STANDARD

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سلطــة مدينــة دبــي الطبيــة Dubai Healthcare City Authority القطاع التنظيمي - Regulatory



STANDARDS FOR SLEEP MEDICINE

INTRODUCTION

There is a growing recognition of the prevalence of sleep disorders and their impact on patients and public health. Sleep Medicine is a medical subspecialty dedicated to the diagnosis and treatment of sleep disturbances and disorders. Dysfunctions of sleep adversely affect alertness, cognition, productivity, safety, learning and mood and are associated with a range of additional pathophysiological processes, leading to adverse metabolic, cardiovascular and mental health outcomes, and mortality. This demands programs and measures to improve sleep habits of patients and the community in general. The practice of Sleep Medicine is progressively developing as new research, policy and technology shift the field to comprehensive patient management. Identifying and managing sleep disorders promotes a better state of health and is increasingly known to impact and improve a wide array of related health conditions. A multi-disciplinary approach to the practice of Sleep Medicine advocates the optimized treatment of sleep disorders where they exist. Competence in Sleep Medicine necessitates an understanding of a broad diverse range of disorders and requires Healthcare Professionals to undertake special training and gain experience to provide Sleep Medicine services effectively and safely.

1. P	1. PURPOSE		
1.1	This Standard defines the minimum requirements including licensing and service specifications to		
	ensure acceptable minimum levels of quality, performance, safety and reliability to provide Sleep		
	Medicine services licensed and operating in Dubai Healthcare City Authority (DHCA) and its branches		
1.2	This Standard further defines qualified personnel and facility and equipment requirements as well as		
	expected standards for patient management and the limitations on the provision of Sleep Medicine		
	services by Licensed Healthcare Operators in Dubai Healthcare City Authority (DHCA) and its		
	branches.		

2. SC	2. SCOPE OF APPLICATION	
2.1	This Standard applies to all Healthcare Operators and Healthcare Professionals providing or	
	intending to provide Sleep Medicine services licensed in DHCA and its branches	
2.2	With the exclusion of equipment set up and maintenance for Home Based Testing, this Standard does	
	not apply to the provision of Home Based Sleep Medicine services.	

3. STANDARD	
3.1 Licensure	
3.1.1	Sleep Medicine services may be provided by Healthcare Operators licensed by Dubai Healthcare City
	Authority (DHCA) holding a Clinical Operating Permit for a Sleep Medicine Center, a Single or Multi-
	Specialty Clinic, an Outpatient Surgical Center with OPD Clinics, or a Hospital in accordance with the





		STANDARDS FOR SLEEP WIEDICINE
		requirements of the Standards defined herein and all applicable regulations, rules, policies and
		standards.
3	3.1.2	Each Healthcare Operator may provide Sleep Medicine services appropriate to its Licensure, Clinical
		Operating Permit and approved Clinical Activities.
3	3.1.3	Only Healthcare Operators licensed as a Sleep Medicine Center or Hospital may provide sleep
		laboratory studies.
3	3.1.4	Only Licensed Hospitals providing sleep laboratory studies within their premises are permitted to
		perform overnight sleep studies.
3	3.1.5	Each Healthcare Operator licensed to provide Sleep Medicine services shall ensure availability of an
		adequate number of qualified staff, availability of all relevant equipment and dedicated space and
		facilities as stipulated within these Standards.
3	3.1.6	Each Healthcare Operator licensed to provide Sleep Medicine services may provide Home Sleep Testing
		under the following conditions:
		3.1.6.1 The Entity in DHCC from which the Home Sleep Testing operates shall provide only
		technical support to ensure safe and effective equipment set up and maintenance. There
		shall be no additional services or patient care provided at the patient's place of residence.
		3.1.6.2 A Home Sleep Study shall be self-administered by the patient following appropriate
		education and demonstration of the operation of the testing devices by the Healthcare
		Operator.
		3.1.6.3 Home Sleep Testing shall only be provided by Entities licensed to provide such services
		to their existing patients as an adjunct and continuum of care. Home Sleep Testing shall
		not be provided as an independent service to any other patients than those stipulated
		here.
		3.1.6.4 Such Entities shall ensure adequate and qualified staffing and make provisions for the
		availability of appropriate equipment for effective Home Sleep Testing.
		3.1.6.5 As a condition of licensure and in accordance with UAE Federal Law number 10 of 2008
		concerning Medical Liability, each Healthcare Operator providing Home Sleep Testing
		must ensure the provision of Professional Indemnity which will extend to the provision
		of the testing.
		3.1.6.6 If any provider of Sleep Medicine Services wishes to provide Home Sleep Testing which
		involves the presence of a sleep laboratory technician or other Healthcare Professional
		performing or supervising such testing, then the Healthcare Operator and their employed
		Healthcare Professionals may be required to obtain Licenses to do so from the concerned
		health authorities in the jurisdiction where such testing is conducted. Such Licensed
		Entities and Healthcare Professionals shall be required to comply with applicable
		regulations, policies and standards of the health authority of the jurisdiction within which





