

VOLUME 10—NO. 3
SUMMER 2003

AASM BULLETIN

THE BULLETIN OF THE AMERICAN ACADEMY OF SLEEP MEDICINE

2003-2004 AASM Board of Directors

APSS 17th Annual Meeting Overview

Medicare Reform Update

PRESORTED
STANDARD
US POSTAGE PAID
ROCHESTER, MN 55901
PERMIT NO. 719

Respironics



EDITOR'S NOTES

The APSS 17th Annual Meeting in Chicago was an outstanding success, despite the heartburn-inducing obstacles faced in the planning of

the event. Record-high attendance, abstract submissions, and educational offerings were only part of the picture. The first annual AASM and SRS fundraising dinner (to raise money for sleep research), the WFSRS joint activities, and the activities to review our history on the 50th anniversary of the discovery of REM sleep, all helped to foster an exciting and stimulating meeting environment. Pages 19-21 of the *Bulletin* highlight many of the meeting's activities.

I have enjoyed the opportunity to participate in the leadership of the AASM this past year and look forward to continuing to assist as past president. It has been an opportunity to learn a lot and work with so many dedicated and talented AASM staff and members. I welcome the new slate of new officers and urge you to review Dr. Conrad Iber's President's Perspective on page 4 and become familiar with your new Board members pictured on pages 8 and 9. They are a hardworking and dedicated group and will serve you well. Committee changes and update member section goals are described on pages 12-16.

The AASM Board of Directors and staff encourage you to contact us with ideas, suggestions and concerns so we can work to make the AASM even better over this next year. Plan to meet with us again in Philadelphia, June 5-10, 2004, at the APSS 18th Annual Meeting to review this year's highlights.

Andrew L. Chesson Jr., MD
Editor-In-Chief

IN THIS ISSUE

Summer 2003

VOLUME 10, ISSUE 3

President's Perspective	4
S.A.F.E.R. CD-Rom	5
2003-2004 AASM Board of Directors	8-9
Related Leadership Profiles	10
Committee Updates	12-15

MEMBER BENEFITS

Communicating With Membership	16
Membership Sections Update	16
Membership Dues Increase	17
Call For Interest: Nursing/Physician Assistant Membership Section	17
2003 AASM Young Investigator Awards	17

APSS 17TH ANNUAL MEETING

Meeting Draws Record Attendance	19-20
Press Coverage a Tremendous Success	20
The Inaugural <i>Discovering the Secrets of Sleep</i> Research Fundraising Dinner	20
2nd Annual Mini Fellowship Program for International Scholars	21
American Sleep Medicine Foundation 2003 Young Investigator Awards	21

HEALTH POLICY/GOVERNMENT AFFAIRS

Medicare Reform	22-23
News Briefs	24-25

ADDITIONAL NEWS

Accreditation FAQ	26
New AASM Accredited Sleep Centers and Laboratories	27
2003 ABSM Diplomates	28-31

CLASSIFIEDS

Calendar of Events, Positions Available, Announcements	37-38
--	-------

AASM Bulletin: The Newsletter of the American Academy of Sleep Medicine, Vol. 10, No. 3, Summer 2003
Editor: Andrew L. Chesson, Jr., M.D., Past-President; Associate Editor: Lee Brown, M.D.
Production Editor: Thomas Meyer
Editorial Advisers: Conrad Iber, M.D., President; Jerome A. Barrett, Executive Director
American Academy of Sleep Medicine, One Westbrook Corporate Center, Suite 920, Westchester, IL 60154
Phone: (708) 492-0930, Fax: (708) 492-0943, E-mail: aasm@aasmnet.org, Web site: http://www.aasmnet.org

ADVERTISING POLICY: Acceptance of advertising for a product or service in this issue does not constitute an endorsement or approval by the AASM of the quality or value of the advertised item or of the claims made by the advertiser. Professional products and services are accepted subject to editors' approval. The AASM Bulletin reserves the right to refuse any advertisement deemed unacceptable for accuracy, content, or appearance. The AASM Bulletin does not honor advertising agency discounts.



PRESIDENT'S PERSPECTIVE

By Conrad Iber, MD
AASM President



Over the past 25 years, Sleep Medicine has grown into a medical specialty. Fueled by dynamic scientific growth in a diversity of disciplines and nurtured by early efforts to develop certification and credentialing, the field of Sleep Medicine has experienced tremendous growth and coalescence. Through its mission and its cooperation with industry partners, the American Academy of Sleep Medicine has been instrumental in all aspects of the field's growth. The growth of AASM reflects the explosive growth of the field. At a membership of almost 5,000 and with 660 accredited sleep centers, the Academy is the largest professional sleep society. The vitality of the AASM is credited to the diversity and commitment of its member physicians, scientists, nurses, and technicians.

Each year, as part of our strategic plan, we focus on special areas of our mission that are timely in the development of the field. Five years ago, the AASM developed the American Sleep Medicine Foundation (ASMF) to fund scientific and educational research. The ASMF has subsequently awarded more than \$1.5 million for clinical and basic research. Over the past year, this has included important initiatives recognized by ACGME and ABMS for fellowship and board certification respectively. These efforts represent the culmination of years of effort by many. The much-needed update of the ICSD will also continue this year as a work-in-progress.

In the coming year, the Academy will extend its initiatives in professional and public education. The Education Committee has issued a Request for Proposals within the ASMF to develop models for educating physicians in Sleep Medicine. The Board will initiate a survey of sleep centers to help define models for development of academic centers in Sleep Medicine. This effort may help to support and focus a similar initiative by the Sleep Research Society and the Institute of Medicine. For the public, the AASM is establishing a separate accessible and searchable web site with updated material and links to other appropriate public educational sites. The Academy is surveying state driver's education tests and manuals and will propose inclusion of appropriate content regarding sleep and drowsy driving.

Membership participation with the AASM has been improved with organizational changes over the past few months. Membership Sections have been given staff support and have been reconstituted into a newly-formed Membership Sections Committee to better facilitate section proposals to APSS and encourage and coordinate other vital member activities.

Finally, the Academy has initiated a process to update the 35-year-old standardized scoring manual. This task will require a thoughtful amalgam of evidence review and consensus, as well as the inclusion of new digital methodologies. The development of the scoring manual will address the effects of age and current regulatory standards.

This overview of the upcoming year is a brief look into the future. The American Academy of Sleep Medicine and its partners, including professional and patient societies, government and industry, have already witnessed and participated in the development and growth of Sleep Medicine over the past decades. The Academy's diverse membership, like the diversity of the field, has provided resources for the implementation of its mission to improve sleep health, and will ensure the continuation of the field's growth.



S A F E R

Did you know that resident training programs are required by the ACGME to educate residents and faculty about fatigue and its management? Sleep loss and fatigue are serious matters. Included in the revised ACGME standards is the requirement that program directors, faculty and residents be educated about the effects of sleep loss on performance and well-being, how to recognize fatigue, and how to apply appropriate countermeasures. Failure to comply with ACGME work-hour standards may result in the loss of ACGME accreditation of the resident training program.

The AASM has developed a CD-ROM slide set that fully complies with the ACGME educational requirements. The **S.A.F.E.R. (Sleep, Alertness and Fatigue Education in Residency)** CD-ROM slide set and curriculum syllabus follows the guidelines outlined by the ACGME, including:

- A description of factors that put residents at risk for sleepiness and fatigue.
- Recognition of domains impacted by sleep loss.
- Identification of signs of sleepiness and fatigue.
- Acknowledgement of misconceptions among physicians about sleep and sleep loss.
- Tools and strategies for alertness management for your facility.

The ACGME requires that resident training programs comply with resident work-hour standards by July 1, 2003. Development and implementation of an internally-produced educational program is costly, time consuming and exhausting. We believe the purchase of S.A.F.E.R. not only satisfies ACGME standard compliance requirements, but is an affordable option to reuse for future resident education. Contact the AASM national office at (708) 492-0930 to place an order, or go directly to www.aasmnet.org.

Atlanta School of Sleep
1/2 Page

Astro-Med

School of
Clinical
Polysomnography

American Academy of Sleep Medicine Board of Directors 2003-2004



PRESIDENT

Conrad Iber, MD received a medical degree in 1974 from the University of Illinois at Chicago, and is a Diplomate of the American Board of Internal Medicine in internal medicine, pulmonary disease and critical care. Dr. Iber is currently director of the Division of Pulmonary Medicine at Hennepin County Medical Center in Minneapolis, Minnesota. Dr. Iber holds membership with several

organizations and societies, including the American Thoracic Society, the American Academy of Sleep Medicine, the American College of Chest Physicians, and is a fellow of the American College of Physicians. He has served the AASM in many capacities, including as chair of the Clinical Practice Review Committee.



PRESIDENT-ELECT

Michael Sateia, MD is professor of psychiatry and director of the Section of Sleep Medicine at Dartmouth-Hitchcock Medical Center. He passed his boards from the American Board of Psychiatry and Neurology in 1980 and from the American Board of Sleep Medicine in 1990. He has been a member of the AASM since 1984. Dr. Sateia has been a reviewer for *SLEEP* and the *Journal of Palliative Care* and

also the Editor of the MEDSleep Medical Education Web site. Dr. Sateia was senior site visitor for AASM center accreditation and appointed Regional Co-Chair for the Accreditation Committee in 1990, and a member of the Medical School Education Committee in 2000 and Chair of the Committee in 2001.



PAST PRESIDENT

Andrew Chesson Jr., MD passed the American Board of Psychiatry and Neurology boards in 1980 and the American Board of Sleep Medicine boards in 1986. Dr. Chesson is a member with numerous scientific societies, including the American Academy of Neurology. Dr. Chesson is an examiner for the American Board of Psychiatry and Neurology, and has been a reviewer for several prominent journals

including *JAMA* and *SLEEP*. Dr. Chesson was a site visitor for AASM center accreditation from 1987-1995, a member of the AASM Education Committee from 1992-1994, and has been on the Standards of Practice Committee since 1992, serving as committee chair from 1995-2002.



SECRETARY/TREASURER

Stephen Sheldon, DO passed his boards from the American Board of Pediatrics in 1980 and from the American Board of Sleep Medicine in 1988. He has been a member of the AASM since 1986. Dr. Sheldon presently serves as assistant professor of pediatrics at Northwestern University Medical School and director of the Sleep Medicine Center at Children's Memorial Hospital in Chicago, and has served in several

capacities on numerous scientific societies including the American Electroencephalographic Society, the Ambulatory Pediatrics Association and the American Academy of Osteopathic Pediatricians. He was a member of the NIH Working Group on Problem Sleepiness at the National Heart, Lung, and Blood Institute and a Delegation Leader for the International Scientific Delegation on Sleep Disorders Medicine to the People's Republic of China. Dr. Sheldon has been a grant reviewer for the NIH Department of Health and Human Services, is on the Editorial Board of *Sleep Medicine*, and serves as an associate editor for the journal *SLEEP*. He has been on the AASM CME and Education Committees since 1996, serving as CME chair since 1997, and has been an AASM accreditation site visitor since 1996. Dr. Sheldon has served on the Board as a director since 2000.



DIRECTOR

Donna Arand, PhD received a doctorate degree in Experimental Psychology from the University of Cincinnati in 1976 and is presently clinical director at Kettering Medical Center Sleep Disorders Center. She became board-certified in sleep in April 1978 and has been an active member of the American Academy of Sleep Medicine. Dr. Arand has served in several capacities within the AASM, starting as an accreditation

site visitor in 1980; she has been a member of the Accreditation Committee from 1993 to present and served as committee chair for the last three years. Dr. Arand has also served as Chair of the Standards of Practice Committee's task force on MSLT.



DIRECTOR

Lawrence Epstein, MD is board-certified in Pulmonary Disease, Internal Medicine and Sleep Medicine. He is currently instructor in the department of medicine at Harvard Medical School and is medical director of Sleep HealthCenters in Bedford and Malden, MA. Previous positions include director of the sleep medicine program at the VA Boston Healthcare System, director of the Sleep Disorders Center at

Wilford Hall Medical Center at Lackland Air Force Base in Texas, and military consultant to the Air Force Surgeon General for Sleep Disorders. He is the former chairman of the AASM Publications Committee.



DIRECTOR

W. Vaughn McCall, MD received a medical degree from Duke University in 1984. He currently works as interim chairman for the Department of Psychiatry and Behavioral Medicine at Wake Forest University School of Medicine in Winston-Salem, NC. Dr. McCall was certified by the American Board of Sleep Medicine in 1988 and the American Board of Psychiatry in 1990. He currently

holds many professional memberships, including the Association for Convulsive Therapy, American Medical Association and American Psychiatric Association.



DIRECTOR

Barbara Phillips, MD, MSPH received a medical degree from the University of Kentucky College of Medicine in 1977 and a master of science in Public Health from the University of Kentucky in Lexington in 1991. She is professor of pulmonary and critical care medicine in the department of Internal Medicine and Preventive Medicine at the University of Kentucky College of Medicine. She directs the

Sleep Clinic and AASM Alternate Tract Sleep Fellowship at the University of Kentucky College of Medicine, and is medical director of the Sleep Disorders Center at Samaritan Hospital in Lexington. Dr. Phillips has been board-certified by the American Board of Internal Medicine, the Pulmonary Subspecialty Boards, Critical Care Medicine and the American Board of Sleep Medicine. She is a fellow of the AASM and served as President of the American Board of Sleep Medicine from 1998-2000. She is a recipient of a Sleep Academic Award from the National Institutes of Health and has served on the Advisory Board to the National Center on Sleep Disorders Research.



DIRECTOR

Stuart Quan, MD received a medical degree from the University of California, San Francisco School of Medicine. He is professor of medicine and anesthesiology at the University of Arizona College of Medicine in Tucson, associate head of the department of medicine, chief of pulmonary and critical care medicine, and director of the University of Arizona Sleep Disorders Center. He served as president of

the American Academy of Sleep Medicine in 1999-2000. Dr. Quan has served as chair of the Accreditation Committee, and was a member of the Board of Directors of the American Board of Sleep Medicine from 1990-1996. His research interests include respiratory disturbances during sleep, cardiovascular consequences of sleep disordered breathing and epidemiology of sleep.



