

**POSITION STATEMENT  
TENNESSEE POLYSOMNOGRAPHY  
PROFESSIONAL STANDARDS COMMITTEE**

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**PRACTICE OF POLYSOMNOGRAPHY AND OUT-OF-CENTER TESTING**

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Tennessee Code Annotated, Section 63-31-101(9)(A) defines the “practice of polysomnography” in the State of Tennessee. In interpreting this provision of its practice act, it is the position of the Tennessee Polysomnography Professional Standards Committee that the following is the practice of Polysomnography:

Under the general supervision and orders of a licensed physician or licensed physicians, the staging and/or scoring of sleep by continuously monitoring the stages of sleep and wake through use of an electroencephalogram (EEG), an electroculogram (EOG), or a submental electromyogram (EMG), and simultaneously recording and monitoring of other physiological variables, in conjunction with the assignment of values for duration, frequency, and type of event to each stage of sleep in which the event occurred.

Pursuant to the ordering physician’s direction, the appropriate test or tests should be administered on a case by case basis as medically indicated or necessary based upon the concerns related to each individual patient’s care and for the patient’s safety.

Additionally those tasks listed in TCA §63-31-101(9)(A)(i)-(v) are also considered a part of the practice of polysomnography when they are performed as part of the staging and scoring of sleep under a physician’s orders, even when that staging or scoring occurs outside of a sleep center.

- Monitoring and recording physiologic data during the evaluation of sleep-related disorders, including sleep-related respiratory disturbances, including those techniques, equipment, and procedures delineated in TCA §63-31-101(9)(A)(i)(a)-(s);
- Observing and monitoring physical signs and symptoms, general behavior, and general physical response to polysomnographic evaluation and determining whether initiation, modification, or discontinuation of a treatment regimen is warranted;
- Analyzing and scoring data collected during the monitoring described in TCA §63-31-101(9)(A)(i) and (ii) for the purpose of assisting a licensed physician in the diagnosis and treatment of sleep and wake disorders that result from developmental defects, the aging process, physical injury, disease, or actual or anticipated somatic dysfunction;

The Committee takes this position pursuant to Tennessee Code Annotated §63-31-101(9)(A).

**Adopted by the Polysomnography Professional Standards Committee on this 13<sup>th</sup> day of May 2014.**

**Adopted by the Board of Medical Examiners on this 20<sup>th</sup> day of May 2014.**