	they are providing such testing. DHCA shall not bear any responsibility for such agreements and services.
3.1.7	Clinical Operating Permits of Single and Multi-Specialty Clinics, and Outpatient Surgical Centers with
	OPD Clinics that includes the specialty of Sleep Medicine are not permitted to provide Sleep Laboratory
	studies and patient care that requires overnight stay.

3.2 QUALIFIED PERSONNEL	
3.2.1	Each Healthcare Operator licensed to provide Sleep Medicine services shall appoint qualified personnel
	and maintain staffing levels as required to ensure reliable and consistent care in compliance with these
	Standards, the CPQ Outpatient Clinic Quality Standards or equivalent accreditation standards, the
	DHCA Quality Oversight Policies, and any other applicable regulations, rules and standards.
3.2.2	Each Healthcare Operator shall have a documented process for determining its overall staffing needs,
	by number and type of staff for the provision of Sleep Medicine services.
3.2.3	Physicians and all other Healthcare Professionals providing Sleep Medicine services shall be Licensed
	Healthcare Professionals in DHCC.
3.2.4	All such Licensed Healthcare Professionals shall provide Sleep Medicine services within their scope of
	practice and standards of proficiency for their licensed category.
3.2.5	Each Medical Specialist providing Sleep Medicine services shall hold a DHCA license in Sleep Medicine
	or in a specific Medical Specialty with certification in Sleep Medicine. Such Medical Specialties includes
	internal medicine, anesthesiology, neurology, pediatrics, family medicine, psychiatry and otolaryngology.
3.2.6	A Medical Specialist licensed or certified in Sleep Medicine shall be referred to as a Sleep Physician.
3.2.7	All Sleep Physicians must have completed specialist training in internal medicine, anesthesiology,
	neurology, pediatrics, family medicine, psychiatry, or otolaryngology; successfully completed a one year
	diploma in sleep medicine; and successfully completed a certified sleep medicine examination.
3.2.8	Each Licensed Healthcare Operator providing Sleep Medicine services shall have appropriate
	managerial, technical and administrative personnel to ensure effective delivery of Sleep Medicine
	services.
3.2.9	The management staffing shall include, but not limited to, an Administrator, a Medical Director and if
	applicable a Sleep Laboratory Technologist.
3.2.10	Each Licensed Sleep Medicine Center and Single Specialty Clinic providing Sleep Medicine services shall
	appoint a Medical Director with full time responsibility for oversight of Sleep Medicine services to
	ensure safe and quality healthcare service delivery. The Medical Director in this instance must be a
	qualified Sleep Physician.
3.2.11	The Medical Director of Multi-Specialty Clinics, Outpatient Surgical Centers with OPD Clinics, and
	Hospitals providing Sleep Medicine services shall designate a qualified Sleep Physician to be responsible
	for the oversight of approved Sleep Medicine services.