DIRECTOR

John Shepard, Jr., MD passed the boards of the American Board of Internal Medicine in 1974 and from the Subspecialty Board in Pulmonary Diseases in 1976. He has been a member with the AASM since 1984 and became board-certified in sleep medicine in 1988. Dr. Shepard served on the American Board of Sleep Medicine from 1990-1995; his positions on the

ABSM Board include Part I Examination Committee Chair and member of the Executive and Finance Committees. He has also served as chair of the American College of Chest Physicians Committee on Cardiopulmonary Sleep Disorders and has served in several leadership positions within the American Thoracic Society. Dr. Shepard was appointed to the ASDA Fellowship Training Committee in 1997 and the AASM Board of Directors in 1998.



DIRECTOR

Michael Silber, MB, ChB passed the boards for the American Board of Electrodiagnostic Medicine in 1992, American Board of Sleep Medicine in 1992 and American Board of Psychiatry and Neurology in 1994. Dr. Silber is currently associate professor of neurology at Mayo Medical School, co-director of Mayo Sleep Disorders Center and a consultant neurologist at Mayo Clinic. Over the past decade,

Dr. Silber has served sleep medicine in several capacities within the American Board of Sleep Medicine, including serving on the Part I Committee; joining the Board of Directors in 1996; and subsequently serving as chair of the Credentialing Committee, president-elect and president with his term ending June 30, 2003. He has served on the Search Committee for the editor of *SLEEP*, the AASM Standards of Practice task force on restless legs syndrome, the Sleep Science Award Committee of the American Academy of Neurology, and the editorial board of *Sleep Medicine* (book review editor).



DIRECTOR

J. Baldwin Smith, III, MD received a medical degree from Medical College of Virginia in Richmond. He is board-certified in General Pediatrics, Clinical Neurophysiology, Neurology with special competence in Pediatric Neurology, Computerized Tomography and Neuroimaging, and Sleep Medicine. He is medical director of Summit Sleep Disorder Center for children and adults in Winston-

Salem and Statesville, North Carolina. He is the former chairman of the AASM Health Policy Committee. He was a member of the AMA CPT Advisory Panel from 1996 to 1998 and has represented the AASM to the AMA's Relative Value Update Committee and the Practice Expense Advisory Committee since 1997.

Related Leadership Profiles



Sleep Research Society President

Emmanuel Mignot, MD, PhD is Howard Hughes Medical Institute Investigator, Professor of Psychiatry and Behavioral Sciences, and director of the Center for Narcolepsy at Stanford University School of Medicine, Stanford, California. Dr. Mignot is currently President of the Sleep Research Society and an active member of the sleep research community. He is a board

member of the National Sleep Foundation and the Institute of Medicine. His primary focus is the study of hypocretins and narcolepsy. His laboratory uses both patient-directed research and animal models (rats, mice, monkeys, and zebrafish) to examine the behavioral, cellular and molecular aspects of the hypocretin system. He has published over 100 peer-reviewed articles and has received numerous awards for his research. He is board certified in sleep disorders medicine.



Associated Professional Sleep Societies President

Ruth M. Benca, MD, PhD is professor and associate chair for research at the University of Wisconsin-Madison department of psychiatry. She earned her a doctorate in 1979 and Medical Degree in 1981 both from the University of Chicago. Dr. Benca divides her time among research, clinical, teaching and administrative activities.

Research studies in her laboratory use behavioral, neurophysiological and neuroanatomical techniques to elucidate mechanisms for sleep abnormalities in psychiatric disorders. Specific projects include identifying neural mechanisms underlying sleep-wakefulness responses to acute lighting changes, studying migratory sleeplessness and unihemispheric sleep in birds, determining the role of the amygdala in sleep regulation, and studying sleep changes associated with mood disorders. Dr. Benca works in the Comprehensive Sleep Disorders Center at the University of Wisconsin Hospital & Clinics, where she trains psychiatry residents and fellows in sleep disorders medicine. Dr. Benca recently served as President of the Sleep Research Society (SRS) and has been a member of the American Academy of Sleep Medicine's (AASM) Board of Directors, as well as Chair of the Associated Professional Sleep Societies' Program Committee. She is currently serving as President of the Associated Professional Sleep Societies, a joint venture of the AASM and the SRS.



American Board of Sleep Medicine President

Nancy Collop, MD received a medical degree in 1984 from the Pennsylvania State University in Hershey and is a Diplomate of the American Board of Internal Medicine in internal medicine, pulmonary disease and critical care and a Diplomate of the American Board of Sleep Medicine since 1997. Dr. Collop is currently associate profes-

sor of medicine in the Division of Pulmonary and Critical Care Medicine at Johns Hopkins University and director of the Johns Hopkins Hospital Sleep Laboratory. Dr. Collop holds membership with several organizations and societies, including the American Academy of Sleep Medicine, the American Thoracic Society, and is a fellow of the American College of Chest Physicians. She is the associate editor of the journal *Chest* and co-editor of MDConsult for Respiratory and Critical Care Medicine. She has served on the Board of Directors of the American Board of Sleep Medicine since 1998. She recently served as chair of the steering committee developing an updated portable monitoring evidence review and guideline and is a member of the AASM fellowship training committee.



American Sleep Medicine Foundation President

John W. Shepard, Jr., MD is medical director of the sleep disorders center at Mayo Clinic in Rochester, Minnesota. He passed the boards from the American Board of Internal Medicine in 1974; from the Subspecialty Board in Pulmonary Diseases in 1976; and became board-certified in sleep medicine in 1988. He earned a medical degree

from Harvard Medical School and completed training at the University of California, San Diego. Dr. Shepard was appointed to the AASM Board of Directors in 1998 and served as president in 2001-2002. He has served the American Board of Sleep Medicine in many capacities, including as chair of the Part I Examination Committee and as a member of the board's executive and finance committees. He was also chair of the American College of Chest Physicians Committee on Cardiopulmonary Sleep Disorders from 1990 to 1992, and sat on the Board of Directors of the American Thoracic Society.

**Dr. Perlis
IDS Ad**

**1/2 Page
Vertical**

COMMITTEE UPDATES

ACCREDITATION COMMITTEE

MANDATE: The mandate of the Accreditation Committee is to carry out the accreditation procedures, as approved by the Board of Directors, for full-service centers, specialty laboratories, and satellites in the United States. The committee is responsible for monitoring these procedures and making recommendations for changes in the accreditation procedures and Standards to the Board, as needed. On behalf of the AASM, the committee may grant accreditation to full-service centers, specialty laboratories, and satellites in the United States that have successfully completed the accreditation process and met the accreditation Standards.

Paul Saskin, PhD, *Chair*; William Kohler, MD, *Vice Chair*; Kenneth Casey, MD; Carolyn D'Ambrosio, MD; David Goldstein, MD; Paul Gouin, MD; John Harsh, MD; Ray Mettu, MD; Michael Stefan, MD; Virgil Wooten, MD; Cameron Harris, RPSGT - *Consultant*; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: Donna Arand, PhD

Administrative Support: John Slater
Email: jslater@aasmnet.org

The new Accreditation Committee chair is Paul Saskin, PhD, who has been previously involved with the committee as both a member and vice chair. Dr. Saskin will be leading the committee's efforts in the evaluation and development of new standards in the areas of Pediatric Care and Patient and Technician Safety. The committee will also focus on communicating and disseminating information related to accreditation to members.

BEHAVIORAL SLEEP MEDICINE COMMITTEE

MANDATE: The mandate of the Behavioral Sleep Medicine Committee is to evaluate and recommend issues of credentialing, training, and reimbursement as they relate to behavioral sleep medicine. The Committee is also responsible for the development, administration and evaluation of the annual behavioral sleep medicine certification examination.

Edward J. Stepanski, PhD, *Chair*; Daniel J. Buysse, MD; Cynthia M. Dorsey, PhD; Jack D. Edinger, PhD; Susan E. Jaffe, PhD, ARNP; Kathryn A. Lee, RN, PhD; Kenneth L. Lichstein, PhD; Jodi A. Mindell, PhD; Michael Perlis, PhD; Paul Saskin, PhD; Arthur J. Spielman, PhD; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: Michael Silber, MB, ChB

Administrative Support: Sheila Story
Email: sstory@aasmnet.org

The recently appointed Behavioral Sleep Medicine Committee is being led by Edward Stepanski, PhD. This committee was changed from a presidential task force to a standing committee within the AASM. The BSM Committee is responsible for the creation and continuation of the BSM examination. This year's examination was a tremendous success, with 33 individuals sitting for the inaugural exam. The committee will continue to develop the examination through the evaluation and expansion of the question databank. The committee will also assess how behavioral sleep medicine can best be integrated into the practice of sleep medicine.

CLINICAL PRACTICE REVIEW COMMITTEE

MANDATE: The mandate of the Clinical Practice Review Committee is to respond to issues raised by physicians, patients, and third-party payers regarding the clinical management of sleep disorders, and to issues referred to the committee by the AASM Board of Directors.

Amy Lynn Meoli, MD, *Chair*; Carol Rosen, MD, *Vice Chair*; Robert Neal Aguillard, MD; David Claman, MD; Nalaka Gooneratne, MD; Chandra Gera, MD; David Kristo, MD; Don Townsend, MD; James Wyatt, MD; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: Conrad Iber, MD

Administrative Support: Patricia Nuccio
Email: pnuccio@aasmnet.org

The Clinical Practice Review Committee, under the leadership of chair Amy Lynn Meoli, MD, has recently completed position papers titled, "Nonprescription Treatments of Snoring or Obstructive Sleep Apnea: An Evaluation of Products with Limited Scientific Evidence" and "Upper Airway Management in the Adult Patient with Obstructive Sleep Apnea in the Perioperative Period." The papers have been submitted to *SLEEP* for publication consideration. The committee continues to work on a paper addressing nonprescription treatments of insomnia. In an effort to disseminate information to the public, the committee will be drafting a patient version of the nonprescription treatment paper.

CONTINUING MEDICAL EDUCATION COMMITTEE

MANDATE: The mandate of the Continuing Medical Education Committee is to review and recommend CME credit for medical educational activities, including courses, lectures, publications, electronic, and others, ensuring that all meet the high standards required by ACCME. In addition, the committee will ensure that all ACCME requirements continue to be met, that necessary changes are recommended to the Board for adoption, and that appropriate records and documentation are on file. The committee will maintain the AASM's ACCME accreditation and develop liaison with ACCME to ensure that the AASM's education policy is in line with the necessary requirements. The committee will participate in all CME activities of the AASM through representation on the appropriate committee or task force charged with development of an educational activity.

Daniel Glaze, MD, *Chair*; Yvette Cook, MD; Steven Hull, MD; Jerrold Kram, MD; Cesar Liendo, MD; William Rodriguez, MD; S. David Scott, MD, PhD; Salim Surani, MD; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: Stephen Sheldon, DO

Administrative Support: Jennifer Markkanen
Email: jmarkkanen@aasmnet.org

Under the leadership of Daniel Glaze, MD, the Continuing Medical Education Committee continues to evaluate the results of an internet-based survey conducted earlier this year. The Committee hopes to extract and determine membership CME needs and future initiatives addressing the educational needs of Sleep Medicine Physicians and Clinicians.

FELLOWSHIP TRAINING COMMITTEE

MANDATE: The mandate of the Fellowship Training Committee is to establish, review, and update the standards of fellowship programs in sleep disorders medicine and clinical polysomnography in order to ensure proper education of trainees for practice in the field of sleep disorders. The committee will determine the quality of individual educational programs by site visits. The committee will also act as an advisory resource to institutions wishing to develop training programs in sleep disorders medicine and clinical polysomnography.

Lois Krahn, MD, *Chair*; Teri Bowman, MD; Alejandro Chediak, MD; Ronald Chervin, MD; Nancy Collop, MD; Christopher Earley, MD; Robert Farney, MD; Brian Foresman, DO; John Herman, PhD; Jayant Phadke, MD; Denise Sharon, MD, PhD; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: Barbara Phillips, MD

Administrative Staff: Sheila Story
Email: ssstory@aasmnet.org

The Fellowship Training Committee, lead by Lois Krahn, MD, continues to work with the Board of Directors and AASM-accredited fellowship training programs to share information regarding ACGME and ABMS activities being pursued by the AASM. The AASM application to ACGME has recently been approved, and the AASM is in the early stages of developing an ACGME Sleep Fellowship Training Program. The AASM has appointed Andrew Chesson Jr. MD, Michael Sateia, MD, and Stuart Quan, MD to the inaugural RRC that will be discussing the sleep medicine curriculum. The AASM currently has 38 accredited fellowship training programs throughout the United States. The committee encourages

those programs that are currently accredited as an AASM alternate track program to pursue regular track status. AASM accredited regular track programs best follow ACGME guidelines and would help facilitate the transition to ACGME accreditation.

HEALTH POLICY COMMITTEE

MANDATE: The mandate of the Health Policy Committee is twofold: (1) to represent the AASM in relations with nationwide payers and policy makers of sleep medicine services and, (2) to provide, on a regular basis, up-to-date information to the AASM Board of Directors and to the AASM membership regarding changes in insurance reimbursement issues nationwide. The committee is to develop authoritative and timely data regarding the cost/benefits of the practice of sleep disorders medicine that can be given by the AASM to insurance companies. The committee will develop procedures and methods for advising members of the AASM regarding issues of changes in the medical delivery environment.

David Franco, MD, *Chair*; Samuel Fleishman, MD, *Vice Chair*; Daniel Lewin, PhD; Mark Miller, MD; Margaret Moline, PhD; Steven Scharf, MD, PhD; Janet Tatman, PhD, PA-C; Richard Waldhorn, MD; James Wellman, MD; Kin Yuen, MD; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: J. Baldwin Smith, MD

Administrative Support: Chris Waring
Email: cwaring@aasmnet.org

The Health Policy Committee, under the direction of David Franco, MD, is evaluating concepts for the development of an analytical and methodological tool to assess the economic impact of sleep specialists on health care. The committee is assessing a pilot study that would collect information from patients and a second phase to look at patient, physician and vendor information. The Health Policy Committee also continues to refine a presentation to inform insurance companies (and possibly employers) about sleep procedures and the importance of reimbursement and insurance coverage policies relating to sleep medicine services.

INTERNATIONAL AFFAIRS COMMITTEE

MANDATE: The mandate of the International Affairs Committee is to receive and review queries from international sleep societies or individuals and to recommend actions. The committee also serves as a resource for AASM members interested in aiding international individuals or societies.

