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Question: 1

Twitching movements of the fingers, toes, and mouth that may occur during stage W, non-REM, and REM sleep are known as

- A. bruxism.
- B. excessive fragmentary myoclonus (EFM).
- C. REM sleep behavior disorder (RBD).
- D. rhythmic movement disorder (RMD).

Answer: B

Explanation:

The correct answer is excessive fragmentary myoclonus (EFM). Scoring requires that the activity continue for at least 20 minutes of non-REM sleep, with at least five EMG potentials per minute. EFM appears to be benign. The duration of an activity burst is usually 150 ms or less, but it may be greater than 150 ms if twitching is obvious. By contrast, bruxism is the grinding of the teeth.

In REM sleep behavior disorder (RBD), some transient muscle activity (usually involving the muscles of the hands, feet, or mouth) often occurs during REM sleep. In addition, some large muscle activity may occur, but does not involve muscle activity across joints. Rhythmic movement disorder (RMD) is common in infants beginning at approximately six months of age and continuing until two to three years of age; it is rare after age five unless a patient has a central nervous system injury. It often includes rocking, head rolling, or head banging. Some children may also have leg banging and body rolling. Most often, RMD occurs either during stage W, when the patient is very drowsy, or during stage 1 non-REM sleep. The rhythmic movements may be accompanied by humming.

Question: 2

The cEMG provides information on all of the following EXCEPT

- A. snoring.
- B. teeth grinding.
- C. electrical activity within the brain.
- D. muscle tone of the chin muscles.

Answer: C

Explanation:

The cEMG is the chin electromyogram. By recording the muscle tone of the chin muscles, it helps the observer to identify REM sleep (during which there is a reduced muscle tone). The cEMG provides

information about snoring, which causes artifacts on cEMG. In addition, it provides information on teeth grinding, which causes muscular movement. It is the EEG (not the CEMG) that provides information on the electrical activity within the brain. Through the use of scalp electrodes, the EEG measures electrical brain activity in order to rule out seizure disorders and to determine sleep-wake state characteristics.

Question: 3

Which of the following constitutes good sleep hygiene?

- A. Drinking alcohol before going to bed.
- B. Watching TV in bed right before trying to go to sleep.
- C. Getting up to do something relaxing after 20 minutes in bed without falling asleep.
- D. Taking naps during the day.

Answer: C

Explanation:

The correct answer is that if one is not asleep within 20 minutes of going to bed, he or she should get up to do something relaxing until feeling sleepy. According to the principles of good sleep hygiene, the bed should only be used for sleeping and sex. Good sleep hygiene involves avoiding activities that interfere with sleep, such as smoking, drinking alcohol or caffeinated beverages, watching TV in bed right before trying to go to sleep, and taking naps during the day.

Question: 4

Which of the following brain structures is involved in autonomic functions, homeostasis, endocrine processes, emotions, and the regulation of sleep?

- A. Hypothalamus.
- B. Mamillary bodies.
- C. Hippocampus.
- D. Posterior pituitary gland.

Answer: A

Explanation:

The hypothalamus has a role in almost all body processes, including autonomic functions, homeostasis, endocrine processes, emotions, and the regulation of sleep. By contrast, mammillary bodies are active in the memory of smells. The hippocampus is a brain region that is responsible for organizing and processing memories and spatial relationships, and for regulating emotions. The posterior pituitary gland stores and secretes oxytocin and antidiuretic hormone.

Question: 5

Morning/evening questionnaires ask the patient to indicate which of the following?

- A. How the patient feels in the morning after going to sleep at 9 PM.
- B. The five consecutive hours during the day that the patient would prefer to work
- C. The patient's appetite two hours after awakening.
- D. All of the above.

Answer: B

Explanation:

The correct answer is that morning/evening questionnaires ask the patient to indicate the five consecutive hours during the day that the patient would prefer to work. A morning/evening questionnaire asks the patient to indicate how he or she feels in the morning after going to sleep at 11 PM. In addition, it asks the patient to assess his or her appetite one-half hour after awakening.

