



POLYSMITH

12 & 12.2

ONE BED RECORDING

SYSTEM – DMS

Quick Reference Guide

Version 13 | © 2023 All Rights Reserved

****This quick reference guide is intended only for quick reference for the Polysmith 12 One Bed Recording System – DMS.**

Please refer to the operator's manual for more in-depth reference and operation.

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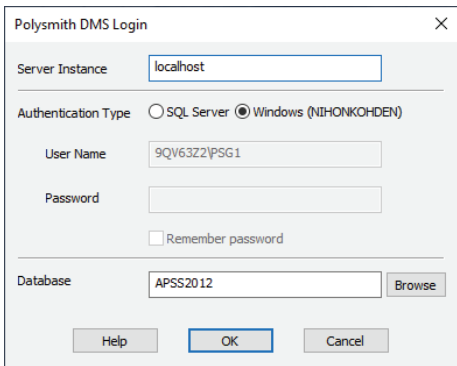
STARTING A RECORDING

Step 1

Double left click on the POLYSMITH DMS icon  on the Desktop.

Step 2

A POLYSMITH DMS LOGIN window will appear. If you are using SQL Server Authentication -Verify that the SERVER INSTANCE is correct and enter your username and password in the appropriate field and left click on OK. If you are using Windows Authentication, you will not have to enter your username and password.



The screenshot shows a dialog box titled "Polysmith DMS Login" with a close button (X) in the top right corner. The dialog contains the following fields and controls:

- Server Instance:** A text box containing "localhost".
- Authentication Type:** Two radio buttons: "SQL Server" (unselected) and "Windows (NIHONKOHDEN)" (selected).
- User Name:** A text box containing "9QV63Z2\PSG1".
- Password:** An empty text box.
- Remember password:** An unchecked checkbox.
- Database:** A text box containing "APSS2012" and a "Browse" button to its right.
- Buttons:** "Help", "OK", and "Cancel" buttons at the bottom.

Step 3

The Polysmith DMS calendar will appear. (Note: Polysmith DMS will open in the tab that it was last closed by a previous user. Left click on the CALENDAR tab to see the calendar if it opens in one of the SEARCH tabs.)

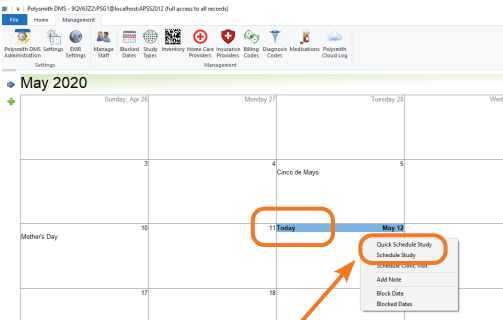
The screenshot displays the Polysmith DMS web application interface. At the top, the browser address bar shows the URL: `Polysmith DMS - 9QV63Z2:P5G1@localhost:AP552012 (Full access to all records)`. The navigation menu includes 'Home' and 'Management'. Below this, there are several icons for different functions: Polysmith DMS Administration, Settings, DMR Settings, Manage Staff, Blocked Dates, Study Types, Inventory, Home Care, Insurance, Billing, Providers, Providers Codes, Diagnosis Codes, Medications, and Polysmith Cloud Log.

The main content area shows a calendar for May 2020. The calendar grid includes the following dates and events:

- Sunday, Apr 26
- Monday 27
- Tuesday 28
- 3
- 4: Cinco de Mayo
- 5
- 10: Mother's Day
- 11: Today
- 12: May 12
- 17
- 18
- 19
- 24: Memorial Day
- 25
- 26
- 31
- Jun 1
- 2

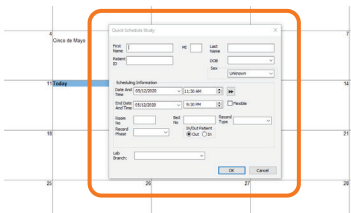
At the bottom of the interface, there is a tab bar with the following tabs: 'Calendar' (highlighted with an orange box), 'Dashboard', 'Basic Search', 'Advanced Search', and 'Administrative'.

Today's date will be highlighted in blue and indicate "Today." Right click on a blank area within the date box (on the date you wish to schedule the patient) and an options window will appear. (Note: If the patient's name is already on the calendar, right click on the patient's name and skip to page 12 step 5 for instructions on "Start Polysmith Acquisition".)



Step 4

Left click on QUICK SCHEDULE STUDY or SCHEDULE STUDY. Fill in the patient's information and left click on OK. (Note: You must fill in the patient's first name, last name, patient ID and date of birth in order to start a recording)



Entering Patient Information (Quick Schedule Study Option)

The QUICK SCHEDULE STUDY option allows you to enter a limited amount of patient information and add the patient to the calendar. (Note: A minimum of the FIRST NAME, LAST NAME, and PATIENT ID fields must be completed to add the patient to the calendar.) The QUICK SCHEDULE option is useful for entering a patient into the calendar when pressed for time or when you have limited information about the patient. You can access and add information to the patient's record before, during and after the study.

Quick Schedule Study ✕

First Name	<input type="text"/>	MI	<input type="text"/>	Last Name	<input type="text"/>
Patient ID	<input type="text"/>	DOB	<input type="text" value="v"/>		
		Sex	<input style="border: 1px solid #ccc;" type="text" value="Unknown"/>		

Scheduling Information

Date And Time	<input style="border: 1px solid #ccc;" type="text" value="05/12/2020"/>	<input style="border: 1px solid #ccc;" type="text" value="8:00 PM"/>	<input type="button" value="▶▶"/>		
End Date And Time	<input style="border: 1px solid #ccc;" type="text" value="05/13/2020"/>	<input style="border: 1px solid #ccc;" type="text" value="6:00 AM"/>	<input type="checkbox"/> Flexible		
Room No	<input type="text"/>	Bed No	<input type="text"/>	Record Type	<input type="text" value="v"/>
Record Phase	<input type="text" value="v"/>	In/Out Patient			
		<input checked="" type="radio"/> Out <input type="radio"/> In			

Lab Branch:

Entering Patient Information (Schedule Study Option)

Detailed patient information can be entered during scheduling by selecting the SCHEDULE STUDY option. The SCHEDULE STUDY option and PATIENT INFORMATION dialog box operate and contain the same information. The SCHEDULE STUDY option is used to enter in new patients, and the PATIENT INFORMATION dialog box is used to add, remove or edit patient information that has already been entered into Polysmith DMS.

To add, remove, or edit patient information during study collection, left click on the PATIENT INFORMATION icon in the Polysmith program. To access the PATIENT INFORMATION dialog box in Polysmith DMS, double left click on the patient's name from any of that screen tabs in Polysmith DMS. You can also access the Patient Information dialogue box after the study is completed by right clicking on the patient's name on the Calendar and left click PATIENT INFORMATION.

Patient Information Dialogue Box (Note: Completion of the FIRST NAME, LAST NAME, and PATIENT ID fields are required to start a study and to advance to the next tab in Patient Information.)

Your facility may require you to fill out specific fields in the PATIENT INFORMATION dialogue box (for example: First Name, Last Name, Patient ID, Date of Birth, Weight, Height, Sex, Comment, Medications, Medical History, Sleep Disorder, Primary Doctor, and Operator.). The data fields in the PATIENT INFORMATION dialog box are used in the generation of default and custom reports. Check with your supervisor for specific instructions on which fields are required by your facility.

Patient Tab: The PATIENT tab allows the user to enter demographic information for the patient including name, date of birth, weight, height, and contact information. The first name, last name, and patient ID are required fields.

The screenshot shows a 'Patient Information' window with several tabs: Patient, Photo, Medical, History, Administrative, Staff and Billing, and Record Status. The 'Patient' tab is active. The form contains the following fields:

- First Name:** Text input field, highlighted with an orange circle.
- MI:** Text input field.
- Last Name:** Text input field, highlighted with an orange circle.
- Patient ID:** Text input field, highlighted with an orange circle.
- Date of Birth:** Date picker (mm/dd/yyyy), highlighted with an orange circle.
- Sex:** Dropdown menu with 'Unknown' selected.
- Weight:** Text input field (0) with radio buttons for kg and lb.
- Height:** Text input field (0) with radio buttons for cm and in.
- BMI:** Text input field (0) with unit kg/m².
- Handedness:** Radio buttons for Right (selected) and Left.
- Address:** Section containing:
 - Street: Text input field.
 - City: Dropdown menu.
 - State: Dropdown menu.
 - Zip: Dropdown menu.
 - Home: Text input field.
 - Office: Text input field.
 - Mobile: Text input field.
 - Pager: Text input field.
 - FAX: Text input field.
 - Emergency: Text input field.
 - Email: Text input field.
- Lab Branch:** Dropdown menu.

Buttons at the bottom: OK, Cancel, Help.

Note: The FIRST NAME, LAST NAME, PATIENT ID, and DATE OF BIRTH fields must be completed prior to advancing to another PATIENT INFORMATION tab. You cannot select another PATIENT INFORMATION tab until the required data fields are completed.

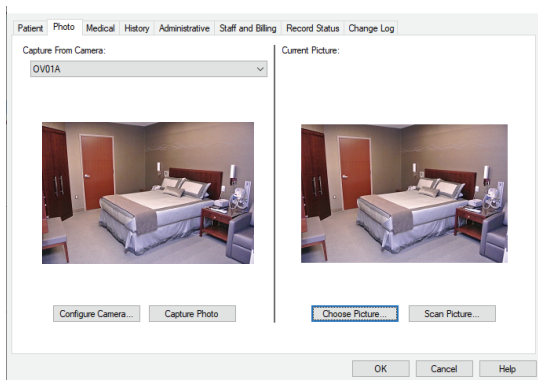
Photo Tab: The PHOTO tab allows the user to capture, scan, or load an image of the patient in Polysmith DMS, or Polysmith, before, during, or after a study.