Mansoor Ahmed, MD, *Chair*; Aatif Husain, MD; John Remmers, MD; Leon Rosenthal, MD; Robert Skomro, MD; Yevgeniy Stefadu, MD, PhD; Maorong Tong, MD, PhD; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: John Shepard Jr., MD

Administrative Support: Jaime Wrabetz
Email: jwrabetz@aasmnet.org

Under the leadership of International Affairs Committee chair Mansoor Ahmed, MD, the international mini-fellowship program recognized significant growth this year and accommodated six individuals. The program was initially established two years ago and hosted two mini-fellowship programs. The participants concluded their programs at the Annual Meeting in Chicago, at which each was presented a certificate recognizing their achievement in this exciting educational opportunity. The committee appreciates the time, effort and resources contributed to this program by the

AASM, program directors, and host facilities. A more detailed summary of the program, including pictures of this year's participants, is found later in this issue of the *Bulletin*.

MEDICAL SCHOOL EDUCATION COMMITTEE

MANDATE: The mandate of the Medical School Education Committee is to propose, plan, develop and disseminate educational products concerning sleep medicine and sleep research with the purpose of meeting the educational needs of the AASM membership, other medical professionals, medical schools and the lay public. The committee will continually monitor the progress of the SAA program and make recommendations when materials require updating, or are no longer relevant to the educational objectives of the AASM. The committee will also monitor and update the SAA web page to ensure the quality of all programs and materials being offered. When appropriate, the committee will seek CME credit for the use of the materials.

Susan Harding, MD, *Chair*; Alon Avidan, MD; Brian Boehlecke, MD, MSPH; Lynn D'Andrea, MD; Rochelle Goldberg, MD, FCCP; Kior Liow, MD; Gerald Rosen, MD; Sigrid Veasey, MD; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: Michael Sateia, MD

Administrative Support: Jennifer Markkanen
Email: jmarkkanen@aasmnet.org

The Medical School Education Committee, being lead by Susan Harding, MD, continues to work with current Sleep Academic Awardees in the development and posting of medical school educational pieces. The committee encourages members to review the resources at <http://www.aasmnet.org/MEDSleepprogram.htm>.

MEMBERSHIP SECTIONS COMMITTEE

MANDATE: The mandate for the Membership Section Committee is to evaluate the needs of the special sections and recommend to the Board of Directors topics of education, research, practice parameters and other potential areas of collaboration as they relate to the special sections and AASM membership. The committee is responsible for relaying timely communications to the membership in regards to section related sleep issues via the AASM Web site, *Bulletin*, and other available resources.

Bradley Vaughn, MD, *Chair*; Dennis Bailey, DDS; Richard B. Berry, MD; David Bruce, DDS, MD, FACS, CPE; Christopher Earley, MD, PhD; Lois Krahn, MD; Jerrold Kram, MD; Judith Owens, MD, MPH; Michael Perlis, MD; Isabelle Raymond, MSC; Raymond Rosen, PhD; Michael Russo, MD; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: Conrad Iber, MD

Administrative Support: Jaime Wrabetz
Email: jwrabetz@aasmnet.org

The newly-appointed Membership Sections Committee, led by Bradley V. Vaughn, MD, is charged with unifying the membership sections and acting as the pipeline "voice" to the Board of Directors. Made up of the chairs of each section, the committee is responsible for presenting the Board with sections' proposals for APSS events, practice parameter paper topics and Foundation grant ideas and, in turn, communicating Board directives to the greater AASM membership through membership sections. The committee will focus its short term efforts on promoting section membership and on improving the structure and purpose of membership sec-

tions.

PUBLICATIONS COMMITTEE

MANDATE: The mandate of the Publications Committee is to develop, or consult on the development of educational materials including slide sets, videotapes, pamphlets, electronic materials and multimedia products. The audience for these materials may include sleep medicine physicians, clinicians, other physicians, and health care providers, patients, or the public.

Lee Brown, MD, *Chair*; Eric Bell, PsyD; Tom Bond, PsyD; Kenneth Lichstein, PhD; James Pagel, MD; Kathy Richards, PhD, RN; Steve Weber, PhD; Adrian Williams, MB, FRCP; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: Lawrence Epstein, MD

Administrative Support: Jaime Wrabetz
Email: jwrabetz@aasmnet.org

Under the direction of chair Lee Brown, MD, the Publications Committee is reviewing the content of AASM-produced educational patient brochures and slides sets, as well as developing a new brochure regarding the causes and consequences of sleepiness, which is expected to be available later this year. The committee is also working with the Health Policy Committee on the production of an insurance presentation regarding sleep procedures and the importance of reimbursement and insurance coverage policies relating to sleep medicine services. The committee works to continually assess the AASM's communication materials and reviews multiple product areas to ensure complete and up-to-date resources.

RESEARCH COMMITTEE

MANDATE: The mandate of the Research Committee is to facilitate and promote basic and clinical research in the sleep field.

Mark Sanders, MD, *Chair*; Eric Nofzinger, MD, *Vice Chair*; M. Safwan Badr, MD; Susnita Chowdhuri, MD; Ian Colrain, MD; Sean Drummond, PhD; Jason Mateika, MD; Louise O'Brien, MD; Steven Shea, PhD; Edward Weaver, MD; Irina Zhdanova, MD; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: Stuart Quan, MD

Administrative Support: Chris Waring
Email: cwaring@aasmnet.org

Under the leadership of newly appointed chair Mark Sanders, MD, the Research Committee will focus its efforts on the development of a mentorship program and the dissemination of research opportunities and developments within the field of sleep medicine. The Committee conducted a successful grant writing course at this year's APSS Annual Meeting and will be evaluating the course feedback to enhance next year's efforts. The Committee will also be involved in the evaluation of grants submitted to the American Sleep Medicine Foundation in the upcoming grant cycle.

SLEEP MEDICINE COURSES COMMITTEE

MANDATE: The mandate of the Sleep Medicine Courses Committee is to propose, develop, and conduct courses for physicians and other clinicians seeking certification from the American Board of Sleep Medicine, or re-certification, or continuing education in sleep medicine occurring outside of the structure of the APSS Annual Meeting. The committee will work in conjunction with the CME committee to obtain CME credits for these activities. It will also work with the Medical Education committee to develop educational proposals appropriate for the setting of a course in sleep medicine.

Mary Esther, MD, *Chair*; Eugene Fletcher, MD, *Vice Chair*; Richard Berry, MD; Christopher Drake, MD; Daniel Glaze, MD; Michael Littner, MD; Vernon Pegram, PhD; Tucker Woodson, MD; Phyllis Zee, PhD; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: W. Vaughn McCall, MD

Administrative Support: Jennifer Markkanen
Email: jmarkkanen@aasmnet.org

The Sleep Medicine Courses Committee, under the direction of Mary Esther, MD, is preparing to conduct the 2003 National Sleep Medicine Course (NSMC), which is scheduled to take place August 9-13 in Oak Brook, Illinois. A registration form and course information is available for download on the AASM web site at <http://www.aasmnet.org/nsmc.htm>. The committee is also focusing efforts on establishing the curriculum and faculty for next years' Advanced Sleep Medicine Course.

STANDARDS OF PRACTICE COMMITTEE

MANDATE: The mandate of the Standards of Practice Committee is to develop and update scientifically sound and appropriate guidelines for the practice of sleep medicine based on literature review, expert opinion, and consensus. The purpose of these practice parameters is to provide guidance and aid to physicians in the diagnosis and treatment of sleep disorders. Written reports recommending indications and standards for selected diagnostic studies or therapeutic procedures will be submitted to the AASM Board of Directors for endorsement. The committee can choose to delegate the work of developing suggested guidelines and consensus statements to specific task forces.

Clete Kushida, MD, PhD, *Chair*; Milton Kramer, MD; Max Hirschowitz, PhD; Cathy Alessi, MD; Dennis Bailey, DDS; Jack Coleman, MD; Leah Friedman, MA, PhD; Sheldon Kapen, MD; Teofilo Lee-Chiong, MD; Daniel Loube, MD; Timothy Morgenthaler, MD; Judith Owens, MD; Jeffrey Pancer, DDS; Conrad Iber, MD, *President, Ex officio*; Jerome A. Barrett, *Executive Director, Ex officio*; Board Liaison: Andrew Chesson, Jr., MD

Administrative Support: Patricia Nuccio
Email: pnuccio@aasmnet.org

The Standards of Practice Committee continues to establish new practice parameters and review existing parameters under the direction of newly-appointed committee chair Clete Kushida, MD, PhD. The Standards of Practice Committee has recently completed the updates for the practice parameter and review papers titled, "Practice Parameter for the Role of Actigraphy in the Study of Sleep and Circadian Rhythms: An Update for 2002" and "The Role of Actigraphy in the Study of Sleep and Circadian Rhythms." These papers were published in the journal *SLEEP* and have been posted on the

AASM Web site at <http://www.aasmnet.org/practiceparameters.htm>. The committee expects to complete several parameter papers within the next year and will assess the possibility of utilizing electronic means for improving the evidence-base process that is used in the development of these papers.

member benefits

Communicating With Membership

The American Academy of Sleep Medicine continues to invest time and resources into enhancing its communication with members. These developments have taken on several forms, including the addition of Scholar One, an online paper submission and tracking software system for the journal *SLEEP*; a recent Web site redesign intended to produce a more easily navigable Web site; and continuous development of the AASM quarterly *Bulletin* and weekly list serve e-mail announcements. These efforts are an attempt to keep members abreast of AASM activities and to improve the process by which members interact with the national office.

The organization also continues to develop the membership sections of the AASM to provide an additional means of communication between members and the Academy Board and staff. Each section has its annual meeting agenda and minutes posted on the

AASM Web site (www.aasmnet.org/sections.htm) to allow members who were not able to attend the opportunity to stay current with the section's actions. Each section is also creating a group-specific email list serve as a tool for communicating with members who share an area of specialty or interest. These efforts will be an ongoing effort to enhance the continuous communications within sections and to the Academy's Board and staff.

Members are strongly encouraged to provide the national office with an active e-mail address as this is the timeliest method for the American Academy of Sleep Medicine to communicate with its membership. To be added to a specific section's email list serve, please contact Membership Coordinator Jaime Wrabetz at jwrabetz@aasmnet.org with current contact information.

Membership Sections Update

Annual meetings for each of the sections of the American Academy of Sleep Medicine were held during the APSS Annual Meeting in Chicago. Charged with renewed support by the AASM Board of Directors, membership sections are now unified by their representation on the Membership Sections Committee. The committee is staffed by the chairs of each section and provide the sections - in essence the general membership - a direct voice to the Board to suggest APSS events, practice parameter paper topics, ASMF grant proposal topics, and other membership needs as they arise. Discussion highlights from this year's meetings include:

- The inaugural American Academy of Sleep Medicine—Behavioral Sleep Medicine Examination was administered on Tuesday, June 4 to 33 candidates. The Behavioral Sleep Medicine Committee has developed a slide set guideline to summarize each chapter of the Principles and Practice of Sleep Medicine, for use as a study aid for BSM lectures.
- A wide variety of suggested practice parameter paper topics and APSS event topic from the Dreams Section relating to nightmares.
- The current standards of AASM accreditation and how they affect freestanding sleep centers that are actively pursuing accreditation.
- The Medical Education in Sleep Section feels that the AASM's new S.A.F.E.R. CD-ROM is an important tool for educating staff and students of resident training programs about the safety and health issues surrounding excessive sleepiness.
- Proposed APSS meeting events relating specifically to restless leg movement disorders.
- The AAN Sleep Section and the AASM's Neurology Section have been working together to promote sleep education in neurology training.
- The Oral Appliance Therapy Section was presented with "Efficacy and Co-Morbidity of Oral Appliances in the Treatment of

Obstructive Sleep Apnea-Hypopnea: A Systematic Review" by Dr. Aaroud Hoekema from the University Hospital Groningen in the Netherlands.

- Sleep medicine pediatricians are actively kept abreast of important industry information via a variety of communication platforms, including PedSleep and SleepL list serve newsletters.
- The Psychiatry Section plans to address the lack of psychiatric job opportunities in the sleep medicine field and work with the APA and other educational venues to promote the specialty.
- The Sleep Deprivation Section supports the Award for Research in Alertness and Cognition presented to Radhika Basheer, PhD by Cephalon during the opening ceremonies of the APSS Annual Meeting.
- The Sleep Disordered Breathing Section suggested future practice parameter papers and APSS events, including "controversies in sleep disordered breathing," "unattended monitoring" and "oximetry," among others.
- The Surgery of the Upper Airway Section is actively working with member surgeons and related organizations to survey the needs of surgeons in the field of sleep medicine and develop applicable parameter papers and educational events in the future.
- Incorporating industry participation in section activities, specifically in developing an industry-granted reward program to section members for active participation in the AASM and/or the APSS Annual Meeting.

Minutes and selected other materials from each of the meetings are available on the AASM Web site at www.aasmnet.org/sections.htm. AASM members interested in joining a section should contact Jaime Wrabetz at (708) 492-0930 or email jwrabetz@aasmnet.org.

Call For Interest: Nursing/Physician Assistant Membership Section

Dues Increase

Membership dues in the American Academy of Sleep Medicine will be increased beginning in the 2004 calendar year. This is the first time that membership dues have been increased since 1984. The increase will allow the AASM to better serve its members by hiring more staff to meet its needs, to develop additional member benefits and utilize its infrastructure (committees, sections, Web site, etc.) to further enhance the reach and scope of the AASM.

Current AASM members will be invoiced for the upcoming calendar year in November; members can anticipate the following fee structure:

Regular	\$200
Fellow	\$200
Emeritus	\$100
Student (with the journal SLEEP)	\$115
Student (without the journal SLEEP)	\$40
Affiliate-Nurse/Technician	\$200
Affiliate-Industry	\$400

Members with questions regarding the increased membership fees should contact the Membership Department at (708) 492-0930.

As a benefit to members, the American Academy of Sleep Medicine encourages participation in membership sections. Sections are established to serve the purpose(s) of:

- Sharing specific interests and ideas;
- Providing continuing education within the Academy;
- Encouraging research and education opportunities;
- Suggesting practice parameter paper topics for treatment methodologies; and
- Identifying and communicating to the Board of Directors clinical and research areas of sleep medicine not otherwise completely served by the existing structure of the Academy.

A proposal for the formation of a section for nurse practitioners and physician assistants has been presented. According to AASM bylaws, the formation of a section requires at least twenty (20) members in good standing who are not members of another section and who are ideally from a diverse geographic region to be identified as charter members of the section. AASM members interested in acting as charter members of a nursing/physician assistant section should contact Jaime Wrabetz, Membership Coordinator, at the AASM National Office at (708) 492-0930 or email at jwrabetz@aasmnet.org.