Question: 6

One criterion for scoring pediatric obstructive sleep apnea is that, compared to baseline, there is a 90% or greater decrease in amplitude for at least what percentage of events?

- A. 25%.
- B. 50%.
- C. 80%.
- D. 90%.

Answer: D

Explanation:

The correct answer is 90%. One criterion for scoring pediatric obstructive sleep apnea is that there is a 90% or greater decrease in amplitude for 90% or more of events, compared to baseline.

Question: 7

Sudden, involuntary, abnormal electrical disturbances in the brain that can manifest as alterations/loss of consciousness and convulsions are known as

- A. generalized tonic-clonic seizures.
- B. primary generalized myoclonic epilepsy.
- C. amyotrophic lateral sclerosis.
- D. West syndrome.

Answer: A

Explanation:

The correct answer is generalized tonic-clonic seizures. Generalized tonic-clonic seizures may affect part of or the entire brain, causing alterations or loss of consciousness and convulsions.

Interictalepileptiform activity (IEA) refers to epileptic-like changes in the EEG that commonly occur between seizures and during sleep. Primary generalized myoclonic epilepsy is characterized by brief jerking motions. Amyotrophic lateral sclerosis (ALS) is a degenerative disease of the motor neurons from the anterior horns of the spinal cord and the motor nuclei in the lower brainstem.

ALS is characterized by increasing muscle weakness, spasticity, twitching, fatigue, and lack of coordination. The symptoms of West syndrome include brain damage, resulting in infantile spasms, intellectual disability, and interictal EEG hypsarrhythmia.

Question: 8

What is the range of normal scores on the Fatigue Severity Scale?

- A. 5-15.
- B. 5-20.
- C. 9-25.
- D. 9-35.

Answer: D

Explanation:

The correct answer is 9-35. The Fatigue Severity Scale contains nine statements related to fatigue. The patient is required to score each statement on a scale of 1 to 7 (in which 1 is strongly disagree and 7 is strongly agree). Examples of the statements include: "I become fatigued easily," "I cannot adequately carry out all of my duties and responsibilities because of fatigue," and "My work, social, and family life suffer because of my fatigue." The scores for each statement are added together, with a score between 9 and 35 considered to be in the normal range. Scores above 35 suggest a high degree of fatigue.

Question: 9

Which of the following is NOT part of scoring pediatric obstructive sleep apneas?

- A. A duration of two or more missed respirations (or duration of two respirations based on baseline recordings).
- B. Inspiratory effort that continues or increases throughout the apneic period.
- C. Missed respirations associated with arousal, awakening, or desaturation of 3% or more.
- D. A 90% or more decrease in amplitude for 90% or more of events, compared to baseline.

Answer: C

Explanation:

The correct answer is that missed respirations associated with arousal, awakening, or desaturation of 3% or more are NOT part of scoring pediatric obstructive sleep apneas.. The scoring for central sleep apnea includes a duration of 20 or more seconds or a duration of two or more missed respirations (or equivalent), associated with arousal, awakening, or desaturation of 3% or more.

Question: 10

Which type of waves have a frequency of 13-35 Hz, an amplitude of less than 30 μ V, and are present during normal wakefulness when the patient is alert?

- A. Delta waves.
- B. Beta waves.
- C. Vertex waves.
- D. Theta waves.

Answer: B

Explanation:

The correct answer is beta waves. Delta waves are slow waves (1-4 Hz), with an amplitude of more than 75 VIV, and are present in stage 3 non-REM (slow-wave) sleep in adults. Delta waves occur in the waking state of newborns and young children and may occur in adults who are intoxicated or have schizophrenia or dementia. Vertex waves are commonly found negative deflections, with amplitude typically ranging from 50-150 VIV. Vertex waves are most noticeable from the vertex and frontal leads. They may have sharp contours and occur in repetitive episodes (particularly in children). By contrast, theta waves have a frequency of 4-6 Hz and oscillations of varying amplitude, and are most easily seen with central and temporal leads. Theta waves frequently occur during daydreaming and self-hypnotic states, occur in stage 1 non-REM sleep, and may occur during arousals.

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