

aasm scoring manual

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The AASM Scoring Manual is an essential resource for sleep medicine professionals, providing standardized criteria for the identification and scoring of sleep and wake stages, as well as various sleep disorders. Developed by the American Academy of Sleep Medicine (AASM), this manual ensures consistency and accuracy across sleep studies, facilitating reliable diagnosis and treatment planning. As sleep medicine continues to evolve with technological advancements and increasing research, the AASM Scoring Manual remains a vital reference point, harmonizing practices across different laboratories and clinicians worldwide.

Overview of the AASM Scoring Manual

Purpose and Significance

The primary purpose of the AASM Scoring Manual is to establish uniform criteria for sleep stage classification, arousal detection, respiratory event scoring, limb movement analysis, and other phenomena observed during polysomnography (PSG). This standardization helps minimize variability among scorers and enhances the comparability of sleep study results across different settings.

Evolution and Updates

Since its initial publication, the AASM Scoring Manual has undergone multiple revisions to incorporate new scientific insights, technological innovations, and clinical practices. The most recent editions reflect updated criteria for:

- Sleep staging
- Respiratory event scoring
- Movement disorders
- Arousal definitions
- Cardiac activity

Each update aims to refine scoring accuracy, improve diagnostic sensitivity, and align with current research.

Structure of the AASM Scoring Manual

Core Components

The manual divides into several sections, each detailing specific scoring criteria:

- Sleep Staging: Rules for classifying wakefulness and sleep stages.
- Respiratory Events: Criteria for apneas, hypopneas, and other breathing-related phenomena.
- Arousal Scoring: Definitions and thresholds for cortical arousals.
- Limb Movements: Guidelines for identifying and quantifying periodic limb movements.
- Cardiac Events: Recognition of arrhythmias and other cardiac phenomena during sleep.

Scoring Epochs and Time Intervals

Most scoring is performed on 30-second epochs, with some phenomena requiring specific temporal parameters. The manual emphasizes precise time measurement to ensure reproducibility.

Sleep Staging Criteria

Sleep Stages Overview

The AASM classifies sleep into the following stages:

- Wakefulness (W)
- Non-REM sleep, subdivided into:
 - N1 (Stage 1)
 - N2 (Stage 2)
 - N3 (Slow-wave sleep or deep sleep)
- REM sleep (Rapid Eye Movement)

Each stage has distinct electrophysiological features based on EEG, EOG, and EMG recordings.

Detailed Criteria for Sleep Stages

Wakefulness (W)

- Desynchronized EEG activity with low-amplitude mixed frequency waves.
- Eye movements are variable.
- Muscle tone may be high or variable.

N1 (Stage 1)

- Transition from wakefulness to sleep.
- Presence of low-voltage mixed frequency EEG (theta waves: 4–7 Hz).
- Decreased muscle tone.

- May observe slow rolling eye movements.

N2 (Stage 2)

- Characterized by sleep spindles (11–16 Hz) and K-complexes.
- Presence of a stable EEG background with predominant theta activity.
- Absence of eye movements.
- Slight reduction in muscle tone.

N3 (Stage 3 or Slow-Wave Sleep)

- Dominated by delta waves (0.5–2 Hz, high amplitude).
- At least 20% of epoch shows delta activity for scoring as N3.
- Represents the deepest non-REM sleep stage.

REM Sleep

- EEG similar to wakefulness with low-amplitude mixed waves.
- Rapid eye movements observed via EOG.
- Complete or nearly complete muscle atonia.
- Usually occurs after N2 and N3 stages.

Scoring Respiratory Events

Types of Events

The manual defines several respiratory phenomena:

- Obstructive apneas
- Central apneas
- Mixed apneas
- Hypopneas

Criteria for Apneas

An apnea is scored when:

- There is a $\geq 90\%$ reduction in airflow for at least 10 seconds.
- The reduction is confirmed by nasal pressure, thermistor, or other airflow measures.
- Respiratory effort (thoracic and abdominal movement) is present in obstructive apnea, absent in central apnea, and variable in mixed apnea.

