

KETTERING POLYSOMNOGRAPHY (PSG) PRACTICE TEST (SAMPLE)

STUDY GUIDE



**SAMPLE STUDY GUIDE
WITH LIMITED QUESTIONS**

**VISIT US ONLINE FOR
THE FULL VERSION STUDY GUIDE**

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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. What is the standard duration of a full-night polysomnography study?**
 - A. Approximately 4 to 6 hours
 - B. Approximately 6 to 8 hours
 - C. Approximately 8 to 10 hours
 - D. Approximately 10 to 12 hours
- 2. What is the recommended compression depth for performing CPR on a child?**
 - A. 1 - 1½ inches
 - B. 1½ - 2 inches
 - C. 2 - 2½ inches
 - D. 2½ - 3 inches
- 3. Which method is considered the "gold standard" for recording respirations from thoracic and abdominal areas?**
 - A. Thermal sensors
 - B. Respiratory inductance plethysmography
 - C. Capnometry
 - D. Pulse oximetry
- 4. What can an increased number of awakenings during sleep indicate?**
 - A. Potential sleep disturbances or disorders
 - B. Improved sleep quality
 - C. Deep sleep cycles
 - D. Normal sleep patterns
- 5. What condition might be indicated if a patient experiences excessive daytime sleepiness?**
 - A. Chronic fatigue syndrome
 - B. Sleep apnea, narcolepsy, or insomnia
 - C. Seasonal affective disorder
 - D. Generalized anxiety disorder

- 6. How many years does the American Academy of Sleep Medicine grant laboratory accreditation for?**
- A. 3 years
 - B. 5 years
 - C. 7 years
 - D. 10 years
- 7. When a patient inquires about who will conduct their sleep study, they expect to be informed about what?**
- A. The facility's credentials
 - B. The name of the physician responsible for their care
 - C. The scheduling of the study
 - D. The type of equipment used
- 8. A patient who goes to bed at 3:00 AM and wakes at 2:00 PM is exhibiting which of the following conditions?**
- A. Delayed sleep phase syndrome
 - B. Excessive daytime sleepiness
 - C. Advanced sleep phase syndrome
 - D. Narcolepsy
- 9. What is the recommended number of observed hypopnea needed in an adult patient before increasing the pressure during a titration?**
- A. 1
 - B. 2
 - C. 3
 - D. 4
- 10. What nocturnal monitoring technique involves assessing the change in airflow with a pressure sensor placed over the nasal area?**
- A. Polysomnography
 - B. Thermistor measurement
 - C. Transcutaneous monitoring
 - D. Capnography

Answers

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

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Explanations

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1. What is the standard duration of a full-night polysomnography study?

- A. Approximately 4 to 6 hours
- B. Approximately 6 to 8 hours**
- C. Approximately 8 to 10 hours
- D. Approximately 10 to 12 hours

The standard duration of a full-night polysomnography study is typically around 6 to 8 hours. This timeframe is aligned with the average duration of a normal night's sleep for adults, allowing for the capture of various sleep stages, including REM and non-REM sleep. Polysomnography is designed to provide a comprehensive assessment of sleep architecture, which can only be accurately gauged over a full sleep cycle. Most adults cycle through several stages of sleep throughout the night, and capturing this information requires a duration that encompasses a complete sleep period. Conducting the study for 6 to 8 hours ensures that the healthcare professionals can effectively analyze sleep patterns, diagnose sleep disorders, and observe any variations that might occur across different stages of sleep. Shorter durations, such as 4 to 6 hours, may not provide enough data for a thorough assessment, as they might miss important information obtained from prolonged observation. Additionally, extended durations like 8 to 10 or 10 to 12 hours could be excessive for most adult sleep patterns, potentially leading to patient discomfort and distraction that might alter natural sleep behavior. Therefore, the 6 to 8-hour duration is optimal for gathering significant data while ensuring patient comfort and natural sleep continuity.

2. What is the recommended compression depth for performing CPR on a child?

- A. 1 - 1½ inches**
- B. 1½ - 2 inches
- C. 2 - 2½ inches
- D. 2½ - 3 inches

The recommended compression depth for performing CPR on a child is 1 to 1½ inches. This guideline is based on the anatomical considerations of a child's thorax, which is smaller and more flexible compared to that of an adult. Adequate compression depth is crucial to ensure that blood is effectively circulated during CPR, but excessive depth can cause injury to the child's ribs or internal organs. By maintaining the compression depth within this range, the rescuer can provide sufficient force to stimulate blood flow without exceeding the safe limits that could lead to further harm. It ensures that the compressions are both effective in generating blood flow and safe for the child's developing body. In the context of other options, the depths suggested by those ranges are considered too deep for a child and may increase the risk of injuries. Therefore, adhering to the recommended depth of 1 to 1½ inches strikes the right balance between efficacy and safety in pediatric resuscitation.

