

AASM Style Guide for Sleep Medicine Terminology

Updated November 2015

INTRODUCTION

Numerous terms that are of particular relevance to the sleep field are included in the many practice guidelines and references published by the AASM. Selected terms are included in this guide as a quick reference to provide direction for preferred usage to sleep medicine professionals. The intent is to enhance the clarity and consistency of AASM publications by promoting the use of standardized language.

The AASM encourages sleep medicine professionals and sleep scientists to adopt these terminology usage recommendations in other forms of communication including lectures, meeting abstracts and proposals, and journal submissions. Recognizing that sleep medicine is a dynamic field, the AASM anticipates the need to update this guide frequently. Questions or comments about this guide can be submitted to the AASM at inquiries@aasmnet.org.

NEW IN 2015

The following terminology usage recommendations represent significant changes adopted by the AASM in 2015:

home sleep apnea testing

The use of unattended diagnostic studies to assess for obstructive sleep apnea without the determination of sleep stage. The term specifies the condition being assessed (i.e., sleep apnea) by current technology without implying that "sleep" quality, staging or time are determined. The AASM recognizes that not all such studies are performed at home; however, "home" is included in the term because that is where the vast majority of patients undergo these tests. HSAT is acceptable on second use within a document, after the abbreviation has been previously defined.

monitoring time

Total recording time minus periods of artifact and time the patient was awake as determined by actigraphy, body position sensor, respiratory pattern, or patient diary, as defined in the AASM Scoring Manual Version 2.2. Monitoring time is used to calculate the respiratory event index for home sleep apnea testing. MT is acceptable on second use within a document, after the abbreviation has been previously defined.

respiratory event index

Total number of respiratory events scored x 60 divided by *monitoring time*, as defined in the *AASM Scoring Manual Version 2.2*. Respiratory event index should be used for *home sleep apnea testing*. REI is acceptable on second use within a document, after the abbreviation has been previously defined.

Recomended Citation:

American Academy of Sleep Medicine. AASM style guide for sleep medicine terminology. Updated November 2015. Darien, IL: American Academy of Sleep medicine, 2016.

Terminology Recommendations



red color indicates that a term is not the preferred, recommended option for regular usage in sleep medicine. **Italics:** use of italics indicates a relationship between terms.

AASM Scoring Manual Version 2.2

Acceptable on first use as a short form of the full title - AASM Manual for the Scoring of Sleep and Associated Events: Rules, Terminology and Technical Specifications Version 2.2

adaptive servoventilation

No hyphens. ASV is acceptable on second use within a document, after the abbreviation has been previously defined.

adherence

The extent to which a patient continues using a treatment (e.g., PAP therapy adherence)

adjustment insomnia

See short-term insomnia disorder.

acute insomnia

apnea-hypopnea index Include a hyphen rather than a slash. The number of apneas plus the number of hypopneas x 60 divided by total sleep time, all as defined in the *AASM*

Scoring Manual Version 2.2. AHI is acceptable on second use within a document, after the abbreviation has been previously defined.

autotitrating positive airway pressure therapy

No hyphens. APAP therapy is acceptable on second use within a document, after the abbreviation has been previously defined.