The photo tab displays a preview of the currently selected video capture device on the left and displays the current patient photo on the right.

Clicking CAPTURE PHOTO will save the image from the video capture device.

Clicking CHOOSE PICTURE... allows the user to choose an existing JPEG image.

Clicking SCAN PICTURE... allows the user to scan a photo from a TWAIN-compliant scanner.



Medical Tab: Select disorders from the drop-down list and click ADD. The ICSD code list will populate automatically with the proper code. This page also contains fields for questionnaires, respiratory information and neck size. Select INFANT under SCORING TYPE to enable infant sleep staging.

Patient Information

Patient Photo Medical History Administrative Staff and Billing Record Status Change Log

Disorders

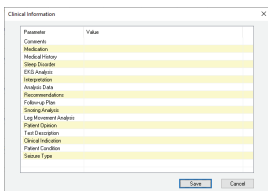
ICSD	ICSD Title
------	------------

ESS: O2 Delivery Range: Snoring: dB

BAI: Respiratory Rate: Scoring Type:

BDI: Neck Size: cm In

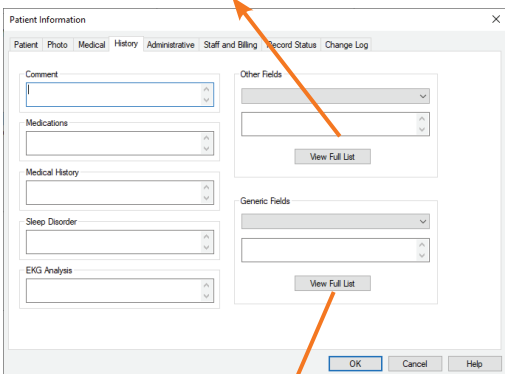
History Tab: The HISTORY tab allows you to insert clinical and generic information about the patient from drop-down lists. The most common clinical text fields are found on the left side. Click on the VIEW FULL LIST buttons to view or edit the CLINICAL INFORMATION and GENERIC INFORMATION fields.



Clinical Information

Parameter	Value
Consents	
Medication	
Medical History	
Sleep Disorder	
EKG Analysis	
Interpretation	
Analysis Data	
Recommendations	
Follow-up Plan	
Scoring Analysis	
Log Movement Analysis	
Patient Opinion	
Text Description	
Clinical Indication	
Patient Condition	
Seizure Type	

Save Cancel



Patient Information

Patient Photo Medical **History** Administrative Staff and Billing Record Status Change Log

Comment

Medications

Medical History

Sleep Disorder

EKG Analysis

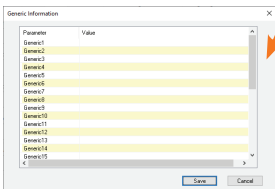
Other Fields

Generic Fields

View Full List

View Full List

OK Cancel Help



Generic Information

Parameter	Value
Generic1	
Generic2	
Generic3	
Generic4	
Generic5	
Generic6	
Generic7	
Generic8	
Generic9	
Generic10	
Generic11	
Generic12	
Generic13	
Generic14	
Generic15	

Save Cancel

Administrative Tab: Use the ADMINISTRATIVE tab to enter study-related information including scheduling information and RECORD TYPE. Use the controls on the bottom left to set user access permissions for the study.

The screenshot shows the 'Patient Information' dialog box with the 'Administrative' tab selected. The 'Administrative' tab label is circled in orange. The 'Call Log' button at the bottom right is also circled in orange. The dialog contains several sections: 'Schedule' with fields for Record Type (SPLIT), Scheduling Date (05/12/2020), Scheduling Time (10:15 PM), Scheduling End Date (05/13/2020), Scheduling End Time (8:15 AM), and In/Out-Patient (Out selected); 'HL7 Interface' with fields for Order #, Procedure Code, and Encounter #; 'Recording' with a Recording Phase dropdown; 'User Access' with checkboxes for 'Can be accessed by all users' and 'Limit Access to the selected users', and a list of users including Anna Ramag, Brend Wilso, Chery Moody, Grego Bush, Janet Solom, John Morro, Minni Nagle, sa, and Winon Scarb; and a 'Call Log' section with a table for Date and Contact, and a 'Call Log' button at the bottom right.

The patient's CALL LOG information is contained within the ADMINISTRATIVE tab. Left click on the CALL LOG button and the CALL LOG dialog box appears.

The screenshot shows the 'Call Log' dialog box. Annotations with orange arrows point to specific elements:

- An arrow points to the table of call entries on the left side, with the text: "All saved call entries are contained on the left side."
- An arrow points to the 'CONTACT' drop-down menu, with the text: "Left click on the CONTACT drop-down box to select contact status."
- An arrow points to the 'ADD' button at the bottom, with the text: "Left click on the ADD button to add text pertaining to call."
- An arrow points to the 'SAVE' button at the bottom, with the text: "Left click on SAVE to record call entry."

Staff and Billing Tab: Use the STAFF AND BILLING tab to select staff members associated with the patient and to enter HOME CARE PROVIDER, INSURANCE PROVIDER, and BILLING CODE information.

Select name by left clicking on drop-down box and scroll till you find the staff names associated with the field.

The screenshot shows a software window titled "Patient Information" with a close button (X) in the top right corner. The window has several tabs: Patient, Photo, Medical, History, Administrative, Staff and Billing (selected), Record Status, and Change Log. The "Personnel" section contains several dropdown menus: Primary Doc (with a list of names: Smith, Nancy J., Smith, Nancy J., Smith, Nancy R.), Secondary Doc, Referring Doc, Reading Doc, and Ordering Doc. To the right of these are fields for Technician, Authoritative Scorer, Refer Dept, and Copy To, each with a dropdown arrow. The "Care and Billing Info" section contains fields for Home Care Provider, Insurance Provider, and Billing Code, each with a dropdown arrow. At the bottom right, there are three buttons: OK (circled in orange), Cancel, and Help. Two orange arrows point to the Primary Doc dropdown and the OK button.

Alternatively, left clicking into any text boxes in the STAFF AND BILLING enables auto complete. For example, typing the letters "Sm" filters all drop-down options to names that start with "Sm."

Left click on the OK button to save data.

Step 5

Starting a PSG, CPAP, or Split-Night Recording

The Patient's information will appear on today's date with patient's last name, first name, room#, bed#, and study type (left of the patient's name is the STATUS TRACKING and PRIORITY status). Right click on the patient's name on today's date and an options window will appear. Left click on **START POLYSMITH ACQUISITION** to start a study.

The screenshot shows a web-based calendar application for May 2020. The interface includes a top navigation bar with various icons for patient management, study scheduling, and reporting. The calendar grid shows dates from Sunday, April 26 to Thursday, May 30. A patient study is listed on Tuesday, May 12, and continues on Wednesday, May 13. A right-click context menu is open over the study on May 13, listing several actions. The option 'Start Polysmith Acquisition' is highlighted in blue.

Date	Event
Monday, May 4	Cinco de Mayo
Monday, May 11	Mother's Day
Tuesday, May 12	[Patient Name] - [Study Type]
Wednesday, May 13	[Patient Name] - [Study Type]
Monday, May 24	Memorial Day

Context Menu Options:

- Patient Information
- View Patient History
- Attachments
- View Reports
- Reschedule Study
- Schedule Additional Study
- Schedule Additional Clinic Visit
- Add to Waiting List
- Remove
- Start Polysmith Acquisition**
- Start Portable Recording
- Start Online Monitoring
- Start Recorder Acquisition
- Add Note
- Block Date
- Blocked Dates
- Link Surveys
- Setup Default PG Survey

After you left click START POLYSMITH ACQUISITION, the NEW RECORD dialogue box will appear:

The screenshot shows the 'New Record' dialog box with the following fields and buttons:


- 1:** Patient First Name (Test)
- 2:** More... button (next to Patient icon)
- 3:** Montage (from file) drop-down box
- 4:** File Size Configuration (radio buttons for Super Small, Small, Medium, Large)
- 5:** Disk Space (9192 Hours Remaining, 468.5 GB Free, 943.7 GB Total)
- 6:** Start MSLT/MWT button

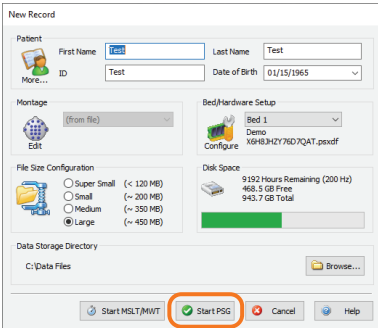
Other visible fields include: Patient Last Name (Test), Patient ID (Test), Date of Birth (01/15/1965), Bed/Hardware Setup (Bed 1, Demo, X6H8JHZY76D7QAT.psdxf), File Size Configuration (radio buttons for Super Small (< 120 MB), Small (~ 200 MB), Medium (~ 350 MB), Large (~ 450 MB)), Data Storage Directory (C:\Data Files), and buttons for Start PSG, Cancel, and Help.

In the NEW RECORD window, do the following:

1. Verify Patient Name, ID number, and Date of Birth.
2. Left click on the MORE button to enter patient information. (See “Entering Patient Information” section starting on page 4 of this Quick Reference Guide for details.)
3. Select starting montage from the drop-down box.
4. Select file recording size compression.
5. Verify that the amount of disk space/hours remaining are adequate for recording a study.
6. Left click START MSLT/MWT or START PSG to initiate patient recording.

(Note: DATA STORAGE DIRECTORY path normally reads “D:\Data Files.” The DATA STORAGE DIRECTORY is where the sleep recording is saved. It is important to verify the location prior to clicking or START PSG.)