Criteria for Hypopneas

A hypopnea is scored when:

- There is a $\geq 30\%$ reduction in airflow lasting ≥ 10 seconds.
- Accompanied by a 3% or greater oxygen desaturation from baseline or an arousal.
- The criteria for desaturation are specified, commonly $\geq 3\%$.

Scoring Considerations

- The manual emphasizes the importance of differentiating between obstructive and central events based on effort signals.
- The oxygen desaturation threshold and the duration criteria are critical for accurate scoring.

Arousal Scoring

Definition and Importance

Arousal is a transient shift in EEG frequency characterized by increased frequency, voltage, or amplitude. Arousal scoring helps assess sleep fragmentation, which impacts sleep quality.

Criteria for Arousal

- An abrupt change in EEG frequency lasting at least 3 seconds, with a concurrent increase in electromyogram (EMG) activity.
- Arousal can be associated with respiratory events, limb movements, or occur spontaneously.
- The manual details minimal criteria, including the importance of differentiating true arousals from artifacts.

Types of Arousals

- Respiratory-related arousals: Occur in conjunction with breathing events.
- Spontaneous arousals: Occur without any apparent trigger.
- Periodic limb movements associated arousals.

Limb Movement Scoring

Types of Movements

- Periodic Limb Movements in Sleep (PLMS): Repetitive movements, typically involving the legs, occurring at regular intervals.
- Simple limb movements: Isolated movements not part of a pattern.

Criteria for PLMS

- Movements lasting 0.5–10 seconds.
- Occur at least every 20–40 seconds.
- Confirmed via EMG recordings from anterior tibialis or other limb muscles.
- Usually associated with or preceded/followed by EEG arousals.

Quantification

- The number of movements per hour of sleep (PLMS index).
- The percentage of sleep epochs containing limb movements.

Cardiac Event Scoring

Common Cardiac Phenomena

- Arrhythmias, including bradycardia and tachycardia.
- Isolated premature beats.
- Sinus pauses.

Criteria for Detection

- Utilizes ECG channels.
- Events are scored based on heart rate changes, rhythm patterns, and clinical significance.
- The manual emphasizes careful differentiation between artifact and true cardiac events.

Additional Considerations in the AASM Manual

Artifact Identification and Management

- Recognizing and annotating artifacts is crucial to avoid misinterpretation.
- Common artifacts include movement-related noise, electrode disconnection, and environmental interference.

Use of Scoring Software and Technology

- Modern sleep studies often employ automated scoring algorithms supplemented by manual review.
- The manual underscores the importance of clinician oversight and training.

Special Populations and Conditions

- Pediatric scoring criteria differ slightly due to developmental differences.
- Specific considerations are provided for patients with neurological disorders, sleep-related movement disorders, and other comorbidities.

Practical Application of the AASM Scoring Manual

Training and Certification

- Scorers typically undergo specialized training.
- Certification programs ensure proficiency and adherence to criteria.

Quality Control

- Regular inter-scorer reliability assessments.
- Use of standardized scoring protocols.

Documentation and Reporting

- Clear documentation of scoring decisions.
- Use of standardized reporting templates aligned with the manual's guidelines.

Conclusion

The AASM Scoring Manual serves as a cornerstone resource in sleep medicine, fostering consistency, reliability, and scientific rigor in sleep study interpretation. Its detailed criteria guide clinicians and technicians in accurately classifying sleep stages, respiratory events, arousals, limb movements, and cardiac phenomena. As sleep research advances, the manual continues to evolve, integrating new evidence and technologies to improve diagnostic precision. Mastery of its guidelines is fundamental for sleep professionals committed to delivering high-quality care and advancing the field of sleep medicine.

Frequently Asked Questions

What is the purpose of the AASM Scoring Manual?

The AASM Scoring Manual provides standardized criteria and guidelines for scoring sleep and wake stages, respiratory events, and other sleep-related phenomena to ensure consistency and accuracy in sleep studies.

