



Job Accommodation Network

Practical Solutions • Workplace Success

## Accommodation and Compliance Series

### Employees with Chronic Fatigue Syndrome

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A service of the U.S. Department of Labor's Office of Disability Employment Policy

## **Preface**

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Authored by Beth Loy, Ph.D. Updated 03/22/10.

# **JAN'S ACCOMMODATION AND COMPLIANCE SERIES**

## **Introduction**

JAN's Accommodation and Compliance Series is designed to help employers determine effective accommodations and comply with Title I of the Americans with Disabilities Act (ADA). Each publication in the series addresses a specific medical condition and provides information about the condition, ADA information, accommodation ideas, and resources for additional information.

The Accommodation and Compliance Series is a starting point in the accommodation process and may not address every situation. Accommodations should be made on a case by case basis, considering each employee's individual limitations and accommodation needs. Employers are encouraged to contact JAN to discuss specific situations in more detail.

For information on assistive technology and other accommodation ideas, visit JAN's Searchable Online Accommodation Resource (SOAR) at <http://askjan.org/soar>.

## **Information about Chronic Fatigue Syndrome (CFS)**

### **How prevalent is CFS?**

It is estimated that perhaps as many as half a million persons in the United States have a CFS-like condition (National Center for Infectious Diseases, 2006b). Typically, women are diagnosed with CFS two to four times as often as men (Mayo Clinic Staff, 2007).

### **What is CFS?**

In order to receive a diagnosis of CFS, a patient must satisfy two criteria. First, an individual must have severe chronic fatigue of six months or longer duration with other known medical conditions excluded by clinical diagnosis (National Center for Infectious Diseases, n.d.). Second, an individual must concurrently have four or more of the following symptoms: substantial impairment in short-term memory or concentration; sore throat; tender lymph nodes; muscle pain; multi-joint pain without swelling or redness; headaches of a new type, pattern, or severity; unrefreshing sleep; and post-exertional malaise lasting more than 24 hours (National Center for Infectious Diseases, n.d.).

### **What are the symptoms of CFS?**

In addition to the primary defining symptoms of CFS, some CFS patients have reported a number of other symptoms. They include abdominal pain, alcohol intolerance, bloating, chest pain, chronic cough, diarrhea, dizziness, dry eyes or mouth, earaches, irregular heartbeat, jaw pain, morning stiffness, nausea, night sweats, photosensitivity, shortness of breath, skin sensations, tingling sensations, and weight loss. A majority of CFS patients also report mild to moderate symptoms of anxiety or depression.

### **What causes CFS?**

CFS may occur after an infection such as a cold or viral syndrome, and it can start during or shortly after a period of high stress or come on gradually without any clear starting point or any obvious cause (Mayo Clinic Staff, 2007). Research about CFS indicates the possibility that sudden onset CFS might be related to an infectious disease, while gradual onset CFS may be triggered by factors such as physical environment or stress (Chronic fatigue . . ., 1997).

### **How is CFS treated?**

A variety of therapeutic approaches have been described as benefiting patients with CFS, and because no cause for CFS has been identified and the cause remains unknown, treatment programs are directed at relief of symptoms (National Center for Infectious Diseases, 2006a). There is no proven cure for CFS, although lifestyle modifications may make symptoms more manageable. The treatment of CFS focuses on symptom management, e.g., aspirin and ibuprofen for pain and headache relief. Some individuals with CFS benefit from a healthy diet; antidepressant, anti-anxiety, and sleep disorder drugs; and behavioral therapy. In addition, relaxation and stress reduction techniques may be beneficial.

## **CFS and the Americans with Disabilities Act**

### **Is CFS a disability under the ADA?**

The ADA does not contain a list of medical conditions that constitute disabilities. Instead, the ADA has a general definition of disability that each person must meet (EEOC, 1992). Therefore, some people with CFS will have a disability under the ADA and some will not.

A person has a disability if he/she has a physical or mental impairment that substantially limits one or more major life activities, a record of such an impairment, or is regarded as having such an impairment (EEOC, 1992). For more information about how to determine whether a person has a disability under the ADA, visit <http://askjan.org/corner/vol02iss04.htm>.

### **When requesting an accommodation, do employees with CFS have to tell their employers that they have CFS?**

Under the ADA, when an employee requests an accommodation, an employer can require sufficient medical documentation to determine whether the employee has a disability and needs the requested accommodation. According to the Equal Employment Opportunity Commission (EEOC), sufficient medical documentation can include the name of the medical condition. The employee may want to begin by giving a more general description of the condition, such as saying "I have chronic fatigue syndrome," and see if that suffices. However, such a limited description does not tell the employer that the individual has an impairment that substantially limits a major life activity because it is vague.