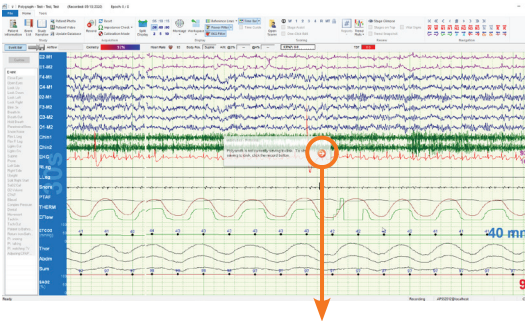
The Recording Window will appear. Notice that the waveforms start scrolling across the screen. While the waveforms are scrolling across the screen, there is a WARNING – PREVIEW dialog box in the center of the screen indicating that “Polysmith is not currently saving to disk. To start saving to disk, click the record button.” To start saving to disk, click the RECORD button .



The 'New Record' dialog box contains the following sections:

- Patient:** First Name (Test), Last Name (Test), ID (Test), Date of Birth (01/15/1965)
- Montage:** (from file) Edit
- Bed/Hardware Setup:** Bed 1, Demo, X6H8JHZY76D7QAT.psxdf
- File Size Configuration:** Super Small (< 120 MB), Small (~ 200 MB), Medium (~ 350 MB), Large (~ 450 MB)
- Disk Space:** 9192 Hours Remaining (200 Hz), 468.5 GB Free, 943.7 GB Total
- Data Storage Directory:** C:\Data Files
- Buttons:** Start MSLT/MWT, Start PSG (highlighted), Cancel, Help

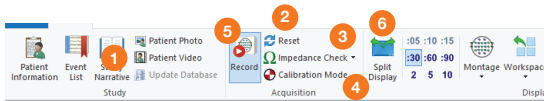
To open the recording window for a PSG, CPAP, Split-Night study, left click on START PSG.



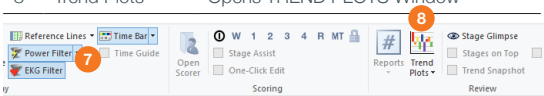
Left click on RECORD button to start data collection.

Pictured below is a magnified view of the HOME ribbon bar and a description of commonly used buttons.


HOME Ribbon Bar:

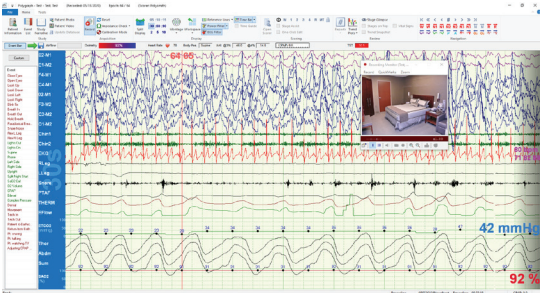


1	Patient Video	Opens video window
2	Reset	Disconnect amplifier and records flat lines
3	Impedance Check	Disconnects amplifier and displays impedance
4	Calibration	Records calibration waveforms
5	Start/Stop Record	Starts recording
6	Toggle Split Display	Opens look back window
7	Notch Filter	Turns on 60 Hz notch filter
8	Trend Plots	Opens TREND PLOTS Window





Step 6

Left Click on SHOW VIDEO button  Patient Video . A camera window will appear.





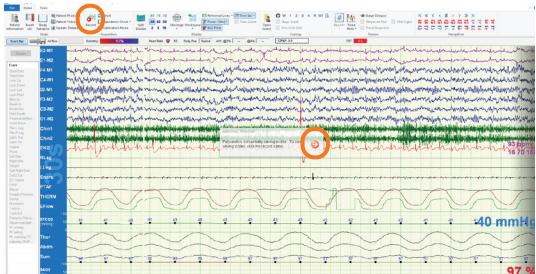
Step 7

Depending on your lab procedure, you may wish to take the patient's photo. Left click on the camera icon button  on the main toolbar of the camera window (Note: a camera photo can only be taken when the video recording is stopped).

To start the video recording, left click on the VIDEO RECORDING button  on the main toolbar of the camera window. (Note: The video recording status changes from NOT RECORDING to RECORDING in the camera window.)

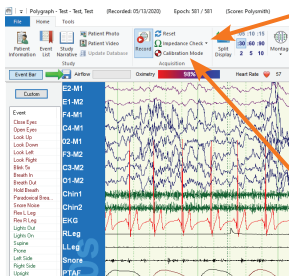
Step 8

To start the data recording, left click on the RECORD button  on the Home ribbon bar or the RECORD button  in the WARNING-PREVIEW dialog box.



Step 9

To check impedance, left click on the Ω Impedance Check  button.



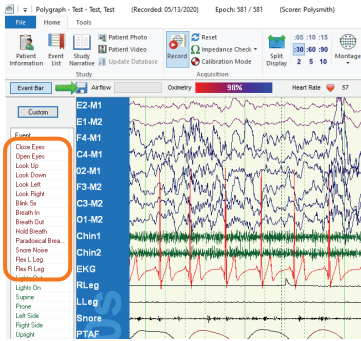
Step 10

To do machine calibrations, left click on the  Calibration Mode button.

Step 11

To do patient machine calibrations, left click on the individual comments in the EVENT BAR:

Left click on the individual patient calibrations. Event marks will be recorded on screen.



Step 12

After the check impedance, machine calibration, and patient calibrations, left click the LIGHTS OUT comment and left click on the appropriate body position in the EVENT BAR. (Note: System comments are in green print.)

The screenshot displays the software interface for a polysomnography recording. At the top, the title bar reads "Polygraph - Test - Test, Test (Recorded: 05/13/2020) Epoch: 695 / 695 (Score: Polysmith)". Below this is a menu bar with "File", "Home", and "Tools". The main toolbar includes icons for Patient Information, Event List, Study Narrative, Patient Photo, Patient Video, Update Database, Record, Reset, Impedance Check, Calibration Mode, Split Display, and Montage. The status bar shows "Airflow", "Oximetry 99%", and "Heart Rate 53".

The central part of the screen is the "Event Bar", which lists various events and body positions. A "Custom" button is highlighted with a red arrow. The event list includes: Custom, E2-M1, E1-M2, F4-M1, C4-M1, O2-M1, F3-M2, C3-M2, O1-M2, Chin1, Chin2, EKG, RLeg, LLeg, Snore, PTAf, THERM, EFlow, and ETCO2 (minHg). The ETCO2 trace shows values of 39, 25, 42, and 42.

A "Log Event Edit" dialog box is open over the event bar. It has a title bar with a close button (X) and a text input field. Below the input field are "OK" and "Cancel" buttons. A red arrow points from the "Custom" button in the event bar to the text input field in the dialog box.

Note: To add a comment (tech note) to the live recording, either left click on a predefined comment in the EVENT BAR or left click on the CUSTOM button and type your comment in the LOG EVENT EDIT box.

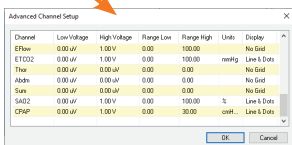
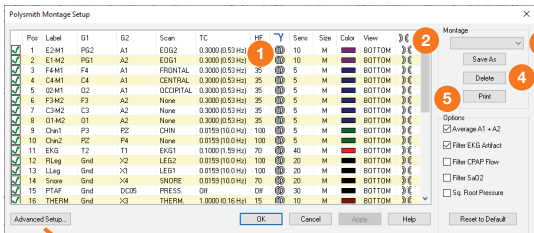
OPENING MONTAGE WINDOW



To open the Montage window, left click on the  button on the HOME ribbon bar to open the POLYSMITH MONTAGE SETUP window.



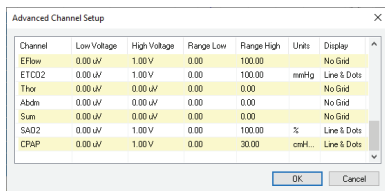
You can adjust the current montage or create and save new ones. If you wish to save the altered montage as a new montage or replace a default montage, left click SAVE AS and name it or save as an existing montage to overwrite it. If you want to alter the montage for a single study, you do not need to click SAVE AS. Simply left-click on OK to save the changes for the individual study.

Note: Only choose SAVE AS if you want to use the altered montage as a default montage.



1. Set notch filter to always on , always off or link to all channel control.
2. Left clicking on the  icon links the channel to all channel control. A linked channel will display the linked icon  and display the row as blue.
3. Saved montages can be accessed by left clicking the “Montage” drop down box.
4. Left click on the DELETE button to delete the displayed montage permanently.
5. Left click on the PRINT button to print the currently displayed montage.

Calibration of DC signals



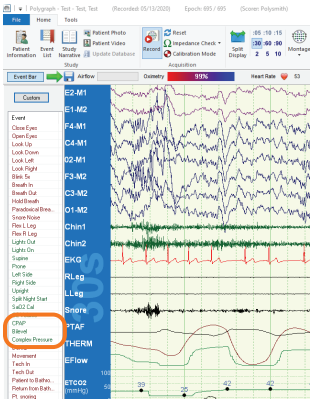
The ADVANCE CHANNEL SETUP window is where DC inputs are configured. Consult the manual of the DC device you wish to connect to the Polysmith System and find the DC output voltage and data ranges (Min and Max values). Verify that the DC device output voltage range are within the Min and Max voltage range of the Nihon Kohden amplifier (Consult the Nihon Kohden Amplifier manual.) Enter the DC device output voltage and data ranges and unit of measure in the ADVANCE CHANNEL SETUP window. After all settings are completed, left click on OK and save the montage.

To calibrate the DC device, start a recording. From the DC device, send a 0V calibration signal from the DC device and note the DC value displaying within the Polysmith recording to determine offset. Open ADVANCE CHANNEL SETUP window and enter in the offset in the RANGE LOW field. For example, the DC channel displays “-1” (when the DC device manual says it should read 0) with a 0V calibration signal. The value in the RANGE LOW currently reads “0.00.” Enter in “1” in the RANGE LOW and left click OK. The display value in the recording window should read “0.” Repeat the above calibration steps for the RANGE HIGH values by sending the high voltage range of the DC device. (Note: Remember to save montage settings after calibration is completed.)