3.2.12	The Medical Director shall be responsible for clinical oversight and privileging; development of
	standards and policies governing Sleep Medicine services provided; ensure all staff are qualified and
	trained appropriately; and direct and oversee all diagnostic and therapeutic procedures.
3.2.13	Each Licensed Healthcare Operator providing Sleep Medicine services shall have written criteria for
	determining the clinical privileges to be granted to individual Licensed Healthcare Professionals and a
	procedure for applying the criteria to those requesting clinical privileges. Staff privileges will be outlined
	based upon the experience and education needed to utilize for the provision of Sleep Medicine services.
3.2.14	Each Licensed Healthcare Operator providing sleep laboratory studies or significant Home Sleep
	Testing shall appoint a Senior Sleep Laboratory Technologist who shall be responsible for the overall
	technical aspects of the service including quality assurance, calibration, equipment safety and
	maintenance and rostering of technical staff.
3.2.15	All medical, technological and nursing staff shall be currently certified and proficient in Basic Life
	Support.
3.2.16	Pediatric sleep studies shall be performed by staff appropriately trained and competent in Pediatric
	Sleep Medicine. Pediatric sleep medicine physicians shall be employed to diagnose treat and manage
	pediatric patients with sleep disorders. They shall not manage adult patients with sleep disorders.
3.2.17	The sleep technologist treating pediatric patients shall maintain a valid Pediatric Advanced Life
	Support (PALS) Certification
3.2.18	DHCA licensed Dentists qualified to provide Dental Sleep Medicine services may be granted clinical
	privileges by the Licensed Healthcare Operator to provide Dental Sleep Medicine services.
3.2.19	Licensed Dentists intending to provide Dental Sleep Medicine services, must successfully complete
	certification in Dental Sleep Medicine from an accredited body.
3.2.20	Each Healthcare Operator licensed to provide Sleep Medicine shall make provisions for regular in-house
	training and ongoing professional development. As part of their required Continuing Medical Education
	(CME) Sleep Physicians and Technologists must earn at least 10 credits of CME per year in Sleep
	Medicine or a related field. Compliance with CME requirements must be documented.

3.3 PATIEN	3.3 PATIENT MANAGEMENT	
3.3.1	Each Licensed Sleep Medicine Center or Licensed Healthcare Operator providing Sleep Medicine	
	services shall manage patients and treatment processes in accordance with these Standards, the Dubai	
	Outpatient Clinic Quality Standards or the standards in use from the approved accreditation agency,	
	and all other relevant DHCA regulations, standards and policies.	
3.3.2	Each Healthcare Operator providing Sleep Medicine services shall only accept referred patients based	
	on whether the Healthcare Operator's scope of clinical activities, services and availability of suitably	
	qualified and licensed healthcare professionals can meet the patient's needs.	





3.3.3	Each Licensed Sleep Medicine Center or Hospital providing Sleep Medicine services shall cond
5.5.5	diagnostic testing only on receipt of an appropriately authorized request provided by a qualified S
	Physician.
3.3.4	Each patient shall undertake an appropriate history and clinical evaluation by a Sleep Physiciar
	assess suitability for diagnostic testing.
3.3.5	Sleep Laboratory studies on patients assessed as high risk due to immobility, safety or critical illr
	shall not be conducted in Sleep Medicine Centers. Sleep studies on such high risk patients shall w
	clinically necessary, only be conducted in hospital based Sleep Laboratories to ensure safe and effec
	care.
3.3.6	In the case of children, each patient should be evaluated and managed by a Sleep Physician qualifie
	Pediatric Sleep Medicine prior to a diagnostic study.
3.3.7	A Sleep Laboratory Technologist will be present for the entire duration of any Sleep Laboratory ba
	diagnostic testing and recording process.
3.3.8	Sleep Laboratory Technologists shall complete technician logs which may include body position, pat
	activity, and real time notations in regards to EEG abnormalities or ECG abnormalities, or as applica
	The technician log shall accompany each recording report and be available at the time
	polysomnographic or other diagnostic testing interpretation.
3.3.9	Scoring of sleep study recordings shall be performed by a Sleep Physician or a Licensed Sl
	Laboratory Technologist. Analysis of sleep study recordings shall be performed by the Sleep Physic
	The Sleep Physician must submit a signed and dated report for each separate polysomnographic
	diagnostic study which must be available in the patient's medical record.
3.3.10	Each licensed Healthcare Operator providing Sleep Medicine services shall ensure that appropr
	diagnostic studies shall be conducted prior to the prescription of Continuous Positive Airway Press
	(CPAP) therapy. Patients shall be followed up at least monthly after the prescription of CPAP ther
	or CPAP titration studies.
3.3.11	Referrals to and reviews from other Licensed Medical Specialists or Healthcare Professionals
	comprehensive patient management related to sleep disorders shall be recorded in the patient's med
	record.
3.3.12	Each Healthcare Operator providing Sleep Medicine services shall have a documented emergency p
	that clearly delineates the duties of specific staff during an emergency and details for contact
	emergency personnel.
3.3.13	Each Healthcare Operator providing Sleep Medicine services shall ensure that staff is educated
	proficient in activation of the emergency plan to perform with confidence and efficiency in respond
	to changes in a patient's condition.
3.3.14	Each Free Standing Sleep Medicine Center shall have a written transfer agreement with a hospita
	within DHCC for the immediate transfer of patients that require emergency medical care. The attend





