


Name of Policy: <u>Maintenance of wakefulness test</u> Policy Number: 3364-171-03-03 Department: Sleep Disorders Approving Officer: Senior Hospital Administrator Responsible Agent: Director, Sleep Disorders Scope: The University of Toledo Medical Center Pulmonary Services Department	 Effective Date: 03/17/2023 Initial Effective Date: 03/17/2023
<input checked="" type="checkbox"/> New policy proposal <input type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Major revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy	

(A) Policy Statement

A Maintenance of Wakefulness Test (MWT) will be performed according to American Academy of Sleep Medicine (AASM) standards when appropriate. MWT is indicated to assess a person’s ability to remain awake when his or her inability to remain awake constitutes a public or personal safety issue. MWT may be indicated in patients with excessive daytime sleepiness to assess response to treatment.

MWT must be ordered or approved by an appropriately-licensed facility medical staff member. Performance of a PSG prior to MWT is decided by the physician based on clinical circumstances. MWT trials last 40 minutes. On occasion the staff physician may order 20 minute trials (e.g., for FAA requirements).

(B) Purpose of Policy

A standard MWT protocol that is consistent with AASM practice parameters promotes consistency, allows comparisons between tests, and ensures accurate interpretations that are consistent with published data.

(C) Procedure

General Considerations:

1. Although it is not a requirement to have a polysomnogram prior to MWT, performance of a PSG prior to MWT should be decided by the clinician based on clinical circumstances.
2. Based on the Rand/UCLA Appropriateness Method, no consensus was reached regarding the use of sleep logs prior to the MWT; there are instances, based on clinical judgment, when they may be indicated.
3. Patients should abstain from alcohol, marijuana, and other sedating substances on the day of their test.
4. The use of medications by the patient before and during MWT should be addressed and decided upon by the sleep clinician before MWT. Drug screening may be indicated to ensure that sleepiness/wakefulness on the MWT is not influenced by substances other than medically prescribed drugs. Drug screening is usually performed on the morning of the MWT but its timing and the circumstances of the testing may be modified by the clinician.

General Description:

1. Patients are monitored for four 40-minute wake trials performed at two-hour intervals. The first trial opportunity begins 1.5 to 3 hours after termination of the nocturnal recording or after the patient’s usual wake-up time at home.
2. The montage for the MWT includes frontal electroencephalogram (EEG) (F3-M2, F4-M1), central EEG (C3-M2, C4-M1), and occipital EEG (O1-M2, O2-M1) derivations, left and right eye