SPLIT-NIGHT STUDY NOTE

Polysmith allows a smooth transition from PSG to a split-night study since all channels are being recorded throughout the study (Note: Channels that are recorded but not displayed are denoted by a red “X” in the montage menu).

Note: **Very Important** – You must left click on the SPLIT NIGHT START comment in the EVENT bar at the beginning of the PAP portion of a split night study. Split night reports use the SPLIT NIGHT START comment to determine the end of the diagnostic portion and the beginning of the treatment portion of the split night study. It can be added later if it was omitted (rescanning the study maybe required).



Left click on CPAP, BILEVEL, or COMPLEX PRESSURE comment to manually add the PAP pressure to the study.

Type the pressure in the POSITIVE AIRWAY PRESSURE dialog box and left click on OK. This example is for CPAP.

Positive Airway Pressure

PRESSURE VALUES

Type: CPAP Bilevel Complex

Protocol Name: Mask: Pressure Device:

CPAP EPAP PS

Range Range Range

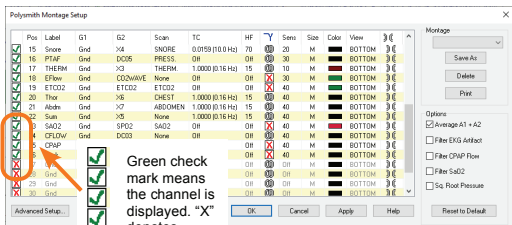
ADDITIONAL SETTINGS:

Phase: Start Split Night

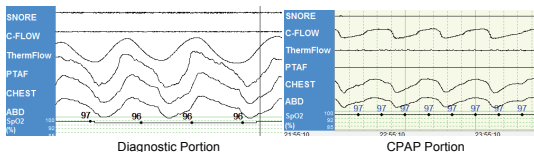
There are Several Options for Transitioning into a Split-night Study

Option 1:

Start the study in a montage that includes CPAP channels with the view already turned on in addition to a thermistor and pressure transducer channel. This will result in flat lines on the CPAP channels from the beginning of the study until the time that CPAP is applied and flat lines on the thermistor and pressure transducer channels after CPAP is applied. This option allows the reviewer to view the study in its entirety without the need for changing montages or individual channel settings. Apneas and Hypopneas will be scored on the THERM. and PRESS. channels prior to CPAP portion and on CPAP channel thereafter.



Option 1 display of airflow signals before and after CPAP is initiated.



Option 2:

Start the study in a basic PSG montage. When it is time to initiate the CPAP portion of the split-night study, left click on MONTAGE and left click on the red “X” next to C-FLOW and any additional CPAP channels to display the channel (the red “X” turns to a green check mark). Change their position in the montage by left clicking on the number next to the channel in the POS column and left click on the appropriate number position.

Option 3:

Start the study in a basic PSG montage. When it is time to initiate the CPAP portion of the split-night study, choose a CPAP montage from the MONTAGE icon drop-down menu. This action will load a CPAP montage with default settings for sensitivity, channel position, filter settings and etc. Any previous adjustments made to individual channel sensitivities, filters, etc. will need to be repeated since selecting the CPAP montage will reset the settings to their defaults. You can also document the change to a different montage and any channel adjustments as a tech comment for study review.

ENTERING CPAP/BILEVEL/ ASV SETTINGS

To enter device pressure settings, left click on CPAP, BILEVEL, or COMPLEX PRESSURE comment in the EVENT BAR list. Enter the appropriate pressure settings and click OK.

CPAP

Positive Airway Pressure

PRESSURE VALUES
Type: CPAP Bilevel Complex

Protocol Name: <input type="text"/>	Mask: <input type="text"/>	Pressure Device: <input type="text"/>
<input checked="" type="checkbox"/> CPAP <input type="text" value="0"/>	<input type="checkbox"/> EPAP <input type="text" value="-"/>	<input type="checkbox"/> PS <input type="text" value="-"/>
<input type="checkbox"/> Range <input type="text" value="-"/>	<input type="checkbox"/> Range <input type="text" value="-"/>	<input type="checkbox"/> Range <input type="text" value="-"/>

ADDITIONAL SETTINGS:

Phase: Start Split Night

OK Cancel Help

Bilevel

Positive Airway Pressure

PRESSURE VALUES
Type: CPAP Bilevel Complex

Protocol Name: <input type="text"/>	Mask: <input type="text"/>	Pressure Device: <input type="text"/>
<input type="checkbox"/> IPAP <input type="text"/>	<input checked="" type="checkbox"/> EPAP <input type="text"/>	<input type="checkbox"/> PS <input type="text" value="-"/>
<input type="checkbox"/> Range <input type="text" value="-"/>	<input type="checkbox"/> Range <input type="text" value="-"/>	<input type="checkbox"/> Range <input type="text" value="-"/>

ADDITIONAL SETTINGS:

Phase: Start Split Night

OK Cancel Help

Complex

Positive Airway Pressure

PRESSURE VALUES
Type: CPAP Bilevel Complex

Protocol Name: <input type="text"/>	Mask: <input type="text"/>	Pressure Device: <input type="text"/>
<input checked="" type="checkbox"/> IPAP <input type="text" value="-"/> MAX	<input checked="" type="checkbox"/> EPAP <input type="text" value="-"/> MAX	<input checked="" type="checkbox"/> PS <input type="text" value="-"/> MAX
<input checked="" type="checkbox"/> Range <input type="text" value="-"/> MIN	<input checked="" type="checkbox"/> Range <input type="text" value="-"/> MIN	<input checked="" type="checkbox"/> Range <input type="text" value="-"/> MIN

ADDITIONAL SETTINGS:

Backup Rate: Humidity: Max Pressure:

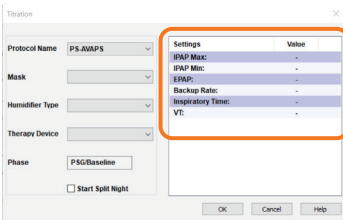
Phase: Start Split Night

OK Cancel Help

Choose from list of protocols.

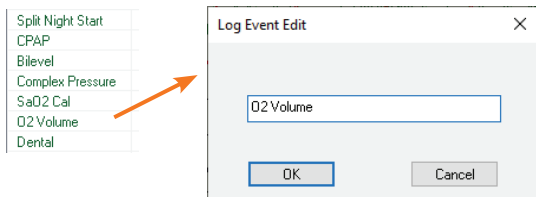


Type values into dialogue box.



ENTERING SUPPLEMENTAL OXYGEN OR ASV/BILEVEL BACKUP RATE SETTINGS

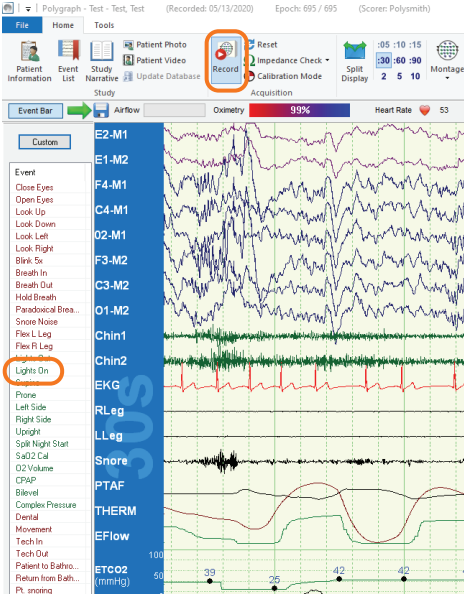
To enter supplemental oxygen settings, left click on O2 VOLUME and the LOG EVENT EDIT dialog box will appear. Enter the liter flow and click OK.



STOPPING A RECORDING

Step 1

Left click on LIGHTS ON comment from the EVENT BAR.



Step 2

Left click on the  icon on the HOME ribbon bar to stop the study.


Step 3

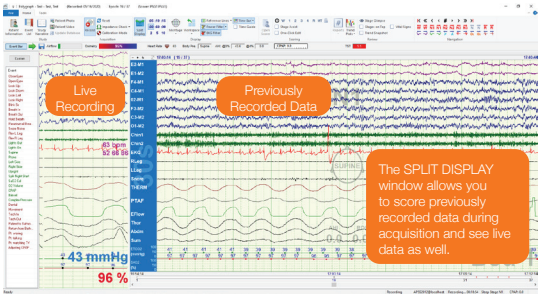
A new window will appear asking “Do you want to stop the data acquisition in progress?” Left click on YES.

Step 4

Depending on your configuration, a dialog box may appear asking you the status of the study and if you would like to update the database.

SCORING A STUDY

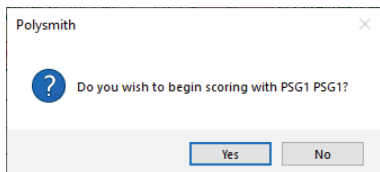
A study can be manually scored during acquisition or after the recording is complete. To start scoring a study during acquisition, left click on the  icon.



To begin scoring the record, press any number on the numeric keypad associated with a sleep stage applicable to the epoch you are viewing (Num 1=N1, Num 2=N2, Num 3=N3, Num 5=REM) or score any clinical event by left clicking and dragging on the appropriate channel (Ex. Left click and drag over the respiratory event on the PTAF channel to score an Obstructive Hypopnea). Reference page 42 for more details on marking events.

A scorer dialogue box will appear verifying the person scoring. If the name on the display is you, select “Yes.” The scorer verification is only done once for each study at the beginning while being scored.

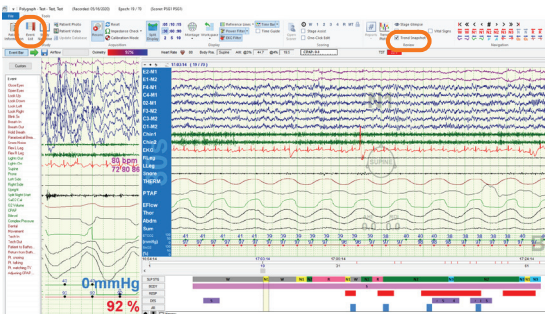
Left click on “Yes” if the displayed name matches the scorer. This confirms that you are the scorer for this record and a unique scoring file is created.



