Credential Maintenance Program **Sleep Disorders Specialty Assessment Detailed Content Outline** *Multiple-choice items are linked to open cells.* *Test takers will be asked to integrate (apply or analyze) information.*	Cognitive Level		Total
	Recall	Integration*	
First Quarter of the Calendar			5
I. PRE-TESTING	0	3	3
A. Identification and Care of At-Risk Individuals	0	1	1
1. Recognize signs and symptoms associated with sleep disorders as revealed by history, interview, or clinical assessment (for example, outpatient, perioperative, inpatient)			
2. Identify special factors affecting individuals with potential sleep disorders (for example, cultural / gender identity, primary language, disabilities, co-morbid conditions)			
3. Identify appropriate diagnostic modality based on patient factors, co-morbid conditions, insurance requirements			
a. polysomnography with or without therapeutic intervention			
b. home sleep apnea testing			
c. Multiple Sleep Latency Test (MSLT)			
d. Maintenance of Wakefulness Test (MWT)			
e. actigraphy			
f. overnight oximetry			
4. Communicate with members of the health care team regarding findings and recommendations			
a. diagnostic studies			
b. therapeutic interventions			
B. Study Preparations	0	2	2
1. Identify critical information from the patient's medical record			
2. Select the appropriate study montage			
3. Set up equipment to achieve the desired data collection			
4. Evaluate equipment calibrations to ensure accuracy and linearity of amplified signals			
5. Confirm adequate audiovisual signals			
6. Recommend modifications to the prescriber's order when necessary			
7. Assess a patient's current clinical condition			
8. Explain testing procedures and potential interventions in response to the patient's expectations			

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9. Recognize special needs associated with the patient's psychological, physical, cultural, language, and cognitive status			
10. Document medications while identifying those that may affect test results			
11. Obtain informed consent from the patient / caregiver			
12. Apply electrodes and sensors at optimal locations to obtain data on airflow, snoring, body position, ECG, respiratory effort, EEG, leg movements, eye movements, chin EMG, and SpO_2			
13. Apply electrodes and sensors at optimal locations to obtain data on			
a. exhaled CO_2			
b. transcutaneous CO_2			
14. Document the quality of monitoring signals including electrode impedances and physiologic calibration results			
II. SLEEP DISORDERS TESTING	**0**	**5**	**5**
A. Signal Maintenance During Testing	**0**	**1**	**1**
1. Recognize inadequate signals / artifacts			
2. Correct inadequate signals / artifacts as appropriate			
3. Document corrections to inadequate signals / artifacts			
B. Therapeutic Interventions During Testing	**0**	**3**	**3**
1. Recognize disorders			
a. sleep			
b. cardiac			
c. neurological			
d. pulmonary			
e. gastrointestinal (for example, pH, distension)			
Second Quarter of the Calendar			5
2. Start therapy			
a. PAP therapy (for example, continuous, auto, bilevel)			
b. other non-invasive therapy (for example, Adaptive Servo Ventilation, Average Volume-Assured Pressure Support)			
c. oxygen			
d. mandibular advancement device (for example, disposable oral appliance)			

Credential Maintenance Program Sleep Disorders Specialty Assessment Detailed Content Outline *Multiple-choice items are linked to open cells.* *Test takers will be asked to integrate (apply or analyze) information.	Cognitive Level		
	Recall	Integration*	Total
3. Optimize therapy based on the patient's response			
a. PAP therapy (for example, continuous, auto, bilevel)			
b. other non-invasive therapy (for example, Adaptive Servo Ventilation, Average Volume-Assured Pressure Support)			
c. oxygen			
d. permanent oral appliance			
e. mandibular advancement device (for example, disposable oral appliance)			
f. patient positioning			
4. Coach a patient in cooperative behaviors while adjusting therapy			
5. Recognize medical emergencies (for example, seizures, stroke, respiratory distress)			
6. Implement interventions for a medical emergency			
a. in-hospital sleep center			
b. freestanding sleep center			
7. Respond when the testing environment becomes unsafe (for example, combative patient or family member, fire, earthquake)			
8. Document times associated with events (for example, artifacts, recording abnormalities, therapeutic adjustments, parasomnias, lights off / on, staff entering room)			
C. Study Conclusion	**0**	**1**	**1**
1. Perform post-study calibrations			
2. Process equipment			
3. Review post-study questionnaire with the patient / caregiver			
4. Describe the post-study process to a patient / caregiver (for example, equipment removal, study interpretation)			
5. Summarize study observations for analysis			
III. STUDY ANALYSIS	**0**	**7**	**7**
A. Record Review	**0**	**1**	**1**
1. Identify critical information from the patient's medical history (for example, medications, co-morbid conditions)			
2. Review a summary of study observations and the patient questionnaires			

