. I understand the purpose and operation of an IID. It is my professional opinion that the above-named driver can not operate an IID or safely operate a vehicle equipped with an IID due to their medical condition.

SIGNATURE OF HEALTH CARE PROVIDER X	DATE
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SECTION 3 COURT / DMV USE ONLY

The above request for an IID Medical Exemption is: APPROVED until _____ (DATE) DENIED

COURT NAME	COURT TYPE <input type="checkbox"/> CIRCUIT <input type="checkbox"/> MUNICIPAL <input type="checkbox"/> JUSTICE <input type="checkbox"/> JUVENILE
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COURT ADDRESS

SIGNATURE OF AUTHORIZED COURT REPRESENTATIVE (If court requirement) X	DATE
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SIGNATURE OF AUTHORIZED DMV REPRESENTATIVE (If DMV requirement) X	DATE
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WHAT IS AN IGNITION INTERLOCK DEVICE (IID)?

An IID is an instrument designed to test a person's breath to detect and measure a person's blood alcohol content (BAC). It is installed in a person's vehicle by an approved installation center and its purpose is to prevent a person from drinking and driving.

WHY DOES MY PATIENT NEED TO INSTALL AN IID?

The patient has been arrested for driving under the influence of intoxicants (DUII). Either the court or DMV is requiring the device.

A court may require a person entering into a DUII Diversion Agreement to install and use an IID for the duration of the agreement (minimum one year).

DMV requires a person convicted of DUII to install and use an IID following a DUII suspension or revocation. The DMV requirement is for one year, two years or five years but can be indefinitely.

HOW DOES AN IID WORK?

When an IID is installed in a person's vehicle, the person must provide a breath sample (generally 1.5 liters of air) to test for the presence of alcohol. If the sample shows the person's blood alcohol concentration is above .020 % BAC the IID will prevent the vehicle from starting.

An acceptable test requires the person to sustain the breath flow for 5-7 seconds and to blow into the device using some type of pattern. Each type of device may use a different pattern such as having the person hum and blow into the device at the same time or suck and then blow into the device or some other configuration. The patterns are designed to ensure a human is providing the breath test and not some apparatus to circumvent the device.

Once on the road, an IID will also require random tests to re-test the driver. The device will alert a driver of the need to retest using a visual and/or audible warning. The driver will then have a certain amount of time (2-3 minutes) and a certain number of attempts to provide the breath sample. If the person does not respond or does not provide a sample that passes the retest, any of the following or something similar may occur:

- The device will trigger alerts such as flashing lights designed to draw attention from other vehicles, including law enforcement, and persuade the driver to stop driving.
- The ignition will lock once the vehicle is turned off and the person has to call an IID installer to unlock the ignition.
- The driver will have a certain amount of time (approximately 24 hours) to report to an IID installer or the device will disable the vehicle indefinitely.
- At no time will the vehicle turn off while in motion.

Random retests generally occur just a short time after the vehicle is started (5-10 minutes) and then again every 20-40 minutes.

WHAT DOES THE IID MEDICAL EXEMPTION DO?

It allows the person to operate vehicles without the IID and there is no alternative requirement.