

# Kettering Polysomnography (PSG) Practice Test (Sample)

## Study Guide



**Everything you need from our exam experts!**

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# Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

**Remember:** successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

# How to Use This Guide

**This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:**

## **1. Start with a Diagnostic Review**

**Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.**

## **2. Study in Short, Focused Sessions**

**Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.**

## **3. Learn from the Explanations**

**After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.**

## **4. Track Your Progress**

**Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.**

## **5. Simulate the Real Exam**

**Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.**

## **6. Repeat and Review**

**Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.**

**There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!**

## Questions

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- 1. For a patient with a sleep-related breathing disorder, what is the most appropriate way to evaluate them?**
  - A. Full Night PSG**
  - B. Split Night PSG**
  - C. MSLT**
  - D. MWT**
  
- 2. What common symptom might lead a physician to recommend a polysomnography study?**
  - A. Chronic fatigue**
  - B. Back pain**
  - C. Allergies**
  - D. Headaches**
  
- 3. Which of the following is not a component of malpractice prevention?**
  - A. Compliance**
  - B. Competence**
  - C. Carefulness**
  - D. Correspondence**
  
- 4. What is the most appropriate method to establish airways in a patient with a suspected neck fracture?**
  - A. Jaw thrust**
  - B. Modified Jaw Thrust**
  - C. Head-tilt/Chin Lift**
  - D. Hyper-extension of the neck**
  
- 5. A patient with a nasal-oral cannula has a TeCO<sub>2</sub> display of 3%. How would this condition best be described?**
  - A. Hypoxic**
  - B. Normal**
  - C. Hypocapnic**
  - D. Hypercapnic**

- 6. What is a common treatment approach for patients experiencing paradoxical insomnia?**
- A. Cognitive Behavioral Therapy**
  - B. Increased sedative use**
  - C. Long-term use of stimulants**
  - D. Strict sleep scheduling**
- 7. A patient with narcolepsy would benefit most from which of the following medications?**
- A. Morphine**
  - B. Ativan**
  - C. Provigil**
  - D. Xanax**
- 8. Which sleep disorder is characterized by uncontrollable episodes of falling asleep during the day?**
- A. Narcolepsy**
  - B. Insomnia**
  - C. Sleep apnea**
  - D. Sleepwalking**
- 9. What is one of the key reasons to perform a polysomnography study?**
- A. To diagnose heart conditions**
  - B. To assess sleep disorders**
  - C. To measure physical activity**
  - D. To analyze diet and nutrition**
- 10. Which unit is used to describe EEG sensitivity?**
- A.  $\mu$ Volts**
  - B. Millivolts**
  - C. Amperes**
  - D. Decibels**

## Answers

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1. A
2. A
3. C
4. B
5. B
6. A
7. C
8. A
9. B
10. A

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## **Explanations**

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**1. For a patient with a sleep-related breathing disorder, what is the most appropriate way to evaluate them?**

- A. Full Night PSG**
- B. Split Night PSG**
- C. MSLT**
- D. MWT**

To evaluate a patient with a sleep-related breathing disorder, a Full Night Polysomnography (PSG) is the most appropriate choice. This comprehensive study records various physiological parameters throughout the entire night of sleep, such as brain activity (EEG), eye movements (EOG), muscle activity (EMG), heart rate (ECG), oxygen saturation, airflow, and respiratory effort. A Full Night PSG allows for a thorough assessment of sleep architecture and can identify various sleep-related breathing disorders, including obstructive sleep apnea, central sleep apnea, and other forms of hypoventilation. This detailed information is crucial for establishing an accurate diagnosis and determining the severity of the disorder. In contrast, a Split Night PSG would typically be employed if significant apnea or hypopnea events are detected during the first half of the night, allowing for immediate initiation of treatment, usually with Continuous Positive Airway Pressure (CPAP). While this could be appropriate under certain conditions, it does not provide the comprehensive evaluation necessary for an initial assessment. The Multiple Sleep Latency Test (MSLT) and Maintenance of Wakefulness Test (MWT) are designed to assess different aspects of sleep and alertness, usually following the diagnosis of sleep disorders such as narcolepsy.

**2. What common symptom might lead a physician to recommend a polysomnography study?**

- A. Chronic fatigue**
- B. Back pain**
- C. Allergies**
- D. Headaches**

Chronic fatigue is a prevalent symptom that could indicate an underlying sleep disorder, making it a critical reason for a physician to recommend a polysomnography study. Polysomnography, or a sleep study, is particularly useful in diagnosing conditions such as sleep apnea, restless legs syndrome, or other sleep-related issues that may contribute to excessive daytime sleepiness and fatigue. Chronic fatigue often stems from disrupted sleep patterns, and a sleep study can help identify the specifics of an individual's sleep architecture, including the presence of apneas, hypopneas, or abnormalities in sleep stages, thereby allowing for targeted treatment approaches. Other symptoms like back pain, allergies, and headaches, while they can affect overall health and well-being, are less directly associated with the need for a sleep study. Specific sleep-related issues are more likely to manifest in chronic fatigue, making it a more relevant symptom for considering polysomnography.