STANDARDS FOR SLEEP MEDICINE Sleep Physician shall be notified and be responsible for arranging the patient's transfer to the appropriate hospital. 3.3.15 The Sleep Laboratory shall be equipped with emergency cart with defibrillator or an Automated External Defibrillator (AED). 3.3.16 Each Hospital based Sleep Medicine service shall have written procedures to provide emergency medical care. 3.3.17 Home Sleep Testing may only be provided subject to the following: 3.3.17.1 Only Sleep Physicians shall refer patients for self-assisted Home Sleep Testing in conjunction with a comprehensive patient assessment. 3.3.17.2 Each Healthcare Operator providing Home Sleep Testing shall ensure the availability of Licensed Sleep Laboratory Technologists, appropriate equipment, transport and effective security measures for the provision of safe Home Sleep Testing. 3.3.17.3 Home Sleep Testing shall not apply to patients with significant comorbid medical conditions that may degrade the accuracy of Home Sleep Testing, for diagnostic evaluation of patients suspected of having comorbid sleep disorders, and for general screening of asymptomatic population. 3.3.17.4 The scope of Home Sleep Testing shall be limited to: 3.3.17.4.1 Sleep Technologists setting up Home Sleep Testing equipment at the patient's home and educating the patient on the use and application of the equipment. The Sleep Laboratory Technologist shall not be present during the Home Sleep Testing. 3.3.17.4.2 Sleep Technologists attaching patients to portable monitoring devices at the Licensed Healthcare Operator site, and assisting patients on return of the device(s) after completion of the sleep study. 3.3.17.5 The raw data from the Home Based Testing is to be reviewed at the Healthcare Operator's premises and scored using scoring criteria in accordance with the most current related American Academy of Sleep Medicine standards. 3.3.17.6 A Sleep Physician shall review and interpret the scores, and in addition with a comprehensive patient assessment, diagnose the patient accordingly. 3.3.17.7 A follow-up visit to review test results shall be performed for all patients undergoing Home Sleep Testing. 3.3.17.8 Negative or technically inadequate Home Sleep Testing in patients with a high pretest probability of a sleep disorder should prompt in-laboratory diagnostic testing. 3.3.17.9To address possible problems that may be encountered in Home Sleep Testing, each Sleep Medicine service provider shall ensure 'on-call' coverage by one of the following, either a Sleep Physician, or appropriately trained technical personnel. All calls received during testing hours must be documented in a secure log.





	EALTH INFORMATION MANAGEMENT
3.4.1	Each Healthcare Operator providing Sleep Medicine services shall comply with DHCA regulation
	policies and standards for the management of patient health information and medical records.
3.4.2	Each Healthcare Operator providing Sleep Medicine services shall ensure the confidentiality of patie
	health information as per the provisions of the DHCA Health Data Protection Regulation No. 7 of 201
3.4.3	When necessary only standardized diagnosis codes, procedure codes, symbols, abbreviations, ar
	definitions shall be used.
3.4.4	Each Healthcare Operator providing Sleep Medicine services must ensure that all patient heal
	information shall be documented on official forms with the Healthcare Operator's name.
3.4.5	Prior to testing, all patient medical records must include history, physical examinations, patie
	questionnaires, or other screening assessments. The medical record must include written indication
	that a Sleep Physician has reviewed and approved the evaluation for Sleep Laboratory and/or Hor
	Sleep Testing.
3.4.6	All diagnostic sleep test results shall be kept consistently in the patient's medical record
3.4.7	Medical records of patients seen by referred Licensed Healthcare Professionals must contain
	documents of patient related interactions, including initial evaluation, testing (if any), diagnos
	treatment, and follow up.
3.4.8	Each Healthcare Operator providing Sleep Medicine services must document ongoing patie
	evaluation and management which shall be available in the patient's medical record.
3.4.9	Each Healthcare Operator providing Home Sleep Testing shall have documented procedures to ensu
	that Licensed Sleep Laboratory Technologists have access to relevant patient information as necessa
	for correct equipment setup.
3.4.10	Each Healthcare Operator providing Sleep Medicine services shall maintain a filing system so th
	diagnostic records and patient-related findings can be easily accessed. The entire patient reco
	including the raw diagnostic data, is to be stored for a period that is in accordance with applicable DH0
	Medical Record policies and standards.
3.4.11	Each Healthcare Operator providing Sleep Medicine services shall report clinical and manager
	performance measures to monitor and improve patient care and outcomes as defined to t
	Department Director

