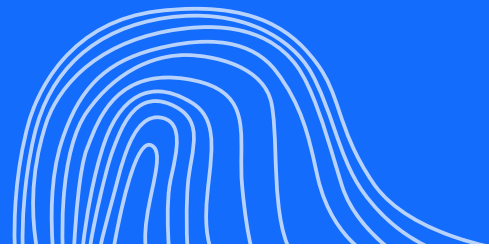


FAQs for Alcohol Interlock Program General Practitioners (GPs)

July 2023

NSW Alcohol Interlock Program



Q. Why are doctors involved?

A. Every day, GPs play an important role in helping to educate patients about their alcohol use. This is no different. The involvement of GPs is essential to support the rehabilitative opportunities of the Alcohol Interlock program.

Q. What guidelines do I use to determine which recommendation to make?

A. The Stage Three Factsheet for GPs is the best place to start. You can access it online [here](#).

Like all patient consultations, you are being asked to use your training and clinical expertise. The purpose of the interlock program is for participants to learn and demonstrate separation of drinking from driving to reduce the risk of repeat offending – that is best determined by a GP with clinical expertise who should go through the Alcohol Use Disorders Test (AUDIT) questionnaire and make a recommendation based on the information available to them as to whether or not the patient can separate drinking from driving. It is important to remember that you are not being asked to make the decision around licensing – that is done by Transport for NSW.

There is a specific form that you need to complete for Transport for NSW – the NSW Mandatory Interlock Medical Examination Certificate – and that will be brought to the

consultation by the patient. In terms of guidelines, we are asking you to use the [Medical Standards for Assessing Fitness to Drive](#), which is a document you would use as part of your ordinary clinical practice.

Q. Is there a number of failed BAC readings that is ok?

A. Failed BAC readings, especially in the last six months of the program, may possibly indicate that your patient is struggling to separate drinking from driving. There is no ‘pass or fail’ number – this is about you using your clinical judgment and the information that is available to you in the consultation with your patient to make a recommendation for Transport for NSW.

Q. The patient said the BAC readings were from mouthwash/hand sanitiser/food/someone else etc. How do I know if they are telling the truth?

A. When your patient signed up for the program, they received information on the correct use of the interlock device. They were informed that some foods, drinks and products such as hand sanitisers can contain alcohol. They were also instructed to use alcohol-free alternatives and only drink water in the 15 minutes before using the interlock. If a “false reading” from something such as hand sanitiser is recorded, then the customer can re-test.

The interlock device is fitted with a camera – if we can clearly see from the photographs that it is the participant providing the zero re-test, then we will not count the failed initial test as a verified breach event. The retest must be taken as soon as the device allows – within 30 minutes. While every patient needs to be assessed by you on their own merits, we have put procedures in place to minimise the chances of an incorrect BAC reading being recorded against a participant.

Q. Am I at risk of losing my medical licence if I recommend exit and the patient reoffends in the future?

A. It is not your role to restrict, reinstate or apply conditions to a patient's driver licence; this responsibility sits with Transport for NSW. Your role is to provide a medical assessment – based on available clinical information – to be used in the decision-making process by Transport for NSW.

Your medical licence is not at risk by assessing your patient and using your clinical judgment in completing the NSW Mandatory Interlock Medical Examination Certificate.

Q. The patient said they were not intending to drive when the BAC reading/s were recorded. They were just using the device as a breathalyser/were curious to see what their BAC would be after drinking.

A. When your patient signed up for the program, they received information on the correct use of the interlock device. This included not using it as a breathalyser and being warned of the consequences if they did so.

Q. I have never seen this patient before, how am I meant to make this decision?

A. In an ideal world, every patient would have a longstanding relationship with a GP. However, we know that is not the case for many people across NSW. As a GP, you are often required to make a clinical assessment without knowing the patient, which is why you are simply being asked to make a recommendation based on the information that is available to you.

Importantly, the medical standards pertaining to Assessing Fitness to Drive don't require you to have a pre-existing relationship with a patient to conduct an assessment as to whether the patient can separate their drinking from their driving.

If you do have concerns, however, you can:

- ask permission from the patient to request their medical file from their regular health professional
- conduct a more thorough examination of the person than would usually be undertaken for an Assessing Fitness to Drive examination.

Remember to visit the [NSW Alcohol Interlock Program website](#) for full information on the program.