Title: Addressing Fatigue and Driving Practices: A Safe Ride Program for Resident Physicians
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Background:
Studies have shown that residents are at increased risk for motor vehicle incidents in a sleep-deprived state, and academic medical centers seek ways to reduce this risk. In preparation to pilot a Safe Ride program that would offer reimbursed ride-sharing to and from work sites for extended hospital shifts, Yale New Haven Hospital sought to learn resident perceptions of driving risk following work periods.

Methods:
We anonymously surveyed Yale Children’s Hospital pediatric residents across all PG years about their experiences driving to and from work as they related to safety and fatigue, as well as their interest in a Safe Ride program. Questions included residents’ perceptions of safety while driving based on length of shift, length of travel in time, and length of travel in distance. Data was analyzed using Fisher exact testing.

Results:
Of 61 pediatric residents surveyed, 54 (89% response) completed the survey, including 50 who regularly drive to work. All 54 residents (100%) agreed that work fatigue diminishes their ability to drive safely. 5 (9%) reported falling asleep while driving and 10 (19%) experienced a motor vehicle accident following a work period. There was a perceived decrease in driving safety following call (>24 hour) shifts compared with shifts shorter than 24 hours (89% vs. 14% felt unsafe, p=<0.0001) [Figure 1]. A higher proportion of residents with drives >15 minutes felt unsafe after a regular (<16 hour) shift compared with those who had drives <15 minutes (40% vs. 4%; p=0.003)[Figure 2]. Overall, 98% of residents supported the establishment of a reimbursed Safe Ride program and 87% would consider using such a program.

Conclusions:
Yale Pediatric residents feel that work fatigue regularly affects their perceived safety in driving home, potentially causing harm to themselves and other drivers. Residents are interested in a Safe Ride program which incentivizes residents to avoid driving while fatigued and may be of particular help after longer shifts.
Figure 1. Residents were asked, “how safe do you feel, on average, driving home after a shift; safe, relatively unsafe, unsafe?” at Yale’s tertiary center. The total responses of safe versus combined relatively unsafe/unsafe were compared based on type of shift. Residents driving after a call shift (24 hour shift) were observed to be more likely to feel unsafe.

Figure 2. Residents were asked, “how safe do you feel, on average, driving home after a regular shift (<16 hours)”. The responses were compared by length of drive, less than 15 minutes or greater than 15 minutes. Residents with drives >15 minutes after a regular shift were significantly more likely to feel unsafe.

Word Count: 314