How often is the AASM Scoring Manual updated?

The AASM Scoring Manual is typically updated every few years to incorporate new research findings, technological advancements, and clinical best practices. The latest edition should always be referred to for current scoring standards.

What are the main sleep stages defined in the AASM Scoring Manual?

The main sleep stages defined are N1 (light sleep), N2, N3 (deep or slow-wave sleep), and REM sleep. The manual provides specific criteria for scoring each stage based on EEG, EMG, and other physiological signals.

How does the AASM Scoring Manual address the scoring of respiratory events?

The manual outlines precise criteria for identifying and scoring apneas, hypopneas, and other respiratory events, including their duration, amplitude reductions, and associated oxygen desaturations, to standardize diagnosis and research.

Is training required to accurately score sleep studies using the AASM Manual?

Yes, proper training and certification are recommended to ensure accurate and reliable scoring according to AASM guidelines, especially given the detailed and specific criteria outlined in the manual.

Additional Resources

Understanding the AASM Scoring Manual: A Comprehensive Guide for Sleep Professionals

In the complex world of sleep medicine, precise and standardized scoring is essential for accurate diagnosis and treatment planning. The AASM Scoring Manual, developed by the American Academy of Sleep Medicine, serves as the authoritative reference for sleep technicians, physicians, and researchers to ensure consistency and reliability in sleep study interpretation. This article provides an in-depth exploration of the AASM Scoring Manual, breaking down its key components, principles, and practical applications.

What Is the AASM Scoring Manual?

The AASM Scoring Manual is a comprehensive guideline document that outlines standardized criteria for scoring various physiological events observed during sleep studies, primarily polysomnography (PSG). It aims to promote uniformity across sleep centers and improve the quality of sleep medicine practice by providing clear definitions, rules, and examples for identifying and quantifying sleep stages, respiratory events, limb movements, arousals, and other relevant phenomena.

Why Is the AASM Scoring Manual Important?

- **Standardization:** Ensures consistency in how sleep events are scored across different laboratories and clinicians.
- **Accuracy:** Enhances diagnostic precision for sleep disorders like obstructive sleep apnea (OSA), narcolepsy, restless legs syndrome (RLS), and others.
- **Research and Data Sharing:** Facilitates comparison and aggregation of sleep data across studies and populations.
- **Quality Control:** Acts as a foundation for training, certification, and ongoing quality assurance in sleep medicine.

Overview of the AASM Scoring Manual Structure

The manual is organized into various chapters and appendices, each dedicated to specific aspects of sleep scoring:

- **Sleep Stages:** Definitions and criteria for NREM and REM sleep.
- **Respiratory Events:** Apneas, hypopneas, and related events.
- **Limb Movements:** Leg movements and periodic limb movements.
- **Arousals:** Criteria for scoring cortical arousals.
- **Other Events:** Snoring, body positions, and miscellaneous phenomena.
- **Special Considerations:** Pediatric scoring, artifact management, and emerging concepts.

Core Components and Principles of the Manual

1. Sleep Stage Scoring

Accurate staging of sleep is foundational. The manual defines sleep stages based on EEG patterns, eye movements, and muscle tone.

- **Wake:** Low-voltage mixed frequency EEG, eye opening, and muscle activity.

- NREM Sleep:
- Stage N1: Transition into sleep, characterized by low-amplitude mixed frequency EEG and slow eye movements.
- Stage N2: Presence of sleep spindles and K-complexes.
- Stage N3: Also known as slow-wave sleep; characterized by delta waves.
- REM Sleep:
- Rapid eye movements, low-amplitude mixed EEG, and muscle atonia.

Key Scoring Tips:

- Use 30-second epochs as the standard epoch length.
- Prioritize EEG features for staging.
- Do not score mixed features; assign the primary stage.

2. Respiratory Event Scoring

The manual provides explicit criteria for identifying and scoring respiratory events.

