COLLEGE OF PHYSICIANS AND SURGEONS OF BRITISH COLUMBIA

Diagnostic Accreditation Program

ACCREDITATION STANDARDS

Daytime Testing

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Introduction

Daytime sleep tests are a crucial diagnostic tool to provide insights into a patient's sleep patterns and daytime alertness.

Multiple sleep latency test (MSLT) assesses how quickly an individual falls asleep in a relaxed quiet setting.

Maintenance of wakefulness test (MWT) assesses an individual's ability to stay awake in a relaxed quiet setting.

Daytime testing

No.		Description	Risk	Reference	Change
DPSG1.0		**DAYTIME TESTS**			NEW
DPSG1.1		**Daytime tests are standardized in a manner that ensures accurate results for interpretation.**			New
DPSG1.1.1	**M**	Relevant pre-test data is reviewed prior to initiating a daytime sleep test.	M	POLY-AC-24	New
DPSG1.1.2	**M**	There is a defined protocol for conducting daytime tests.	M		New
DPSG1.1.3	**M**	Pre-test requirements are defined and communicated to the patient in advance of the test date (e.g. withholding medications).	M		New
DPSG1.1.4	**M**	The physical environment is comfortable, quiet and the room is dimly lit room to create an environment conducive for sleep.	L		New
DPSG1.1.5	**M**	Efforts are made to optimize a comfortable patient experience (e.g. physical environment).	L		New
DPSG1.1.6	**B**	Sleep diary or alternate method (e.g. actigraphy) is maintained by the patient and reviewed prior to the study.			New
DPSG1.1.7	**B**	There is a process to obtain a toxicology screening.			New
DPSG1.1.8	**M**	In children, a clear indication for MSLT is defined and documented.	M	POLY-AC-24	New
DPSG1.1.9	**B**	Drug screening sample is collected, as required.			New
DPSG1.2		**Multiple sleep latency tests (MSLT) are standardized and recorded in a manner that ensures accurate results for interpretation.**		JCSM 2021	New
DPSG1.2.1	**M**	A polysomnogram test is conducted prior to MSLT.	M		New
DPSG1.2.2	**M**	The MSLT is performed 1.5 to 3 hours after termination of the overnight polysomnogram. *Guidance: A minimum of seven hours of time in bed with at least six hours of sleep is established prior to starting the MSLT testing. Each subsequent trial should begin two hours after the start of the prior trial.*	L		New
DPSG1.2.3	**M**	The overnight polysomnogram results are reviewed prior to the MSLT.	M		New
DPSG1.2.4	**M**	Post PSG electrodes are removed prior to a MSLT for patient comfort.	L		New

No.		Description	Risk	Reference	Change
DPSG1.2.5	**M**	Polysomnography therapeutic interventions (e.g. split night, PAP titration) are not conducted prior to a MSLT.	L		New
DPSG1.2.6	**M**	PAP therapy is not discontinued for MSLT. *Guidance: PAP parameters are not adjusted prior to the study.*	M		New
DPSG1.2.7	**M**	Stimulants or depressants are avoided for the day of the test and/or follow physician orders (e.g. alcohol, caffeine, nicotine, etc.). *Guidance: Medications that affect REM sleep are avoided prior to the study.*	M		New
DPSG1.2.8	**M**	PSG is not terminated if the patient is in REM stage sleep.	L		New
DPSG1.2.9	**M**	The MSLT consists of a minimum of five 20-minute nap opportunities scheduled at specific times during the day, with a two-hour interval between naps or starting time.	L		New
DPSG1.2.10	**B**	Four naps are permitted when there are clear findings of type I or II narcolepsy with SOREMS and appropriately reduced sleep onset of less than eight minutes.			New
DPSG1.2.11	**M**	During a nap trial and following the first epoch of sleep an additional one minute of recording time is added.	L		New
DPSG1.2.12	**M**	Biological calibrations are performed before each nap trial. *Guidance: Standardized examples include:* *1. lie quietly with your eyes open for 30 seconds* *2. close both eyes for 30 seconds* *3. without moving your head look to the right, then left – repeat twice* *4. blink eyes slowly for five times* *5. clench or grit your teeth tightly together*	L	JCSM 2021	New
DPSG1.2.13	**M**	During periods between sleep opportunities, patients are monitored for wakefulness. *Guidance: The technologist ensures that the patient stays awake between tests (e.g. through direct observation or instructions if the patient leaves the sleep lab).*	L		New
DPSG1.2.14	**M**	If vigorous physical activity, exposure to bright lights, smoking and caffeine are witnessed between naps it is documented.	L		New
DPSG1.2.15	**M**	End of test criteria or early termination protocols are defined.	L		New