2003 AASM Young Investigator Awards

The American Academy of Sleep Medicine's Young Investigator Award is presented each year at the APSS Annual Meeting to up to five young investigators who exhibit outstanding scientific abilities as demonstrated in the year's abstract submissions. Only persons under 40 years of age are eligible to participate.

This year, those abstracts submitted by eligible candidates were reviewed by representatives of the Research Committee, who then selected what they deemed as the ten most outstanding submittals. A second round of reviews took place and the committee selected the winner of the award and four runners up. A first place winner and four honorable mentions are selected from the submitted work. The first place winner receives \$1000, a year's membership in the AASM, and a seat on the Research Committee for the following year's term. Each of the four recipients of honorable mention receives \$500 and a certificate acknowledging their achievement.

The full text of abstracts written by the 2003 Young Investigators are available in the abstract supplement of the journal *SLEEP*.

First Place: Sanjay R. Patel, MD, "A Prospective Study of Sleep Duration and Mortality Risk to Women." Page A184.

Honorable Mention: Valerie M. Crabtree, PhD, "Quality of Life and Depressive Symptoms Among Children with Suspected Sleep-Disordered Breathing." Page. A124.

Honorable Mention: Monique K. LeBourgeois, MS, "The Relationship between Sleep Hygiene and Sleep Quality in Italian and American Adolescents." Page A138.

Honorable Mention: Girardin Jean-Louis, PhD, "Relationships of Ambient Illumination to Depressed Mood: Contribution of Ophthalmic Diseases." Page A156.

Honorable Mention: Ye-Ming J. Sun, MD, PhD, "Opioids Protect Against Substantia Nigra Cell Degeneration Under Conditions of Iron Deprivation: A Possible Model for Restless Leg Syndrome." Page A343.

The AASM congratulates the winners of the 2003 Young Investigator Awards and encourages all investigators to submit their work for consideration in 2004.

Ambulatory Monitoring

Discovery
REM 50th Anniversary



APSS JUNE 3-8 2003
17TH ANNUAL MEETING
CHICAGO

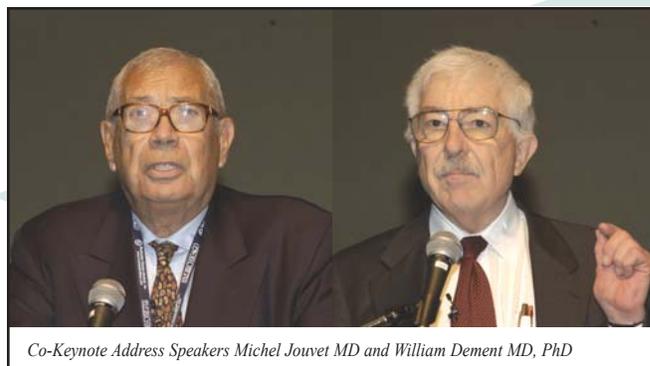
APSS 17th Annual Meeting Draws Record Attendance

The 17th Annual Meeting of the Associated Professional Sleep Societies was held June 3-8 in Chicago, Illinois. The 2003 meeting marked the 50th anniversary of the REM sleep discovery at the University of Chicago. The Annual Meeting and this anniversary celebration were further enhanced by the World Federation of Sleep Research Societies meeting jointly with the APSS in Chicago. The Association of Polysomnographic Technologists and the Academy of Dental Sleep Medicine also convened in Chicago for their respective annual meetings. Attendance reached a total of 4,600 participants, the largest gathering of sleep clinicians and sleep scientists at the Annual Meeting to date! Over 1,100 abstracts were presented, in addition to 15 postgraduate courses, 30 symposia sessions, 47 meet the professor offerings, and 7 discussion groups, all of which highlighted progress made in the fields of sleep research and sleep disorders medicine from around the world since the discovery of REM sleep.

The American Academy of Sleep Medicine and the Sleep Research Society hosted the first annual fundraising dinner the night prior to the Plenary Session. The participants enjoyed an evening of dinner and dancing and helped raise money in support of the advancement of knowledge in the field of sleep.



An audience of over 2,500 attends the Plenary Session



Co-Keynote Address Speakers Michel Jouvet MD and William Dement MD, PhD

The Plenary Session began with a welcome by APSS Program Committee Chair Ronald S. Szymusiak, PhD, followed by awards presentations by the AASM and the SRS Presidents. William C. Dement, MD, PhD, who presented "A La Recherche du Temps Perdu," and Michel Jouvet, MD, who presented "Some Paradoxes of Paradoxical Sleep," delivered an enlightening and educational co-keynote address to a copious crowd of over 2,500.

During the Annual Meeting, both societies held general membership meetings, which were open to all members of the AASM or SRS, as well as luncheons for the past presidents. The SRS hosted a jubilee celebrating the profession's founders and significant early contributors and presented a plaque commemorating the discovery

What's New for 2004?

The APSS 18th Annual Meeting is June 5-10, 2004 in historic Philadelphia, Pennsylvania at the Philadelphia Convention Center. The Call for Scientific Sessions and Abstracts will be mailed later this summer and will also be available for viewing on the meeting website. Please mark important deadlines on your calendar for abstract, postgraduate course and scientific session submissions in December 2003! All dates will be highlighted in the Call.

2004



SRS Past President Ruth Benca and AASM Past President Andrew Chesson present Tom Roth with a Service Award for his contributions to the Journal SLEEP as Editor-in-Chief (1998-2002).

of REM sleep, which is permanently on display at the University of Chicago.

The exhibit hall, boasting an unprecedented 115 vendors, provided access to sleep-related equipment suppliers, pharmaceutical companies, publishers, etc. Several of these vendors also contributed to sponsoring novelty items, such as tote bags, lanyards, coffee breaks, abstracts on CD and many other items, to enhance the attendees' meeting experience. In addition to the give-away items, industry sponsored six satellite symposia events which took place in the evenings at various venues throughout Chicago. The APSS is grateful for this support of both the meeting and the sleep disorders medicine field.



Attendees gather at the entrance to the Exhibit Hall on opening day.

Ronald S. Szymusiak, PhD will continue to serve as chair of the Program Committee for next year's meeting in Philadelphia. The Program Committee welcomes and encourages your feedback on the Annual Meeting. Contact the national office at (708) 492-0930 if you have questions or would like to offer suggestions.

The press room at the APSS 17th Annual Meeting in Chicago was a tremendous success, with more than 50 members of the media attending symposia, lectures, and discussions to report the most current research, advances, and topics in sleep medicine. This year was the first time the Annual Meeting experienced this degree of coverage and several substantial articles will be published in the upcoming months.

Four Chicago television stations aired segments on the use of antidepressants as treatment of sleep apnea and one station aired a segment on the sleep patterns of children enrolled in daycare. National press coverage of the meeting includes an article about the 50th anniversary of REM sleep in *Smithsonian* magazine by award-winning journalist Chip Brown; a piece about the business of sleep in *Wired*; a series of articles about women and sleep in *Self*; a overarching look at sleep in *New Scientist*; and articles in *JAMA*. *American Medical News*, the American Medical Association's weekly newspaper, published an article in the June 23, 2003 issue about pediatric sleep disorders. Two crews from the Canadian Broadcasting Company attended the meeting, a television crew filming a documentary on the history of sleep and a radio producer who will air a documentary on sleep and dreams, and will broadcast these pieces next year.

This coverage will undoubtedly increase public awareness of disorders of sleep and wakefulness and will further establish the APSS Annual Meeting as the preeminent source of timely and cutting edge research. Questions about the press room or general public relation efforts should be addressed to Kathleen McCann, Public Relations Coordinator, at (708) 492-0930 or kmccann@aasmnet.org.

The inaugural *Discovering the Secrets of Sleep* research fundraising dinner was a great success! Andrew Chesson, MD and Ruth Benca, MD, PhD, co-hosts for the evening, thank the patrons, sponsors, and individuals who attended the event for supporting research in sleep medicine. Over 300 people enjoyed the festivities, which included live music and centerpiece giveaways for each table.

As part of the evening's program, John Shepard, MD, President of the American Sleep Medicine Foundation, announced the 2003 grant award winners.

The American Academy of Sleep Medicine will donate its portion of the proceeds to the American Sleep Medicine Foundation. The Foundation has awarded over \$1 million in research grants since its inception in 1998. The Sleep Research Society will contribute its funds to trainee support activities, the junior faculty development program, and promotion of sleep research.



MINI FELLOWSHIP PROGRAM FOR INTERNATIONAL SCHOLARS INTERNATIONAL AFFAIRS COMMITTEE

The 2nd annual Mini Fellowship Program for International Scholars, hosted by the AASM's International Affairs Committee, met with success by both the participating physicians and their host site mentors. The visiting physicians spent three weeks at their respective host sites learning practical hands-on techniques of sleep medicine. Each was then invited to attend the APSS 17th Annual Meeting in Chicago on June 3-8, attending a half-day postgraduate course of their choosing and open attendance to the symposia and lectures presented.

Armin Delgado MD of Lima, Peru was at the Cleveland Clinic Sleep Disorders Center with Dr. Nancy Folvary.

Wayne State University's Dr. M. Safwan Badr hosted **Alejandro Jimenez-Genchi MD** of Tlalpan, Mexico. Dr. Genchi enthusiastically says that he will share his experiences with colleagues and encourage them to apply for consideration in future AASM programs.

Nurudeen A. Lawal MD of Benin City, Nigeria spent his fellowship program at the Sleep Medicine Associates of Texas under the guidance of Dr. Leon Rosenthal. Dr. Lawal expressed his enthusiasm to return to his country of 120 million people to start Nigeria's first-ever sleep center with the knowledge he has gained in the program.

Guangdong, China's **Jiyang Pan MD** was assisted by Dr. Allan I. Pack at the University of Pennsylvania Sleep Disorders Center.

Yin Chu Catharine Tse MD of Hong Kong spent her fellowship at the Sleep Disorders Center at the Mayo Clinic in Rochester, Minnesota with Dr. John Shepard.

Osama El Kholy MD of Alexandria, Egypt will spend his fellowship at the Stanford Sleep Disorders Center under the tutelage of Dr. Rafael Pelayo in August 2003. Dr. El Kholy is looking forward to having the opportunity to spend his fellowship program at Stanford's esteemed sleep center.

Plans for the 2004 program are currently underway. The AASM encourages members to share program information with international colleagues and encourage their submission of application for consideration. Program information will be posted on the AASM Web site at www.aasmnet.org/iacom.htm and members will be notified of its posting via the weekly e-mail list serve. AASM-accredited sleep centers interested in volunteering as a host site for next year's program should contact Jaime Wrabetz at the AASM national office at (708) 492-0930 or e-mail jwrabetz@aasmnet.org.

AMERICAN SLEEP MEDICINE FOUNDATION

2003 Young Investigator Awards

The American Sleep Medicine Foundation congratulates the recipients of the 2003 Young Investigator Awards. Each recipient will receive a two-year grant for up to \$60,000 in funding. The Foundation has now awarded over \$1 million in research grants supporting studies in basic science and clinical research and spanning virtually all areas of sleep medicine.

2003 ASMF Young Investigator Award Recipients

Dean Beebe, PhD

Neurobehavioral Effect of OSA in Obese Teens and Preteens
Cincinnati Children's Hospital Medical Center

Helen Burgess, PhD

The Effect of a History of Short Nights on the Human Circadian System's Phase Shifting Response to Light
Rush-Presbyterian-St. Luke's Medical Center

Ruben Guzman-Marin, MD, PhD

Role of Sleep in Regulation of Adult Neurogenesis
Sepulveda Research Corporation

Jonathan P. Wisor, PhD

Day-Active Mice: Genetics of Circadian Rhythm Entrainment
Stanford University



2003 ASMF Young Investigator Award Recipients Helen Burgess, PhD; Ruben Guzman-Marin, MD, PhD; Dean Beebe, PhD; and Jonathon Wisor, PhD.

MEDICARE REFORM

In June, the House and Senate approved separate bills adding a \$400 billion prescription drug benefit to Medicare and making other changes to the program before adjourning for their July 4 recess. The Senate passed its version of the Medicare Prescription Drug and Modernization Act of 2003 June 27 by a bipartisan 76-21 vote after dispensing with hundreds of amendments. GOP leaders in the House faced dissension in their own ranks from conservative Republicans who opposed creation of a new costly entitlement program, but they managed to eke out a razor-thin 216-215 vote victory. Most House Democrats opposed the measure over fears that it would lead to the privatization of the Medicare program. They also raised concerns over the gaps in coverage and argued that the new benefit is too limited.

When Congress returns from their recess in July a conference committee will begin to reconcile the House and Senate passed bills (H.R. 1, S.1), a process that could take weeks. In his weekly radio address on June 28, President Bush urged lawmakers to move quickly so he could sign the legislation into law.

The two bills share many similarities, but also share key differences that could mean a protracted conference. Beginning in 2006, both bills would give beneficiaries a drug benefit for those enrolled in the traditional fee-for-service plan as well as those who opt for private health plans. Seniors

would pay an estimated \$35 average monthly premium for the new coverage, a \$250 deductible under the House bill, or a \$275 deductible under the Senate version. H.R. 1 would cover 80% of beneficiaries' drug costs from \$251 to \$2,000, after which there would be a gap in coverage, known on Capitol Hill as the "doughnut hole." After \$3,500 in out-of-pocket costs, seniors will receive 100 percent coverage under the bill's catastrophic plan. Unlike the Senate bill, H.R. 1 contains a controversial provision that would require wealthier beneficiaries to pay more once catastrophic coverage began. Both bills would also provide seniors with interim assistance in the form of a drug discount card starting January 1. The card could provide discounts of between 10% to 25%.

Under the Senate bill, Medicare would pay 50% of drug costs from \$276 to \$4,500 per year. The beneficiary would then pay all drug costs up to about \$5,800 a year. Medicare would pay 90% of drug costs exceeding \$5,800. Both bills would provide low-income seniors with additional assistance with their premiums and cost sharing.

The House and Senate bills also aim for increased participation by private plans in Medicare. Under S.1, seniors have the choice of staying in the traditional Medicare program and enrolling in a stand-alone drug plan or selecting a new coverage option called Medicare Advantage, which



would offer new benefits and services through preferred provider organizations. The House bill also offers beneficiaries other coverage options but in a marked departure from S.1 establishes direct price competition between traditional Medicare and private health plans beginning in 2010. In addition, the House bill contains a measure expanding medical savings accounts to all U.S. residents.

