		Items			
		Cognitive Level			Total
	Sleep Disorders Specialty Examination Detailed Content Outline *Multiple-choice items are linked to open cells.*	Recall	Application	Analysis	
I. PRE-TESTING		9	16	4	29
A.	**Identification and Care of At-Risk Individuals**	3	5	4	12
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 the appropriate diagnostic modality based on patient factors, co-morbid conditions and 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**	6	11	0	17
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				

			Items	
Sleep Disorders Specialty Examination Detailed Content Outline *Multiple-choice items are linked to open cells.*		Cognitive Level		Total
	Recall	**Application**	**Analysis**	
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				
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	**7**	**22**	**8**	**37**
A. Signal Maintenance During Testing	**0**	**3**	**1**	**4**
1. Recognize inadequate signals / artifacts				
2. Correct inadequate signals / artifacts as appropriate				
3. Document corrections to inadequate signals / artifacts				
B. Therapeutic Interventions During Testing	**4**	**17**	**7**	**28**
1. Recognize disorders				
a. sleep				
b. cardiac				
c. neurological				
d. pulmonary				
e. gastrointestinal (for example, pH, distention)				
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)				

	Items			
Sleep Disorders Specialty Examination Detailed Content Outline *Multiple-choice items are linked to open cells.*	Cognitive Level			Total
	Recall	Application	Analysis	
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	3	2	0	5
1. Perform post-study calibrations				
2. Remove 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	**9**	**38**	**6**	**53**
A. Record Review	1	1	0	2
1. Identify critical information from the patient's medical history (for example, medications, co-morbid conditions)				
2. Review a summary of study observations and patient questionnaires				

		Items		
		Cognitive Level		
Sleep Disorders Specialty Examination Detailed Content Outline *Multiple-choice items are linked to open cells.*	**Recall**	**Application**	**Analysis**	**Total**
B. Sleep Staging	2	6	0	8
1. Score sleep stages for adult patients				
2. Score sleep stages for pediatric patients				
C. Sleep Event Identification	3	19	5	27
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	3	12	1	16
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				
i. wake after sleep onset				
4. Document statistics for MSLT and MWT (for example, mean sleep latency, REM periods)				

	Items			
Sleep Disorders Specialty Examination Detailed Content Outline *Multiple-choice items are linked to open cells.*	Cognitive Level			**Total**
	Recall	**Application**	**Analysis**	
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. desaturations				
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				
IV. ADMINISTRATIVE FUNCTIONS	**2**	**5**	**1**	**8**
A. Data and Equipment Maintenance	**1**	**3**	**0**	**4**
1. Ensure information from each patient is stored according to government and industry standards				
2. Correct problems with data acquisition and recording equipment				
3. Satisfy requirements (for example, perform, document)				
a. biomedical equipment quality control				
b. routine equipment processing				
c. inventory maintenance				

	Items			
Sleep Disorders Specialty Examination **Detailed Content Outline** *Multiple-choice items are linked to open cells.*	Cognitive Level			
	Recall	**Application**	**Analysis**	**Total**
B. **Management**	1	2	1	4
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**	7	16	10	33
A. **Development**	2	5	2	9
1. Assess a 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**	4	5	0	9
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**	1	6	8	15
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				
5. Communicate treatment plan results and recommended revisions to the healthcare provider				
TOTAL	**34**	**97**	**29**	**160**

Specifications by Patient Age

Patient	Min	Max
Pediatric 6 years of age or younger	4	8
Pediatric 7 to 17 years of age	4	8
General	balance	
Total	**160**	

Specifications by Patient Airway Type

Patient	Min
Has a tracheostomy	2
General	balance
Total	**160**

Specifications by Study Location

Patient	Min
Home	10
In lab	20
General	balance
Total	**160**