No.		Description	Risk	Reference	Change
DPSG1.2.16	**M**	Electroencephalogram (EEG) is recorded. *Guidance: The EEG recording uses a minimum of three channels e.g., Central, Frontal, and Occipital.*	L		New
DPSG1.2.17	**M**	Electrooculogram (EOG) is recorded. *Guidance: The EOG recording uses a minimum of two channels.*	L		New
DPSG1.2.18	**M**	Electromyogram (chin EMG) is recorded. *Guidance: The EMG recording uses three channels for submental.* *Three electrode placements are recommended in the event of an electrode malfunction and ensures continuous monitoring of chin EMG activity (e.g. one electrode above the mandible and two below the inferior edge of the mandible).*	L		New
DPSG1.2.19	**M**	Electrocardiogram (ECG) is recorded. *Guidance: A modified lead I or lead II electrode placement is used to capture cardiac activity.*	L		New
DPSG1.3		**MSLT findings are reported in a standardized manner.**		JCSM 2021	New
DPSG1.3.1	**M**	MSLT report includes the total time for each nap opportunity (lights-out to lights-on).	L		New
DPSG1.3.2	**M**	MSLT report includes the documented sleep stages.	L		New
DPSG1.3.3	**M**	MSLT report includes the following recording parameters for each trial: start time, end time, total sleep time, sleep latency, and REM latency.	L		New
DPSG1.3.4	**M**	MSLT report includes the mean sleep latency.	L		New
DPSG1.3.5	**M**	MSLT report includes the number of sleep onset REM periods (SOREMP).	L		New
DPSG1.3.6	**M**	MSLT report includes the absence of sleep on any nap opportunity	L		New
DPSG1.3.7	**M**	MSLT report includes the reason(s) for early test termination	L		New
DPSG1.3.8	**M**	MSLT report includes a list of current medications used within 24 hours of and during the MSLT.	L		New
DPSG1.3.9	**B**	MSLT report includes a notation of the drug screening results.			New
DPSG1.3.10	**M**	MSLT report includes a list of current medications.	M		New
DPSG1.3.11	**M**	MSLT report includes documentation of patient's intake and physical activity between scheduled naps.	L		New

No.		Description	Risk	Reference	Change
DPSG1.3.12	**M**	MSLT report includes the degree of sleepiness using a standardized sleepiness scale (e.g. Stanford Sleepiness Scale).	L		New
DPSG1.4		**Maintenance of wakefulness test (MWT) are standardized and recorded in a manner that ensures accurate results for interpretation.**		JCSM 2021	New
DPSG1.4.1	**B**	The overnight polysomnogram results are reviewed prior to the MWT. *Guidance: If a complete polysomnogram is not required it follows physician orders and within documented lab policies.*			New
DPSG1.4.2	**B**	PAP therapy is not discontinued for MWT.			New
DPSG1.4.3	**B**	Pre-study documentation is reviewed prior to the study (e.g. sleep diary, actigraphy and PAP downloads).			New
DPSG1.4.4	**M**	The patient's prior night's sleep and activities are assessed prior to testing. *Guidance: The quality of the sleep the night before can impact the validity of the test.*	M		New
DPSG1.4.5	**M**	The patient is required to stay awake for a minimum of forty minutes every two hours.	L		New
DPSG1.4.6	**M**	The MWT consists of four 40-minute wake trials.	L		New
DPSG1.4.7	**M**	The initial trial begins 1.5 to 3 hours after the termination of the preceding night's sleep at home, and a subsequent trial begins two hours after the start of the prior trial.	L		New
DPSG1.4.8	**M**	Sleep rooms are dimly lit. *Guidance: A 7.5-watt nightlight placed 12 inches off the floor and 3 feet lateral to the patient's head.*	L		New
DPSG1.4.9	**M**	The patient is seated in a bed or reclining chair.	L		New
DPSG1.4.10	**M**	Each wake trial is ended once the patient has 3 consecutive epochs of stage N1 sleep or one epoch of any other sleep stage or after 40 minutes.	L		New
DPSG1.4.11	**M**	End of test criteria or early termination protocols are established and documented.	L		New
DPSG1.4.12	**M**	Biological calibrations are conducted before each wake trial.	L		New