- Apneas:
- Complete or near-complete cessation of airflow for at least 10 seconds.
- Confirmed by the absence of airflow on thermistor or nasal pressure sensor, with continued respiratory effort.
- Hypopneas:
- A reduction in airflow lasting at least 10 seconds, with a specific amplitude criterion (often a 30% or greater reduction from baseline).
- Usually associated with oxygen desaturation of at least 3-4% or an arousal.
- Obstructive vs. Central Events:
- Obstructive: Respiratory effort persists during airflow cessation.
- Central: No respiratory effort during airflow cessation.

Important Considerations:

- The manual emphasizes the importance of combining airflow, effort, and oxygen saturation data for accurate classification.
- The scoring rules are periodically updated; always refer to the latest version.

3. Limb Movement and Periodic Limb Movements

Limb movements are scored based on amplitude, duration, and pattern.

- Leg Movements:
- Defined by an increase in electromyography (EMG) activity from baseline.
- Duration: typically 0.5 to 5 seconds.
- Amplitude: at least 8 μ V or a relative increase over baseline.
- Periodic Limb Movements:

- Series of limb movements occurring at regular intervals (usually 20-40 seconds apart).
- Associated with sleep disturbance or other sleep disorders.

Scoring Tips:

- Differentiate voluntary movements from involuntary limb movements.
- Use EMG channels from anterior tibialis muscles for limb movement detection.

4. Arousal Scoring

Arousals are brief shifts to lighter sleep or wakefulness, often triggered by respiratory or limb events.

- Criteria:
 - An abrupt shift in EEG frequency lasting at least 3 seconds.
 - Usually accompanied by transient muscle activation.
- Significance:
 - Arousals contribute to sleep fragmentation and are critical in disorders like sleep apnea.

Note:

- The manual clarifies that not all transitions are arousals; strict criteria must be met for scoring.

Practical Application: Implementing the Scoring Rules

Step-by-Step Approach

1. Preparation:

- Ensure proper electrode placement and calibration.
- Review the recording for artifacts or signal loss.

2. Epoch-by-Epoch Review:

- Analyze each 30-second epoch systematically.
- Assign sleep stage based on EEG and other signals.

3. Identify Events:

- Mark respiratory events according to airflow, effort, and saturation.
- Detect limb movements and classify as periodic or isolated.
- Observe EEG for arousals, noting their duration and triggers.

4. Use the Manual as a Reference:

- Consult specific criteria and examples provided.
- Confirm ambiguous events with the detailed definitions.

5. Document and Record:

- Use standardized scoring sheets or software aligned with AASM criteria.
- Note the timing, duration, and characteristics of each event.

Common Challenges and Solutions

- **Artifact Management:**
 - Artifacts can mimic or obscure events.
 - Use signal filtering and review multiple channels for confirmation.
- **Event Overlap:**
 - Respiratory events often coincide with limb movements or arousals.
 - Prioritize events based on clinical relevance and scoring rules.
- **Differentiating Event Types:**
 - For example, distinguishing between hypopnea and airflow limitation without desaturation.
 - Rely on amplitude changes and effort signals.

Updates and Evolution of the Manual

The AASM Scoring Manual undergoes periodic updates to incorporate new evidence, technology advances, and consensus. Notable recent updates include:

- Refinements in hypopnea scoring criteria.
- Clarifications on respiratory effort-related arousals (RERAs).
- Introduction of novel event definitions like respiratory cycle-related arousals.

Staying current with these updates is vital for compliance and accurate scoring.

Training and Certification

Proficiency in applying the AASM Scoring Manual is achieved through formal training, practice, and certification programs. Many sleep technologists pursue the Registered Sleep Technologist (RST) credential, which emphasizes adherence to scoring standards.

Key points for trainees:

- Study the manual thoroughly.
- Participate in supervised scoring sessions.
- Review scored cases and receive feedback.

- Engage in continuous education to keep pace with updates.

Conclusion

The AASM Scoring Manual is the cornerstone document that underpins the practice of sleep medicine. Its meticulous criteria and standardized approach enable clinicians and technologists to produce reliable, reproducible, and clinically meaningful sleep study interpretations. Mastery of its guidelines enhances diagnostic accuracy, informs effective treatment strategies, and advances the field of sleep research.