Note: A study can be scored by multiple staff members. Each time a new scorer opens a record and stages or marks an event, a verification dialog box will appear to confirm who the scorer is. A separate scoring file is generated for each staff member who scores or modifies the record.

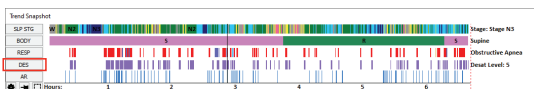
TOGGLING TREND SNAPSHOT BAR

The TREND SNAPSHOT bar displays trend summaries for multiple parameters at the bottom of the review window. It can be displayed in the SPLIT DISPLAY window during acquisition or in the main window in review. The TREND SNAPSHOT bar can be turned on and off by clicking the TREND SNAPSHOT check box in the HOME ribbon bar. When the bar is visible, you can select a trend plot from the drop-down list. You can also show or hide the log event list with the EVENT LIST button. Navigate to different points in the record by left clicking on the trend plot or by double left clicking on a log event in the EVENT LIST dialog box.

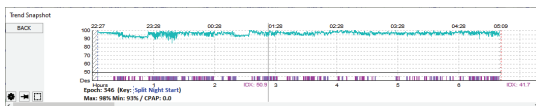



TREND SNAPSHOT

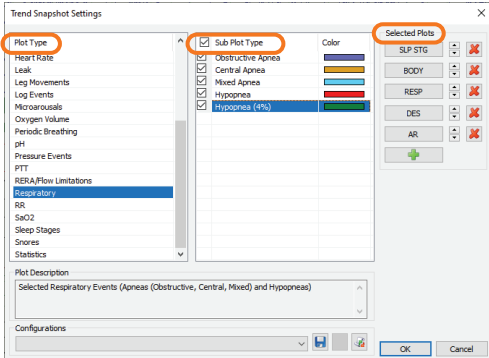
The TREND SNAPSHOT gives a quick view of a subset of simplified trend plots (selected in the SETTINGS button ) which gives an overview of events throughout the entire study. You can still view the trend in detail by clicking the trend button in the left column.



Left clicking on trend plot label opens a detailed view of that specific trend plot.



The TREND SNAPSHOT SETTINGS dialog box can be accessed by left clicking on the SETTINGS button  in the lower left corner of the TREND SNAPSHOT window. The TREND SNAPSHOT SETTINGS window has three lists, PLOT TYPE, SUB PLOT TYPE, and SELECTED PLOTS which are used to add and delete plots to be included in the Trend Snapshot, change color, and arrange the order.



NAVIGATING A RECORD

The recorded study can be navigated by using the buttons in the NAVIGATION section of the HOME ribbon bar, TIME BAR, or by using the arrow keys on the keyboard.

Navigation on the Home Ribbon Bar

Use these buttons in the main tool bar to navigate through a file. Jump to lights on or lights out, auto-page, page one page at a time or select an epoch to jump to. Navigation buttons include: LIGHTS-OUT, AUTO-PAGE BACKWARDS, BACK ONE PAGE, BACK HALF PAGE, GOTO EPOCH, FORWARD HALF PAGE, FORWARD ONE PAGE, AUTO-PAGE FORWARD, and LIGHTS-ON.

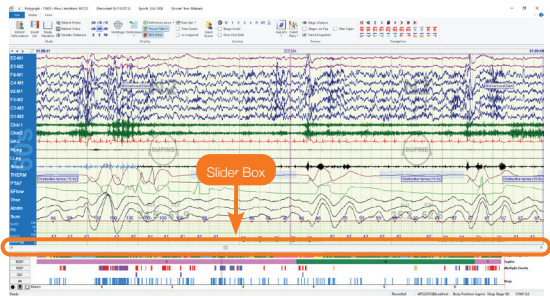


Keyboard

The LEFT-ARROW and RIGHT-ARROW keys on the keyboard will page back and forward respectively. Pressing the UP-ARROW key will begin auto-page forward. Press the UP-ARROW key again to cancel auto-page. Pressing the DOWN-ARROW key will begin auto-page back. Press the DOWN-ARROW key again to cancel auto-page. Jump directly to an epoch number by pressing the + key on the numeric keypad of the keyboard and typing the epoch number desired and pressing ENTER key.

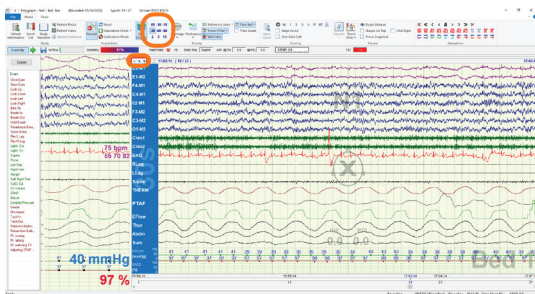
Time Bar

The TIME BAR functions similarly to a Windows scroll bar. Left click on the slider box and drag the box to the desired position on the TIME BAR. The TIME BAR icon on the HOME ribbon bar has a drop-down list to show events on the TIME BAR. Select from APNEAS/HYPOPNEAS, LOG EVENTS, MICROAROUSALS, SLEEP STAGES, and BODY POSITION. Enabling the TIME BAR events displays both the study record time and epoch above and below the slider box respectively.





CHANGING THE TIME BASE

Click on the 5s, 10s, 15s, 30s, 60s, 2m, 5m, or 10m button in the DISPLAY section of the HOME ribbon bar to set the time span. You can also cycle through the eight possible time spans by clicking on the “+” or “-” button in the upper left corner of the SPLIT DISPLAY screen.



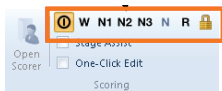
SLEEP STAGE SCORING

Sleep stage editing is enabled and disabled by selecting ENABLE STAGING button  from the SLEEP STAGE EDIT BAR in the SCORING section of the HOME ribbon bar or by using “F2” key on the keyboard. When ENABLE STAGING  is selected the SLEEP STAGE EDIT BAR will be visible (and not grayed out). Turn ENABLE STAGING off when not in use to prevent accidental scoring. Change the current sleep stage by selecting a stage from the SLEEP STAGE EDIT BAR or by using the number pad on the keyboard.

Stage Glimpse Bar



Sleep Stage Edit Bar



Note: Use the number pad to stage or change the scoring of the epoch and advance to the next epoch. Use the RIGHT-ARROW key on the keyboard to advance an epoch or the LEFT-ARROW key to go back an epoch without changing the sleep stage.

STAGE ASSIST

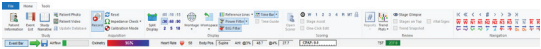
Use this feature to assist sleep staging a record. During the automated analysis, Polysmith tags epochs that the system is uncertain about the automated scoring. By scoring the epochs the system is uncertain about, scoring time can be greatly reduced while maintaining scoring quality. To activate this feature, left click the STAGE ASSIST check box in the SCORING portion of the HOME ribbon bar. Polysmith will jump to the first epoch to be scored. Continue scoring as you normally would and the record will automatically jump to the next epoch to be scored. When Stage Assist is enabled, the sleep stage trend plot will display purple tick marks for the epochs that are to be scored. These will disappear as the record is scored.



The table below shows the results of 23 studies that was scored by three scorers and then scored using Stage Assist. The three human scorers were designated as Master, subordinate, or inter-lab. The master scorer is a registered tech or physician with at least 5 years' experience scoring sleep records. The subordinate is a less experienced registered sleep tech in the same lab. The inter-lab scorer is an expert scorer from another lab used as a control. The master scorer is used as the gold standard. The results when using the scoring assist feature are in between the inter-lab results and the intra-lab results.

Subordinate	Inter-lab	Polysmith	Polysmith w/scoring assist
89.5%	82.8%	73.0%	84.4%

USING ONE-CLICK EDIT



ONE-CLICK EDIT allows users to quickly add events with a single left click of the mouse. Enable One-Click editing by left clicking on the check box for ONE-CLICK EDIT under the SCORING portion of the HOME ribbon bar. Left-click to add an event and right-click on an event to delete it. Polysmith determines the type of event by the channel the user clicks on. To change the type of apnea or hypopnea event in the ONE-CLICK EDIT MODE, move the mouse cursor over the event. An event dialog box will appear giving information about the event and displays options to change the event type or delete the event.

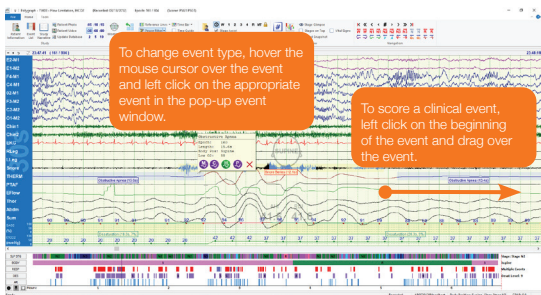


CLINICAL EVENT SCORING

Scoring Apneas or Hypopneas

Apneas are scored on the THERM (Thermistor) channel and hypopneas are scored on the PRESS. (Pressure) channel before the SPLIT NIGHT comment is entered into the record. Both apneas and hypopneas are scored on the C. FLOW channel after the SPLIT NIGHT comment is entered into the record or at the beginning of a PAP study. The THERM., PRESS., and C. FLOW score channels are determined in the montage under the SCAN column.