3. Which method is considered the "gold standard" for recording respirations from thoracic and abdominal areas?

- A. Thermal sensors
- B. Respiratory inductance plethysmography**
- C. Capnometry
- D. Pulse oximetry

The method recognized as the "gold standard" for recording respirations from the thoracic and abdominal areas is respiratory inductance plethysmography. This technique utilizes coils placed around the chest and abdomen to measure changes in the inductance that occur with volume changes during respiration. As a person breathes, the expansion and contraction of the thorax and abdomen alter the electrical characteristics of the coils, allowing for precise tracking of breathing patterns and tidal volume. This method is highly valued because it provides real-time, non-invasive monitoring of respiratory movements. It effectively distinguishes between thoracic and abdominal contributions to respiration, which is essential in evaluating various sleep-related breathing disorders. The comprehensive data obtained aids in diagnosing conditions such as obstructive sleep apnea and other respiratory conditions. Other methods, such as thermal sensors, capnometry, and pulse oximetry, serve different purposes in monitoring respiratory function but do not focus solely on recording the mechanical aspects of breathing from the thoracic and abdominal areas. Thermal sensors detect airflow based on temperature changes, capnometry measures carbon dioxide levels in exhaled breath, and pulse oximetry assesses oxygen saturation in the blood. While these techniques are important components of respiratory assessment, they do not match the specificity and detail provided by respiratory inductance plethysmography.

4. What can an increased number of awakenings during sleep indicate?

- A. Potential sleep disturbances or disorders**
- B. Improved sleep quality
- C. Deep sleep cycles
- D. Normal sleep patterns

An increased number of awakenings during sleep can indicate potential sleep disturbances or disorders. Frequent awakenings might suggest that the individual is experiencing disruptions in their sleep cycle, which can be caused by various factors such as anxiety, discomfort, medical conditions, or environmental disturbances. This pattern often correlates with poor sleep quality, as it prevents the individual from achieving the deeper, restorative stages of sleep necessary for physical and mental health. In contrast to this, improved sleep quality, deep sleep cycles, and normal sleep patterns are associated with fewer awakenings. Improved sleep quality typically involves longer continuous periods of undisturbed sleep, while deep sleep cycles are characterized by stable, uninterrupted phases that promote restfulness. Normal sleep patterns also align with a predictable progression through the sleep stages with minimal arousals, which is not the case when there are multiple awakenings. Therefore, an increased frequency of awakenings is primarily indicative of underlying sleep issues rather than healthy sleep functioning.

5. What condition might be indicated if a patient experiences excessive daytime sleepiness?

- A. Chronic fatigue syndrome
- B. Sleep apnea, narcolepsy, or insomnia**
- C. Seasonal affective disorder
- D. Generalized anxiety disorder

Excessive daytime sleepiness is often a symptom associated with various sleep disorders, most notably sleep apnea, narcolepsy, and insomnia. Sleep apnea is characterized by repeated interruptions in breathing during sleep, which leads to poor sleep quality and resultant daytime sleepiness due to fragmented sleep cycles. Narcolepsy is a neurological disorder that affects the brain's ability to regulate sleep-wake cycles, often causing uncontrollable sleep episodes during the day. Insomnia, characterized by difficulty falling or staying asleep, directly affects sleep quality, leading to tiredness during waking hours. In contrast, while chronic fatigue syndrome refers to persistent fatigue that can be debilitating, it doesn't exclusively lead to excessive daytime sleepiness caused by poor sleep quality. Seasonal affective disorder primarily affects mood and is related to seasonal changes, which can affect energy levels but isn't specifically tied to daytime sleepiness alone. Generalized anxiety disorder may contribute to sleep disruption and fatigue, but it is more associated with difficulty falling asleep or maintaining sleep rather than a direct link to excessive daytime sleepiness. Thus, sleep apnea, narcolepsy, or insomnia are the primary conditions one would consider when evaluating excessive daytime sleepiness due to their direct impact on sleep quality and quantity.

