

GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2009

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HOUSE BILL 819\*  
Committee Substitute Favorable 5/28/09  
Committee Substitute #2 Favorable 6/3/09  
Senate Finance Committee Substitute Adopted 7/22/09

Short Title: Polysomnography Practice Act.

(Public)

Sponsors:

Referred to:

March 30, 2009

1 A BILL TO BE ENTITLED  
2 AN ACT TO ESTABLISH THE POLYSOMNOGRAPHY PRACTICE ACT.

3 The General Assembly of North Carolina enacts:

4 SECTION 1. Chapter 90 of the General Statutes is amended by adding a new  
5 Article to read:

6 "Article 39A.

7 "Polysomnography Practice Act.

8 "§ 90-677.1. Definitions.

9 The following definitions apply in this Article:

- 10 (1) Board. – The Board of Registered Polysomnographic Technologists (BRPT),  
11 a member of the National Organization of Certification Associations and  
12 accredited by the National Commission for Certifying Agencies (NCCA),  
13 the accreditation body of the National Organization for Competency  
14 Assurance (NOCA).
- 15 (2) Direct supervision. – An act whereby a registered polysomnographic  
16 technologist who is providing supervision is present in the area where the  
17 polysomnographic procedure is being performed and immediately available  
18 to furnish assistance and direction throughout the performance of the  
19 procedure.
- 20 (3) General supervision. – The authority and responsibility to direct the  
21 performance of activities as established by policies and procedures for safe  
22 and appropriate completion of polysomnography services whereby the  
23 physical presence of a licensed physician is not required during the  
24 performance of the polysomnographic procedure, but the licensed physician  
25 must be available for assistance, if needed.
- 26 (4) Licensed physician. – A physician licensed to practice medicine under  
27 Article 1 of Chapter 90 of the General Statutes.
- 28 (5) Medical Board. – The North Carolina Medical Board established under  
29 G.S. 90-2.
- 30 (6) Polysomnography. – The allied health specialty involving the process of  
31 attended and unattended monitoring, analysis, and recording of physiological  
32 data during sleep and wakefulness to assist in the assessment of sleep and  
33 wake disorders and other sleep disorders, syndromes, and dysfunctions that  
34 are sleep-related, manifest during sleep, or disrupt normal sleep and wake  
35 cycles and activities.



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- 1           (7)   Registered polysomnographic technologist. – A person who is credentialed  
2           by the Board as a 'Registered Polysomnographic Technologist' (RPSGT).  
3           (8)   Student. – A person who is enrolled in a polysomnography educational  
4           program approved by the Board as an acceptable pathway to meet eligibility  
5           requirements for credentialing.

6   **"§ 90-677.2. Practice of polysomnography.**

7       (a)   Practice. – The 'practice of polysomnography' means the performance of any of the  
8       following tasks:

- 9           (1)   Monitoring and recording physiological data during the evaluation of  
10          sleep-related disorders, including sleep-related respiratory disturbances, by  
11          applying the following techniques, equipment, or procedures:  
12           a.   Positive airway pressure (PAP) devices, such as continuous positive  
13           airway pressure (CPAP), and bilevel and other approved devices,  
14           providing forms of pressure support used to treat sleep disordered  
15           breathing on patients using a mask or oral appliance; provided, the  
16           mask or oral appliance does not attach to an artificial airway or  
17           extend into the trachea.  
18           b.   Supplemental low flow oxygen therapy, up to eight liters per minute,  
19           utilizing nasal cannula or administered with continuous or bilevel  
20           positive airway pressure during a polysomnogram.  
21           c.   Capnography during a polysomnogram.  
22           d.   Cardiopulmonary resuscitation.  
23           e.   Pulse oximetry.  
24           f.   Gastroesophageal pH monitoring.  
25           g.   Esophageal pressure monitoring.  
26           h.   Sleep staging, including surface electroencephalography, surface  
27           electrooculography, and surface submental or masseter  
28           electromyography.  
29           i.   Surface electromyography.  
30           j.   Electrocardiography.  
31           k.   Respiratory effort monitoring, including thoracic and abdominal  
32           movement.  
33           l.   Plethysmography blood flow monitoring.  
34           m.   Snore monitoring.  
35           n.   Audio and video monitoring.  
36           o.   Body movement.  
37           p.   Nocturnal penile tumescence monitoring.  
38           q.   Nasal and oral airflow monitoring.  
39           r.   Body temperature monitoring.  
40           s.   Actigraphy.  
41          (2)   Observing and monitoring physical signs and symptoms, general behavior,  
42          and general physical response to polysomnographic evaluation and  
43          determining whether initiation, modification, or discontinuation of a  
44          treatment regimen is warranted based on protocol and physician's order.  
45          (3)   Analyzing and scoring data collected during the monitoring described in  
46          subdivisions (1) and (2) of this subsection for the purpose of assisting a  
47          licensed physician in the diagnosis and treatment of sleep and wake  
48          disorders.  
49          (4)   Implementing a written or verbal order from a licensed physician that  
50          requires the practice of polysomnography.  
51          (5)   Educating a patient regarding polysomnography and sleep disorders.