3.5 PATIENTS RIGHTS AND RESPONSIBILITIES 3.5.1 Each Healthcare Operator providing Sleep Medicine services shall provide patients and families with information regarding the Patients' Rights and Responsibilities in accordance with Schedule Two of the DHCA Governing Regulation No. 1 of 2013. This information shall be displayed in English and Arabic throughout the facility for patients and visitors to review.





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3.5.2	Each Healthcare Operator providing Sleep Medicine services is responsible for providing processes that	
	support patients' and families' rights during care.	
3.5.3	Where necessary, Informed Consent shall be obtained through a process defined by each Healthcare	
	Operator providing Sleep Medicine services and carried out by trained staff in a manner and language	
	that the patient or legal guardian can understand in accordance to applicable DHCA Informed Consent	
	policies and standards.	
3.5.4	Explicit informed consent shall be obtained for video recording and observation of patients during sleep	
	studies. Such video recordings and observations shall only be conducted as and when such recording	
	and observations are required for the purpose of the study. Any breach of this requirement may result	
	in serious repercussion to the Healthcare Operator and the concerned employees.	
3.5.6	Each Healthcare Operator providing Sleep Medicine services shall ensure that reasonable measures are	
	in place to maintain privacy and cultural rights of patients during overnight laboratory sleep studies.	
3.5.7	Each Healthcare Operator providing Sleep Medicine services shall ensure that reasonable measures are	
	in place to maintain privacy and cultural rights of patients during overnight laboratory sleep studies.	
3.5.8	The DHCA Patients' Rights and Responsibilities shall be applicable within their place of residence while	
	they are setting up Home Sleep Testing equipment and providing patient education.	
3.5.9	Each Healthcare Operator providing Sleep Medicine services shall have a process to receive and manage	
	complaints from patients and their families. Patients shall be informed of their right to make a formal	
	complaint to DHCR concerning any applicable Home Sleep Testing services.	

3.6 N	INIMUM FACILITY REQUIREMENTS
3.6.1	To obtain and maintain a Clinical Operating Permit, each Licensed Sleep Medicine Center and
	Healthcare Operator providing Sleep Medicine services shall meet and comply with applicable DHCA
	regulations, standards and policies for minimum facility requirements.
3.6.2	Each Licensed Healthcare Operator providing Sleep Medicine services shall comply with the minimal
	facility requirements of the most current Facility Guidelines Institute's 'Guidelines for Design and
	Construction of Hospital and Outpatient Facilities', in accordance with intended services to be provided.
3.6.3	Such services shall be provided in appropriate consultancy, diagnostic and treatment areas of adequate
	size to allow for the presence of necessary equipment, patient and staff. They must also allow for the
	presence of emergency personnel and equipment and the safe care and transfer of the patient in case
	of a medical emergency.
3.6.4	Each Healthcare Operator providing Sleep Medicine services shall have a written plan for monitoring of
	all applicable patient-related equipment for electrical and mechanical safety. The written plan must
	include specific instructions regarding documentation of compliance and an equipment maintenance
	log.





