

# Study suggests risk management approach to combat EMS fatigue

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Extended shift work has historically been linked to interrupted sleep patterns and risk of injury, and is a persistent problem for emergency medical services (EMS) personnel who are tasked with delivering acute care under significant pressure.

New guidelines, written by a team led by University of Pittsburgh School of Medicine scientists and published this week in the journal *Prehospital Emergency Care*, aim to mitigate the effects of [fatigue](#) by addressing the impact of [shift work](#) and scheduling.

"The problem of fatigued EMS personnel is widespread and not isolated to one type of EMS operation or category of EMS clinician.

Administrators of EMS organizations are not sufficiently equipped to address fatigue in the workplace, in part because of the absence of guidelines for fatigue risk management in the EMS setting," said Daniel Patterson, Ph.D., lead author and assistant professor of emergency medicine at the Pitt School of Medicine

After review and analysis of more than 38,000 journal articles, conference presentations and other publications, Patterson and his colleagues gathered information on fatigue and shift work to develop the evidence-based guidelines for fatigue risk management and test the impact of the findings to create a biomathematical model for use by the EMS community to aid in shift-scheduling decisions.

The guidelines consist of five recommendations:

- Use of fatigue/sleepiness surveys to measure and monitor EMS personnel fatigue.
- Limit EMS shifts to less than 24 hours in duration.
- Give EMS personnel access to caffeine to help stave off fatigue.
- Allow EMS personnel the opportunity to nap while on duty.
- Provide education and training in fatigue risk management to EMS personnel.

Patterson and his team expect the guidelines to have a wide impact on improving practice and policies to alleviate EMS personnel fatigue, whether when driving an ambulance or caring for patients.

"Operating the ambulance is only one aspect of EMS care," said Patterson. "Most of the work EMS clinicians do is actually patient care. Fatigue affects decision-making abilities and overall performance, and with the pressure of delivering acute care, one wrong decision can be detrimental."

Provided by University of Pittsburgh Schools of the Health Sciences

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