



American Academy of Sleep Medicine

MEMORANDUM

DATE: April 10, 2009

TO: Bruce Blehart

CC: Jerry Barrett

FROM: Ted Thurn

RE: Massachusetts Senate Bill 877 – Requires health care facilities to provide transportation to residents, medical students and other health care providers who have worked for more than 16 consecutive hours.

Information Received _____

Please see me _____

1. Massachusetts Senate Bill 877

AASM Position: Support

Synopsis

Senate Bill 877 (SB877) requires any health care facility to provide transportation via taxi, car or bus service or other form of private or public transportation for all resident-physicians, medical students and other health care providers who have worked for more than 16 consecutive hours. The legislation would also require transportation for any health care provider who judges herself or himself to be too fatigued to safely operate a motor vehicle.

Analysis

- (1) Section 25B of Chapter 111 of the Massachusetts General Laws (MGL) defines a “health care facility” as: a hospital, institution for the care of unwed mothers or clinic, a long-term care facility, which is an infirmary maintained in a town, a convalescent or nursing home, a rest home or a charitable home for the aged, a clinical laboratory, a public medical institution, which is any medical institution, and any institution for the mentally ill or retarded staffed by professional, medical and nursing personnel and providing medical care, in accordance with standards established through licensing, approval or certification for participation in the programs.

- (2) Section 1 Chapter 111 defines a “health care provider” as: any doctor of medicine, osteopathy, or dental science, or a registered nurse, social worker, doctor of chiropractic, or psychologist or an intern, or a *resident*, fellow, or medical officer or a hospital, clinic or nursing home or a public hospital and its agents and employees.
- (3) The MGL does not include a definition for a “medical student.” Since a medical student is not employed by the hospital it might be prudent to omit this term from the bills language.

Rationale to support SB 877 includes that the AASM has already developed brochures (attached) addressing the problem of drowsy driving. Supporting this legislation would also buttress the AASM position (attached) that drowsy driving is a growing problem in the United States, and the risk, danger and often tragic outcomes of drowsy driving are sobering. Specifically, the AASM document illustrates that the people who are most at risk to drive drowsy include:

- Young people, particularly males
- Shift workers
- People who work long hours

Since resident-physicians and health care providers fall into most, if not all of these categories, it would be appropriate for the AASM to support the bill.

In addition, the legislation is in line with the 2004 report issued by the Sleep Research Society (SRS). The SRS Presidential Task Force on Sleep and Public Policy developed model legislation regarding physician-in-training work hours. The Task Force’s recommendations include:

- 1) the optimal way to provide education to hospital leaders and resident physicians and other trainees in clinical training programs to increase awareness of the risks of sleep deprivation; 2) the potential role of annual sleep disorders screening for all physicians to reduce the risk of sleep disorder-related errors and accidents; 3) the use of fatigue counter-measures to mitigate the effects of sleep deprivation, including, but not limited to the use of naps before and during work shifts, rest breaks, and caffeine; *4) the responsibility of health care employers to provide safe transport home for any resident physicians and other trainees in clinical training programs impaired by sleepiness;* and 5) a requirement for physicians who have been awake for more than 22 of the prior 24 hours to inform their patients of the extent and potential safety impact of their sleep deprivation and to obtain consent from such patients prior to providing clinical care or performing any medical or surgical procedures.