Sleep Laboratory – Random Checklist

Name of the Facility: _____

Date of Inspection: _____/_____/_____

Ref.	Description	Yes	No	Remarks
5.	**Standard One: Registration and Licensure Procedures**			
5.5.	**The health facility shall provide documented evidence of the following:**			
5.5.1.	Transfer of critical/complicated cases when required			
5.5.2.	Patient discharge			
5.5.3.	Clinical laboratory services			
5.5.4.	Equipment maintenance services			
5.5.5.	Laundry services			
5.5.6.	Medical waste management as per Dubai Municipality (DM) requirements			
5.5.7.	Housekeeping services.			
5.7.	A detailed business plan/ list of equipment, etc.			
5.8.	The health facility shall maintain charter of patients' rights and responsibilities posted at the entrance of the premise in two languages (Arabic and English).			
5.10.	The health facility shall ensure it has in place adequate lighting and utilities, including temperature controls, water taps, medical gases, sinks and drains, lighting, electrical outlets and communications.			
5.11.2.	Employ licensed healthcare professionals to satisfy the functional program of the sleep laboratory.			
5.12.	Install and operate equipment required for provision of the proposed services in accordance with manufacturer specifications.			
6.	**Standard Two: Health Facility Requirements**			
6.3.	The health facility shall ensure easy access to the health facility and treatment areas for all patient groups.			
6.4.	The health facility design shall provide assurance of patients and staff safety.			
6.6.1.	Patient preparation area shall be defined by the facility and can be in the same area as the patient testing room.			
6.7.	Preparation of patient could be done in the sleep therapy room, but ideally, it should be done in a separate room with adequate ventilation and storage space for supplies.			

6.7.2.	The sink area can be in the dirty utility room and the facility shall clearly specify the cleaning processes if disposable equipment is not used.				
6.9.	All sleep therapy rooms shall be single occupancy, private and comfortable. However, for paediatric patients, space should be made available for a parent or caregiver to stay as well.				
6.9.5.	The sleep therapy rooms shall not have any obstructions in delivering emergency care.				
6.9.6.	The sleep therapy room shall have a bed with a mattress not smaller than a standard hospital bed.				
6.9.8.	In case the health facility provides treatment for handicapped patients, it shall have a sleep therapy room and toilet to accommodate these patients.				
6.9.9.	Live audio-video monitoring and recording with a two-way communication system.				
6.9.10.	The health facility shall maintain equipment for delivery of positive airway pressure (PAP) therapy for sleep apnea, which is remotely controlled through the sleep monitoring system.				
6.9.14.	Additional escort bed shall be available for paediatric patients and other patients who might need the presence of a caregiver.				
6.10.	There shall be a two-way communication system between the sleep therapy room and the control room.				
6.11.	The control room shall host the polygraphic equipment capable of recording and storing physiological parameters using sensors and recommended or alternative derivations.				
6.12.	Phone numbers of important contacts should be visibly posted near the workstation, which shall include the number of the sleep laboratory service in-charge.				
7.	**STANDARD THREE: HEALTHCARE PROFESSIONALS REQUIREMENTS**				
7.1.	The facility should employ and license sufficient healthcare professionals to meet the functional program of the twenty-four (24) hour service with special attention to security during the night. The number of sleep therapy rooms in the facility generally dictates the staffing requirements.				
7.2.	A sleep laboratory, service in-charge should be a consultant/ specialist Physician in one of the categories as mentioned below, with certified training and experience in sleep medicine or holding an equivalent qualification to overlook the entire functioning of the sleep laboratory service provided.				
7.3.	All physicians should hold speciality or sub-speciality degree in Sleep Medicine and be licensed in this field.				
7.4.	**The physician in-charge should be:**				
7.5.	Be present in the health facility on a regular basis.				
7.6.	Paediatric sleep medicine physicians should be employed to diagnose, treat and manage paediatric patients with sleep disorders. They should not manage adult patients with sleep disorders unless				

	they are American Board Sleep Medicine Specialists. Any restriction to practice is considered based on individual doctor's training and experience.				
7.8.	The sleep facility should employ appropriately trained and licensed polysomnographic technologist or sleep technologist.				
7.9.	The polysomnographic technologist or sleep technologist should document ongoing evaluation and management of every patient with sleep disorder.				
7.10.	The polysomnographic technologist should be responsible for close monitoring of the patient and should have sufficient training to recognize potential emergencies such as life-threatening conditions like cardiac arrhythmias.				
7.11.	The polysomnographic technologist should monitor for signals by the patient that they may be in distress. This can be verbal as well as behavioral.				
7.12.	The patient to technologist ratio should be 2:1 under most circumstances for attended polysomnography.				
7.13.	For infants, young children and older children/ adults with special needs the ratio of patient to technologist is 1:1.				
7.14.	The polysomnographic technologist should maintain a valid Basic Life Support (BLS) certification.				
7.15.	The polysomnographic technologist treating paediatric patients should maintain a valid Paediatric Advanced Life Support (PALS) certification.				
8.	**Standard Four: Health Records**				
8.2.	Health records should document patient interaction, including initial evaluation, sleep therapy (if any), diagnosis, treatment, CPAP and/or BIPAP' assessment and follow-up.				
8.3.	The health record should include written indication that the physician has reviewed and approved the proposed evaluation.				
8.4.	Every evaluation should be signed and stamped by the physician in case of paper- based health records and signed off in case of electronic health records.				
9.	**Standard Five: Patient Safety**				
9.4.5.	**The sleep laboratory should be equipped with emergency equipment like:**				
a.	Emergency cart with defibrillator or Automated Electronic Defibrillator (AED).				
b.	Oral airways with different sizes based on specialities.				
c.	Oxygen cylinder.				
d.	Nebulizer.				
e.	Suction machine with suction tubes.				
f.	Oxygen masks.				

9.4.1.	Crash cart trolley shall be fully equipped with emergency equipment.			
9.7.	Provide hand rub stations at convenient locations throughout the sleep laboratory.			
9.9.	The facility should maintain fire extinguishers. There should be trained staff to respond to fire events. Orientation on the fire safety measures should be included in new staff induction program.			
9.10.	There should be evacuation maps posted to indicate current locations marked with "You are here" to provide information regarding escape routes and fire exits.			