



INSTRUCTIONS FOR THE SLEEP-PET SIGNAL VERIFICATION FORM (SVF)

I. General Instructions

The SVF Form is completed by the Field Center staff completing polysomnography (PSG) with ARIC Sleep-PET participants. The form may need to be filled out on paper initially, and then transcribed to the DMS, since internet will likely not be available at all participants' homes (or hotel rooms), where the PSG is performed. Only one record per invited participant is expected for this form. This form is filled out in its entirety the night that the sleep study equipment is hooked up to the participant.

The purpose of the SVF is to record details about the PSG, as completed by the staff who wire participants for PSG.

II. Detailed Instructions for Each Item

0a-0b. Record the completion date and the staff ID in these fields.

0c. Enter the ID for the machine (PSG monitor).

0d-f. Enter the date and time of arrival on the day the participant is first wired for the PSG, and the time of departure of staff after the participant is wired up (the same night). Use a 24-hour clock for times.

Impedances: Once the participant is wired for the sleep study, the impedance values should be entered for #1-10 under "first check".

View Signals: #11-27 All signals should be reviewed for the quality of the signal on the Natus MPR monitor screen before leaving the participant for the PSG. Signals should be clean and mostly free of artifact, with appropriate deflections (eye blinks and movement where appropriate, chin muscle movements when prompted, etc.). No flatline signals should be seen.

28. If hookup was successful, this should be marked as "yes"; if not, please record the correct response in 28a. If PSG was rescheduled, 28b should be marked as "yes", and 28b1 should be completed with rescheduled date.

29. Examples of environmental conditions include excessive heat, excessive cold, extreme living conditions (including having many animals, a large number of people in the home, excessively poor sanitation, or other living conditions felt by staff to be extreme).

30. Answer as appropriate.

31. Please provide free text description of any problems with hookup or sensor checks.

For items 32-33, these items should be filled out at the time that the participant is hooked up.

32. If the tech performing the PSG notices any of the following at the time of hooking up the participant, the study physician should be notified: (please note: although additional criteria are listed after items 1-27, although oximetry may need repositioning, the values listed there do not warrant a medical alert).

- a. Heart rate <30 bpm for 2 minutes or longer, or heart rate >150 bpm for 2 minutes or longer
- b. Pulse oxygenation level <80% for 2 minutes or longer (while awake)
- c. Any of the following complaints: chest pain, shortness of breath, severe headache, or other concerning symptoms.

If any of these were identified, "yes" should be marked, and the study sleep physician should be notified at the time of the alert (and item #33 should be marked when the form is completed). In this event, for item **33** the details about course of action (which may include a phone call by the physician) should be listed. A list of the on-call study sleep physician will be available at the Comstock Center (usually Dr. Mark Wu or Dr. Naresh Punjabi)