



ID:			
Dato	of Study:		

PSG Red	ceipt	ChildHoo	d Adeno	Tonsi	illecto	omy Study		Date of S	Study:			
Date received:			Unit ID:					Site Number:	Site Number: F 10-CHOP F 20-CINN F 30-CLD F 40-LVL			
Week ending date: staendt			Tech	Tech ID:				Study Type:	F Baseline ₍₁₎ F 7	-Month ₍₂₎ F Cert ₍₃₎	F Maint ₍₄₎	
Date Reviewed:			Stud	lv D	0000	.d2 [stą	tus _	_	_		
			Study Passed? (1) Yes (2) No - Failed at RC (3) No - Study Not Sent Failure Reason: Reason Codes for Failure: 1-Oximetry; 2-EEG; 3-Short Recording; 4-Multiple; 5-									
Reviewed by:								y; 7-Corrupted file - no b				
Comments:						r	snco)			<u> </u>	
QS Form												
Time to bed (Tec	ch Reported LO):		Total time in bed: hrs				hrs min	Scorer ID:				
Lights out (Score	r): stloutp		Total sleep time: hrs				hrs min	Date received:	rcvddt			
Sleep onset:			Eligi	ible:	:	_ (1) In	neligi	ble:(0)	Date scored:	scordt	First d entr	
Lights on:	stlonp					qsahi	(qsoai	staendt			
Signals	Approximate hours of usable signal in sleep		Signa	al qu	ıalit	y		Individual Si	ignal Grading:			
E1	eogldur	1	2	3	4	5 qued	gl	1. Signal good	for less than 25% of	sleep time.	Second da entry	
E2	eogrdur	1	2	3	4	5 qued	gr	2. Signal good	for 25% of sleep tim	e.	(Initials)	
Chin	chindur	1	2	3	4	5 quch	in	3. Signal good	for 50% of sleep tim	e.		
C3	c3dur	1	2	3	4	5quc3		4. Signal good	l for 75% of sleep tim	e.		
C4	c4dur	1	2	3	4	5quc4		2 2	for almost entire (95			
01	o1dur	1	2	3	4	5quo1	ļ	5. Signai good	nor annost entire (75	70) sieep time.		
O2	o2dur	1	2	3	4	5quo2	ļ					
F3	f3dur	1	2	3	4	5 quf3	ļ					
F4	f4dur	1	2	3	4	5 quf4	.	Overall Study Qua	ality: overall			
T3	t3dur	1	2	3	4	5 qut3	.	† (7) Outstanding. All signals (EEG+M1,M2, both EOGs, chin, airflow cannula flow, both belts, EtCO2 and oximetry) good for at least 6 hours lights off to lights on and almost entire (95%) sleep time. † (6) Excellent. At least one central EEG (C3 or C4), one EOG channel, chin, airflow, both belts or cannula flow, and oximetry good for 6 hours lights off to lights on and minimum of 75% of the sleep time. † (5) Very good. At least one central EEG (C3 or C4), one EOG, airflow one belt (either thoracic or abdominal) or cannula flow, and oximetry				
T4	t4dur	1	2	3	4	5qut4	.				o nours	
M1	m1dur	1	2	3	4	5 qum	3 1				G channel,	
M2	m2dur	1	2	3	4	5 qum	1 I				: 6 hours	
ECG	hrdur	1	2	3	4	5 quhr	1 1				G airfloss	
Lleg	legldur	1	2	3	4	5 qule	• 1					
Rleg	legrdur	1	2	3	4	5 qule	gr	,		d minimum of 50% of		
Snore	snordur	1	2	3	4	5 qusn	or	time			•	
*CannulaFlow	candur	1	2	3	4	5 quca	h			3 or C4), one EOG, on		
*Airflow	airdur	1	2	3	4	5 _{quair}				er band), and oximetry		
Chest	chestdur	1	2	3	4	5 quch	est			n of 50% of the sleep to f or C4), one respirator		
ABD	abdodur	1	2	3	4	5 quab	1 1			sable for minimum of 4		
SUM	sumdur	1	2	3	4	5qusu	3 I			eep/wake only (becaus		

capdur

oximdur

pwfdur

psndur

2 3 4

2 3 4

2 3 4

2 3

2 3 4 5 quca

5quco

5 qup

5 qupsn

4

5quoxim

Cap

EtCO2

Oximetry

Pleth

Position

... (0) N

tolerance issues) with usable oximetry for >75% of study duration.

slewake

··· (1) Yes

Scored Sleep/Wake only:

Reference 1= Good 2 = Problem

,	(If "2" explain in notes)
quref	(11 2 explain in notes)

	Yes (1)	No (0)	Comments
Eligible – But Surgeon should be notified of PSG results below			
1. OAI > 15 or AHI > 20			ahiov20
2 SaO2 <92% for >2% of sleep time			sao2lt92
PSG Ineligible Urgents			Urgent Referral Alert to Study Coordinator
3. Urgent Referral – OAI >20 or AHI > 30			ahiov30
4. Urgent Referral - SaO2 <90% >2% sleep time			sao2lt90
5. Urgent - Problem HR <40 bpm or >140 bpm > 2 mins			uruhrou
6. Urgent - Other HR arrhythmia, heart block, V-Tach, etc.			unuhroth
Other Exclusion/Ineligible Criteria			
7. Apnea Hypopnea in normal range OAI <1 and AHI <2			ahilt2
8. Data lost - Recording ended before waking			receaw
9Data lost - Recording began in sleep			losbeg
10. Data lost - Other			losoth
11. Scoring stage Wake/Sleep unreliable			wakslepr
12. Scoring Stage 1/ Stage 2 unreliable			stg1stg2r
13. Scoring Stage 2/ Deep sleep unreliable			stg2stg3pr
14. Scoring REM/NREM unreliable			remnrempr
15. Scoring arousals unreliable			arunrel
16. Scoring arousals in REM (only) unreliable			remarunrel
17. Scoring respiratory events (RDI) unreliable			respevpr
18. Scoring Apnea/Hypopnea unreliable			apnhyppr
19. Abnormal EEG background/waveforms			abnoreeg
20. Physiologic alpha intrusion			alpdel
21. Periodic breathing ≥ 10 min			period
22. Flow limitation			npflow
23. Extreme staging distribution			unustgou
24. Arousal Index < 3 verified			arsl3ou
25. Max length respiratory event >30s verified			maxresou30
26. PLM > 25 verified (must be in sleep)			plmou25
27. Other outlier			otherou

Scorer Comment Signal Quality Issues	
Scoring issues (inputs, filters, etc)	
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