

Polysomnographic Record Scoring- Adult

Includes the New AASM Rules

LOCATION	Texas School of Sleep Medicine & Technology, 5290 Medical Drive, San Antonio, TX 78229			
2010 DATES	February 6-7 Saturday - Sunday	May 1-2 Saturday - Sunday	August 7-8 Saturday - Sunday	November 13-14 Saturday - Sunday
	Classes begin at 8:30 a.m. Saturday and end 2:00 p.m. Sunday.			
COURSE DESCRIPTION	<p>This is an intensive 2 – day didactic and practical training program in the proper scoring of polysomnographic records. This will also cover the new AASM guidelines. The focus is in the instruction and practice of recognizing the various waveforms and rhythms that are found in an adult polysomnographic record at an accredited sleep center facility. Academics include currently accepted standards and practice for accurately identifying the various stages of sleep, normal and abnormal waveforms associated with respiratory, neuromuscular, cardiologic and artifactual processes. The comprehensive curriculum is presented by highly experienced staff and an adjunct faculty of experts. Participant will have opportunity to review both analog and digital records.</p> <p>Completion of this course does not constitute certification or credentialing in sleep medicine or polysomnographic technology.</p>			
OBJECTIVE	Upon completion of the course, participants should understand the rules of polysomnographic scoring methods and develop an approach to accurately identifying various sleep related waveforms.			
WHO SHOULD ATTEND	Physicians, Polysomnographic Technicians & Technologists, and Respiratory Therapists and nurses with 6-months sleep technician experience. Class limited to first 20 persons who register. Program Director reserves the right to refuse admission to any individual applicant. Program Director also reserves the right to deny a certificate of completion to any participant not attending the entire course.			
PREREQUISITES	Participants should have a working knowledge of sleep related medical terminology, 6 months experience and an interest in clinical sleep medicine. Special request is required for those with less than 6 months experience.			
TUITION	The tuition of \$595 includes all lectures, practical exercises, and course materials. Optional scoring manuals (R & K and / or new AASM Guide) also available for purchase at \$75 each. \$20 discount for registration payments received 30 days or more prior to program start date. Fees can be paid by cash, check, or credit card and should be received prior to course date. Tuition includes a \$300 non-refundable fee.			
CONTINUING EDUCATION CREDIT	<ul style="list-style-type: none"> This program has been approved for a maximum of 15.00 AAST Continuing Education Credits (CEC) by the American Association of Sleep Technologists. One Westbrook Corporate Center, Suite 920, Westchester, IL 60154 			



TEXAS SCHOOL OF SLEEP MEDICINE & TECHNOLOGY
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 1-866-614-6007

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TOPICS	Foundation Knowledge Introduction to Sleep Technology Normal Sleep Architecture Diagnostic utility of PSG Formulae of Sleep Related Indices	Clinical Event Scoring including: Respiratory Limb Movements Arousals Electrocardiographic MSLT / MWT Protocols / Scoring	Practical Exercise Analog & Digital Record Review Common EEG Rhythm & Frequency Recognition Non-EEG Artifact Recognition & Corrective Action Course Evaluation Course Review & Critique
FACULTY	James M. Andry, MD Diplomate– ABSM Diplomate, Sleep Medicine, ABIM Director Texas School of Sleep Medicine & Technology San Antonio, Texas Susan Herrera, BS, RPSGT Faculty / Instructor Texas School of Sleep Medicine & Technology San Antonio, Texas	Michael Herrera, RPSGT Faculty / Instructor Texas School of Sleep Medicine & Technology San Antonio, Texas James Enger, MS, RPSGT Faculty / Instructor Texas School of Sleep Medicine & Technology San Antonio, Texas	Shawn Monroe, RPSGT Faculty / Instructor Texas School of Sleep Medicine & Technology San Antonio, Texas Jason Easterling, RPSGT Faculty / Instructor Texas School of Sleep Medicine & Technology San Antonio, Texas
SCHEDULE FOR TRAVEL	Registration begins at 8:00 a.m. and lectures begin at 8:30 a.m. on Saturday. The course ends at 2:00 p.m. on Sunday. If you plan to leave San Antonio on Sunday, you should select a flight that departs after 5:00 p.m. Attendees who leave prior to the completion of the course may not be eligible to receive a course completion certificate but will receive appropriate C.E.C's for the hours attended.		
ACCOMMODATIONS	Participants are responsible for their own travel, food, and lodging. Preferred Hotels : Drury Inn & Suites / Best Western – Medical Center – Corporate Code 301835		
DISCLOSURE POLICY	All faculty members participating in continuing education programs sponsored by Texas School of Sleep Medicine & Technology are expected to disclose to the program audience any real or apparent conflict(s) of interest related to the content of their presentation(s).		
PROGRAM DIRECTOR	James M. Andry, MD Texas School of Sleep Medicine & Technology San Antonio, Texas		
CONTACT INFORMATION	Texas School of Sleep Medicine & Technology Education Department 5290 Medical Drive San Antonio, Texas 78229	Phone: 210-860-6000 Toll Free: 866-614-6007 Fax: 210-614-7728 Email: education@TexasSleepSchool.com Web Site: www.TexasSleepSchool.com	

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Registration Form (**Please Mark the Date You Are Attending**)

2010	Polysomnographic Record Scoring – Adult – New AASM Rules	\$595 All Participants (Optional Books – R & K Manual and New AASM Scoring Manual available)	Discount \$20 if payment received 30 days in advance Registration Fee - \$15.00
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February	6-7	<input type="checkbox"/>
May	1-2	<input type="checkbox"/>
August	7-8	<input type="checkbox"/>
November	13-14	<input type="checkbox"/>

ATTENTION

ALL Participants MUST register online, even if paying by mail in or at the event!

Please complete all information on registration form. (PLEASE PRINT)

Participant Information

Full Name: _____

Credentials: _____

Name on Name Badge: _____

License #: _____

Specialty: _____

Mailing Address: _____

City, State, Zip: _____

Country: _____

Home Phone: _____

Work Phone: _____

Work Fax: _____

Email: _____

Name of Sleep Center where you work: _____

City, State: _____

Hospital Affiliation: _____

Management Company: _____

Position / Title: _____

Hotel you are registered in: _____

Payment Information

Make checks payable to Texas School of Sleep Medicine & Technology. A \$50.00 administrative fee will be retained from all cancelled registrations.

Method of Payment: Cash Check Credit Card

Credit Card: AX VISA MC DIS

Amount Enclosed: \$ _____

Credit Card Information (*Must have for credit card transactions)

*Credit Card Number: _____ Security Code _____

*Expiration Date: _____

*Customer Name: _____

*Billing Street Address: _____

*City, State, Zip: _____

*Country: _____

*Signature: _____

If someone other than the registrant is paying the tuition, please complete the information below.

Who will pay: _____

Contact Person: _____

Phone Number: _____

Please Send My Confirmation Letter To:

4	Location	Email / Fax
	Email Address 1	
	Email Address 2	
	Fax Number	
	Mail Address Above	

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Date Received	
Payment	
Confirmation Sent	