Driving — Posture and When You Can Resume

Setting up your seat

- **Sit right back** in the seat. The backrest should be almost upright — around 100 to 110 degrees, not reclined.
- Move the seat **close enough** that you can fully press the pedals with a slight bend in the knee, without stretching or pointing your toes.
- Your **hips should be level with or slightly higher than your knees.**
- Support the lower back with the seat's lumbar support, or a small cushion or rolled towel.
- Hold the steering wheel with **elbows slightly bent** and shoulders resting against the seat — not stretched forward.
- Adjust the **headrest** so its centre is level with the back of your head, close behind it. A badly set headrest is why minor collisions cause whiplash.
- Keep your **wallet out of your back pocket** — sitting on it tilts the pelvis and irritates the sciatic nerve.

ON LONG JOURNEYS

Stop every 1 to 2 hours, get out and walk for a few minutes. This protects your back and prevents blood clots.
Do ankle pumps at traffic signals. Keep well hydrated.
On a two-wheeler, avoid a heavy bag on one shoulder, keep the handlebar height so you are not stooped, and be aware that Indian road surfaces transmit a lot of jolt to a healing spine or pelvis.

WHEN CAN YOU DRIVE AGAIN?

There is no single answer — it depends on the operation and on you. **Ask us at your review.** As a general guide:

You may drive when you can **perform an emergency stop without hesitation**, are **off strong painkillers**, can turn to look over your shoulder comfortably, and are not in a plaster or brace on a limb needed for control.

Do not drive while taking tramadol or other strong painkillers, with your operated limb in plaster, or before we have cleared you.

Check with your insurer. Driving before you are medically fit may invalidate your cover, whatever the cause of an accident.

Search: driving posture, when can I drive after surgery, car seat, two wheeler back pain