



Re: Vision Test

Dear Optometrist,

Your patient has requested a driver evaluation. In order to proceed with the evaluation, we require written confirmation that your patient meets the Ministry of Transportation's minimum vision standards.

Please review the minimum vision standards outlined below and sign the bottom of the form for the patient to bring with them to their appointment.

Minimum MTO Vision Standards for G and M licences

- 20/50 with corrected vision (both eyes)
- 120 degrees peripheral vision, including 15 degrees above and below.

My patient _____ meets the above listed minimum MTO vision standards for the driver evaluation.

Optometrist Signature

Date

Please ensure that you bring this completed form with you to your driver evaluation. Without this form the test will not proceed.

541 Days Road, Unit #6
Kingston, Ontario, K7M 3R8
Tel (613) 389-2350 or (800) 334-3326 Fax (613) 389-5354
Email: limeston@kos.net Website: www.limestonehealth.ca