The House-passed Medicare bill provides for updates of at least 1.5% in 2004 and 2005 for physicians and other providers reimbursed under the physician fee schedule. The medical community supported this provision, lobbying vigorously in pursuit of a reprieve from projected cuts of -4.2% in 2004. This temporary reprieve from further reductions provides time for Congress and the medical community to work together to improve the underlying formula that determines how the updates are calculated. The House bill would also require that a ten-year rolling average of changes in per capita GDP be used to calculate the sustainable growth rate (SGR), beginning in calendar year 2006. Finally, the bill also calls for a GAO study on Medicare beneficiary access to physician services.

The Senate bill does not contain provisions to avert the projected cuts. However, lawmakers approved a "Sense of the Senate" resolution by voice vote that urges Congress to fix the problems with the sustainable growth rate formula (SGR). Offered by Senators Orrin Hatch (R-UT) and Jon Kyl (R-AZ), it states: "It is the Sense of the Senate that Medicare beneficiary access to quality care may be compromised if Congress does not take action to prevent cuts next year and the following year that result from the SGR formula." The Senate legislation also includes provisions to improve Medicare payments to physicians in rural areas.

The House-and Senate-passed bills contain numerous other changes affecting providers that will need to be reconciled when House and Senate conferees meet. Consistent with a recommendation made by MedPAC, H.R. 1 sets the hospital inpatient payment update at marketbasket minus 0.4 percentage points for fiscal year 2004, 2005, and 2006. The Senate bill contains no reduction in the hospital update. Similarly, the House bill imposes home health copayments on beneficiaries not included in the legislation approved by the Senate. In other action:

- The House rejected the payment reductions for ambulatory surgery centers recommended by MedPAC and instead set the update for the next five years at CPI minus two percentage points. S.1 has no payment cuts for ASCs.
- Under the House bill, the Secretary of HHS would implement nationwide competitive bidding for durable medical equipment. The Senate bill establishes a seven-year fee schedule freeze for DME, supplies, and some orthotics.
- Both bills reform pricing for drugs administered by physicians.
- S.1 outlaws physician financial participation in specialty hospitals to which they refer patients. While existing facilities would be exempt from the prohibition, this "grandfather" clause will provide little real protection for physician owners. H.R.1 calls on MedPAC to conduct a study of specialty hospital issues.

Appropriations

House and Senate appropriations panels approved fiscal year 2004 spending bills before adjourning for the July 4 recess. In a party-line vote, the House Appropriations Committee June 25 voted 33-23 to approve the FY 2004 spending bill for HHS. The Senate

Appropriations Committee passed its version of the bill 25-4.

Under the Senate bill, the National Institutes of Health would receive \$27.9 billion in FY 2004, an increase of \$1 billion over the FY 2003 appropriation and \$318.6 million over the administration's request. NIH is slated to receive \$27.6 billion in the House measure. The Centers for Disease Control and Prevention would receive \$4.55 billion in the House bill and \$4.4 billion in the Senate. Both panels recommended level funding for AHRQ at \$303 million.

The House and Senate are expected to take up their respective bills on the House and Senate floors when Congress returns from its July recess.

Medical Liability Reform

Senator John Ensign (R-NV) introduced legislation June 26 backed by Senate leaders that would cap non-economic damages at \$250,000. The House passed a similar measure (H.R. 5) in March by a 229-196 vote. Before Congress adjourned, Majority Leader Bill Frist (R-TN) announced the Senate would consider medical liability legislation the week of July 7.

"This issue has been debated at length by doctors, lawyers, and insurance companies," Ensign said in a statement. "This bill puts the interests of patients ahead of all others by bringing stability to the system and ensuring patients' access to doctors."

The provisions contained in the Patients First Act of 2003 include:

- Ensuring patients receive 100 percent compensation for their economic losses, including medical expenses, rehabilitation costs, lost wages and more, if harmed by a physician's negligence;
- Maximizing the amount of money juries award for patients;
- Implementing expert-witness requirements; and
- Enabling patients to receive up to \$250,000 in additional, non-economic damages, while also allowing states the flexibility to establish different caps.

Cosponsors of the Patients First Act of 2003 include Senators Frist (R-TN), McConnell (R-KY), Kyl (R-AZ), Bunning (R-KY), Enzi (R-WY), Thomas (R-ID), Voinovich (R-OH), Hagel (R-NE), Cornyn (R-TX), and Inhofe (R-OK).

HIPAA Electronic Claims Deadline Approaching

The Transactions and Code Sets (TCS) standard of HIPAA requires physicians to use a new claim form to submit electronic claims by October 16, 2003. Physicians are required to submit claims using the familiar ICD and CPT code sets. The regulation implementing these requirements was completed this past February, giving physicians and vendors little time to prepare their systems for the new forms. Most will likely not be ready in time to meet the deadline. There is significant concern that claims will be returned to providers and not paid if the new form is not completed properly.

The AASM has joined physician and hospital groups in urging the Secretary of Health and Human Services to take immediate steps to put in place a contingency plan that will avoid disruptions in claims processing and payment. The AASM will keep you apprised of the outcome of this effort.

For more information about HIPAA visit <http://www.cms.hhs.gov/hipaa/hipaa2>.

Newsbriefs

WASHINGTON OVERVIEW

On May 28, President Bush signed into law a 10-year, \$350 billion tax package that contains \$20 billion in emergency funding for cash-strapped states. H.R. 2 provides a temporary \$10 billion increase in federal matching funds for state Medicaid programs. The other \$10 billion would be evenly divided over two years for states to use for health care, social services, public safety, education, job training, transportation and infrastructure, law enforcement or other "essential government" services. The House approved the measure 231-200; the Senate passed it by 51-50, with Vice President Cheney casting the tie-breaking vote.

Removed from the final version of the tax-cut legislation were provisions approved by the Senate that were intended to boost Medicare payments to rural providers, including physicians, hospitals, and home health agencies. The amendment, authored by Sen. Charles Grassley (R-IA), sought to make Medicare bonus payments in rural health professional shortage areas (HPSAs) automatic and set a floor for work, practice expense and medical liability geographic indices for physicians at 1.00, effective January 1, 2004. This would eliminate many of the state-by-state differences in physician payments.

Under the amendment, an estimated \$25 billion in new spending would have been offset by reducing payments for Medicare-covered outpatient drugs; freezing payments for durable medical equipment, prosthetics and orthotics; and requiring beneficiaries to pay deductibles and copays for clinical laboratory services. The provisions were dropped following objections from House Ways and Means Chairman Bill Thomas (R-CA) and the Bush Administration over their inclusion in a tax bill. The President has pledged to support them as part of Medicare reform legislation.

MEDICARE REFORM

With the tax bill out of the way, the key health committees are drafting Medicare reform proposals, with the goal of passing a bill before the July 4 recess. The Senate Finance Committee may mark up a bill beginning June 9, with floor debate occurring the last two weeks of June. Action by the House Ways and Means and the Energy and Commerce Committees is expected in June, as well.

In a speech on the Senate floor June 2, Majority Leader Bill Frist (R-TN) expressed his commitment to a bipartisan Medicare plan. The "balanced proposal" being developed by the Finance Committee, he said, draws on elements of the so-called "tripartisan" plan from the last Congress, "a plan from several years ago that John Breaux and I worked on, and a House-passed plan from last Congress" as well as the framework put forth by President Bush. Minority Leader Tom Daschle (D-SD) said he did not see any reason why the Senate couldn't finish the legislation by the end of this month. However, he emphasized the need for a broad consensus rather than a "51-vote solution."

MEDICARE - PHYSICIAN FEE SCHEDULE

Physician Groups Urge Congress to Fix 2004 Update

Groups representing physicians and other providers paid under the physician fee schedule are intensifying their efforts to fight cuts in the FY 2004 update, as lawmakers begin work on Medicare reform legislation. In a June 3 letter to Congress initiated by the AMA, organizations (including the AASM) called on lawmakers to address Medicare's physician/practitioner update in the broader Medicare package enacted by

Congress this year. CMS projects that the Medicare physician update could be reduced by as much as 4.2%. Pointing out that another cut in 2004 would be the fifth since 1991, the letter warns that further reductions will threaten physicians' ability to continue providing high quality care to elderly and disabled Americans. Action to stop the cuts is warranted, the groups argue, because:

- The sustainable growth rate cuts payments if services to Medicare beneficiaries grow faster than the gross domestic product even though patients' needs do not shrink when the economy slows.
- The formula penalizes physicians and other practitioners for volume increases that they cannot control and that the government actively promotes through new coverage decisions, quality improvement activities and other initiatives that, while beneficial to patients, are not reflected in the SGR.
- From 1991-2003, payment rates for physicians and health professionals fell 14% behind practice cost inflation as measured by Medicare's own conservative estimates.
- Congressional action taken earlier this year restored money that was inadvertently removed from the SGR due to inadequate projections in 1998 and 1999, but it did not address the underlying flaws in the SGR.
- Many surveys indicate that physicians increasingly are limiting how many Medicare patients they see and that more will be forced to do so if payments are cut again.

Energy and Commerce Leaders Urge CMS to Take Drugs out of SGR

Reps. Billy Tauzin (R-LA), Energy and Commerce Committee Chair, and Michael Bilirakis (R-FL), who heads the panel's Health Subcommittee, called on CMS Administrator Tom Scully to "remove Medicare-covered drugs from the sustainable growth rate (SGR) formula" in a June 3 letter. The pair said that additional cuts in the fee schedule "pose a threat to Medicare beneficiaries' continued access to high quality care and may require action by both the Administration and Congress." Taking prescription drugs out of the formula, Tauzin and Bilirakis wrote, "is justified from both a policy and a legal perspective and would go a long way towards improving Medicare beneficiaries' access to physician services."

The letter points out that there is no reference to drugs in the statutory definition of "physicians' services" pertaining to the calculation of the SGR. It also cites the significant jump in Medicare drug spending--\$1.8 billion to \$6.2 billion between the 1996 SGR baseline and 2002, a 242% increase for each Medicare beneficiary. "As a result of this unprecedented growth in expenditures," Tauzin and Bilirakis wrote, "we believe that the underlying formula no longer accurately reflects true physician service costs."

Medical Liability

Senator Dick Durbin (D-IL) May 13 proposed legislation (S. 1055) that would allow physicians and hospitals to claim tax credits for a percentage of the malpractice premiums they pay. Under the bill, doctors who specialize in areas such as obstetrics, surgery, emergency medicine, and anesthesiology would be eligible for a tax credit equivalent to 20 percent of their total malpractice premium. Other physicians would be eligible

for a 10 percent tax credit.

In addition, Durbin's proposal would make for-profit hospitals eligible for tax credits equivalent to 15 percent of their total malpractice premiums and provide relief to non-profit hospitals through a grant program to be established in the Health Resources and Services Administration (HRSA) within the U.S. Department of Health and Human Services.

"We all agree that there is a crisis in America with doctors being severely financially impacted - even driven out of practice altogether - when their medical malpractice insurance becomes unaffordable," Durbin said. "While this financial strain is crippling individual doctors and threatening their ability to provide patients with comprehensive care, the root causes of this crisis are both numerous and complex, and Congress is right to be thorough in its debate and analysis of the issues at hand. At the same time, there are immediate steps we can take to bring relief to these health providers."

GENETIC NONDISCRIMINATION

HELP Committee Approves Legislation

By voice vote, the Senate Health, Education, Labor and Pensions Committee May 21 passed bipartisan legislation that would prohibit employers and health insurers from discriminating on the basis of an individual's genetic makeup. S. 1053 would bar employers and insurers from using genetic information in underwriting and from disclosing it. It gives the Departments of Labor and Health and Human Services the authority to enforce the protections against plans and issuers. The legislation has the support of HHS Secretary Tommy Thompson, who called it necessary to "help guarantee that we fully realize the potential of ongoing advances in genetic science."

Passage of the bill represents a victory for sponsor Olympia Snowe (R-ME), who has introduced versions of genetic nondiscrimination legislation during the last three Congresses.

AGENCY UPDATES

Agency for Health Care Research and Quality

The National Quality Forum reached consensus last month on an initial set of 30 key patient safety practices that should be universally used in health care settings to reduce the risk of harm resulting from processes, systems, or environments of care, AHRQ announced in a May 15 release. Informing patients that they are likely to fare better if they have certain high-risk, elective surgeries at facilities that have demonstrated superior outcomes; specifying explicit protocols for hospitals and nursing homes to ensure adequate nurse staffing; hiring critical care medicine specialists to manage all patients in hospital intensive care units; making sure hospital pharmacists are more actively involved in the medication use process; and creating a culture of safety in all health care settings are among the recommendations contained in the new report, *Safe Practices for Better Healthcare: A Consensus Report*.

HHS Secretary Tommy Thompson praised the members of the NQF for their work. "Our long-term goal is to ensure that the American people have the highest quality, safest health care system possible." The report is an important step in meeting that goal, he said.

The report reflects agreement among the 173 members of the NQF about the need to put better systems and procedures in place to prevent medical errors. Member organizations include AARP, the American Hospital Association, the American Medical Association, the American Nurses Association, and the Ford Motor Company.

AHRQ's press release is available at <http://www.ahrq.gov/news/press/pr2003/forumpr.htm>.

Centers for Medicare & Medicaid Services

The Centers for Medicare & Medicaid Services has invited health care organizations to participate in a new disease management demonstration program for Medicare patients with end-stage renal disease. During the four-year project, CMS will solicit a variety of types of organizations to coordinate care to patients with ESRD, encourage the provisions of disease-management services for these patients, collect clinical performance data, and provide incentives for more effective care, the agency said. ESRD providers would be able to choose between various delivery models. Under the managed care model, the organization would be paid a capitated rate; those organizations opting to participate under the fee-for-service bundled payment option would be required to provide an expanded set of dialysis services under a bundled rate. The required bundle of services is more comprehensive than that currently reimbursed under the composite rate for outpatient dialysis, CMS said in a release, and would include nearly all routine drugs and lab tests provided during dialysis.

More information is available in the June 4 Federal Register. Go to http://www.access.gpo.gov/su_docs/fedreg/frcont03.html, click on June 4, and scroll down to the heading for CMS.

HEALTH AND HUMAN SERVICES

Secretary Tommy G. Thompson announced May 30 the appointment of Dara Corrigan of Baltimore as acting principal deputy inspector general for the Department of Health and Human Services. Corrigan currently serves as the director of program integrity for HHS' Centers for Medicare & Medicaid Services (CMS), responsible for all enforcement activities and integrity functions regarding the Medicare program. She will run the IG's office until a permanent replacement for Janet Rehnquist is named. Rehnquist's resignation was effective June 1.