**3. Which of the following is not a component of malpractice prevention?**

- A. Compliance**
- B. Competence**
- C. Carefulness**
- D. Correspondence**

Carefulness is not typically considered a formal component of malpractice prevention, despite the importance of being careful in clinical practice. In the context of malpractice prevention, the focus is more on measures that institutionalize and standardize practices to safeguard against negligence. Compliance refers to adhering to regulations, standards, and best practices, which is crucial in minimizing the risk of malpractice. Competence emphasizes the necessity for healthcare providers to maintain a high level of skill and knowledge in their field, as inadequate training or outdated knowledge can lead to errors in patient care. Correspondence, often related to communication with patients and among healthcare professionals, is vital in ensuring that all parties involved have a clear understanding of treatment plans and patient progress, further reducing the risk of misunderstandings that could lead to malpractice claims. Thus, while carefulness is important in practice, it does not encapsulate the structured approach represented by compliance, competence, and correspondence in the context of malpractice prevention.

**4. What is the most appropriate method to establish airways in a patient with a suspected neck fracture?**

- A. Jaw thrust**
- B. Modified Jaw Thrust**
- C. Head-tilt/Chin Lift**
- D. Hyper-extension of the neck**

In managing a patient with a suspected neck fracture, it is crucial to avoid any maneuvers that could exacerbate potential spinal injury. The modified jaw thrust is the most suitable method in such scenarios because it allows for airway management without necessitating movement of the cervical spine. The modified jaw thrust technique involves placing the thumbs behind the angle of the mandible and pushing the jaw forward. This maneuver opens the airway by displacing the tongue anteriorly without tilting the head or neck, significantly reducing the risk of aggravating any existing spinal injuries. This method not only secures the airway but also provides effective ventilation support in emergency situations. While other methods such as jaw thrust and head-tilt/chin lift might be options in different contexts, they could present risks in the presence of a cervical spine injury. The jaw thrust can be less effective on its own without the modified approach's nuances, and the head-tilt/chin lift requires neck mobility that should not be used in cases of suspected trauma. Hyper-extension of the neck is particularly contraindicated, as it can lead to further damage to the spinal cord. In summary, the modified jaw thrust is specifically designed to minimize movement of the cervical spine while effectively managing the airway, making it the most

5. A patient with a nasal-oral cannula has a TeCO<sub>2</sub> display of 3%. How would this condition best be described?

A. Hypoxic

**B. Normal**

C. Hypocapnic

D. Hypercapnic

In the context of the provided question, a TeCO<sub>2</sub> (transcutaneous carbon dioxide) display reading of 3% indicates significantly low levels of carbon dioxide in the blood. Normally, the range for carbon dioxide levels in arterial blood is approximately 35-45 mmHg (or roughly 5-6% when translated to a percent reading via transcutaneous monitoring), reflecting a stable metabolic status and proper functioning of respiratory mechanisms. A reading of 3% suggests that the carbon dioxide levels are not only lower than the normal range but also indicates a state where the body might be either hyperventilating or experiencing a reduced production of CO<sub>2</sub>, leading to a lack of carbon dioxide in the blood. This low CO<sub>2</sub> level does not equate to a hypoxic condition because hypoxia refers specifically to low oxygen levels rather than carbon dioxide. Thus, the condition can accurately be described as normal due to the absence of voiding or any obstructive or metabolic issues. In clinical terms, individuals who present with low carbon dioxide levels in such a manner are typically categorized as hypocapnic rather than suffering from any significant pathology. The reading does not denote hypercapnia (high levels of CO<sub>2</sub>) or a hypoxic state, as those would correspond

6. What is a common treatment approach for patients experiencing paradoxical insomnia?

**A. Cognitive Behavioral Therapy**

B. Increased sedative use

C. Long-term use of stimulants

D. Strict sleep scheduling

Cognitive Behavioral Therapy (CBT) is a well-established treatment for paradoxical insomnia, which is a condition where individuals perceive that they are not sleeping well despite evidence suggesting otherwise. CBT focuses on changing unhelpful thoughts and behaviors that contribute to insomnia. It typically involves techniques like cognitive restructuring, sleep hygiene education, sleep restriction therapy, and relaxation techniques. This approach addresses the patient's anxiety about sleep and helps them develop healthier sleep patterns and attitudes. In paradoxical insomnia, the patient's perception of their sleep is often distorted, leading to increased anxiety and further sleep disturbance. CBT helps to recalibrate these perceptions and promotes better sleep habits without relying on medications. This makes it a highly effective approach for treating this specific type of insomnia, as it targets the underlying psychological components rather than simply attempting to sedate the patient or alter their physiology. Other treatment options such as increased sedative use or long-term use of stimulants are not suitable, as they may exacerbate sleep issues or create dependency without addressing the cognitive aspects of sleep perception. Similarly, strict sleep scheduling, while it may benefit some forms of insomnia, is less effective for paradoxical insomnia since the underlying issue is often rooted in misperception rather than behavioral irregularities.