STANDARDS FOR SLEEP MEDICINE 3.6.5 Each Licensed Sleep Medicine Center or Hospital providing Sleep Laboratory services shall conform to the following: 3.6.5.1 Have comfortable furnished bedrooms conducive to sleep and of sufficient size (minimum 2.4 x 3.5 meters), with adequate lighting, sound-proofing, exclusion of light during study, air conditioning, emergency oxygen and suction; 3.6.5.2 All rooms shall conform to applicable DHCA regulations, standards and policies with respect to entrances, exits and fire precautions; 3.6.5.3 Have separate bedrooms with adjoining bathrooms for each patient; 3.6.5.4 Bedrooms design must ensure safe entry and egress and must not have any impediments to the delivery of emergency care. The patient testing rooms must be of sufficient size to accommodate emergency personnel access with a minimum of 0.6 meters of available clear space on 3 sides of the bed, and must include a testing bed with a mattress not smaller than a standard hospital bed; 3.6.5.5 Be able to accommodate a patient escort when requested in a manner that will meet the cultural needs and security of the patient while not interfering with the testing; 3.6.5.6 The control room shall be located in close proximity to the bedrooms and large enough to comfortably house working space for the Sleep Laboratory Technologist(s) and the required equipment. A two way call system for communication between the patient and the Sleep Laboratory Technologist must be installed and maintained. The dimensions of the control room must not be less than 3.75 meters2. There shall be adequate storage space for the safe and secure storage of records, consumables and equipment. 3.6.5.7 Each Licensed Sleep Medicine Center or Hospital providing Pediatric Sleep Laboratory studies must ensure that the bedroom be child-safe and age-appropriate. Sites for a parent or caregiver to sleep in the child's bedroom should be available. 3.6.5.8 At least one testing bedroom and bathroom must be handicap accessible. 3.6.5.9 Each Licensed Sleep Medicine Center and Hospital shall ensure that equipment for the conduct of Sleep Laboratory studies and other tests or treatments shall be suitable for purpose and regularly maintained and safety checked. All equipment must conform to applicable FDA, CE, IEC standards or equivalent for the class and type of equipment. 3.6.5.10 Each Licensed Sleep Medicine Center and Hospital providing Sleep Laboratory studies must ensure that diagnostic devices utilized during sleep studies, shall produces clear, valid and quality data recordings. In digital recordings the monitor screens must have a sufficiently high resolution to allow accurate assessment and evaluation of all recorded biosignals. 3.6.5.11 Each testing bedroom in the facility must have a mechanism for visual monitoring and video recording of patients during testing.





	3.6.5.12 Each Sleep Laboratory shall maintain equipment for the delivery of CPAP therapy for
	sleep apnea, including remote control of the device (e.g. pressure output, device mode).
	3.6.5.13 Each Licensed Sleep Medicine Center or Hospital providing Sleep Laboratory studies
	shall ensure adequate security measures are in place for the management of overnight stay patients.
	3.6.5.14 Such Entities shall employ security personnel from the same security company
	managing the respective building security from which they provide the healthcare
	services in accordance to DHCC requirements.
	3.6.5.15 Each Licensed Sleep Medicine Center or Hospital providing Sleep Laboratory studies
	must ensure that Sleep Studies allows the full disclosure of the raw signals, which must be clearly labeled and calibrated.
	3.6.5.16 Standard physical calibrations of all testing equipment shall be used wherever
	applicable. Each calibration procedure should be repeated at least twice to ensure
	reproducibility.
	3.6.5.17Each Licensed Sleep Medicine Center or Hospital providing Sleep Laboratory studies
	shall also ensure the availability of equipment that conform to specifications (linearity,
	sensitivity, frequency response, signal to noise ratio, stability) that ensure collection of
	meaningful, interpretable results. Overnight visual monitoring of patients (by infra-red
	or low light video) is a desirable feature.
3.6.6	Each Licensed Healthcare Operator providing Sleep Medicine Home Sleep Testing shall:
	3.6.6.1 ensure that devices used allows for the display of raw data with the capability of
	manual scoring or editing of automated scoring by a licensed Sleep Laboratory
	Technologist;
	3.6.6.2 ensure the availability of at least the airflow, effort, and oximetric biosensors
	conventionally used for in-laboratory diagnostic studies;
	3.6.6.3 ensure that all reusable equipment has a unique identifier so that it may be assigned
	to a patient and tracked;
	3.6.6.4 have a documented process in place for the deletion of all physiologic data following
	the use of each device;
	3.6.6.5 have documented standard operating procedures for device and sensor packing,
	shipping and storage.