No.		Description	Risk	Reference	Change
DPSG1.4.13	**M**	Electroencephalogram (EEG) is recorded. *Guidance: The EEG recording uses a minimum of three channels (e.g. Central, Frontal, and Occipital).*	L		New
DPSG1.4.14	**M**	Electrooculogram (EOG) is recorded. *Guidance: The EOG recording uses a minimum of two channels.*	L		New
DPSG1.4.15	**M**	Electromyogram (chin EMG) is recorded. *Guidance: The EMG recording uses three electrodes for submental.*	L		New
DPSG1.4.16	**M**	Electrocardiogram (ECG) is recorded. *Guidance: There is a process to ensure the electrodes placements are maintained from the PSG study.*	L		New
DPSG1.5		**MWTT findings are reported in a standardized manner.**		JCSM 2021	New
DPSG1.5.1	**M**	MWT report includes the start time, end time, total sleep time, sleep latency of each wake trial.	L		New
DPSG1.5.2	**M**	MWT report includes the mean sleep latency averaged over 4 wake trials.	L		New
DPSG1.5.3	**M**	MWT report includes the documented sleep stages.	L		New
DPSG1.5.4	**M**	MWT report includes any abnormal findings before or during each nap.	L		New
DPSG1.5.5	**M**	MWT report includes the reason for early termination of test.	L		New
DPSG1.5.6	**M**	MWT report includes a list of current medications.	M		New
DPSG1.5.7	**M**	MWT report includes the degree of sleepiness is documented (e.g. Stanford Sleepiness Scale).	L		New
DPSG1.5.8	**B**	MWT report includes notation of the drug screening results.			New

References

Abbreviation	Reference
AASM 2022	American Academy of Sleep Medicine. AASM Standards for Accreditation of Sleep Disorders Centers. 2022 [cited 2024 Aug 9]. Available from: https://aasm.org/resources/pdf/aasmcenteraccredstandards.pdf
AASM Scoring Manual V3.0	American Academy of Sleep Medicine. The AASM Manual for Scoring Sleep and Associated Events. Rules, Terminology and Technical Specifications. Version 3.0. 2023
HSAT DAP 2021	College of Physicians and Surgeons of British Columbia. Accreditation standard: Home sleep apnea testing [Internet]. Vancouver (BC): Diagnostic Accreditation Program; 2021 [cited 2024 Aug 9]. Available from: https://www.cpsbc.ca/files/pdf/DAP-AS-Home-Sleep-Apnea-Testing-V1.0.pdf.
JCSM 2008	Lois E. Krahn, MD, Donna L. Arand, PHD, et al. Recommended protocols for Multiple Sleep Latency Test and Maintenance of Wakefulness Test in adults: guidance form American Academy of Sleep Medicine. Journal of Clinical Sleep Medicine. 2021. Available from: https://jcsm.aasm.org/doi/10.5664/jcsm.9620
MoH Sleep	British Columbia Ministry of Health. Sleep apnea: assessment and management. BC Guidelines. 2019 Mar 11 [cited 2024 Aug 9]; Available from: https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines/sleep-apnea#resources
POLY-AC-24	College of Physicians and Surgeons of British Columbia. Diagnostic Accreditation Program. Polysomnography Advisory Committee. 2024.