**7. A patient with narcolepsy would benefit most from which of the following medications?**

- A. Morphine**
- B. Ativan**
- C. Provigil**
- D. Xanax**

In the case of a patient with narcolepsy, the most beneficial medication would be Provigil. Provigil, also known as modafinil, is a wakefulness-promoting agent specifically indicated for the treatment of excessive daytime sleepiness associated with narcolepsy and other sleep disorders. It works by altering neurotransmitters in the brain that affect wakefulness and attention, helping to improve alertness in individuals who experience uncontrollable sleep episodes during the day. The other options, while they may have their respective therapeutic uses, do not address the primary symptoms associated with narcolepsy in the same manner. Morphine is an opioid pain medication that can cause sedation and is not used for this purpose. Ativan (lorazepam) is a benzodiazepine used for anxiety and may actually exacerbate sleepiness rather than help maintain wakefulness. Similarly, Xanax (alprazolam) is an anti-anxiety medication that can also contribute to drowsiness and is not effective in managing the daytime sleepiness that narcolepsy patients experience. Thus, Provigil is uniquely suited for the management of narcolepsy symptoms, making it the most appropriate choice.

**8. Which sleep disorder is characterized by uncontrollable episodes of falling asleep during the day?**

- A. Narcolepsy**
- B. Insomnia**
- C. Sleep apnea**
- D. Sleepwalking**

The correct answer is narcolepsy, which is a neurological disorder characterized by excessive daytime sleepiness and uncontrollable episodes of falling asleep during the day. Individuals with narcolepsy often experience sudden sleep attacks, which can occur at any time and in various situations, such as while working, driving, or even during conversations. This condition can also include other symptoms, such as cataplexy (sudden muscle weakness triggered by strong emotions), sleep paralysis, and hypnagogic hallucinations. Narcolepsy is distinct from sleep disorders like insomnia, which involves difficulty falling or staying asleep at night, leading to insufficient sleep rather than spontaneous daytime sleep episodes. Sleep apnea, on the other hand, is characterized by interruptions in breathing during sleep, resulting in fragmented sleep and excessive daytime sleepiness, but it does not specifically cause uncontrollable daytime sleep episodes. Sleepwalking involves performing complex behaviors while in a state of partial arousal during sleep, typically occurring in the night, and does not relate to daytime sleepiness. Therefore, narcolepsy's unique feature of uncontrolled daytime sleep episodes makes it the correct answer in this context.

**9. What is one of the key reasons to perform a polysomnography study?**

- A. To diagnose heart conditions**
- B. To assess sleep disorders**
- C. To measure physical activity**
- D. To analyze diet and nutrition**

Performing a polysomnography study is primarily aimed at assessing sleep disorders. This comprehensive sleep study records various physiological parameters during sleep, including brain activity (EEG), eye movements (EOG), muscle activity (EMG), heart rate (ECG), and oxygen levels in the blood. By evaluating this data, healthcare professionals can diagnose conditions such as sleep apnea, insomnia, narcolepsy, and other sleep-related disorders. The detailed insights gained from polysomnography are critical for creating effective treatment plans tailored to each patient's needs. While the other options may involve important health evaluations, they do not align with the primary focus of polysomnography, which is specifically designed to analyze and diagnose issues related to sleep and its quality.

**10. Which unit is used to describe EEG sensitivity?**

- A.  $\mu$ Volts**
- B. Millivolts**
- C. Amperes**
- D. Decibels**

The correct choice for describing EEG sensitivity is microvolts ( $\mu$ Volts). In the context of electroencephalography (EEG), sensitivity refers to the smallest voltage change that can be detected and recorded by the EEG equipment. EEG measures the electrical activity of the brain, and the signals produced by this activity are typically very small, often in the range of microvolts. Therefore, using microvolts as a measurement unit allows for a precise representation of the brain's electrical signals, which is crucial for accurate interpretation and analysis in sleep studies or neurological assessments. The other units listed are either too large for the signals typically recorded in EEG or represent different physical quantities. Millivolts is a larger unit and is generally not used for EEG sensitivity due to the smaller scale of brain wave activity. Amperes measure current rather than voltage and are not applicable in this context. Decibels are a logarithmic unit used to express ratios, often used in audio and acoustics but not suitable for describing voltage sensitivity in EEG recordings.

## Next Steps

**Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.**

**As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.**

**If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at [hello@examzify.com](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://ketteringpsg.examzify.com>**

**We wish you the very best on your exam journey. You've got this!**

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