No hyphens. BPAP therapy is acceptable on second use within a document, after the abbreviation has been previously defined. Do not use BiPAP , which is a proprietary name.
ισ α ριορπειαι у παιπε.
See bilevel positive airway pressure therapy.
Include a hyphen. A physician who has earned board certification in sleep medicine from the American Board of Sleep Medicine (ABSM) or one of the member boards of the American Board of Medical Specialties (ABMS)
Sleep disorders in which the primary complaint is daytime sleepiness not caused by disturbed nocturnal sleep or misaligned circadian rhythms, as described in the <i>ICSD-3</i> . See <i>hypersomnia</i> and <i>hypersomnolence</i> .
Include a hyphen.
Insomnia present for at least 3 months, as described in the ICSD-3
Include a hyphen. Sleep disorders caused by alterations of the circadian time-keeping system, its entrainment mechanisms, or a misalignment of the endogenous circadian rhythm and the external environment, as described in the <i>ICSD-3</i> . CRSWD is acceptable on second use within a document, after the abbreviation has been previously defined. Similarly, use "wake" in delayed sleep-wake phase disorder, advanced sleep-wake phase disorder, irregular sleep-wake rhythm disorder, and non-24-hour sleep-wake rhythm disorder.
No hyphens. CBT-I is acceptable on second use within a document, after the abbreviation has been previously defined.
No hyphen
See treatment-emergent central sleep apnea.
See <i>adherence</i> . However, the term "compliance" is recommended when describing conformity to health care laws and regulations (e.g., Medicare compliance).
No hyphens. CPAP therapy is acceptable on second use within a document, after the abbreviation has been previously defined.
Acceptable on second use within a document for central sleep apnea, after the abbreviation has been previously defined. Should not be used as a short form of complex sleep apnea , which is a term that is no longer to be used for this entity; instead see <i>treatment-emergent central sleep apnea</i> .

electronic health record	The comprehensive patient health information that can be shared between providers and health systems. EHR is acceptable on second use within a document, after the abbreviation has been previously defined.
electronic medical record	See electronic health record.
home sleep apnea testing	The use of unattended diagnostic studies to assess for obstructive sleep apnea without the determination of sleep stage. The term specifies the condition being assessed (i.e., sleep apnea) by current technology without implying that "sleep" quality, staging or time are determined. The AASM recognizes that not all such studies are performed at home; however, "home" is included in the term because that is where the vast majority of patients undergo these tests. HSAT is acceptable on second use within a document, after the abbreviation has been previously defined.
home sleep testing	See home sleep apnea testing.
hypersomnia	Use only when referring to a disorder characterized by excessive sleepiness (e.g., idiopathic hypersomnia), as described in the <i>ICSD-3</i> . See <i>hypersomnolence</i> and <i>central disorders of hypersomnolence</i> .
hypersomnolence	Excessive sleepiness during the normal wake period, as described in the <i>ICSD-3</i> . See <i>hypersomnia</i> and <i>central disorders of hypersomnolence</i> .
ICSD-3	See International Classification of Sleep Disorders, Third Edition.
idiopathic insomnia	See chronic insomnia disorder.
International Classification of Sleep Disorders, Third Edition	Use the full name for first mention of this manual, which was published by the AASM in 2014. <i>ICSD-3</i> is acceptable on second use within a document, after the abbreviation has been previously defined.
Kleine-Levin syndrome	The sleep disorder characterized by relapsing and remitting episodes of severe hypersomnolence in association with cognitive, psychiatric, and behavioral disturbances, as described in the <i>ICSD-3</i>
limited channel testing, limited channel sleep testing	See home sleep apnea testing.
Maintenance of Wakefulness Test	Capitalize each word. MWT is acceptable on second use within a document, after the abbreviation has been previously defined.
mandibular advancement device	An <i>oral appliance</i> that maintains a patent upper airway during sleep by protruding and helping stabilize the mandible. MAD is acceptable on second use within a document, after the abbreviation has been previously defined.