There are seven types of airflow events (listed in the table on the next page). You can switch between event types by hovering the mouse cursor over the event and using the hot-keys on the keyboard or by left-clicking on the event type from the pop-up EVENT DIALOG box. If there is only one scan channel set, both apneas and hypopneas are scored on the one channel. For a split night (or full night CPAP) study, apneas and hypopneas are scored on different channels as mentioned below:



1. If THERM., PRESS. and C. FLOW scan channels are designated in the POLYSMITH MONTAGE SETUP window prior to adding the SPLIT NIGHT START comment, apneas will be scored on THERM. channel and hypopneas will be scored on the PRESS. channel. After the SPLIT NIGHT START (or “CPAP” comment) is added to the record, both apneas and hypopneas will be scored on C. FLOW channel.
2. If only THERM. and PRESS. scan channels are designated in the POLYSMITH MONTAGE SETUP window prior to adding the SPLIT NIGHT START comment, apneas will be scored on THERM. and hypopneas will be scored on PRESS. channel. After the SPLIT NIGHT START (or “CPAP” comment) is added to the record, both apneas and hypopneas are scored on the PRESS. channel.

Clinical Event Type	Scan Channel	Hot Key
Obstructive Apnea	THERM.,C. FLOW	F3
Central Apnea	THERM.,C. FLOW	F4
Mixed Apnea	THERM.,C. FLOW	F5
Periodic Breathing Apnea	THERM.,C. FLOW	-
Obstructive Hypopnea	PRESS.,C. FLOW	F6
Central Hypopnea	PRESS.,C. FLOW	F7
Mixed Hypopnea	PRESS.,C. FLOW	F8
Oxygen Desaturation	SAO2	-
Snore	SNORE	-
Limb Movement	LEG1 and LEG2	F11
Microarousal	EEG, EOG	F9
Custom Events	Assigned by user	-

Scoring RERAs

Score RERAs on the PRESS. designated scan channel. Left click and drag on the PRESS. channel to add an event or right-click on a respiratory event to edit type or delete it.

Scoring Desaturations

Score desaturations on the “SAO2” designated scan channel. Left click and drag on the “SAO2” channel to add an event or right-click on an event to delete it.

Scoring Limb Movements

Leg movements are scored on the Leg scan channels (LEG1, and LEG2). Left click and drag on the “LEG1” and “LEG2” designated scan channels to add an event or right-click on an existing event to delete it. PLMS (Periodic Limb Movement Series) are automatically scored on the combined leg channels based on the location and frequency of the leg movements as defined in the POLYSMITH SETTINGS dialog box under SCORING. Every time leg events are added, Polysmith will apply AASM scoring rules to mark PLMS automatically.

Scoring Snores

Snores are scored on the SNORE channel. Click and drag on the SNORE channel to add an event or right-click on an existing event to delete it. SNORE Series are automatically scored on the Snore channel when there are snores with a minimum separation of 1 second and a maximum separation of 6 seconds. The minimum frequency for a snore series is 2 snores. Every time an event is added; Polysmith will adjust Snore Series and instantly show the change.

Scoring Microarousals

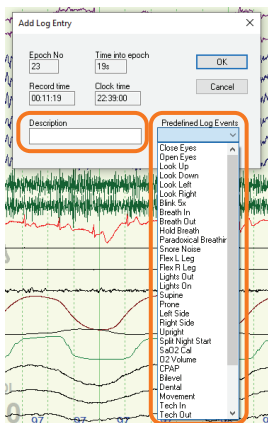
Microarousals can be marked on any EEG, EOG, EMG, or EKG scan channel. Microarousals can either have a duration or no duration depending on the configurations in TOOLS ribbon bar -> SETTINGS -> SCORING-> AROUSALS. Right-click on any of these channels to add or delete a Microarousal. The Microarousal event tag will appear near the occipital channel. Polysmith will automatically associate the Microarousal with any nearby event and prioritize the association according to the AASM scoring rules.

Scoring Custom Events

Custom events are scored on the scan channel designated in TOOLS ribbon bar -> SETTINGS -> CUSTOM EVENTS. To score an event, click and drag over the event on the designated channel. If a series is associated with the custom event, Polysmith will automatically generate the series based on the rules set up in "Custom Events."

ADDING A TECH COMMENT OR SYSTEM EVENT

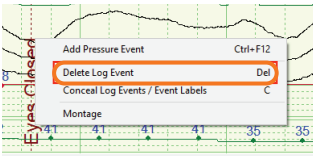
To add a comment in SPLIT DISPLAY or to a completed record, right click on the epoch you want to enter the comment, left click on ADD LOG EVENT (or Press F12), then choose from the pre-defined drop down list or type directly in the comment box. Left click OK to enter the comment in the record.



Choose from PREDEFINED LOG EVENTS or type your comment in the DESCRIPTION text box.

DELETING A TECH COMMENT OR SYSTEM EVENT

To delete a previously entered tech comment or system event, right-click on the comment and left click on DELETE LOG EVENT. You can also access the entire event list log by left clicking on EVENT LIST in the HOME ribbon bar. Right-click on the comment you want to delete in the EVENT LIST and left-click DELETE to delete it.



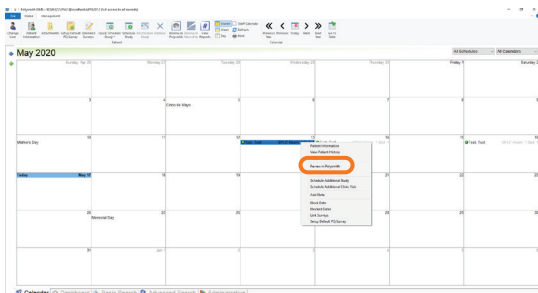
Right click on the comment to open the option menu and left click on DELETE EVENT.

Epoch	Stage	BP	Type	Record Time	Time	Length	Description
8	L	UNKNOWN	Log	00:03:34	22:31:15	-	3 breaths - oral
9	L	UNKNOWN	Log	00:04:14	22:31:55	-	hold breath
10	L	UNKNOWN	Log	00:04:32	22:32:13	-	stretch belts
11	W	SUPINE	Log	00:05:08	22:32:49	-	Lights Out
11	W	SUPINE	Log	00:05:08	22:32:49	-	Supine
11	W	SUPINE	Desat	00:05:01	22:32:41	14.0	Desaturation 3%, Low O2: 96, Resp: 13.9
11	W	SUPINE	Arr	00:05:01	22:32:41	31.6	Arrhythmia AFIB, HR: 68.0
11	W	SUPINE	Arr	00:05:01	22:32:41	8.4	Arrhythmia BRADY, HR: 68.0
11	W	SUPINE	Arr	00:05:01	22:32:41	4.5	Arrhythmia PAUSE, HR: 68.0
12	W	SUPINE	Desat	00:05:30	22:33:11	69.0	Desaturation 2%, Low O2: 97, Resp: 19.5
14	W	SUPINE	Desat	00:06:31	22:34:11	24.5	Desaturation 1%, Low O2: 97, Resp: 20.5
14	W	SUPINE	Arr	00:06:32	22:34:11	0.0	Arrhythmia PVC, HR: 81.0
15	W	SUPINE	Desat	00:07:01	22:34:41	36.0	Desaturation 1%, Low O2: 97, Resp: 22.3
15	W	SUPINE	Arr	00:07:02	22:34:41	0.0	Arrhythmia PVC, HR: 80.0
16	W	SUPINE	Arr	00:07:30	22:35:11	0.0	Arrhythmia PVC, HR: 79.0
18	W	SUPINE	Desat	00:08:32	22:36:11	28.0	Desaturation 2%, Low O2: 96, Resp: 22.1

Left click on EVENT LIST icon to open EVENT LIST log. Right click on event entry to be deleted. The Options dialog box will open and left click on DELETE.

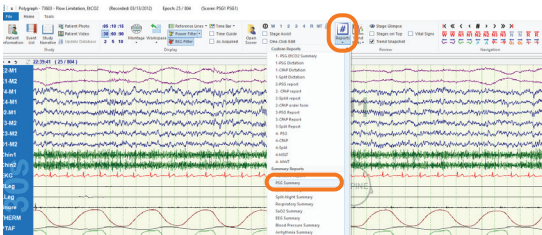
OPENING A STUDY THROUGH POLYSMITH DMS (CALENDAR)

Right click on the patient's name in the Calendar. Left click on REVIEW IN POLYSMITH. The study will open in Polysmith.

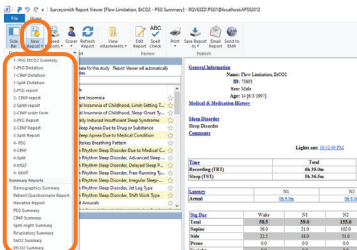


GENERATING A REPORT




After the patient recording has been completed and scored (manually or auto scored), a report can be generated that will incorporate the scored events and stages. There are several default reports to choose from. To generate a report, open a patient recording (or leave the currently scored study open) and left click on REPORTS from REVIEW portion of the HOME ribbon bar. Left click on the desired report. In this example, the PSG Summary report is selected.

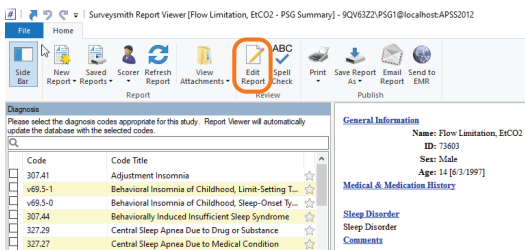


The Report Viewer program will open with the selected report. To regenerate the report or select a different report, left click on the drop-down box of the NEW REPORT icon in the SURVEYSMITH REPORT VIEWER window.



MANUALLY EDITING A REPORT

Left click on the  icon on the HOME ribbon bar of the SURVEYSMITH REPORT VIEWER window to type directly on the report and make edits. When you are finished editing the report left click the  icon once more to exit EDIT REPORT mode. (Note: Each time you left click the  icon, edit mode is toggled on and off.)