To increase the chance that the employer will settle for the use of a vague term, the employee may want to provide a letter from his/her doctor that confirms the existence of "chronic fatigue syndrome," but then goes on to give concrete information about how the condition substantially limits a major life activity. The inclusion of concrete information may satisfy the employer. However, if the employer insists on knowing the diagnosis and the individual refuses to divulge it, the employer probably has a valid reason to refuse to provide the requested accommodation.

## **Accommodating Employees with CFS**

(Note: People with CFS may develop some of the limitations discussed below, but seldom develop all of them. Also, the degree of limitation will vary among individuals. Be aware that not all people with CFS will need accommodations to perform their jobs and many others may only need a few accommodations. The following is only a sample of the possibilities available. Numerous other accommodation solutions may exist.)

### **Questions to Consider:**

1. What limitations is the employee with CFS experiencing?
2. How do these limitations affect the employee and the employee's job performance?
3. What specific job tasks are problematic as a result of these limitations?
4. What accommodations are available to reduce or eliminate these problems? Are all possible resources being used to determine possible accommodations?
5. Has the employee with CFS been consulted regarding possible accommodations?
6. Once accommodations are in place, would it be useful to meet with the employee with CFS to evaluate the effectiveness of the accommodations and to determine whether additional accommodations are needed?
7. Do supervisory personnel and employees need training regarding CFS?

### **Accommodation Ideas:**

#### **Cognitive:**

- Provide written job instructions when possible
- Prioritize job assignments and provide more structure
- Allow flexible work hours and allow a self-paced workload
- Allow periodic rest periods to reorient
- Provide memory aids, such as schedulers or organizers
- Minimize distractions
- Reduce job stress

#### **Depression and Anxiety:**

- Reduce distractions in work environment
- Provide to-do lists and written instructions
- Remind employee of important deadlines and meetings
- Allow time off for counseling
- Provide clear expectations of responsibilities and consequences

- Provide sensitivity training to co-workers
- Allow breaks to use stress management techniques
- Develop strategies to deal with work problems before they arise
- Allow telephone calls during work hours to doctors and others for support
- Provide information on counseling and employee assistance programs

#### Fatigue/Weakness:

- Reduce or eliminate physical exertion and workplace stress
- Schedule periodic rest breaks away from the workstation
- Allow a flexible work schedule and flexible use of leave time
- Allow work from home
- Implement ergonomic workstation design
- Provide a scooter or other mobility aid if walking cannot be reduced

#### Migraine Headaches:

- Provide task lighting
- Eliminate fluorescent lighting
- Use computer monitor glare guards
- Reduce noise with sound absorbent baffles/partitions, environmental sound machines, and headsets
- Provide alternate work space to reduce visual and auditory distractions
- Implement a "fragrance-free" workplace policy
- Provide air purification devices
- Allow flexible work hours
- Allow periodic rest breaks
- Allow work from home

#### Photosensitivity:

- Minimize outdoor activities between the peak hours of 10:00 am and 4:00 pm
- Avoid reflective surfaces such as sand, snow, and concrete
- Provide clothing to block UV rays
- Provide "waterproof" sun-protective agents such as sunblocks or sunscreens
- Install low wattage overhead lights
- Provide task lighting
- Replace fluorescent lighting with full spectrum or natural lighting
- Eliminate blinking and flickering lights
- Install adjustable window blinds and light filters

#### Sleep Disorder:

- Allow flexible work hours and frequent short breaks
- Allow work from home

## Temperature Sensitivity:

- Modify work-site temperature and maintain the ventilation system
- Modify dress code
- Use fan/air-conditioner or heater at the workstation and redirect vents
- Allow flexible scheduling and work from home during extremely hot or cold weather
- Provide an office with separate temperature control

## Situations and Solutions:

A customer service representative with CFS and memory and concentration problems had difficulty answering some customer questions. She was accommodated with written materials to help her remember information and a private office to reduce distractions.

A design engineer with CFS had difficulty working fulltime. He was allowed to work-at-home three days a week.

A student with CFS had difficulty keeping up with class notes. He was accommodated with a laptop computer to use in class.

An operating-room nurse with CFS had difficulty rotating schedules. She was accommodated with a permanent day schedule.

