

Polysomnographer / Sleep Tech

Name _____ Telephone _____ Who is your recruiter? _____ Date _____

Instructions: This checklist is meant to serve as a general guideline for our client facilities as to the level of your skills within your nursing specialty. Please use the scale below to describe your experience/expertise in each area listed below.

1 = No Experience 2 = Some Experience 3 = Intermittent Experience 4 = Experienced 5 = Very Experienced

AGE OF PATIENTS CARED FOR					
	1	2	3	4	5
Newborn/Neonate (birth to 30 days)					
Infant (1 month to 1 year)					
Toddler (1 year to 3 years)					
Preschooler (3 years to 5 years)					
School Age Child (5 years to 12 years)					
Adolescents (12 years to 18 years)					
Young Adults (18 years to 39 years)					
Middle Adults (39 years to 64 years)					
Older Adults (64 years to 79 years)					
Elderly Adults (over 79+ years)					

GENERAL SKILLS					
	1	2	3	4	5
Standard Precautions					
Isolation Precautions					
Pediatric Respiratory/Cardiac Arrest					
Adult Respiratory/Cardiac Arrest					
Crash Carts					
Defibrillators					
Electronic Documentation					
Automated Med Dispensing Systems					

SETTING					
	1	2	3	4	5
Hospital					
Independent Lab					
Patient Home					

DIAGNOSTIC STUDIES/PROCEDURES					
	1	2	3	4	5
Multiple Sleep Latency Test (MSLT)					
Maintenance of Wakefulness Test (MWT)					
Nocturnal Penile Tumescence					
Seizure Study					
Portable Sleep Study					
Split - Night Polysomnogram					
EKG Electrode Placement					
EEG Electrode Placement					
Seizure Hook - Up					
Calibration					
Patient Positioning/Preparation					
Drawing Arterial Blood Gases (ABGs)					

MONITORING/SCORING					
	1	2	3	4	5
Periodic Limb Movements					
Snores					
Respiratory Events					
Respiratory Disturbance Index (RDI)					
Apnea - Hypopnea Index (AHI)					
Periodic Breathing					
Complex Sleep Apnea					
Cheyne - Stokes					
Obstructive Sleep Apnea					
Hypopnea					
Sleep Log					
Seizure Recognition and Precaution					
Transient Arousal Scoring Rules/Procedures					

EQUIPMENT					
	1	2	3	4	5
Oximeters					
Nasal Cannula					
Humidified O2					
Nasal Mask					
BiPAP					
CPAP					
Portable Set-Up					
Position Sensor					
Actimeter					

Thermistor					
Phillips Respironics					
Nihon Kohden					
Grass Technologies					
Natus					
ResMed					
CleveMed					
CareFusion BD					
Compumedics					
Cadwell					
Somnomedics					
Other					

CREDENTIALS					
	1	2	3	4	5
CPSGT					
RST					
RPSGT					
SDS					

I hereby certify that ALL information I have provided to Clover Health Services, on this skills checklist and all other documentation, is true and accurate. I understand and acknowledge that any misrepresentation or omission may result in disqualification from employment and/or immediate termination.