3.7 QUALITY OVERSIGHT AND ACCREDITATION

3.7.1 Each Licensed Healthcare Operator providing Sleep Medicine services shall be subject to this Standard and all applicable quality oversight policies and standards of the Clinical Affairs Department of DHCR.





3.7.2	Each Sleep Medicine Center is required to successfully meet the applicable Outpatient Clinic Qualit
	Standards and to obtain certification of successful completion of the Quality Survey performed by th
	Clinical Affairs Department of DHCR within (2) years of commencing operations, and maintain suc
	certification throughout the term of its Clinical Operating Permit in accordance with the requirement
	of the DHCA Healthcare Operators Regulation number (4) of 2013.
3.7.3	Prior to commencing Sleep Medicine services, each Licensed Healthcare Operator shall have in plac
	written policies and procedures required for safe and effective practices in compliance with th
	accreditation standards of the approved accreditation agency and all other applicable regulation
	policies and standards. All related documents, including policies, procedures, and programs shall b
	managed in a consistent and uniform manner.
3.7.4	Each Licensed Sleep Medicine Centre and Hospital providing Sleep Laboratory studies shall mainta
	written protocols for all diagnostic studies available, i.e. protocols for comprehensive polysomnograph
	multiple sleep latency test, maintenance of wakefulness test, and titration of positive pressure therap
	and Home Sleep Testing, etc.
3.7.5	Each Licensed Sleep Medicine Center conducting overnight sleep studies shall have documente
	effective measures in place to ensure the safety and security of patients, visitors and staff present
	the facility.
3.7.6	Each Licensed Healthcare Operator providing Sleep Medicine services must have written emergen
	policies that include procedures for the management of cardiac, neurologic, psychiatric a
	environmental emergencies.
3.7.7	Each Healthcare Operator providing Sleep Medicine services shall monitor and review the quality ar
	safety of the services provided.
3.7.8	Each Licensed Healthcare Operator providing Sleep Medicine services shall report all related sentin
	events to Clinical Affairs Department as per the applicable DHCA Sentinel Event policies and standard
	irrespective of where such adverse event occurred.
3.7.9	Each Healthcare Operator providing Sleep Medicine services shall evaluate the effectiveness of i
	Emergency Management Plan. It shall test its Emergency Management Plan at least annually at each
	site included in the Plan as an emergency response exercise.
3.7.10	Each Licensed Sleep Medicine Centre and Hospital providing Sleep Laboratory studies shall ensure th
5.7.10	regular periodic audits are conducted of on-call logs to identify trends related to device, sensor
	service issues. These audit results must be incorporated into the Healthcare Operator's Quali
	Assurance program.
3.7.11	Each Healthcare Operator providing Sleep Medicine services shall plan for preventing and controllir
J.1.11	infections in accordance to the applicable Outpatient Clinical Quality Standards and/or other applicable
	standards, policies and procedures. Particular emphasis shall be on infection control management
	related to equipment.





3.7.12	Each Licensed Sleep Medicine Center and Hospital providing Sleep Laboratory studies shall have
	standardized and documented processes for the conduct and analysis of applicable sleep studies.
3.7.13	Such Entities shall have established methods for assessing the quality of measurements and analysis
	including periodic assessment of inter-observer variability in analysis of sleep studies.
3.7.14	The facility shall maintain a written plan for monitoring equipment for electrical and mechanical safety,
	with monthly visual inspections for apparent defects. Annual inspections conducted for electrical safety
	and ground fault by certified electrician or biomedical engineer.
3.7.15	Licensed Healthcare Operator providing Sleep Medicine services shall have in place written procedures
	for the prescription and supply of CPAP therapy and its follow up care that is consistent with good
	professional practice.
3.7.16	All diagnostic study recordings shall be subject to review for technical quality of the recordings as well
	as accuracy of scoring and interpretation using a standardized system.
3.7.17	A Home Sleep Testing program shall include a written procedure for infection control including cleaning
	and inspection of equipment.
	Where there is thought to be an imminent risk of harm to a patient or their family, DHCR may seek
	access to a patient's place of residence where they are receiving Home Sleep Testing in accordance with
	UAE law and with the cooperation of the Dubai Police.