Monitoring Time	Total recording time minus periods of artifact and time the patient was awake as determined by actigraphy, body position sensor, respiratory pattern, or patient diary, as defined in the AASM Scoring Manual Version 2.2. Monitoring time is used to calculate the respiratory event index for home sleep apnea testing. MT is acceptable on second use within a document, after the abbreviation has been previously defined.
Multiple Sleep Latency Test	Capitalize each word. MSLT is acceptable on second use within a document, after the abbreviation has been previously defined.
narcolepsy type 1	The sleep disorder characterized by excessive daytime sleepiness, cataplexy and/or low or absent cerebrospinal fluid (CSF) hypocretin-1 levels, as described in the <i>ICSD-3</i>
narcolepsy type 2	The sleep disorder characterized by excessive daytime sleepiness, without cataplexy, with unmeasured or normal cerebrospinal fluid (CSF) hypocretin-1 levels, as described in the <i>ICSD-3</i>
night terrors	See sleep terrors.
obstructive sleep apnea	Do not add "syndrome" to the end of the term. OSA (but not OSAS) is acceptable on second use within a document, after the abbreviation has been previously defined.
obstructive sleep apnea syndrome	See obstructive sleep apnea.
oral appliance	Any intraoral device designed to reduce snoring and/or obstructive sleep apnea
out of center sleep testing	See home sleep apnea testing.
portable monitoring	See nome sleep apried testing.
primary insomnia	See chronic insomnia disorder.
Psychomotor Vigilance Task	PVT is acceptable on second use within a document, after the abbreviation has been previously defined.
REM sleep	See stage R sleep.
recurrent hypersomnia	See Kleine-Levin syndrome.

subspecialty	No hyphen
stage R sleep	The stage of rapid eye movement sleep, as defined in the AASM Scoring Manual Version 2.2
sleepwalking	One word with no hyphen, as described in the ICSD-3
sleep terrors	A parasomnia involving events that are often accompanied by a cry or piercing scream, accompanied by autonomic nervous system and behavioral manifestations of intense fear, as described in the <i>ICSD-3</i>
sleep-related breathing disorders	Include a hyphen. Sleep disorders characterized by abnormalities of respiration during sleep, as described in the <i>ICSD-3</i> . SRBD is acceptable on second use within a document, after the abbreviation has been previously defined.
sleep medicine	Do not capitalize unless the words are part of a proper name.
sleep disorders center	The word "disorders" is plural.
sleep-disordered breathing	Include a hyphen. A broad term that encompasses both <i>sleep-related</i> breathing disorders (e.g., obstructive sleep apnea) and other abnormalities of respiration during sleep that do not meet the diagnostic criteria for a disorder (e.g., snoring). SDB is acceptable on second use within a document, after the abbreviation has been previously defined.
short-term insomnia disorder	Insomnia present for less than 3 months, as described in the ICSD-3
restless legs syndrome	The word "legs" is plural. RLS is acceptable on second use within a document, after the abbreviation has been previously defined.
respiratory event index	Total number of respiratory events scored x 60 divided by <i>monitoring time</i> , as defined in the <i>AASM Scoring Manual Version 2.2</i> . Respiratory event index should be used for <i>home sleep apnea testing</i> . REI is acceptable on second use within a document, after the abbreviation has been previously defined.
respiratory effort-related arousal	Include a hyphen. RERA is acceptable on second use within a document, after the abbreviation has been previously defined.
respiratory disturbance index	The number of apneas plus the number of hypopneas plus the number of respiratory effort-related arousals x 60 divided by total sleep time, as defined in the AASM Scoring Manual Version 2.2. RDI is acceptable on second use within a document, after the abbreviation has been previously defined.

telehealth	Electronic exchange of medical information to improve a patient's health status, as defined in the AASM Position Paper for the Use of Telemedicine for the Diagnosis and Treatment of Sleep Disorders. This is a broader concept than <i>telemedicine</i> .
telemedicine	A legal patient/clinician encounter using electronic communication, as defined in the AASM Position Paper for the Use of Telemedicine for the Diagnosis and Treatment of Sleep Disorders
treatment-emergent central sleep apnea	Include a hyphen. The sleep disorder characterized by predominantly obstructive events (obstructive or mixed apnea or hypopnea) during a diagnostic sleep study with persistence or emergence of central sleep apnea during administration of positive airway pressure without a backup rate, as described in the ICSD-3. Treatment-emergent CSA is acceptable on second use within a document, after the abbreviation has been previously defined.