Surveysmith Report Viewer [Flow Limitation, EtCO2 - PSG Summary] - 9QV63Z2\PSG1@localhost:APSS2012

File Home

Side Bar New Report Saved Reports Scorer Refresh Report View Attachments **Edit Report** Spell Check Print Save Report As Email Report Send to EMR

Report Review Publish

Diagnosis
Please select the diagnosis codes appropriate for this study. Report Viewer will automatically update the database with the selected codes.


Code	Code Title	
<input type="checkbox"/> 307.41	Adjustment Insomnia	☆
<input type="checkbox"/> v69.5-1	Behavioral Insomnia of Childhood, Limit-Setting T...	☆
<input type="checkbox"/> v69.5-0	Behavioral Insomnia of Childhood, Sleep-Onset Ty...	☆
<input type="checkbox"/> 307.44	Behaviorally Induced Insufficient Sleep Syndrome	☆
<input type="checkbox"/> 327.29	Central Sleep Apnea Due to Drug or Substance	☆
<input type="checkbox"/> 327.27	Central Sleep Apnea Due to Medical Condition	☆

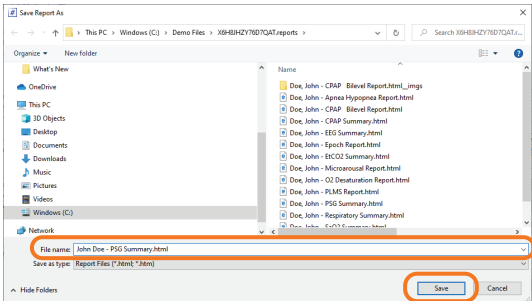
General Information
Name: Flow Limitation, EtCO2
ID: 73603
Sex: Male
Age: 14 [6/3/1997]

Medical & Medication History

[Sleep Disorder](#)
[Sleep Disorder](#)
[Comments](#)

SAVING A REPORT

Left click on the  icon in the REVIEW section of the HOME ribbon bar in the SURVEYSMITH REPORT VIEWER window to save report edits and changes. The SAVE REPORT AS dialogue box will open. If you wish to change the name of the report, type the new name of the report in the FILE NAME box and left click SAVE. If you do not wish to change the name of the report, simply left click SAVE. The report will be saved with the patient study.



PRINTING A REPORT

Reports can be printed from the Report Viewer program. To print a report, open the desired report and left click on icon to print the displayed report.



SurveySmith Report Viewer [Flow Limitation, EIC02 - PSG Summary] - SQV63ZVPSG1@localhost:APSS2012

File Home

File Bar: New Report, Saved Report, Reports, Scorer Report, Refresh Report, View Attachments, Edit Report, Spell Check, Print, New Report, Email Report, Send to All, Publish

Diagnosis: Please select the diagnosis codes appropriate for this study. Report Viewer will automatically update the database with the selected codes.

Code	Code Title
307.41	Adjustment Insomnia
v68.5-1	Behavioral Insomnia of Childhood, Limit-Setting Ty...
v68.5-0	Behavioral Insomnia of Childhood, Sleep-Onset Ty...
307.44	Behaviorally Induced Insufficient Sleep Syndrome
327.29	Central Sleep Apnea Due to Drug or Substance
327.27	Central Sleep Apnea Due to Medical Condition
786.04	Cheyne Stokes Breathing Pattern
327.37	Circadian Rhythm Sleep Disorder Due to Medical C...
327.32	Circadian Rhythm Sleep Disorder, Advanced Sleep ...
327.31	Circadian Rhythm Sleep Disorder, Delayed Sleep P...
327.34	Circadian Rhythm Sleep Disorder, Free-Running Ty...
327.33	Circadian Rhythm Sleep Disorder, Irregular Sleep...
327.35	Circadian Rhythm Sleep Disorder, Jet Lag Type
327.36	Circadian Rhythm Sleep Disorder, Shift Work Type
327.41	Confused Arousal

General Information

Name: Flow Limitation, EIC02
ID: 7560
Sex: Male
Age: 14 [8/3/1997]

BMI: 43.26
Height: 66.0 in
Weight: 268.0 lb
Date: 5/11/20

Medical & Medication History

Sleep Disorder
Sleep Disorder
Comments

Lights out: 10:33:49 PM

Time	Total	Supine
Recording (TRT)	0h 35.0m	0h 3.5m
Sleep (TST)	0h 36.5m	0h 27.5m

Latency	N1	N2	N3
Actual	0h 5.0m	0h 5.0m	0h 27.0m

Sig. Dur	Wake	N1	N2	N3	R
Total	59.5	39.0	153.0	134.0	0
Supine	26.0	21.0	102.0	78.5	0
Side	22.5	18.0	51.0	55.5	0
Prone	0.0	0.0	0.0	0.0	0
Upright	0.0	0.0	0.0	0.0	0

Apnea Summary

	Total	Sub	Supine	Side	Prone
Total	27	26	26	1	0
	NIEM	27	26	1	0

The PRINT dialogue box will open. Ensure that the printer settings are correct then left click the PRINT button in the PRINT dialogue box.

Print

General Options

Select Printer

- Adobe PDF
- Brother MFC-J6945DW
- Brother MFC-J6945DW Printer**
- Brother PCL-FAX v.3.2.1
- Fax
- Foxit Reader PDF Print

Status: Ready Print to file Preferences

Location: Find Printer...

Comment:

Page Range

All Selection Current Page

Pages: 1

Enter either a single page number or a single page range. For example, 5-12

Number of copies: 1

Collate 1 2 3


Print Cancel Apply

COPYING A STUDY TO CD/ DVD OR SERVER LOCATION

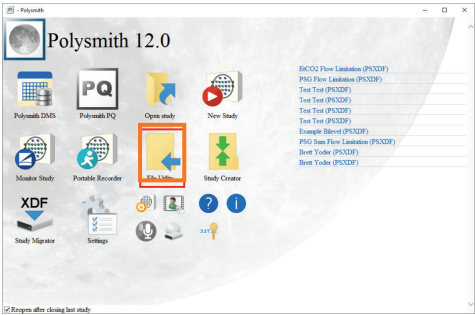
Note: The copy function copies the file to a destination disk or drive/server location and updates the database as to the location of the file. **(Without a database they perform the same function)**

1. Go to the computer that the study was collected on.
2. *(For CD/DVD only) Insert Blank CD or DVD into the appropriate CD/DVD drive.
3. *(For CD/DVD only) In some cases, a window will appear shortly after inserting a blank CD.

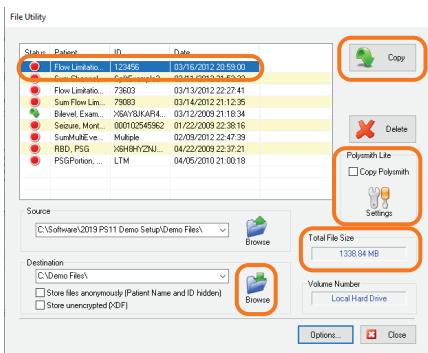


4. *(For CD/DVD only) Close out of the CD\DVD Drive window by left clicking on the CANCEL button on the bottom of the window. Double left click on the  icon on the desktop of the PC the study was collected on.

5. The Polysmith window will open. Left click on FILE UTILITY.



6. The FILE UTILITY window will appear. Left click on the patient's name that you wish to copy. The patient's name will be highlighted. You can choose more than one patient by holding the CTRL button on the keyboard and left-clicking the desired patients. All selected patients will be highlighted along with the total size of the files to be copied.

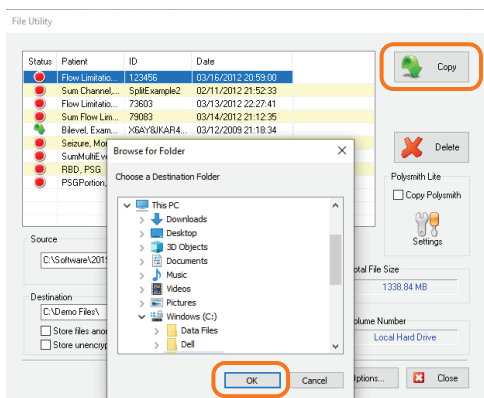


Left click on the check box next to COPY POLYSMITH in the POLYSMITH LITE section of the FILE UTILITY window to add a copy of Polysmith Lite with the patient file on the CD/DVD. Polysmith Lite allows the patient file to be reviewed on any Windows based computer. Studies cannot be scored using POLYSMITH LITE. Left click on the COPY button to initiate the transfer of the study to CD/DVD.

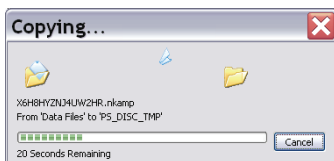
Verify the TOTAL FILE SIZE is within the CD/DVD storage limits.

Under the DESTINATION box, left click on the BROWSE" button and a new box will appear.

- Left click on the CD/DVD drive or the server location (Verify that the COPY POLYSMITH box is unchecked when saving to a storage location other than a CD/DVD) and left click on OK. (Note: If applicable, check with your supervisor for the drive letter/name of your server location)



- Left click on the COPY button
- A status window will appear.



10. *(For CD/DVD only) A new dialogue box will appear. If copying to a CD/DVD, Polysmith will ask if you would like to leave the recording session open. Allowing for the recording session to stay open will permit other studies to be added to the CD/DVD later. Answering “NO” will close the CD/DVD burning session and prevent additional studies from being added to the CD/DVD. Note: To make the CD/DVD readable on PC, you will need to close the recording session.

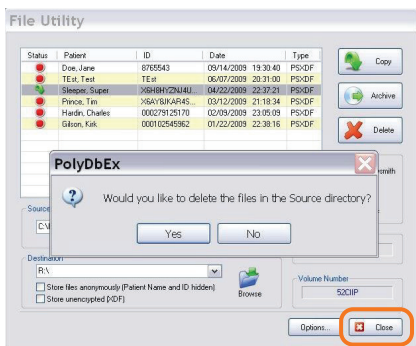



11. *(For CD/DVD only) A progress window will appear.