By understanding its structure, principles, and practical applications, sleep professionals can confidently navigate the complexities of sleep scoring, ultimately improving patient outcomes and contributing to the evolving science of sleep medicine.

[Aasm Scoring Manual](#)

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aasm scoring manual: *Fundamentals of Sleep Medicine - E-Book* Richard B. Berry, Mary H. Wagner, Scott M. Ryals, 2024-06-30 Master the basics of sleep medicine with this easy to read, award-winning text! Fundamentals of Sleep Medicine, 2nd Edition, by Drs. Richard B. Berry, Mary H. Wagner, and Scott M. Ryals, is an ideal resource for sleep medicine fellows and trainees, sleep technicians, and sleep medicine practitioners as a concise, clinically focused alternative to larger references. Beginning with core content, it then proceeds to information useful for everyday practice—all written in a clear, direct style designed for quick and easy access. - Features video content that demonstrates common sleep disorders - Includes more than 350 updated multiple-choice questions and answers for self-assessment and board preparation - New! Offers concise Key Points at the end of each chapter, expanding on information from Drs. Berry and Wagner's popular book Sleep Medicine Pearls to enhance your understanding - Provides updated

references to AASM scoring guidelines and diagnostic criteria for sleep disorders - Illustrated with numerous diagrams, charts, and polysomnograms (sleep studies) to clarify complex concepts - Any additional digital ancillary content may publish up to 6 weeks following the publication date

aasm scoring manual: Handbook of EEG Interpretation, Third Edition William O. Tatum, 2021-05-07 Praise for the Third Edition: [B]roadly clinically useful and provides excellent, succinct, and practical information for clinical neurophysiologists of all levels... This should be a standard addition to the library of all neurologists. © Doody's Review Service, 2021, Lawrence Brown, MD (The Children's Hospital of Philadelphia) Thoroughly updated and expanded Third Edition of the most trusted resource for anyone involved in EEG interpretation. Designed for on-the-go reference in the clinic or at the bedside, Handbook of EEG Interpretation concisely covers the fundamental components of EEG in clinical practice with graphic examples of classic EEG presentations and essential text throughout. Six new chapters have been added to address areas of growing importance with new dedicated chapters on technical aspects and artifacts of recording. With chapters written by prominent experts, this portable reference includes updated examples and color images new to this edition to reflect current advances in the field. Using a visual approach to identifying EEG waveforms, this handbook is the prime point-of-care reference on all major EEG topics: normal and abnormal variants, epileptiform and nonepileptiform abnormalities, adult and pediatric seizures, status epilepticus, ICU EEG, and sleep; in addition to ambulatory and video-EEG monitoring, electrocorticography, and magnetoencephalography. Essential bottom-line information in every chapter helps guide clinicians through the many challenges of EEG interpretation to improve patient outcomes. Practical tips from authors are included in a user-friendly manner. Designed for rapid retrieval and structured review, this handbook is a highly useful tool for neurology residents and fellows, clinicians, and technologists in search of reliable EEG information, regardless of specialty or level of training. Key Features: Third edition of the comprehensive, easy to read, quick access handbook on EEG interpretation Updated to reflect advanced clinical EEG applications and techniques Expanded coverage with the addition of six entirely new chapters Provides a visual approach to identifying EEG waveforms and understanding the essence of their clinical significance with over 300 color tracings Purchase includes access to the eBook for use on most mobile devices or computers

aasm scoring manual: A Clinical Guide to Pediatric Sleep Jodi A. Mindell, Judith A. Owens, 2010 Written for busy primary care practitioners, this book is a practical clinical guide to common pediatric sleep disorders and their treatment. Information is organized by specific disorder and by the most frequent presenting complaints. Symptom-based algorithms will enable practitioners to evaluate sleep complaints in a stepwise manner. Other features include symptom checklists for specific disorders and chapters on sleep problems in special populations. Appendices provide practical tools for screening for sleep problems, evaluating sleep studies, and counseling families. This edition includes updated ICSD-2 and ICD-10 diagnostic criteria and new and revised American Academy of Sleep Medicine Standards of Practice guidelines. Other highlights include new chapters on sleep hygiene and sleep enuresis, updated and expanded chapters on all sleep disorders, and up-to-date information on sleep medications and sleep in special populations. A companion Website will offer parent handouts for each age group and each sleep disorder, as well as screening questionnaires and sleep diaries.