To meet the needs of the aging baby boomer generation, the U.S. must dramatically increase its number of long-term care workers, a new federal report finds. About 5.7 million to 6.5 million nurses, nurse aids, and home health and personal care workers will be needed by 2050, almost three times as many long-term care employees as are currently in the field. The report, prepared by the Departments of Health and Human Services (HHS) and Labor, projects that the number of people using nursing facilities, alternative residential care or home care services will rise from 15 million in 2000 to 27 million by 2050. Most of this increase will be fueled by the growth in the number of elderly in need of such care, which is expected to double from approximately 8 million in 2000 to 19 million in 2050. These projections underscore the importance of retaining long-term care workers and attracting new ones to the field. The report cites low job satisfaction and salaries, poor benefits, and a lack of training and education opportunities as among the reasons contributing to the staffing shortage.

HHS and DOL make a number of recommendations to increase the number of long-term care workers and urge continued support for existing Administration efforts to address the growing demand. These include a national panel on nursing, apprenticeship programs, the Administration on Aging's National Family Caregiver Support Program, and several programs administered by HRSA.

The report, "The Future Supply of Long-Term Care Workers in Relation to the Aging Baby Boom Generation," is available at <http://aspe.hhs.gov/daltcp/reports/lcwork.htm>.

Accreditation FAQ.....

The Accreditation Committee receives many calls and e-mails from Academy members and other individuals with questions relative to the process of accreditation of centers and laboratories. Below are some of the most frequently asked questions and the corresponding answers, which were supplied by Dr. Donna Arand, Board Liaison to the Accreditation Committee.

1. What is the required size of bedrooms in a sleep center?

At present, there is no minimum requirement for bedroom size, although 140 square feet is recommended. The preeminent issues relating to room size include the ability of a medical emergency team to have easy access to the patient from either side of the bed, and the ability of the patient to move safely in the space available and feel comfortable especially during daytime testing.

2. If the patient is being referred to the sleep center, what process should we follow to schedule the study?

The exact procedure for scheduling direct referrals is determined by the sleep center. However, the procedure must include a mechanism for obtaining a sleep history and physical or questionnaire equivalent before the sleep study is performed. This information must be reviewed and the ordered studies approved by a sleep staff physician or D,ABSM before the study is performed.

3. If our staff physician has just been accepted for the ABSM examination, can we apply as a center?

Yes. As long as there is either a D,ABSM or someone accepted to sit for the ABSM exam on staff at the time of application, you may apply as a center. The letter of acceptance to sit for the exam must be submitted with the application. Once accredited, a program must have a D,ABSM or an individual still accepted to sit for the exam on staff at all times.

4. What is required for scoring reliability?

As part of the quality assurance initiatives at an accredited program, scoring must be compared between all scorers and the D,ABSM on a quarterly basis. This requires epoch-by-epoch comparisons with a calculation of percent agreement. Sleep staging, arousals, apneas and hypopneas, as well as PLMs, are typically compared between individuals. Accepted reliability figures are set by the facility, typically a minimum of 80-90% on each parameter. A procedure must also be established that defines the steps taken if reliability fails to meet the minimum set by the facility.

5. We are a home medical equipment supplier that has been doing home-based sleep studies for many years. Assuming we are able to meet the other requirements for accreditation, could we possibly be eligible for AASM accreditation even though we are not a facilities-based program?

No. An accredited program cannot perform only home based sleep studies. They must be able to perform MSLT's, CPAP titrations and specialized PSGs in a facility-based setting.

Questions specific to the accreditation process should be directed to John Slater at the AASM national office at (708) 492-0930 or email jslater@aasm-net.org for consideration of placement in future issues of the *AASM Bulletin*.

NEW

AASM ACCREDITED

SLEEP DISORDERS CENTERS AND LABORATORIES

Sleep Disorders Center
Southeastern Lung Care
320 Winn Way, Ste 103
Decatur, GA 30030
Accredited Center

Great River Medical Center Sleep Disorders Center
Great River Medical Center
1221 South Gear Ave
West Burlington, IA 52655
Accredited Center

Sleep Disorders Center
Providence Medical Center
8929 Parallel Parkway
Kansas City, MO 66112-1689
Accredited Center

Topeka Pulmonary & Sleep Medicine
634 SW Mullane
Suite 1000
Topeka, KS 66606
Accredited Center

HealthEast Sleep Care
St. Joseph's Hospital
69 West Exchange St
St. Paul, MN 55102
Accredited Center

Strong Sleep Disorders Center
University of Rochester
Strong Memorial Hospital
2337 South Clinton Ave
Rochester, NY 14618
Accredited Center

Sleep Diagnostics
Cleveland Regional Medical Center
201 Grover St
Shelby, NC 28150
Accredited Center

Sleep Disorders Center
Willamette Valley Medical Center
2700 SE Stratus Ave.
McMinnville, OR 97128
Accredited Center

Sleep Disorders Center
Skyline Medical Center
3441 Dickerson Pike
Nashville, TN 37207
Accredited Center

Children's Sleep Center
Texas Children's Hospital
6621 Fannin St
Houston, TX 77030
Accredited Center

Northern Vermont Center for Sleep Disorders
North Country Hospital
189 Prouty Drive
Newport, VT 05855
Accredited Center

Charleston Sleep Center
3321 MacCorkle Ave. SE
Charleston, WV 25304
Accredited Laboratory

Princeton Community Hospital Sleep Center
Princeton Community Hospital
12th Street Ext
Princeton, WV 24740
Accredited Center

ABSM Diplomates

The following is a list of individuals who passed the American Board of Sleep Medicine Part II certification examination. The Board extends its congratulations and best wishes. From this time forward, these individuals may refer to themselves as Diplomates of the American Board of Sleep Medicine.

Robert Mark Aaronson, M.D. Tucson, AZ	Mohammed Ahmed Aziz, M.D. Horseheads, NY	Susan D. Borchers, M.D. Columbus, OH	Barbara Chatr-Aryamontri, M.D. New Paltz, NY
Ibrahim Farag Abdulhamid, M.D. Farmington Hills, MI	Erin Kathleen Baehr, Ph.D. Woodridge, IL	Raymond Earle Bourey, M.D. Toledo, OH	Bilal Khalid Chaudhry, M.D. Lancaster, PA
Salah E. Aboubakr, M.D. Springfield, IL	Juan E. Bahamon, M.D. Corpus Christi, TX	Nihad M. Boutros, M.D. Greenville, SC	Ho-Kan Cheng, M.D. Marlton, NJ
Loutfi Sami Aboussouan, M.D. West Bloomfield, MI	Oneil Singh Bains, M.D. Mercer Island, WA	Ernesto Brauer, M.D. LaCrosse, WI	John Thomas Chewning, M.D. Pfafftown, NC
Ricardo Abreu, M.D. McAllen, TX	Imran Mushtaq Bajwa, M.D. Indiana, PA	Gregory Breen, M.D. Moorestown, NJ	Barbara A. Chini, M.D. Cincinnati, OH
Fateh Uddin Ahmed, M.B.,B.S. Sylvania, OH	Diwakar D. Balachandran, M.D. Houston, TX	David Bresch, M.D. St. Paul, MN	Jirayot Chintanadilok, M.D. Marianna, FL
Mateen Ahmed, M.D. Richmond, VA	Marshall S. Balish, M.D. Rockville, MD	Bashar Brijawi, M.D. Cincinnati, OH	Keith M. Clance, M.D. Greensboro, NC
Akinyemi Olutoye Ajayi, M.D. Orlando, FL	Frank J. Barch, M.D. Harrisonburg, VA	Andrew Craig Brown, M.D. Newtown Square, PA	Dennis P. Clifford, M.D. Evergreen, CO
Maha Alattar, M.D. Chapel Hill, NC	Khalid Bashir, M.D. Asheville, NC	Thomas K. Browne, M.D. Evansville, IN	John Wesley Cochran, M.D. Oakton, VA
Robert D. Albertson III, M.D. Jackson, MI	Vikas Batra, M.D. Maple Shade, NJ	Andrew Gray Bullard, M.D. Concord, NC	Carol A. Cohen, M.D. Decatur, IL
Robert J. Albin, M.D. Atlanta, GA	Michel George Beaudry, M.D. Chicoutimi, Quebec CANADA	Robert J. Bundy, M.D. Mansfield Center, CT	Jeremy Cole, M.D. Edmund, OK
Sherif Taha Al-Farra, M.D. Arlington, TX	Ronald E. Becker, M.D. Newton, MA	William S. Burkes, M.D. Beaumont, TX	Roslinde M. Collins, M.D. Bangor, ME
Ali J. Al-Himyary, M.D. Houston, TX	Brian Alan Benoff, M.D. Flushing, NY	Daniel Francis Callahan, M.D. Alpharetta, GA	Gregory Myrus Colodner, M.D. New Haven, CT
Stephan Allan Alkins, M.D. APO, AE	Herbert Anton Berger, M.D. Iowa City, IA	John P. Callan, M.D. Honolulu, HI	Heidi V. Connolly, M.D. Rochester, NY
Gopal Allada, M.D. Portland, OR	Aditya Bhargava, M.D. Reno, NV	Mark A. Camp, M.D. Norman, OK	Robert M. Cook, M.D. Janesville, WI
Everett H. Alsbrook, M.D. Naples, FL	Meeta Hasmukh Bhatt, M.D. Short Hills, NJ	William E. Caras, M.D. Puyallup, WA	Gregory E. Cooper, M.D. Lexington, KY
Anita Atmaram Alwani, M.D. Kingsport, TN	Nitin Y. Bhatt, M.D. Westerville, OH	Paula G. Carvalho, M.D. Boise, ID	David E. Corley, M.D. Bremerton, WA
David E. Anderson, M.D. Great Falls, MT	Anand Bhuptani, M.D. Terre Haute, IN	Richard E. Casey, M.D. Mandeville, LA	Robert Edward Cox, M.D. Edwons, WA
Surinder K. Aneja, M.D. Pittsburgh, PA	Kimberly S. Bird, M.D. Durham, NC	Ronald D. Cates, M.D. Athens, TX	Michel A. Cramer Bornemann, M.D. St. Paul, MN
Maria Antoniou, M.D. Bala Cynwyd, PA	Lloyd William Blake, M.D. Somerset, KY	Ramesh Chadavalada, M.D. Goodlettsville, TN	Suresh Daniel, M.B.,B.S. Pearland, TX
Raana Arens, M.D. Wynnewood, PA	Sandra Anne Block, M.D. Getzville, NY	Sridar Chalaka, M.D. Mukilteo, WA	Michael L. Darnell, M.D. Denver, CO
Francis James Averill, M.D. Clearwater, FL	Jeffrey M. Bluhm, M.D. Lake Oswego, OR	Michel Nabih Chalhoub, M.D. Staten Island, NY	Richard Mitchell Dasheiff, M.D. Dallas, TX
Donald William Ayres, M.D. Lebanon, NH	Bernard R. Borbely, M.D. St. Augustine, FL	Ravi T. Chandran, M.B., B.S. Central, SC	John R. Debus, M.D. Dallas, TX