A teacher with CFS had difficulty meeting the physical demands of her job and was exhausted by early afternoon. She was provided with a teacher's aid, her off-hour was moved to the afternoon, and she was excused from afternoon recess duty.

A daycare director with CFS had difficulty getting to work on time and maintaining a fulltime schedule. She was allowed a later start time and a part-time schedule.

A flight attendant with CFS was missing a lot of work due to fatigue. Her doctor recommended that she reduce the amount of traveling she was doing. She wanted to continue working fulltime so requested reassignment to an office job.

A school psychologist with CFS was having difficulty working at full production. She was allowed to schedule appointments in the morning, which gave her uninterrupted time in the afternoon to complete paperwork. She was also allowed to schedule several short rest breaks throughout the day and use of sick leave as needed.

A social worker with CFS experienced headaches and photosensitivity. Accommodations included changing the lighting in her workstation from fluorescent lighting to task lighting, adding a glare guard to her computer monitor, providing window blinds, and implementing other workstation changes to enhance ergonomics.



**Products:**

There are numerous products that can be used to accommodate people with limitations. JAN's Searchable Online Accommodation Resource (SOAR) at <http://askjan.org/soar> is designed to let users explore various accommodation options. Many product vendor lists are accessible through this system; however, upon request JAN provides these lists and many more that are not available on the Web site. Contact JAN directly if you have specific accommodation situations, are looking for products, need vendor information, or are seeking a referral.

## Resources

### **Job Accommodation Network**

West Virginia University  
PO Box 6080  
Morgantown, WV 26506-6080  
Toll Free: (800)526-7234  
TTY: (877)781-9403  
Fax: (304)293-5407  
[jan@askjan.org](mailto:jan@askjan.org)  
<http://askjan.org>

The Job Accommodation Network (JAN) is a free consulting service that provides information about job accommodations, the Americans with Disabilities Act (ADA), and the employability of people with disabilities.

### **Office of Disability Employment Policy**

200 Constitution Avenue, NW, Room S-1303  
Washington, DC 20210  
Toll Free: (866)633-7365  
TTY: (877)889-5627  
Fax: (202)693-7888  
<http://www.dol.gov/odep/>

The Office of Disability Employment Policy (ODEP) is an agency within the U.S. Department of Labor. ODEP provides national leadership to increase employment opportunities for adults and youth with disabilities while striving to eliminate barriers to employment.

### **Centers for Disease Control and Prevention**

1600 Clifton Rd NE  
Atlanta, GA 30333  
Toll Free: (800)311-3435  
Direct: (404)498-1515  
<http://www.cdc.gov>

The Centers for Disease Control and Prevention are dedicated to protecting the health and safety of people - at home and abroad, providing credible information to enhance health decisions, and promoting health through strong partnerships.

### **Chronic Fatigue Immune Dysfunction Association of America**

CFIDS Association of America  
PO Box 220398  
Charlotte, NC 28222-0398  
Direct: (704)365-2343  
Fax: (704)365-9755

cfids@cfids.org  
<http://www.cfids.org>

The CFIDS Association of America is the nation's leading charitable organization dedicated to conquering CFIDS, also known as chronic fatigue syndrome (CFS) and myalgic encephalomyelitis (M.E.).

**International Association for CFS/ME**

27 N. Wacker Drive Suite 416  
Chicago, IL 60606  
Direct: (847)258-7248  
Fax: (847)579-0975  
Admin@iacfsme.org  
<http://www.iacfsme.org>

IACFS/ME is a membership organization for clinicians as well as research and health care workers professionally engaged in CFS activities.

**National Chronic Fatigue and Fibromyalgia Syndrome Association**

PO Box 18426  
Kansas City, MO 64133  
Direct: (816)737-1341  
information@ncfsfa.org  
<http://www.ncfsfa.org>

NCFFSA is an organization that educates and informs the public, patients and their families, and health professionals about the nature and impact of FMS. Services include response to inquiries, educational and resource materials, and referrals.

**National Organization for Rare Disorders**

55 Kenosia Avenue  
PO Box 1968  
Danbury, CT 06813-1968  
Toll Free: (800)999-6673  
Direct: (203)744-0100  
TTY: (203)797-9590  
Fax: (203)798-2291  
orphan@rarediseases.org  
<http://www.rarediseases.org/>

NORD is a unique federation of voluntary health organizations dedicated to helping people with rare "orphan" diseases and assisting the organizations that serve them. NORD is committed to the identification, treatment, and cure of rare disorders through programs of education, advocacy, research, and service.

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