6. How many years does the American Academy of Sleep Medicine grant laboratory accreditation for?

- A. 3 years
- B. 5 years**
- C. 7 years
- D. 10 years

The American Academy of Sleep Medicine (AASM) grants laboratory accreditation for a period of five years. This duration is established to ensure that accredited sleep laboratories maintain high-quality standards for patient care and meet specific operational requirements over time. During this five-year period, laboratories are expected to continually provide quality services and adhere to evolving guidelines and standards set by the AASM. After this timeframe, laboratories must undergo a re-accreditation process to verify that they still comply with the necessary criteria for providing safe and effective sleep medicine practices. This re-accreditation process is crucial for ensuring ongoing compliance and quality improvement in the field of sleep medicine.

7. When a patient inquires about who will conduct their sleep study, they expect to be informed about what?

- A. The facility's credentials
- B. The name of the physician responsible for their care**
- C. The scheduling of the study
- D. The type of equipment used

Patients undergoing a sleep study typically want to know who will be responsible for their care during the procedure, which includes the name of the physician overseeing their evaluation. This information is crucial because it provides reassurance and establishes a direct line of communication between the patient and their healthcare provider. Understanding who will be in charge of their care can significantly affect a patient's comfort level and trust in the process. While other choices may provide valuable information regarding the facility, equipment, or scheduling, the direct relationship and accountability of their physician are essential factors that impact patient care and satisfaction. Knowing the physician responsible is important for addressing questions, managing concerns, and fostering a supportive healthcare environment.

8. A patient who goes to bed at 3:00 AM and wakes at 2:00 PM is exhibiting which of the following conditions?

- A. Delayed sleep phase syndrome**
- B. Excessive daytime sleepiness
- C. Advanced sleep phase syndrome
- D. Narcolepsy

The patient's sleep pattern, going to bed at 3:00 AM and waking at 2:00 PM, indicates a significant delay in their sleep schedule relative to the typical or socially accepted sleep patterns. This is characteristic of delayed sleep phase syndrome, which is a circadian rhythm sleep disorder where a person's sleep is delayed by two or more hours beyond the conventional bedtime. Individuals with this condition often struggle to fall asleep at a normal time and have difficulty waking up in the morning, leading to late sleep onset and late rising. Those experiencing this syndrome often find that their sleep patterns do not align with societal norms, which can lead to challenges in occupational or social situations. This condition is distinct from other sleep disorders like excessive daytime sleepiness, advanced sleep phase syndrome, or narcolepsy, which have different characteristics and patterns related to timing or duration of sleep.

9. What is the recommended number of observed hypopnea needed in an adult patient before increasing the pressure during a titration?

- A. 1
- B. 2
- C. 3**
- D. 4

The recommended number of observed hypopneas needed in an adult patient before increasing the pressure during a titration is three. This guideline is based on the understanding that a single hypopnea may not be indicative of a significant problem, as fluctuations can occur in an individual's breathing pattern. Therefore, observing three hypopneas gives a clearer indication that a patient's condition may warrant an adjustment in pressure. In the context of polysomnography, hypopneas are defined as episodes of abnormally shallow breathing or an abnormally low respiratory rate that can lead to drops in oxygen saturation. Monitoring and documenting the frequency of these events is crucial in sleep studies, especially during the titration phase, where the goal is to establish optimal positive airway pressure (PAP) settings. Recognizing an adequate threshold of hypopneas before making changes ensures that interventions are warranted based on consistent patterns rather than isolated incidents, thereby improving patient outcomes through more precise adjustments in therapy.

10. What nocturnal monitoring technique involves assessing the change in airflow with a pressure sensor placed over the nasal area?

- A. Polysomnography
- B. Thermistor measurement**
- C. Transcutaneous monitoring
- D. Capnography

The technique that involves assessing the change in airflow with a pressure sensor placed over the nasal area is thermistor measurement. This method typically utilizes a thermistor, which is a type of temperature-sensitive resistor, to detect airflow by measuring the temperature change caused by airflow through the nasal passage. As air moves over the sensor, it cools or warms the thermistor, allowing for the assessment of airflow patterns during sleep, which is particularly useful in the diagnosis of sleep-related breathing disorders such as obstructive sleep apnea. Polysomnography is a comprehensive sleep study that evaluates multiple parameters, such as brain activity, eye movement, muscle activity, heart rhythm, and airflow, but it encompasses a broader analysis than just monitoring airflow alone. Transcutaneous monitoring is primarily used to measure the partial pressures of gases (such as oxygen and carbon dioxide) through the skin, rather than directly assessing airflow at the nasal level. Capnography measures the concentration of carbon dioxide in exhaled air, which does not specifically involve monitoring airflow with a pressure sensor over the nasal area. These differences highlight why thermistor measurement is the appropriate choice for this specific assessment of airflow during sleep.

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.

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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