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studying for the sleep boards. - Consult this title on your favorite e-reader, conduct rapid searches, and adjust font sizes for optimal readability. - Zero in on the practical, case-based information you need to effectively interpret sleep studies (polysomnography, home sleep testing, multiple sleep latency testing), sleep logs, and actigraphy. - Get clear, visual guidance with numerous figures and sleep tracings illustrating important concepts that teach the reader how to recognize important patterns needed to diagnose sleep disorders. - Confer on the go with short, templated chapters—ideal for use by busy physicians. A combination of brief didactic material followed by case-based examples illustrates major points. - Stay current with knowledge about the latest developments in sleep medicine by reading updated chapters using the new diagnostic criteria of the recently published International Classification of Sleep Disorder, 3rd Edition and sleep staging and respiratory event scoring using updated versions of the scoring manual of the American Academy of Sleep Medicine Manual for the Scoring of Sleep and Associated Events. - Benefit from Drs. Berry and Wagner's 25+ years of clinical experience providing care for patients with sleep disorders and educational expertise from presenting lectures at local, regional and national sleep medicine courses. Dr Berry was awarded the AASM Excellence in Education Award in 2010. - Access the full contents online at ExpertConsult.

aasm scoring manual: *Principles and Practice of Sleep Medicine E-Book* Meir H. Kryger, Thomas Roth, William C. Dement, 2010-11-01 Principles and Practice of Sleep Medicine, 5th Edition, by Meir H. Kryger, MD, FRCPC, Thomas Roth, PhD, and William C. Dement, MD, PhD, delivers the comprehensive, dependable guidance you need to effectively diagnose and manage even the most challenging sleep disorders. Updates to genetics and circadian rhythms, occupational health, sleep in older people, memory and sleep, physical examination of the patient, comorbid insomnias, and much more keep you current on the newest areas of the field. A greater emphasis on evidence-based approaches helps you make the most well-informed clinical decisions. And, a new more user-friendly, full-color format, both in print and online, lets you find the answers you need more quickly and easily. Whether you are preparing for the new sleep medicine fellowship examination, or simply want to offer your patients today's best care, this is the one resource to use! - Make optimal use of the newest scientific discoveries and clinical approaches that are advancing the diagnosis and management of sleep disorders. - Stay on top of the hottest topics in sleep medicine with 56 new chapters, including: - Postpartum Sleep Disturbances - Fatigue Risk Management - What does Brain Imaging Reveal about Sleep Genesis and Maintenance? - Physician Examination of the Sleep Patient - Forensic Sleep Medicine - Pathophysiology and Models of Insomnia - Treatment of Insomnia: Developing Treatment Guidelines - Restrictive Lung Disorders - Sleep Medicine in the Elderly: Obstructive - Obstructive Sleep Apnea, Metabolic, and Renal Disorders - Sleep Apnea, Obesity and Bariatric Surgery - Sleep and Renal Disease - Theories of Dreaming - Why We Dream - Sleep, Stress, and Burnout - Evaluating Sleep EEG and Sleep Stage Scoring - And more - Master the newest areas in the field with 5 new sections covering: - Sleep Mechanisms and Phylogeny - Genetics of Sleep - Physiology in Sleep - Occupational Sleep Medicine - Sleep Medicine in the Elderly - Access the complete contents online, fully searchable, and follow links to abstracts for most bibliographical references. - Apply evidence-based approaches wherever available. - Find answers more easily thanks to a new user-friendly, full-color format.

