

AMERICAN MEDICAL ASSOCIATION WOMEN PHYSICIANS SECTION

Resolution:1  
June 2021

Introduced by: Women Physicians Section

Subject: Fatigue Mitigation Respite for Faculty and Residents

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1 Whereas, During the COVID-19 pandemic, physicians have been on the front lines, and have  
2 experienced increased duress and extreme fatigue during the case surges as hospitals are  
3 overrun with patients; and  
4

5 Whereas, Longer shifts, disruptions to sleep and to work-life balance, and occupational hazards  
6 associated with exposure to COVID-19 have contributed to physical and mental fatigue; and  
7

8 Whereas, About 20-30 percent of shift workers experience prominent insomnia symptoms and  
9 excessive daytime sleepiness consistent with circadian rhythm sleep disorder, also known as  
10 shift work disorder;<sup>5</sup> and  
11

12 Whereas, Drowsy driving causes almost 1,000 estimated fatal motor vehicle crashes in the  
13 United States (2.5 percent of all fatal crashes), 37,000 injury crashes, and 45,000 property  
14 damage-only crashes;<sup>2</sup> and  
15

16 Whereas, Physicians have a higher likelihood of dying from accidents than from other causes  
17 relative to the general populations;<sup>4</sup> and  
18

19 Whereas, Physicians' risk of crashing while driving after working extended shifts ( $\geq 24$  hours)  
20 was 2.3 times greater and the risk for a "near miss" crash was 5.9 times greater, compared to a  
21 non-extended shift. The estimated risk of a crash rose by 9.1 percent for every additional  
22 extended work shift hour;<sup>3</sup> and  
23

24 Whereas, Forty-one percent (41%) of physicians report falling asleep at the wheel after a night  
25 shift;<sup>6</sup> and  
26

27 Whereas, A simulation study demonstrated that being awake for 18 hours, which is common for  
28 physicians working a swing shift (i.e., from 6 p.m. to 2 a.m.), produced an impairment equal to a  
29 blood alcohol concentration (BAC) of 0.05 and rose to equal 0.10 after 24 hours without sleep;<sup>7</sup>  
30 and  
31

32 Whereas, Driving simulator studies show driving home from the night shift is associated with two  
33 to eight times the incidents of off track veering, decreased time to first accident, increased eye  
34 closure duration, and increased subjective sleepiness. Night-shift work increases driver  
35 drowsiness, degrading driving performance and increasing the risk of near-crash drive events;<sup>8</sup>  
36 and

1 Whereas, Actual driving studies post-night shift versus post-sleep night showed eleven near-  
2 crashes occurred in 6 of 16 post night-shift drives (37.5 percent), and 7 of 16 post night-shift  
3 drives (43.8 percent) were terminated early for safety reasons, compared with zero near-  
4 crashes or early drive terminations during 16 post-sleep drives;<sup>9</sup> and

5  
6 Whereas, AMA Policy H-15.958, Fatigue, Sleep Disorders, and Motor Vehicle Crashes,  
7 notes the risks associated with sleep deprivation and actions physicians can take to help protect  
8 patients; therefore, be it

9  
10 RESOLVED, That the AMA make available resources to institutions and physicians that support  
11 self-care and fatigue mitigation, help protect physician health and well-being, and model  
12 appropriate health promoting behaviors (Directive to Take Action); and be it further;

13  
14 RESOLVED, That the AMA advocate for policies that support fatigue mitigation programs, which  
15 include, but are not limited to, quiet places to rest and funding for alternative transport including  
16 return to work for vehicle recovery at a later time for all medical staff who feel unsafe driving due  
17 to fatigue after working. (Directive to Take Action)

Fiscal Note: Modest - between \$1,000 - \$5,000

Received: 3/2/2021

#### RELEVANT AMA POLICY

[Resident/Fellow Clinical and Educational Work Hours H-310.907](#)  
[Fatigue, Sleep Disorders, and Motor Vehicle Crashes H-15.958](#)

#### References:

1. Fatigue Mitigation Transportation Reimbursement for Trainees. Available at <https://medschool.ucla.edu/gme/transportation-reimbursement-for-fatigued-trainees>.
2. Research on Drowsy Drive. Available at <https://one.nhtsa.gov/Driving-Safety/Drowsy-Driving/scope%E2%80%93of%E2%80%93the%E2%80%93problem>.
3. Barger LK, Cade BE, Ayas NT, Cronin JW, Rosner B, Speizer FE, et al. Extended work shifts and the risk of motor vehicle crashes among interns. *N Engl J Med*. 2005;352(2):125–34.
4. Frank, E, Biola, H, Burnett, CA. Mortality rates and causes among U.S. physicians. *Am J Prev Med* 2000; 19: 155–9.
5. Booker LA, Magee M, Rajaratnam SMW, Sletten TL, Howard ME. Individual vulnerability to insomnia, excessive sleepiness and shift work disorder amongst healthcare shift workers. A systematic review. *Sleep Med Rev*. 2018;41:220–33.
6. <https://www.bbc.com/news/uk-england-suffolk-36767868>
7. Williamson AM, Feyer AM. Moderate sleep deprivation produces impairments in cognitive and motor performance equivalent to legally prescribed levels of alcohol intoxication. *Occup Environ Med*. 2000;57(10):649–655. doi:10.1136/oem.57.10.649.
8. Akerstedt T<sup>1</sup>, Peters B, Anund A, Kecklund G. Impaired alertness and performance driving home from the night shift: a driving simulator study. *J Sleep Res*. 2005 Mar;14(1):17-20.
9. Lee MI<sup>1</sup>, Howard Me<sup>2</sup>, Horrey WJ<sup>3</sup>, Liang Y<sup>3</sup>, Anderson C<sup>4</sup>, Shreeve Ms<sup>5</sup>, O'Brien Cs<sup>5</sup>, Czeisler Ca<sup>6</sup>. High Risk Of Near-Crash Driving Events Following Night-Shift Work. *Proc Natl Acad Sci U S A*. 2016 Jan 5;113(1):176-81. doi: 10.1073/pnas.1510383112.