4. DE	4. DEFINITIONS	
4.1	Clinical privileges: It is an entitlement that the health organization grants to a physician to permit	
	them to perform at the facility. Clinical privileges represent the scope of clinical responsibility that a	
	medical practitioner may exercise in a facility. Clinical privileges are specific to an individual, and are	
	according to their education, training, experience and competence, to manage and treat patients with	
	a level of proficiency which minimizes the risk of causing harm. Clinical privileges also relate to the	
	role delineation resources, equipment and staff available in the healthcare facility.	
4.2	Circadian rhythm: is a daily cycle of biological activity based on a 24-hour period and influenced by	
	regular variations in the environment, such as the alternation of night and day.	
4.3	CPAP titration : is a type of in-laboratory sleep study used to calibrate continuous positive airway	
	pressure (CPAP) therapy.	
4.4	DHCA: the Dubai Healthcare City Authority established under Article (4) of the Law,	
	and comprises the Chairperson, the DHCC Board of Directors and the Executive Body.	
4.5	DHCC: Dubai Healthcare City.	
4.6	DHCR: is the regulatory arm of Dubai Healthcare City Authority. An independent licensing and	
	regulatory authority for all healthcare providers, medical, educational and other business operating	
	within DHCA and its branches	
4.7	FGI: Facility Guidelines Institute, USA.	





4.8	Home Sleep Testing: is the use of polysomnographic testing systems which are designed
	be self-administered by patients in their own home.
4.9	Informed Consent: a process of communication between a person and a physician or other health
	professional that results in the person's authorization or agreement to undergo a specific med
	intervention. It includes the principle that a physician has a duty to inform his or her patients about
	nature of a proposed or alternative treatment, procedure, test, or research, including the risks
	benefits of each alternative and of not receiving it. An informed patient can then make a choice w
	procedure, if any, to undergo.
4.10	Licensed Sleep Medicine Center: is a free-standing Licensed Sleep Medicine Center that evaluates
	treats patients with the full range of sleep disorders
4.11	Maintenance of Wakefulness Test: measures how alert an individual is during the day. This is
	indicator of how well one is able to function and remain alert in quiet times of inactivity.
4.12	Multiple Sleep Latency Test: tests for excessive daytime sleepiness by measuring how quickly
	individual falls asleep in a quiet environment during the day.
4.13	Polysomnography: is a diagnostic technique comprising the simultaneous recording
	neurophysiological, cardiorespiratory and other biosignals during an entire nocturnal sleep.
4.14	Scoring: is the review of data is collected on a patient that underwent a sleep study. The data is usu
	reviewed by a Sleep Laboratory Technologist who will score, or tabulate all of this data in organ
	packets of clinical information.
4.15	Sleep Apnea: is an involuntary cessation of breathing that occurs while the patient is asleep. The
	are three types of sleep apnea: obstructive, central, and mixed.
4.16	Sleep Disorder: means a medical disorder affecting the pattern of sleep and causing physical, me
	emotional impairments.
4.17	Sleep Medicine: is the medical specialty that provides the clinical assessment, laboratory test
	diagnosis, management and prevention of sleep and circadian rhythm disorders.
4.18	Sleep Laboratory: is a facility which has been designed for the purpose of studying sleep disorders
4.19	Sleep Laboratory Technologist: means a DHCC Licensed Sleep Laboratory Technologist. Sl
	laboratory technologists perform studies on patients suffering from sleeping disorders. The dutie
	these technologists include preparing rooms and patients for observation, conducting sleep studies
	recording results.
4.20	Sleep studies: are tests that record what happens to the body during sleep. The studies are done
	find out what is causing sleep problems e.g. Polysomnography, Multiple Sleep Latency T
	Maintenance of Wakefulness Test, etc. Sleep studies usually are done in a Sleep Laboratory. It may
	be done with portable equipment for use at home.





4.20	Sleep Physician: is a medical specialist certified in the subspecialty of sleep medicine who specializes in	
	the clinical assessment, physiologic testing, diagnosis, management and prevention of sleep and	
	circadian rhythm disorders.	

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