Washington D.C.  
Contains a Polysomnography Licensure Practice Act  
“Practice of Polysomnography Amendment Act of 2009”  

The District of Columbia Health Occupations Revision Act of 1985,  
D.C. Law 6-99;  
D.C. Official Code § 3-1201.01

(21)(A) “Practice of polysomnography” means the process of analyzing, monitoring, and recording physiologic data during sleep and wakefulness, with or without compensation, to assist in the assessment and diagnosis of sleep-wake disorders and other disorders, syndromes, and dysfunctions that are sleep related, manifest during sleep or that disrupt normal sleep-wake cycles and activities.

(B) For purposes 1 of this chapter, the term:  
(i) “Polysomnographic technologist” means a person who is licensed to practice polysomnography; provided, that a polysomnographic technologist shall practice under the general supervision of a physician that is licensed in the District of Columbia.

(ii) “Polysomnographic technician” means a person who is registered with the Board of Medicine and is authorized to perform certain polysomnography procedures as determined by the Board while generally supervised by either a physician that is licensed in the District of Columbia or a polysomnographic technologist that is licensed by the District of Columbia who is on-site or available through voice communication.

(iii) “Practice by a polysomnographic trainee” means a person who is registered with the Board of Medicine and is authorized to perform basic polysomnography procedures as determined by the Board while directly supervised by a physician that is licensed in the District of Columbia, or a polysomnographic technologist that is licensed by the District of Columbia, or a registered polysomnographic technician who is on the premises and immediately available for consultation.

(C) Nothing in this paragraph shall be construed as limiting licensed respiratory care practitioners and licensed physicians in their respective scope of practice, including care in connection with the provision of polysomnography services.

(b) Section 203 (D.C. Official Code § 3-1202.03) is amended as follows:  
(1) A new subsection (a)(8)(E) is added to read as follows:  
“(E) The practice of polysomnography in accordance with guidelines approved by the Advisory Committee on Polysomnography.”

(2) A new subsection (d-1) is added to read as follows:  
“(d-1)(1) There is established an Advisory Committee 1 on Polysomnography to consist of 5 members appointed by the Mayor. “(2) The Advisory Committee on Polysomnography shall develop and submit to the Board of Medicine guidelines for licensing, registration and regulation of polysomnographic technologists, polysomnographic technicians, and polysomnographic trainees in the District of Columbia. The guidelines shall set forth the education and experience requirements for registration and licensure and the actions that may be
performed by polysomnographic technologists, polysomnographic technicians, and polysomnographic trainees.

(3) Of the members of the Advisory Committee on Polysomnography, shall be physicians who have been certified by a national accrediting body as sleep specialists, 2 shall be licensed polysomnographic technologists, and 1 shall be either the Director of the Department of Health or his designee.

(4) The Advisory Committee on Polysomnography shall submit initial guidelines to the Board within 180 days of the effective date of the Practice of Polysomnography Amendment Act of 2009, and shall subsequently meet at least annually to review the guidelines and make necessary revisions for submission to the Board.

Sec. 3. Fiscal impact statement.

The Council adopts the fiscal impact statement in the committee report as the fiscal impact statement required by section 602(c)(3) of the District of Columbia Home Rule Act of 1973, as amended, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-21 206.02(c)(3)).