

ANNEX

1. Annex II to Directive 2006/126/EC is amended as follows:
 - (a) point 2.1.3 is replaced by the following:
 - 2.1.3. The road:
 - the most important principles concerning the observance of a safe distance between vehicles, braking distances and road holding under various weather and road conditions,
 - driving risk factors related to various road conditions, in particular as they change with the weather and the time of day or night,
 - characteristics of various types of road and the related statutory requirements,
 - safe driving in road tunnels;
 - (b) point 5.1.3 is replaced by the following:
 - 5.1.3. Specific provisions concerning vehicles of category C, CE, D and DE
Member States may decide that no restriction to vehicles with automatic transmission shall be recorded on the driving licence for a category C, CE, D or DE vehicle referred to in point 5.1.2, when the applicant already holds a driving licence obtained on a vehicle with manual transmission in at least one of the following categories: B, BE, C, CE, C1, C1E, D, DE, D1 or D1E, and has performed the actions described in point 8.4 during the test of skills and behaviour.;
 - (c) point 6.3.8 is replaced by the following:
 - 6.3.8. Special road features (if available): roundabouts; railway level crossings; tram/bus stops; pedestrian crossings; riding up-/downhill on long slopes; tunnels;;
 - (d) point 7.4.8 is replaced by the following:
 - 7.4.8. Special road features (if available): roundabouts; railway level crossings; tram/bus stops; pedestrian crossings; riding up-/downhill on long slopes; tunnels;;
 - (e) point 8.3.8 is replaced by the following:
 - 8.3.8. Special road features (if available): roundabouts; railway level crossings; tram/bus stops; pedestrian crossings; riding up-/downhill on long slopes; tunnels;.
2. In Annex III to Directive 2006/126/EC, section 11 ('NEUROLOGICAL DISEASES') is replaced by the following:

NEUROLOGICAL DISEASES AND OBSTRUCTIVE SLEEP APNOEA SYNDROME
NEUROLOGICAL DISEASES

 - 11.1. Driving licences shall not be issued to, or renewed for, applicants or drivers suffering from a serious neurological disease, unless the application is supported by authorised medical opinion.

Neurological disturbances associated with diseases or surgical intervention affecting the central or peripheral nervous system, which lead to sensory or motor deficiencies and affect balance

Status: EU Directives are being published on this site to aid cross referencing from UK legislation. After IP completion day (31 December 2020 11pm) no further amendments will be applied to this version.

and coordination, must accordingly be taken into account in relation to their functional effects and the risks of progression. In such cases, the issue or renewal of the licence may be subject to periodic assessment in the event of risk of deterioration.

OBSTRUCTIVE SLEEP APNOEA SYNDROME

- 11.2. In the following paragraphs, a moderate obstructive sleep apnoea syndrome corresponds to a number of apnoeas and hypopnoeas per hour (Apnoea-Hypopnoea Index) between 15 and 29 and a severe obstructive sleep apnoea syndrome corresponds to an Apnoea-Hypopnoea Index of 30 or more, both associated with excessive daytime sleepiness.
- 11.3. Applicants or drivers in whom a moderate or severe obstructive sleep apnoea syndrome is suspected shall be referred for further authorised medical advice before a driving licence is issued or renewed. They may be advised not to drive until confirmation of the diagnosis.
- 11.4. Driving licences may be issued to applicants or drivers with moderate or severe obstructive sleep apnoea syndrome who show adequate control of their condition and compliance with appropriate treatment and improvement of sleepiness, if any, confirmed by authorised medical opinion.
- 11.5. Applicants or drivers with moderate or severe obstructive sleep apnoea syndrome under treatment shall be subject to a periodic medical review, at intervals not exceeding three years for drivers of group 1 and one year for drivers of group 2, with a view to establish the level of compliance with the treatment, the need for continuing the treatment and continued good vigilance..