aasm scoring manual: Review of Sleep Medicine Alon Y. Avidan, Teri J. Barkoukis, 2011-08-26 Here's an ideal refresher on the core information in the field of sleep medicine. It is a comprehensive review-and-test workbook for preparation of the Sleep Board exam that emphasizes the highlights of sleep medicine and recaps major points with figures, tables, and lists to guide readers. The second half is a mock examination for practice, which includes many polysomnogram segments and multiple epochs. Also included are 500 exam questions, a quick reference to drug effects relating to sleep medicine, and an appendix on sleep scoring basics. Enables the user to practice for the exam with the same type of questions used in the exam itself. Provides the busy clinician a succinct summary of all aspects of working up the sleep disordered patient Offers very comprehensive and thorough answers and rationals so the user will know the why and how to think logically about the problem.

Additional coverage brings review book up to date with ASBM test material New chapters include: Sleep Breathing Disorders Cardiovascular Pathophysiology Evaluating Epilepsy Pearls of Pediatric Sleep Cardiopulmonary Disorders Neurological Sleep Disorders Sleep-Wake Disorders Clinical Case Studies II Knowing Practice Parameters Sleep Journals in Review

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Successfully review sleep medicine whether you plan to improve your sleep medicine competency skills or prepare for the Sleep Medicine Certification Exam with this expanded review-and-test workbook that includes more than 1,400 interactive questions and answers. Now in full color throughout, Review of Sleep Medicine, 4th Edition, by Dr. Alon Y. Avidan, features a new, high-yield format designed to help you make the most of your study time, using figures, polysomnography tracings, EEG illustrations, sleep actigraphy and sleep diaries, tables, algorithms, and key points to explain challenging topics. - Includes concise summaries of all aspects of sleep medicine clinical summaries from epidemiology, pathophysiology, clinical features, diagnostic techniques, treatment strategies and prognostic implications. - Provides a library of assessment questions with comprehensive explanations to help you identify the reasoning behind each answer and think logically about the problems. - Offers the expertise of a multidisciplinary global team of experts including sleep researchers, multispecialty sleep clinicians, and educators. The unique strength of this educational resource is its inclusion of all sleep subspecialties from neurology to pulmonary medicine, psychiatry, internal medicine, clinical psychology, and Registered Polysomnographic Technologists. - Perfect for sleep medicine practitioners, sleep medicine fellows and trainees, allied health professionals, nurse practitioners, sleep technologists, and other health care providers as review tool, quick reference manual, and day-to-day resource on key topics in sleep medicine. - Provides a highly effective review with a newly condensed, outline format that utilizes full-color tables, figures, diagrams, and charts to facilitate quick recall of information. - Includes new and emerging data on the function and theories for why we sleep, quality assessment in sleep medicine, and benefits and risks of sleep-inducing medications. - Contains new chapters on sleep stage scoring, sleep phylogenetic evolution and ontogeny, geriatric sleep disorders and quality measures in sleep medicine. - Features an expanded online question bank with 1,400 questions and answers that mimic the ABMS sleep exam in style and format.

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further chapters focus on depicting real-time illustrations of sleep data as captured in the sleep laboratory and the scoring of recording data. Information regarding common montages, artifacts, and troubleshooting in the sleep laboratory will facilitate the reader's journey as a trainee sleep technologist. While scoring sleep recordings, the When you score the data histogram can provide a great deal of useful information, and this has been explained in detail in this book. Most importantly, it is prudent to be able to write reports that are both informative and easy to understand by physicians who do not have advanced knowledge of sleep medicine. A chapter has been dedicated to explaining this in detail. Lastly, the authors have provided ready-made forms, questionnaires, and documents that can either be used as they are or with some modifications. This up-to-date and comprehensive volume will be an invaluable guide for technicians and physicians who wish to practice sleep medicine and will be useful for sleep technology and physician training programs. The volume is intended to complement, not be a substitute for, the AASM scoring manual, as many areas that are covered in the manual are not covered here.

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