David Lars Dedrick, M.D. Bend, OR	Darren P. Gannuch, M.D. Huntsville, AL	Victor H. Harding, M.D. Orlando, FL	Jesse Blake Kellum, M.D. Marion, OH
Daniel C. Deetz, M.D. La Crosse, WI	Shekhar Anant Ghamande, M.D. Morgantown, WV	Kevin Rene Hargrave, M.D. Opelousas, LA	Hany Y. Khalil, M.D. Perrysburg, OH
John DellaBadia, Jr., M.D. Bossier City, LA	Eleni Giannouli, M.D. Winnipeg, Manitoba CANADA	Vasantha Kumar Srinivasa Hathwar, M.B.,B.S. Virginia Beach, VA	Anand Vardhan Khandelwal, M.D. Medina, OH
John M. Dengler, M.D. Johnson City, TN	Alan Stephen Glann, M.D. Lewiston, ME	Raed J. Hawa, M.D. Toronto, Ontario Canada	Rudolf Khusid, M.D. Holland, PA
Avinash M. Desai, M.D. Troy, MI	Vishal Goel, M.D. Richmond, KY	John F. Hawley, D.O. Silver Spring, MD	Anton Issa Kidess, M.B.,B.S. Eau Claire, WI
Prasad Venkatadurga Devabhaktuni, M.D. Fairmont, WV	Lewis P. Golden, M.D. Cumberland Foresioe, ME	Rollin James Hawley, M.D. Christiansburg, VA	John S. Kim, M.D. Powell, OH
Naresh A. Dewan, M.D. Omaha, NE	Marcy Levy Goldstein, M.D. Deep River, CT	Todd K. Horiuchi, M.D. Sarasota, FL	Howard B. Koffler, M.D. Ambler, PA
Anil Kumar Dhuna, M.D. Burlington, IA	Brian Winfield Goltry, M.D. Boise, ID	Robert L. Huck, M.D. Olympia, WA	Sudarshan Kumar Komanapalli, M.D. Danville, IL
Maroun T. Dick, M.D. Germantown, TN	Heydy Lorena Gonzalez-Arriaza, M.D. 8008 Zurich, Switerland Europe	Frank Peter Hull, M.D. New York, NY	James P. Krainson, M.D. Miami, FL
Shirley L. Dickinson, M.D. Montrey, CA	Jacob L. Gordon, M.D. Oak Park, MI	Naseer Ahmad Humayun, M.D. Bethlehem, PA	Martina L. Kreutzer, M.D. Palo Alto, CA
Anthony DiMarco, M.D. Solon, OH	Michele Gorla, M.D. Niskayuna, NY	Kishwar Husain, M.B.,B.S. St. Augustine Beach, FL	Samavedam Ananta Krishna, M.D. Mount Vernon, OH
Kofi Adeleke Doonquah, M.D. Danville, VA	Raymond Gottschalk, M.B., Ch.B. Hamilton, Ontario CANADA	Douglas A. Isenstein, M.D. Snellville, GA	Steven M. Kubas, M.D. Austin, MN
Bassam Mouhin Doujaiji, M.D. Saudi Aramco, Dhahran SAUDI ARABIA	Yasmeen Sherali Gowani, M.D. Orlando, FL	Anna Ivanenko, M.D. Louisville, KY	Tracy F. Kuo, Ph.D. Mountain View, CA
Christopher Lawrence Drake, Ph.D. Framington Hills, MI	Anuj Goyal, M.D. Beavercreek, OH	Subin Jain, M.D. Louisville, KY	Sunye Kwack, M.D. San Francisco, CA
Azmi Draw, M.D. Louisville, KY	William Keith Graham, M.D. Jackson, MO	Ahmad S. Jalloul, M.D. Machias, ME	Franco Laghi, M.D. Burr Ridge, IL
Jeffrey S. Durmer, M.D. Bryn Mawr, PA	Anthony Alexander Granato, M.D. Congers, NY	Mazhar NMN Javaid, M.D. Madera, CA	Richard J. Lambert, M.D. Spokane, WA
Lewis B. Eberly, M.D. Alexandria, VA	BJB Grant, M.D. East Amherst, NY	Sanja Jelic, M.D. Bronx, NY	Lisa Hood Lancaster, M.D. Nashville, TN
Howard Eisenberg, M.D. Cape Coral, FL	Kathy R. Gromer, M.D. St. Paul, MN	Lissette Jimenez, M.D. Rio Piedras, P.R.	Robert J. Lapidus, M.D. Denver, CO
Arn H. Eliasson, M.D. Silver Spring, MD	David Charles Gross, M.D. Putomac, MD	Chacko John, M.D. Greenwood, SC	Kenneth J. Lazarus, M.D. Fayetteville, GA
Richard E. England, M.D. Valrico, FL	Manish Kumar Gugnani, M.D. Lawrenceville, NJ	Clifford G. Johnson, M.D. Canton, OH	Judith A. Leech, M.D. Ottawa, Ontario Canada
Mitchell S. Engler, M.D. Teaneck, NJ	Robert Gunnink, D.O. La Crosse, WI	Janet H. Jones, M.D. Lexington, KY	Gregory S. Lenchner, M.D. Wynnewood, PA
Aaron Melvin Esbenshade, M.D. Old Hickory, TN	Ashok K. Gupta, M.D. East Lansing, MI	Rajiv Joseph, M.D. Plano, TX	Michael Shawn Lepire, M.D. Phoenix, AZ
Joseph D. Espiritu, M.D. Rochester, MN	Paul M. Gustman, M.D. Miami, FL	Brooke G. Judd, M.D. Hanover, NH	Nat Trevor Levy, M.D. St. Louis, MO
Karl S. Fernandes, M.D. Perrysburg, OH	Rizan Hajal, M.D. Sioux Falls, SD	Sabieli Kabeli, M.D. Plattsburg, NY	Kevin L. Lewis, M.D. Tulsa, OK
Kristin G. Fless, M.D. South Orange, NJ	Holly Christine Hannon, M.D. Bonita Springs, FL	Jagjeet S. Kalra, M.B.,B.S. Stockton, CA	Mary-Margaret Lewis, M.D. Mendham, NJ
Norman R. Friedman, M.D. Denver, CO	Kimberly A. Hardin, M.D. Citrus Heights, CA	Dean T. Karamelas, M.D. Treasure Island, FL	Melissa S. Lim, M.D. San Francisco, CA
Gary Brian Fromm, M.D. South Bend, IN	Deborah F. Harding, M.D. Windermere, FL	Ronald A. Kass, M.D. Stockton, CA	Nancy I. Linneman, M.D. Goshen, NY
Palvannanathan Ganesan, M.D. Omaha, NE		Eliot Samuel Katz, M.D. Dover, MA	Kar-Ming Lo, M.D. Centennial, OH

Timothy Alan Lucas, M.D. Hollidaysburg, PA	Jeffrey Adam Miller, D.O. Livingston, NJ	Kwaku Ankomah Osafo-Mensah, M.D. Albuquerque, NM	William Kim Rawlinson, M.D. Newark, OH
William Lucht, M.D. Anchorage, AK	Shawn Arlen Milligan, M.D. Shreveport, LA	James Paul Osmanski II, D.O. Hayden, ID	Meera Ranganathan, M.D. Belleville, NJ
George R. Lyons, M.D. Boise, ID	Cassandra Jean Milling, M.D. Ann Arbor, MI	Vivek A. Padegal, M.D. Dallas, TX	Michael Steven Reif, M.D. Charlotte, NC
Timothy Donald Macon, D.O. West Branch, MI	Eduardo Jose Molinary, M.D. Marietta, GA	Howard William Palay, M.D. Clyde, NC	Michael Edward Rinow, M.D. Atlanta, GA
Shawn M. Magee, M.D. Topeka, KS	Henry J. Moller, M.D. Toronto, Ontario Canada	A. Joel Papowitz, M.D. Fairfield, CT	Albert Anthony Rizzo, M.D. Hockessin, DE
John Green Malone, M.D. Mount Airy, NC	Laurie Anne Mooney, M.D. Ashland, OH	Youngsook Park, M.D. Hillside, IL	Emory H. Robinette, M.D. Abingdon, VA
Christopher Edward Manfredi, D.O. Oakland, NJ	Majaz Moonis, M.D. Shrewsbury, MA	Nathaniel Mark Pascual, M.D. Colorado Springs, CO	Eve Renee Rogers, M.D. Rochester, MN
Prasad Manian, M.D. Houston, TX	Greg Warren Morgan, M.D. Austin, TX	Hema Patel, M.D. Indianapolis, IN	Thomas E. Rojewski, M.D. Zanesville, OH
Uma U. Marar, M.B.,B.S. Powell, OH	Thomas Francis Morley, D.O. Laurel Springs, NJ	Prafullkumar Gordhan Patel, M.D. Baltimore, MD	Daniel Bryan Root, M.D. Portland, OR
William Irvin Mariencheck, M.D. Memphis, TN	Robert J. Morrison, M.D. Austin, TX	Susheel Pandit Patil, M.D. Baltimore, MD	Bernard Johannes Roth, M.D. Roy, WA
Steven Alan Marks, D.O. Virginia Beach, VA	Douglas Edward Moul, M.D. Pittsburgh, PA	Gregg A. Patten, M.D. Horton, MI	Pamela J. Russell-Howard, M.D. Taylorsville, NC
Thornton Beverley Alexander Mason II, M.D. Haddonfield, NJ	Thomas D. Mulgrew, M.D. Payette, ID	Mark I. Pensler, M.D. Bloomfield Hills, MI	David A. Russian, M.D. Everett, WA
Stephen L. Matarese, D.O. Sounderstown, RI	Ganesan Murali, M.D. Melrose Park, PA	John Frederick Perri, D.O. Chesapeake, VA	Mohamed A. Saad, M.D. Louisville, KY
Jyoti S. Matta, M.D. West Orange, NJ	Janet Nicolas Myers, M.D. McLean, VA	Vijay Pethkar, M.D. Nashville, TN	Prabhasadanam G. Sadhujan, M.D. Chesterton, IN
James Paul Maynard, M.D. Forsyth, IL	Vincent Mysliwec, M.D. San Antonio, TX	Kathleen Denise Pfeffer, M.D. Salt Lake City, UT	Boris Sagalovich, M.D. Edison, NJ
Robert Williamson McCain, M.D. Nashville, TN	Rashid Nadeem, M.B., B.S. Johnston, PA	Clarke Ulysses Piatt, M.D. Wayne, PA	Ammar Sakkour, M.D. Los Angeles, CA
Joseph Paul McCarty, M.D. Fort Smith, AR	Jhanti Rani Nalamati, M.D. Bronx, NY	Erika Helen Poehm, M.D. Silver Spring, MD	Rafael Manuel Santiago, M.D. San Antonio, TX
Robert Hays McCoy, M.D. Edmonds, WA	Andrew M. Namen, M.D. Jacksonville, FL	Gary Robert Polk, M.D. Amarillo, TX	Robert O. Satriale, M.D. Coatesville, PA
John Lucius McGehee, M.D. Memphis, TN	Eyad Nashawati, M.D. Canton, OH	Manoj Prakash, M.D. St. Augustine, FL	Alan E. Schaffer, M.D. Goshen, NY
Douglas A. McKim, M.D. Ottawa, Ontario CANADA	Michael Eugene Nelson, M.D. Mission Hills, KS	Karem Y. Principe-Rodriguez, M.D. Winter Park, FL	Daron Lynn Scherr, M.D. Idaho Falls, ID
Joseph P. McMahon, M.D. Madison, WI	Surendra Kumar Nevatia, M.D. Queensbury, NY	Robert Joseph Pueringer, M.D. Billings, MT	Markus H. Schmidt, M.D., Ph.D. Columbus, OH
Reena Mehra, M.D. Cleveland Heights, OH	Michael Lee Nevins, M.D. Sammamish, WA	Michael William Quinn, M.D. Evans, GA	Joseph Alvin Schoenhals, M.D. Salt Lake City, UT
Nehal Laheri Mehta, M.D. New York, NY	Catherine K. Nobel, M.D. Los Angeles, CA	Rana Imam Rab, M.D. Atlanta, GA	Charles E. Schroeder, M.D. Olathe, KS
Ravindra M. Mehta, M.D. Glen Oaks, NY	Carla Rae Nordstrom, M.D. West Lebanon, NH	Rishi Raj, M.B.,B.S. Parker, AZ	David Alexander Schulman, M.D. Atlanta, GA
Catharine Elizabeth Menes, M.D. Kitchener, Ontario CANADA	Thomas John Nuckton, M.D. San Francisco, CA	Sri-Sujanthy Rajaram, M.D. Princeton Junction, NJ	Shirin Shafazand, M.D. Alexandria, VA
Jeffery Evan Michaelson, M.D. Roswell, GA	Thomas Rone Nugent, M.D. Cherry Hill, NJ	Anil Natesan Rama, M.D. San Jose, CA	Kiran Premchand Shah, M.D. Carrollton, TX
Gary Howard Miller, M.D. Potomac, MD	James C. O'Brien, M.D. Milton, MA	Marc Rasansky, M.D. Whitefish Bay, WI	Syed Jirgis Shah, M.D. Dania Beach, FL
	Timothy David O'Connor, M.D. Mill Creek, WA	Shaista Rauf, M.D. Sacramento, CA	Arunabh Sharma, M.D. Oshawa, Ontario CANADA

Satyendra Sharma, M.D.
Winnipeg, Manitoba
CANADA

R. H. Shashikumar, M.B.,B.S.
Terra Haute, IN

Jason A. Shatkin, M.D.
Wesley Hills, NY

John C. Shehan, M.D.
Omaha, NE

Aaron Emanuel Sher, M.D.
Delmar, NY

Muhammad Hadi Shibli, M.D.
Bethesda, MD

Robert Vincent Sibilila, M.D.
Wooster, OH

Pawan Sikka, M.D.
Temple, TX

Jeffery Roy Smale, M.D.
West Bend, WI

Michael A. Spandorfer, M.D.
Charleston, SC

Peter Spiegler, M.D.
Mineola, NY

Hardev S. Sroa, M.B.,B.S.
Bryan, OH

John K. Staheli, M.D.
Prove, UT

Kingman Perkins Strohl, M.D.
Shaker Heights, OH

David Arthur Strumpf, M.D.
Slingerlands, NY

Florin Stuleanu, M.D.
Wells, MI

Henry Su, M.D.
Bellevue, WA

Thomas A. Sullivan, M.D.
Knoxville, TN

Dana Supe Dzidic, M.D.
East Brunswick, NJ

Sever Catalin Surdulescu, M.D.
 Mooresville, NC

Richard Allender Swift, M.D.
Warrenton, VA

Bruce R. Tammelin, M.D.
San Clemente, CA

Varsha S. Taskar, M.D.
Tyler, TX

Sanjiv Tewari, M.D.
Akron, OH

Divya Thai, M.B., B.S.
Rockville Centre, NY

Thomas Paul Thigpen, M.D.
Billings, MT

Lowery Lee Thompson, M.D.
Monroe, LA

Vijaya Latha Tirunahari, M.B.,B.S.
Edison, NJ

Nikola Trajanovic, M.D.
Scarborough, Ontario
CANADA

Daniel Carlos Traviesa, M.D.
Lakeland, FL

Giorgio S. Turella, M.D.
Tacoma, WA

Arthur S. Turetsky, M.D.
New Rochelle, NY

Rochelle A. Turetsky, M.D.
New Rochelle, NY

Suneel S. Valla, M.B.,Ch.B.
Easton, PA

Kevan E. VanLandingham, M.D.
Durham, NC

Ricardo Rafael Vega, M.D.
Bakersfield, CA

Andrew Norbert Vernon, M.D.
Soday Daisy, TN

Sanjeev P. Vettichira, M.D.
Tampa, FL

Janine R. E. Vintch, M.D.
Westchester, CA

Joyce Deanette Wade-Hamme, M.D.
Ridgeland, MS

Mary Hipskind Wagner, M.D.
Newberry, FL

Jeanne Marie Wallace, M.D.
La Canada, CA

Bennet Minguang Wang, M.D.
Bellevue, WA

Pell Ann Wardrop, M.D.
Lexington, KY

Jonathan Warren, M.D.
Fox River Grove, IL

Andrzej J. Wartak, M.D.
West Point, MS

Kirk Grant Watkins, M.D.
St. George, UT

Nate Watson, M.D.
Seattle, WA

Michael Peter Weissberg, M.D.
Boulder, CO

Carolyn Helen Welsh, M.D.
Denver, CO

Yu-Ching Eugenia Wen, M.D.
Los Angeles, CA

John Robert White, M.D.
Lexington, KY

Terry Lee Wimpey, M.D., Ph.D.
Athens, GA

John Peter Winikates, M.D.
Columbus, IN

Glenna Barbara Winnie, M.D.
Arlington, VA

Gary Wohlberg, M.D.
Fort Salonga, NY

Johnny C. Wong, M.D.
Richmond, VA

John M. Wright, M.D.
Bettendorf, IA

Kumar P. Yogesh, M.D.
Dresden, TN

Iman S. Youssef, M.D.
Metuchen, NJ

Muhammad Asif Ali Zaidi, M.D.
Sioux Falls, SD

Nasser Zakieh, M.D.
Hinsdale, IL

Mohamed M. Zakkar, M.D.
Beavercreek, OH

Boutros Moussa Zeidan, M.D.
Johnstown, PA

Margarita D. Zhavoronkova, M.D.
Rochester, NY

Wichita Clinic
1/4 Page

ResMed

Looking for something new for casual Fridays?

