

McClatchy Medical Center

What you need to know about...

Sleep Apnea

Sleep Apnea is probably the most common cause of excessive daytime somnolence (EDS) in the general population. This disorder is characterized by excessive daytime sleepiness and the patient may fall asleep at inappropriate times and particularly while sitting. On awakening, the patient feels drowsy and not fresh. The severity of EDS varies. After repeated attacks patients may suffer from cognitive impairment which will interfere with the memory, concentration and judgment. The patients may have cardiopulmonary disturbances. This condition, therefore, is conducive to hazardous driving during long driving hours as noted in interstate driving.

What is the Rule?

Regarding interstate commercial driving regulations, we are concerned mainly with those sleep disturbances which can cause excessive daytime somnolence (EDS). Patients with sleep apnea syndrome or excessive daytime somnolence cannot take part in interstate driving, because they likely will be involved in hazardous driving and accidents resulting from sleepiness. Therefore, those patients who are not on any treatment and are suffering from symptoms related to EDS should not be allowed to participate in interstate driving.

Patients with sleep apnea syndrome whose symptoms (e.g., EDS, fatigue etc.) can be controlled by surgical treatment, e.g. permanent tracheostomy, may be permitted to drive after a 3 month period free of symptoms, provided there is constant medical supervision. Laboratory studies must be performed to document absence of EDS and sleep apnea. (SEE PAGE 55 OF CONFERENCE ON NEUROLOGIC DISORDERS AND COMMERCIAL DRIVERS and page 40 OF CONFERENCE ON PULMONARY DISORDERS AND COMMERCIAL DRIVERS)

Guidelines for “acceptable” control of sleep apnea must be met:

Sleep Apnea Syndrome-

1. Drivers with suspected sleep apnea or with proven, but unrelated, sleep apnea are not to be medically qualified until the diagnosis has been eliminated or adequately treated.
2. Qualification should only be allowed when multiple sleep latency testing values return to normal range following treatment or repeat sleep study during treatment shows resolution of sleep apneas.
3. Annual multiple sleep latency testing or repeat sleep study should be required for drivers with the diagnosis of obstructive sleep apnea.

What is required?

You will need Proof of seen care for EDS and after treatment. Bring reports of testing for multiples sleep latency test and polysomnographic studies. A statement from provider of adequate treatment of sleep apnea/EDS; and whether the condition is likely to interfere with the safe operating of a commercial motor vehicle is also needed.