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	Recall	Integration*	
B. Sleep Staging	0	1	1
1. Score sleep stages for adult patients			
2. Score sleep stages for pediatric patients			
Third Quarter of the Calendar			5
C. Sleep Event Identification	0	2	2
1. Recognize events from in-lab sleep testing			
a. sleep-disordered breathing			
b. abnormal limb movements			
c. abnormal cardiac rhythm			
d. abnormal EEG waveforms (for example, seizure, voltage changes)			
e. parasomnias (for example, night terrors, REM behavior disorder)			
f. arousals			
g. abnormal CO_2 levels or hypoventilation			
2. Evaluate data from home sleep apnea testing			
a. validity			
b. sleep-disordered breathing			
c. oximetry			
d. artifacts			
e. cardiac rhythm			
D. Sleep Event Reporting	0	3	3
1. Summarize findings of the patient's behavior (for example, tolerance of therapeutic interventions, parasomnias)			
2. Summarize evidence of			
a. inadequate signals / artifacts			
b. adverse events			
c. technical problems, errors, and corrective actions			
3. Verify the accuracy of generated statistics			
a. oxygen saturation			
b. sleep latency			
c. REM latency			
d. sleep efficiency			
e. total sleep time			
f. total time in bed			
g. total recording time			
h. sleep stage percentages			

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	Recall	**Integration***	
i. wake after sleep onset			
4. Document statistics for MSLT and MWT (for example, mean sleep latency, REM periods)			
5. Document the frequency or verify accuracy			
a. obstructive, central, and mixed apneas			
b. obstructive and central hypopneas			
c. arousals			
d. abnormal limb movements			
e. snoring			
f. Respiratory Effort Related Arousals (RERAs)			
g. Cheyne-Stokes respirations			
h. sleep-related hypoventilation			
i. periodic breathing			
j. CO_2 levels			
6. Verify the accuracy of statistical indices			
a. apneas			
b. hypopneas			
c. RERAs			
d. respiratory events from portable monitors			
e. arousals			
f. abnormal limb movements			
g. snoring			
h. desaturations			
i. CO_2 levels			
7. Document abnormalities in			
a. EEG activity (for example, spike wave, alpha-delta, alpha-intrusion)			
b. REM (for example, density, latency)			
c. ECG activity			
8. Generate a valid written report including objective and subjective information			
Fourth Quarter of the Calendar			**5**
IV. ADMINISTRATIVE FUNCTIONS	**1**	**1**	**2**
A. Data and Equipment Maintenance	**1**	**0**	**1**
1. Ensure information from each patient is stored according to government and industry standards			
2. Correct problems with data acquisition and recording equipment			

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	Recall	**Integration***	**Total**
3. Satisfy requirements (for example, perform, document)			
a. biomedical equipment quality control			
b. routine equipment processing			
c. inventory maintenance			
B. Management	**0**	**1**	**1**
1. Implement policies and procedures (for example, secure data archiving, patient confidentiality, safety)			
2. Implement quality improvement programs (for example, patient satisfaction, inter-scorer reliability)			
V. TREATMENT PLAN	**0**	**3**	**3**
A. Development	**0**	**1**	**1**
1. Assess the patient's / caregiver's needs and barriers to optimal therapy (for example, educational level, cultural / gender identity, disabilities, insurance requirements)			
2. Select equipment and interface to ensure maximum adherence and efficacy			
3. Communicate details of assessment to the health care team			
4. Assist in the development of an individualized treatment plan (for example, behavior modifications, co-morbid condition management)			
B. Implementation	**0**	**1**	**1**
1. Assist in the generation of the prescription			
2. Provide education to the patient / caregiver regarding the therapeutic plan			
3. Adjust equipment settings to comply with the prescription			
4. Document educational assessments, interventions, and the patient's / caregiver's comprehension of treatment plan			
C. Evaluation	**0**	**1**	**1**
1. Analyze PAP data download			
2. Evaluate mask fit			
3. Analyze results from follow-up studies			
a. nocturnal oximetry			
b. repeated home sleep test			
c. actigraphy			
4. Document treatment outcomes			

Credential Maintenance Program	Cognitive Level		
Sleep Disorders Specialty Assessment Detailed Content Outline *Multiple-choice items are linked to open cells.* *Test takers will be asked to integrate (apply or analyze) information.	Recall	Integration*	Total
5. Communicate treatment plan results and recommended revisions to the health care provider			
TOTAL	**1**	**19**	**20**

Specifications by Patient Age

Patient	Maximum items per form
Pediatric-6 years of age or younger	1
Pediatric-7 to 17 years of age	1
General	balance
Total	**20**

Specifications by Patient Airway Type

Patient	Maximum items per form
Has a tracheostomy	1
General	balance
Total	**20**

Specifications by Study Location

Patient	Minimum items per form
Home	1
In lab	2
General	balance
Total	**20**