



The AASM Manual for the Scoring of Sleep and Associated Events

RULES, TERMINOLOGY AND TECHNICAL SPECIFICATIONS



VERSION 3

SUMMARY OF UPDATES IN VERSION 3 | FEBRUARY 2023



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The American Academy of Sleep Medicine (AASM) is committed to ensuring that *The AASM Manual for the Scoring of Sleep and Associated Events* reflects the best and most current evidence in sleep medicine. The online format of the manual makes it particularly amendable to periodic updates based on new evidence in the literature and feedback from users. The Scoring Manual Committee oversees the content and makes recommendations when there is need for clarification for certain rules or notes, there is new technology that should be included, or the literature suggests that updates are needed.

Based on the recommendations of the AASM Scoring Manual Committee, the AASM Board of Directors has approved the updated manual, which was released in February 2023, as Version 3. All AASM-accredited sleep facilities are required to implement the new rules in Version 3 by December 31, 2023.

The following summary provides an overview of new sections and key changes that have been made in Version 3.

II. Parameters to be Reported, Part 1: Rules for Reporting for Polysomnography

- Section D – updated rules that reporting highest and lowest heart rate during sleep and recording is OPTIONAL
- Section F – added new rules that reporting the central apnea index is OPTIONAL and reporting time below specified oxygen saturation threshold is RECOMMENDED; previously an OPTIONAL rule, reporting the occurrence of snoring in children was changed to RECOMMENDED

II. Parameters to be Reported, Part 2: Rules for Reporting MSLT and MWT

- Added this new section, which includes reporting rules for the multiple sleep latency test and maintenance of wakefulness test

III. Technical and Digital Specifications

- Section A – clarified rules that the desirable sampling rates for many of the parameters listed are equal to or higher than the rate listed; updated the high-frequency filter setting for ECG to 100 Hz; added a rule that the ability to display raw data for review, manual scoring or editing of automated scoring is RECOMMENDED
- Section C – specified that recorded video data must be synchronized with PSG data within one second and added an accompanying note about increasing video frames when assessing disorders where nocturnal behaviors are a key pathologic feature

IV. Sleep Staging Rules, Part 1: Rules for Adults

- Section E – updated terminology for ‘alpha rhythm’ to ‘posterior dominant rhythm (also known as alpha rhythm)’ throughout the chapter and added a new note to explain why this change was made and typical ranges seen across age groups
- Section H – added a new note with tips for correctly identifying qualifying slow waves

IV. Sleep Staging Rules, Part 3: Rules for Infants

- Section A – updated terminology for ‘conceptional age’ to ‘post menstrual age (formerly termed conceptional age)’ throughout the chapter
- Section B – added a new note about keeping the video focused on the patient’s face and body in order to capture behavioral characteristics

V. Arousal Rules

- Section A – added a new RECOMMENDED rule about scoring arousals immediately preceding a transition to stage W

VI. Cardiac Rules

- Section A – added a new OPTIONAL rule about using a single modified electrocardiograph Lead I on the torso (with an accompanying new figure and new note)
- Section B – added new RECOMMENDED rules for scoring the presence of 2nd or 3rd degree atrioventricular heart block and cardiac pacemaker rhythm (with an accompanying new figure and note)

VII. Movement Rules

- Section B – updated terminology for ‘significant’ leg movement to ‘candidate’ leg movement throughout the chapter; specified that at least a portion of a candidate leg movement must occur in an epoch of sleep
- Section F – previously, scoring rules for alternating leg muscle activation, hypnagogic foot tremor, and excessive fragmentary myoclonus were in their own sections, but have now been combined into one section titled ‘Scoring Other Movement Disorders’

VIII. Respiratory Rules, Part 1: Rules for Adults

- Section B – previously a RECOMMENDED rule, information about baseline breathing amplitude is now contained in two new notes
- Section D – previously an ACCEPTABLE rule, scoring of hypopneas using a $\geq 4\%$ oxygen desaturation from pre-event baseline was changed to OPTIONAL
- Section H – updated the figure for central apneas during PAP device-triggered breaths

VIII. Respiratory Rules, Part 2: Rules for Children

- Section I – updated the figure for central apneas during PAP device-triggered breaths

IX. Home Sleep Apnea Test (HSAT) Rules for Adults, Part 1: HSAT Utilizing Respiratory Flow and/or Effort Parameters

- Section B – added a new note about differences in central apnea index derived from HSAT versus PSG
- Section H – previously ACCEPTABLE rules, scoring of hypopneas using a $\geq 4\%$ oxygen desaturation from pre-event baseline when sleep is, or is not recorded, was changed to OPTIONAL

IX. Home Sleep Apnea Test (HSAT) Rules for Adults, Part 2: HSAT Utilizing Peripheral Arterial Tonometry

- Section B – previously a RECOMMENDED rule, reporting the oxygen desaturation index was changed to OPTIONAL