- After the disk has completed recording (For CD/DVD only - the CD/DVD door will open) or file has been copied/archived to the server location, a new dialogue box will appear.

Click on “Yes” if you want to delete the original off the hard drive. Click on “No” if you want to keep the original copy on the Hard Drive.



- Left click on  Close on the bottom right hand corner of the File Utility window.

KEY NOTES ON ARCHIVING OR COPYING MSLTS

1. Copy the MSLT project as well as each individual nap.
2. When deleting an MSLT, delete the MSLT project first. Then delete each individual nap **after the MSLT is deleted.**

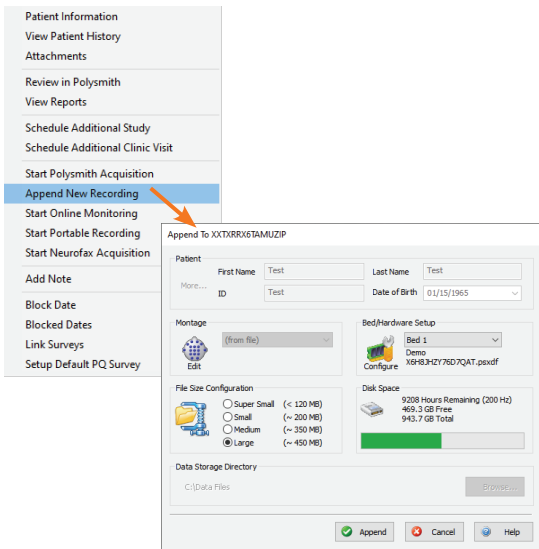
APPENDING A FILE

Appending Live Studies

Existing studies can be combined using the Study Creator at any time. You can also append a new recording to an existing study when you start the recording from Polysmith DMS.



This is useful if a recording is aborted or if you want to create a combined study at the time the recording is started. To append a new recording, the following criteria must be met:

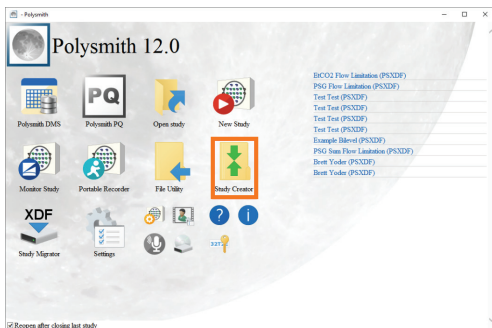
1. The recording must be either a PSG or a MSLT/MWT study.
2. The recording must reside on the same machine that originally recorded the previous study portion.



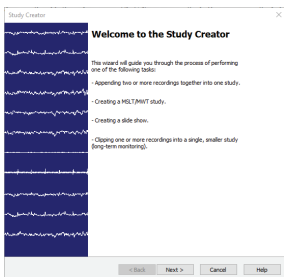
To append a new recording, right-click the patient in the calendar view, and select the APPEND NEW RECORDING option. Polysmith will be launched (if it is not already running) and the APPEND TO dialog box will appear. Since the new recording is being appended to an existing one, you will not be able to alter the patient information or the storage path. If you attempt to append to a non-local recording, Polysmith DMS will bring up an error dialog box and tell you which machine the recording is located on.

Appending Previously Recorded Studies (Study Creator)

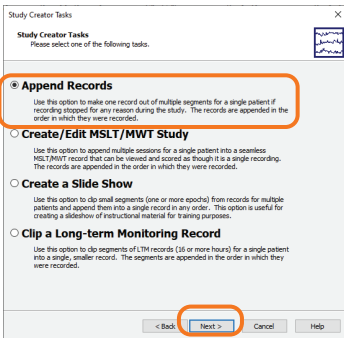
1. Go to the computer that the study was collected on.
2. Double left click on the  icon on the Desktop.
3. The Polysmith window will open. Left click on  icon.



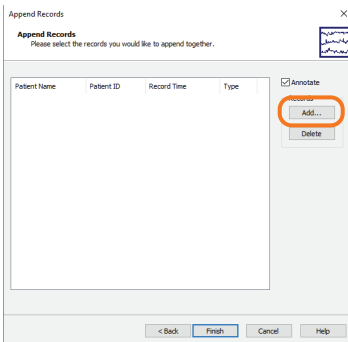
4. The STUDY CREATOR wizard will appear. Left click on NEXT button.



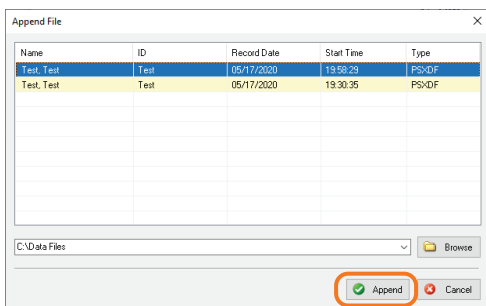
5. The STUDY CREATOR TASKS window will appear. Select APPEND RECORDS and click on NEXT.



6. An APPEND RECORDS window will appear. Left click on ADD.

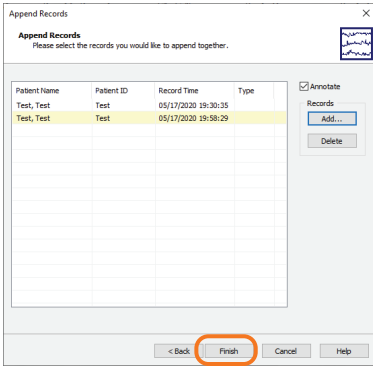


- The APPEND FILE window appears. If your study does not appear immediately, click on the BROWSE button and select the appropriate drive location on the appropriate computer. Left click on the first study recording and left click on APPEND.

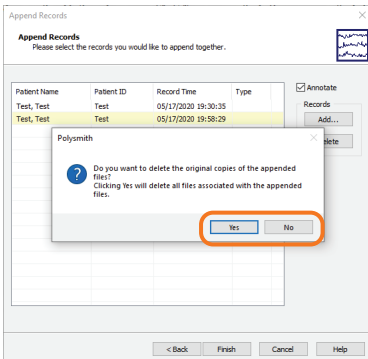


- Repeat steps 8-9 until all appropriate files are selected. (Note: The append feature will only append files that have the same patient ID and names. For this reason, it is important not to re-enter patient information when starting a study or MSLT nap.)

9. The selected files will appear in the APPEND RECORDS window. Left click on FINISH when all files that need to be appended appear in the main window.




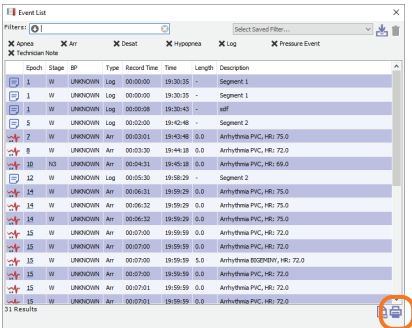
10. Click on YES to delete the original files. Select NO to keep the original files.



11. The Study Creator will close. Click on “X” on the top right corner of Polysmith to exit out of the program.
12. Verify the newly appended file by opening the patient’s file in Polysmith. The file to select will be the one with the earliest start recording time. (Note: If the ANNOTATE box is checked, the record will make a log entry for each study appended in the sleep record.)

PRINTING OUT TECH NOTES

1. Verify that the printer is powered and online.
2. Open study file.
3. Left click on EVENT LIST.
4. The EVENT LIST window will appear.
5. Left click on  icon on the bottom right corner of the




Epoch	Stage	BP	Type	Record Time	Time	Length	Description
1	W	UNKNOWN	Log	00:00:00	19:30:35	-	Segment 1
1	W	UNKNOWN	Log	00:00:00	19:30:35	-	Segment 1
1	W	UNKNOWN	Log	00:00:08	19:30:43	-	pdf
5	W	UNKNOWN	Log	00:02:00	19:42:48	-	Segment 2
7	W	UNKNOWN	Arr	00:03:01	19:43:48	0.0	Arrhythmia PVC, HR: 75.0
8	W	UNKNOWN	Arr	00:03:30	19:44:38	0.0	Arrhythmia PVC, HR: 72.0
10	NS	UNKNOWN	Arr	00:04:31	19:45:38	0.0	Arrhythmia PVC, HR: 69.0
12	W	UNKNOWN	Log	00:05:30	19:58:29	-	Segment 2
14	W	UNKNOWN	Arr	00:06:31	19:59:29	0.0	Arrhythmia PVC, HR: 75.0
14	W	UNKNOWN	Arr	00:06:32	19:59:29	0.0	Arrhythmia PVC, HR: 75.0
14	W	UNKNOWN	Arr	00:06:32	19:59:29	0.0	Arrhythmia PVC, HR: 75.0
15	W	UNKNOWN	Arr	00:07:00	19:59:59	0.0	Arrhythmia PVC, HR: 72.0
15	W	UNKNOWN	Arr	00:07:00	19:59:59	0.0	Arrhythmia PVC, HR: 72.0
15	W	UNKNOWN	Arr	00:07:00	19:59:59	5.0	Arrhythmia BIGEMINY, HR: 72.0
15	W	UNKNOWN	Arr	00:07:00	19:59:59	0.0	Arrhythmia PVC, HR: 72.0
15	W	UNKNOWN	Arr	00:07:01	19:59:59	0.0	Arrhythmia PVC, HR: 72.0
15	W	UNKNOWN	Arr	00:07:01	19:59:59	0.0	Arrhythmia PVC, HR: 72.0

EVENT LIST window.

6. Follow the instructions in the PRINT dialog box and left click on OK.

PRINTING MULTI-TREND PLOTS

1. Verify that printer is powered and online.
2. Open study file.
3. Left click on  icon on the HOME ribbon bar.
4. Select the correct scheme by left clicking on the PAGE SCHEME drop down box and left clicking on the correct scheme (e.g., Sleep Summary).
5. Left click on PRINT. Follow the Print dialog box.



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