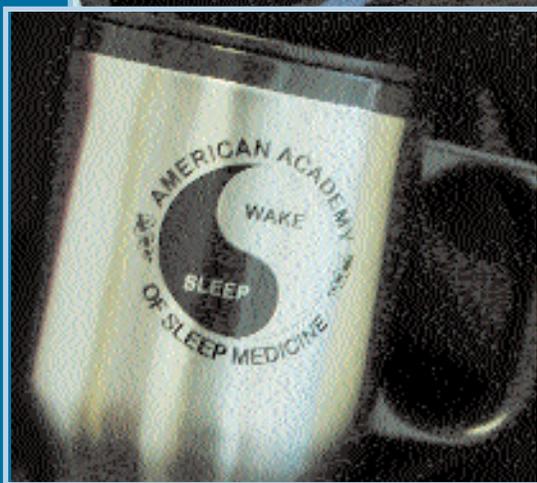
Every dollar spent on merchandise goes to the American Sleep Medicine Foundation

You can find the answer while supporting the Foundation with AASM Apparel!



AASM polos, denims and sweatshirts are professional, yet comfortable for your work environment.

These products also make great gift ideas for incoming employees or all staff uniforms.



Other great gifts include mugs, office accessories, key chains, hats, ties, lapel pins, and much more!

Order yours today by visiting the AASM Web site at www.aasmnet.org and make your casual Fridays even better!

NTS

American Academy of Sleep Medicine - Product Order Form

TITLE	ITEM#	QTY	PRICE (prices subject to change)		TOTAL
			Member	Non-member	
PATIENT EDUCATION BROCHURES (Available only in lots of 50)					
Circadian Rhythms	0002	_____	\$20.00	\$35.00	_____
Coping with Shift Work	0012	_____	\$20.00	\$35.00	_____
Drowsy Driving	0023	_____	\$20.00	\$35.00	_____
Insomnia	0003	_____	\$20.00	\$35.00	_____
"My Child Can't Sleep"	0019	_____	\$20.00	\$35.00	_____
"My Child Snores"	0020	_____	\$20.00	\$35.00	_____
Narcolepsy	0001	_____	\$20.00	\$35.00	_____
Obstructive Sleep Apnea & Snoring	0007	_____	\$20.00	\$35.00	_____
Overnight Sleep Studies	0014	_____	\$20.00	\$35.00	_____
Parasomnias	0009	_____	\$20.00	\$35.00	_____
Positive Airway Pressure Therapy for Sleep Apnea	0018	_____	\$20.00	\$35.00	_____
Restless Legs Syndrome and Periodic Limb Movement Disorder	0013	_____	\$20.00	\$35.00	_____
Sleep & Depression	0016	_____	\$20.00	\$35.00	_____
Sleep & Health	0021	_____	\$20.00	\$35.00	_____
Sleep & Heart Disease	0026	_____	\$20.00	\$35.00	_____
Sleep As We Grow Older	0006	_____	\$20.00	\$35.00	_____
Sleep Diary	0022	_____	\$20.00	\$35.00	_____
Sleep Hygiene	0004	_____	\$20.00	\$35.00	_____
Sleep in Women	0017	_____	\$20.00	\$35.00	_____
Sleepwalking and Other Childhood Parasomnias	0024	_____	\$20.00	\$35.00	_____
Teenagers, Young Adults and Sleep	0025	_____	\$20.00	\$35.00	_____
Treatment Options for Obstructive Sleep Apnea Syndrome	0015	_____	\$20.00	\$35.00	_____
Pamphlet Sampler Pack (one of each of the above)	0008	_____	\$10.00	\$15.00	_____
PATIENT EDUCATION VIDEO					
Visiting a Sleep Lab Sleep Apnea — Diagnosis and Treatment	1002	_____	\$30.00	\$50.00	_____
PROFESSIONAL ACCREDITATION MATERIALS¹					
Starting a Sleep Disorders Program Manual	9001	_____	\$60.00	\$60.00	_____
Center Accreditation/Reaccreditation Application	9002	_____	\$300.00	\$300.00	_____
Lab Accreditation/Reaccreditation Application	9006	_____	\$300.00	\$300.00	_____
Application on disk	9007	_____	\$25.00	\$25.00	_____
(only available with the purchase of an application)					
Accredited Facility Patient Referral Brochure (Available only in lots of 50)	9008	_____	\$20.00	\$35.00	_____
Accreditation Reference Manual	9010	_____	\$395.00	\$595.00	_____
¹ You must list on page two the program name that the accreditation materials are being purchased for.					
CERTIFICATE FRAMES					
Membership certificate in frame, cherrywood *	5001	_____	\$50.00	\$65.00	_____
Membership certificate in frame, black *	5002	_____	\$35.00	\$50.00	_____
Certificate Frame (no certificate), cherrywood	5001-A	_____	\$40.00	\$50.00	_____
Certificate Frame (no certificate), black	5002-A	_____	\$25.00	\$35.00	_____

*Indicate certificate to include: AASM individual membership AASM center membership AASM center accreditation

Print name to appear on Certificate _____

Provide additional instructions on a separate sheet if ordering multiple certificates or ordering certificates for more than one individual or entity, or ordering for an individual not listed on this order form.

TITLE	ITEM#	QTY	PRICE		TOTAL
			(prices subject to change)		
			Member	Non-member	
PROFESSIONAL REFERENCE MATERIALS					
The International Classification of Sleep Disorders, Revised: Diagnostic and Coding Manual (ICSD-R)					
Softbound, 1997 Revised Edition	2001	_____	\$55.00	\$65.00	_____
Pocket 2000 Edition	2003	_____	\$30.00	\$40.00	_____
Sleep Center Management Manual	4002	_____	\$25.00	\$40.00	_____
AASM Clinical Practice Parameters & Review Papers	4003	_____	\$50.00	\$65.00	_____
Practice Parameters & Review Paper CD-ROM	4004	_____	\$50.00	\$65.00	_____
SLEEP Archives 1998 CD-ROM	6001	_____	\$50.00	\$50.00	_____
SLEEP Archives 1999 CD-ROM	6002	_____	\$50.00	\$50.00	_____
SLEEP Archives 2000 CD-ROM	6003	_____	\$50.00	\$50.00	_____
Patient Satisfaction Surveys (50/tablet)	7001	_____	\$15.00	\$20.00	_____
PROFESSIONAL EDUCATION MATERIALS (Slide sets and *CD-Rom)					
Sleep Apnea: Diagnosis and Treatment	3001	_____	\$195.00	\$390.00	_____
*Sleep Apnea: Diagnosis and Treatment	3001CD	_____	\$195.00	\$390.00	_____
Insomnia: Etiology, Evaluation and Treatment	3002	_____	\$195.00	\$390.00	_____
*Insomnia: Etiology, Evaluation and Treatment	3002CD	_____	\$195.00	\$390.00	_____
*Illustrated Guide to Polysomnography: Normal Sleep	3010CD	_____	\$99.00	\$200.00	_____
Respiratory Sleep Disorders in Children	3011	_____	\$150.00	\$300.00	_____
Non-Respiratory Sleep Disorders in Children	3012	_____	\$175.00	\$350.00	_____
Both Pediatric Slide Sets	3013	_____	\$275.00	\$550.00	_____
Narcolepsy	3014	_____	\$175.00	\$350.00	_____
*Narcolepsy	3014CD	_____	\$175.00	\$350.00	_____

***SHIPPING**

For U.S. UPS Ground Orders Only

Order Size	Add
1-6 items	\$8.00
7-12 items	\$13.00
13-18 items	\$19.00
19-24 items	\$24.00
Over 24 items	Based on Cost
<input type="checkbox"/> Next Day	<input type="checkbox"/> Second Day
Based on Cost	Based on Cost

*** All Canadian and International orders will be based on cost.**

Subtotal	_____
IL State residents add 7.75% sales tax	_____
Shipping from box at left (applies for U.S. UPS GROUND ORDERS ONLY, all others will be based on cost)	_____
Handling Charge	\$5.00
New AASM Membership Fees (enclose application)	_____
TOTAL	_____

Individual or Center Member Name (required): _____ Member # _____

Nonmember

Name _____ E-mail _____

Accreditation Applications Purchased for (Program Name) _____

Phone _____ FAX _____

Address _____ Residential Commercial

City, State, Zip, Country _____

Check enclosed (U.S. Bank Only) American Express VISA MasterCard Purchase Order # _____

CC# _____ **(\$500 minimum on all purchase orders. Hard copy of the P.O. must be attached.)**

Signature _____ Expiration Date ____/____/____

Orders accepted by mail, fax or online at www.aasmnet.org. Please allow up to 2 weeks for delivery.

American Academy of Sleep Medicine
One Westbrook Corporate Center, Suite 920
Westchester, IL 60154
Fax (708) 492-0943

August 2003

Association Name	Meeting Name	Dates	Location
AASM	Board of Directors	Aug. 1-3, 2003	Chicago, IL
AASM	National Sleep Medicine Course	Aug. 9-13, 2003	Oakbrook Hills Resort

September 2003

Association Name	Meeting Name	Dates	Location
National Cancer Institute	Advisory Council Meeting	Sept. 8-10, 2003	NIH
National Eye Institute	Advisory Council Meeting	Sept. 11-12, 2003	NIH
NHLBI	Advisory Council Meeting	Sept. 4-5, 2003	NIH
NHGRI	Advisory Council Meeting	Sept. 15-16, 2003	NIH
National Institute on Aging	Advisory Council Meeting	Sept. 23-24, 2003	NIH
NIAAA	Advisory Council Meeting	Sept. 18, 2003	NIH
NICHD	Advisory Council Meeting	Sept. 22-23, 2003	NIH
NIDDK	Advisory Council Meeting	Sept. 24-25, 2003	NIH
NIDA	Advisory Council Meeting	Sept. 17-18, 2003	NIH
NIGMS	Advisory Council Meeting	Sept. 11-12, 2003	NIH
NIMH	Advisory Council Meeting	Sept. 11-12, 2003	NIH
NINDS	Advisory Council Meeting	Sept. 18-19, 2003	NIH
NINR	Advisory Council Meeting	Sept. 16-17, 2003	NIH

of events

OFFICE OF EVENTS

CLASSIFIEDS

PULMONARY/CRITICAL CARE/SLEEP-Washington—Position available in a high quality 45+ physician owned integrated multi-specialty group with 3 Pulmonologists. BC/BE pulmonary disease, critical care and sleep certification required. Practice covers all aspects of outpatient pulmonary medicine, hospital-critical care and with emphasis in sleep medicine. Located in NW Washington on Puget Sound. Thriving 165,000+ community - excellent area for family and recreational, social, cultural, and educational activities. Comprehensive compensation package - base with potential production bonus, full spectrum of benefits. Shareholder potential after two years. To learn more about Madrona Medical Group, P.S. visit our Web site at www.madronamedical.com Position Reply: Human Resources Director, Madrona Medical Group, P.S., 4545 Cordata Parkway, Bellingham, WA 98226. FAX 360-752-5681, Email: madronahr@hinet.org

SLEEP LABORATORY DIRECTOR—Wanted for a brand new state-of-the-art four bed sleep disorders laboratory in Atlanta, Georgia. Salary is extremely competitive and will include a performance incentive. Benefits include health insurance, life insurance, dental plan, pension fund, as well as paid vacation. We are searching for a top quality, highly motivated individual with experience in management and patient care. This laboratory is associated with three BC/BE Sleep Disorders physicians, and will be seeking AASM accreditation as a Sleep Center. For further information please contact Deryl Roberson, phone number (770) 948-5409 or fax resume to: (770) 948-7994.

SLEEP MEDICINE COURSE—The Atlanta School of Sleep Medicine and Technology offers 5 and 8-day intensive review courses in clinical polysomnography for physicians, technologists, and allied health care professionals. Courses include a blend of lectures and hands-on experience, and are designed to address the needs of those at an entry level as well as experienced professionals. Courses are taught by board certified sleep specialists and registered sleep technologists. Enrollment is limited to ensure personalized attention. Category 1 CMEs and contact hours are offered to physicians and technicians respectively. For more information visit the Web site www.sleepschool.com or call 404-303-3385 or 800-782-9418 ext. 3385(voice mail only)

SLEEP CENTER SUPERVISOR—Due to the continued growth of our Sleep Center in Weston, Florida, Cleveland Clinic Hospital has an opening for a dynamic, outgoing individual to serve as the lab supervisor. This qualified candidate will be responsible for the overall supervision of the technical staff as well as ensuring all sleep tests are properly performed and scored in a timely manner. Quality assurance and continued education will also play a vital role in this position. The position requires Board certification as a Polysomnograph Technologist and a minimum of two years full-time experience in polysomnography. Supervisory experience is preferred. Cleveland Clinic Hospital is a four-bed lab with board certified sleep specialists on staff. Interested candidates may submit resume to Human Resources, 3100 Weston Road, Weston, FL 33331. Fax (954) 689-5129. Jobline (954) 689-5150. Email: whnhrmail@tenethealth.com EOE/Drug Free Workplace.

ASSOCIATE MEDICAL DIRECTOR—Neurologist, Psychiatrist, Pulmonologist, or Internist with sleep expertise sought for a large network of New England-based sleep centers and a clinical trials site. Duties will include providing consultations and follow-up for patients with sleep problems, interpreting sleep studies, and serving as principal investigator for our growing clinical trials division. We participate in investigator-initiated and multi-site trials of medications to treat the full range of sleep, neurologic and psychiatric disorders. In addition, this individual will play a key role in educating and mentoring our Clinical Manager and very competent sleep technologists. We are committed to continuous quality improvement and outstanding customer service. This is a very promising growth opportunity for a proven team leader with a demonstrated record of uncompromising clinical excellence. Email CV to HRMD@neurocareinc.com

Do you qualify to offer AASM-sponsored CME credit?

In November 1997, the American Academy of Sleep Medicine was awarded full accreditation by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians. Since that time, the AASM CME Committee has worked to establish guidelines and procedures to enter into joint sponsorship agreements with organizations not accredited to sponsor CME educational activities. At this time, the Committee is pleased to announce its intent to accept applications from AASM accredited member centers and laboratories and other entities for joint sponsorship with the AASM.

If you are interested in offering CME credit for physician educational activities, please contact Jennifer Markkanen at the AASM National Office by phone at (708) 492-0930, or by e-mail at jmarkkanen@aasmnet.org for additional information and an application for CME credit.

School of
Sleep
Medicine
I.S. Back

Cadwell
O.S. Back