

**Obstructive Sleep Apnea (OSA)  
Annual CMV Medical Recertification**

Federal Motor Carrier Safety Regulations require that a person is physically qualified to drive a commercial motor vehicle (CMV) if that person has no established history or clinical diagnosis of respiratory dysfunction likely to interfere with their ability to control and drive a CMV. This includes OSA.

OSA has been demonstrated to significantly increase safety and health risks. Medical research has shown that OSA is a significant (2-7-fold increased risk) cause of motor vehicle crashes. Furthermore, OSA increases the risk of an individual developing significant health problems such as hypertension, stroke, ischemic heart disease and mood disorders. Studies indicate that CMV drivers have a higher prevalence of OSA than the general population.

Annually, CMV drivers with OSA must provide documentation of effective treatment. If using CPAP, time on pressure documentation is required. Drivers must document at least 4 hours of CPAP each sleep period. If time on pressure readings are not available, Maintenance of Wakefulness Test (MWT), preferred, or Multiple Sleep Latency Test (MSLT) or repeat polysomnography within the last 3 months is acceptable. Annual evaluation by a sleep specialist and assessment of compliance must be done for all OSA drivers.

**Patient consent for release of Medical Information**

I, \_\_\_\_\_ hereby authorize the release of medical records and reports to Lancaster General Health Occupational Medicine.

Patient Signature \_\_\_\_\_ Date \_\_\_\_\_  
Date of Birth: \_\_\_\_\_

**Statement of Treating Physician**

I certify that \_\_\_\_\_ is currently under my care and his / her OSA is under effective control as determined within the last 3 months by:

\_\_\_ CPAP time on pressure readings (attach documentation / machine printout)

\_\_\_ MWT, MLST or Polysomnography (attach report)

**Physician Name/Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_