1       **(b) Limitations.** – The practice of polysomnography shall be performed under the  
2 general supervision of a licensed physician. The practice of polysomnography shall take place  
3 in a hospital, a stand-alone sleep laboratory or sleep center, or a patient's home. However, the  
4 scoring of data and education of patients may take place in settings other than a hospital,  
5 stand-alone sleep laboratory or sleep center, or patient's home.

6 **"§ 90-677.3. Unlawful acts.**

7       **(a) Unlawful Act.** – On or after January 1, 2012, it shall be unlawful for a person to do  
8 any of the following unless the person is listed with the Medical Board as provided in this  
9 Article:

- 10           (1) Practice polysomnography.
- 11           (2) Represent, orally or in writing, that the person is credentialed to practice  
12 polysomnography.
- 13           (3) Use the title 'Registered Polysomnographic Technologist' or the initials  
14 'RPSGT.'

15       **(b) Violations.** – A violation of this section is a Class 1 misdemeanor. Complaints and  
16 investigations of violations of this Article shall be directed to and conducted by the Board. The  
17 court may issue injunctions or restraining orders to prevent further violations under this Article.

18 **"§ 90-677.4. Exemptions.**

19       The provisions of this Article do not apply to any of the following:

- 20           (1) A person registered, certified, credentialed, or licensed to engage in another  
21 profession or occupation or any person working under the supervision of a  
22 person registered, certified, credentialed, or licensed to engage in another  
23 profession or occupation in this State if the person is performing work  
24 incidental to or within the scope of practice of that profession or occupation  
25 and the person does not represent himself or herself as a registered  
26 polysomnographic technologist.
- 27           (2) An individual employed by the United States government when performing  
28 duties associated with that employment.
- 29           (3) Research investigation that monitors physiological parameters during sleep  
30 or wakefulness, provided that the research investigation has been approved  
31 and deemed acceptable by an institutional review board, follows  
32 conventional safety measures required for the procedures, and the  
33 information is not obtained or used for the practice of clinical medicine.
- 34           (4) A physician licensed to practice medicine under Article 1 of Chapter 90 of  
35 the General Statutes or a physician assistant or nurse practitioner licensed to  
36 perform medical acts, tasks, and functions under Article 1 of Chapter 90 of  
37 the General Statutes.
- 38           (5) A student actively enrolled in a polysomnography education program if:
  - 39               a. Polysomnographic services and post-training experience are  
40 performed by the student as an integral part of the student's course of  
41 study;
  - 42               b. The polysomnographic services are performed under the direct  
43 supervision of a registered polysomnographic technologist; and
  - 44               c. The student adheres to post-training examination guidelines  
45 established by the Board.

46 **"§ 90-677.5. Listing requirements.**

47       **(a) Annual Listing.** – A person may not practice polysomnography under this Article  
48 unless the person is listed with the Medical Board. In order to be listed with the Medical Board,  
49 a person must annually submit on or before September 1 of each year all of the following  
50 information to the Medical Board in the manner prescribed by the Medical Board:

- 51           (1) The person's full legal name.

- 1           (2)    The person's complete address and telephone number.  
2           (3)    Evidence that the person is currently credentialed in good standing by the  
3           Board as a Registered Polysomnographic Technologist (RPSGT).  
4           (4)    The date the person was credentialed by the Board to practice  
5           polysomnography.  
6           (5)    A nonrefundable listing fee of fifty dollars (\$50.00).  
7       (b)    Listing. – The Medical Board must maintain a listing of polysomnographic  
8       technologists that have submitted proof of credentials under this section. The Board must  
9       promptly notify the Medical Board, by mail or electronic means, when a person's credential is  
10       revoked or no longer in effect. Upon receipt of this notification, the Medical Board must  
11       remove the person's name from the list."

12           **SECTION 2.** No later than six months from the effective date of this act, the North  
13       Carolina Medical Board shall identify the standards of physician supervision of persons  
14       registered to practice as registered polysomnographic technologists under Article 39A of  
15       Chapter 90 of the General Statutes, as enacted in Section 1 of this act. The North Carolina  
16       Medical Board shall communicate the standards of supervision to all physicians licensed to  
17       practice medicine under Article 1 of Chapter 90 of the General Statutes.

18           **SECTION 3.** This act becomes effective October 1, 2009.