

# A night in the life of a sleep technician

## Have you ever wondered what sleep technicians do?

The Burnside Sleep Centre is responsible for looking after six patients, 6–7 nights per week. A typical day in the sleep centre is really divided into two halves, that of day technician and that of the night technician, with a small amount of overlap between the two.

Our night technicians are responsible for the majority of patient care. They welcome the new patients on arrival and get them settled into their rooms. Each technician is responsible for the care of two patients during the initial wire up, obtaining their relevant medical history, wiring them up and fully explaining how their sleep study will proceed. They apply 21 electrodes to the patients, measuring brain wave activity, respiratory effort and flow, cardiac signals, limb movement and oximetry (oxygen percentage in the blood). There is also a digital video and decibel meter to record body position and the level of snoring.



Once the patients are tucked up into bed, staff are responsible for maintaining high quality signals, recording all aspects of the sleep study and for patient care. They typically have two treatment studies per night where staff facilitate breathing by either the use of Continuous Positive Airway Pressure (CPAP – a mask that pumps room air under pressure into the patient) or less commonly supplemental Oxygen titrations or Bi-Level titrations (a more complex breathing machine which tidal volume and breath rate can also be set). Once the study is over, staff wake the patients up, unwire them and then they have the job of sorting out a tangled, sticky mess of wires in their sleep deprived state.

There is a hand-over with the day staff, typically on the mornings where there are patient's remaining in the Sleep Centre for a Multiple Sleep Latency Test (MSLT) or Maintenance of Wakefulness Test (MWT). These patients remain in the sleep centre all day and have 2 hourly naps to see if and how quickly they can fall asleep. Some of our patients can fall asleep within 30 seconds of the lights being turned out multiple times across the day, despite getting a full night sleep. These tests are frequently used as a part of a condition of licencing for pilots and professional drivers and hence absolute silence in the area around the sleep centre is required.



"OK, Mrs. Tully. We want you to relax, get a good night's sleep, and we'll evaluate any sleep issues that you have."

The role of the day time sleep analysts is quite different. We are responsible for organising patients, overseeing booking and many various laboratory statistics. But the primary function is the scoring and analysis of the sleep study. This involves determining when the patient is asleep during the study, what level or stage of sleep they are in, and if all the right stages are occurring in the correct order (known as sleep architecture). We also have to mark in each reduction in respiratory effort and flow, all awakenings of 3 seconds or greater and every leg movement. Once the analysis has been conducted, a detailed report is written and then the report and scored data is sent to the VMO for review, reporting and diagnosis. For more information about Sleep Health, contact the Burnside Sleep Centre.



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