

# Clinical Sleep Health Examination

#### **Clinical Sleep Health Examination**

An advanced credentialing examination for healthcare providers who work directly with sleep medicine patients, families and practitioners to coordinate and manage patient care, improve outcomes, educate patients and the community, and advocate for the importance of good sleep. The exam will be available in the Spring/Summer of 2014. Additional exam details and study references will be available in early 2014 well in advance of the first exam delivery. The exam is being developed through the Board of Registered Polysomnographic Technologists Inc. (BRPT) and will be administered in collaboration with Pearson VUE, BRPT's testing partner. International testing locations will be available.

#### **CCSH Exam Blueprint**

The Certification in Clinical Sleep Health examination consists of 100 multiple choice items. Of these, 75 items count toward the candidates' scores and 25 are pretest items that are not scored.

## The Successful Candidate Will Have Knowledge Of:

Sleep physiology, respiratory/cardiac/ neurophysiology, sleep disorders and diagnostic criteria, sleep related comorbidities, intervention/ treatment/therapy modalities, clinical guidelines, adherence/compliance techniques, testing options, sleep and related test results, human growth and development, cultural competency, behavioral health models, health literacy, written care plans, learning theories, outcomes data and measures, verbal and written communication skills, medical terminology, patient assessment techniques, chart review and documentation, medications and overthe-counter products, patient confidentiality, ethics, emergency procedures, safety, basic knowledge of computers, math skills/calculations.

#### DOMAIN 1: SLEEP OVER THE LIFESPAN 20%

TASK A: Describe normal sleep architecture, quantity, and quality 5-7%

- i. Adult
- ii. Geriatric
- iii. Pediatric
- iv. Infant

TASK B: Identify factors contributing to variations in normal sleep 3-5%

- i. Medication
- ii. Gender

### TASK C: Identify and recognize the pathophysiology, epidemiology, and clinical presentation of abnormal sleep 11-15%

- i. Identify terminology currently used to classify common sleep disorders
- ii. Recognize the clinical presentation of sleep disorders
  - a. Sleep disordered breathing
  - b. Insomnia
  - c. Circadian rhythm disorders
  - d. Other sleep disorders
- iii. Describe the incidence and prevalence of sleep disorders
- iv. Differentiate chronic from temporary sleep disturbances
- v. Describe the short and long-term effects of sleep disruption and deprivation
- vi. Associate abnormal sleep with underlying pathophysiology
  - a. Cardiopulmonary disorders
  - b. Depression
  - c. Chronic pain
  - d. Other medical conditions

#### DOMAIN 2: CLINICAL EVALUATION AND MANAGEMENT 40%

TASK A: Correlate and document sleep and medical history 8-12%

- i. Assess the impact of sleep on quality of life
- ii. Recognize health changes
  - a. Physical appearance
  - b. Weight
  - c. Medications
  - d. Recent hospitalization and surgeries





- iii. Evaluate signs and symptoms of disease progression, exacerbation and improvement
- iv. Document actions, observations and orders in the patient chart

### TASK B: Identify co-morbid conditions and impact on patient 8-12%

- i. Explain how sleep disorders affect comorbid conditions
- ii. Explain how comorbid conditions affect sleep disorders

### TASK C: Assess and explain evaluation and measurement tools 10-15%

- i. Questionnaires and surveys
  - a. Epworth Sleepiness Scale
  - b. Berlin Questionnaire
  - c. Functional Outcomes of Sleep Questionnaire
  - d. Sleep diary
  - e. Other measures
- ii. Diagnostic testing and indications
  - a. In-lab PSG
  - b. Home Sleep Test
  - c. MSLT/MWT
  - d. Actigraphy
  - e. Other procedures
  - f. Eligibility and reimbursement

#### TASK D: Evaluate treatment/therapy 12-16%

- i. Monitor adherence/compliance
- ii. Identify and remove/reduce barriers to success
- iii. Evaluate side-effects
- iv. Describe appropriate therapeutic options
  - a. Sleep disordered breathing therapies
    - 1. PAP and related devices
    - 2. Oral appliance therapy
    - 3. Positional therapy
    - 4. Surgical options
  - b. Cognitive behavioral therapy
  - c. Light therapy
  - d. Chronotherapy
- v. Develop individualized patient care plans
  - a. Chronic disease model
  - b. Clinical guidelines

## DOMAIN 3: PATIENT AND FAMILY COMMUNICATION AND EDUCATION 30%

TASK A: Provide education to patient and family 10-13%

- i. Respond to questions
- ii. Recognize the importance of diversity
- iii. Evaluate readiness to learn at an age appropriate level
- iv. Adapt interactions to learning styles

### TASK B: Understand and explain the importance of sleep hygiene 13-16%

- i. Lifestyle
- ii. Environment
- iii. Cultural differences

TASK C: Encourage and promote patient self-assessment and self-management 3-5%

## DOMAIN 4: PROGRAM MAINTENANCE AND ADMINISTRATION 10%

#### TASK A: Develop multidisciplinary programs 3-6%

- i. Develop and expand collaborative sleep programs
  - a. Inpatient/outpatient
  - b. Occupational health/wellness
- ii. Market services and provide education to staff/clinicians/healthcare providers/administrators

### TASK B: Manage performance improvement and quality 2-5%

- i. Audit charts
- ii. Track outcomes

### TASK C: Promote sleep disorders as a public health Issue 2-5%

- i. Impact of disorders on society
- ii. Public policy influences and impact
- iii. Community outreach

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