



CMSA

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R E G U L A T I O N S
FOR ADMISSION TO THE DIPLOMA IN SLEEP MEDICINE OF
THE COLLEGE OF NEUROLOGISTS OF SOUTH AFRICA
DSM(SA)

1.0 Requirements for the Diploma of Sleep Medicine.

1.1 Admission to the training programme.

- 1.1.1 Registration as a medical practitioner licensed to work in the Republic of South Africa.
- 1.1.2 The training programme will be under the management of a Department of Neurology at any South African university. This training is currently only on offer at the University of Pretoria.
- 1.1.3 Access to the training programme will be at the discretion of the Head of the relevant Department of Neurology.
- 1.1.4 The candidate will not be admitted to the examination unless (s)he has been through a training programme as outlined below.
- 1.1.5 Once accepted on such a training programme, the candidate is expected to complete his/her examinations within a period of no more than 18 months. Failure to do so will require the candidate to repeat the training programme, unless particular exceptions are made, which will be at the discretion of the Head of the relevant Department of Neurology.

1.2 Objective of training:

- 1.2.1 The candidate should have the ability to properly assess and manage the majority of sleep disorders.
- 1.2.2 The evaluation of the candidate will include but not be limited to the following:
 - 1.2.2.1 A reasonable knowledge of sleep physiology.
 - 1.2.2.2 A thorough working knowledge of the tests specific to sleep medicine, including but not limited to polysomnography, sleep-related encephalography, actigraphy, the multiple sleep latency test and the maintenance of wakefulness test.
 - 1.2.2.2.1 The candidate will be expected to be able to analyse the raw data, and to apply the results thereof in the clinical situation.
 - 1.2.2.3 A thorough knowledge of the current classification of sleep disorders is required.
 - 1.2.2.4 The candidate is required to have a comprehensive understanding of the diagnosis and treatment of sleep disorders.

- 1.3 Training requirements. The following is required for admission to the examination:**
- 1.3.1 Compulsory requirements
- 1.3.1.1 The submission of a minimum of 10 detailed case studies of patients with sleep disorders. These studies should include history, examination, investigations performed, treatment given, follow-up assessments, and differential diagnosis, with reference to current literature. These case studies should include at least one each of the following:
- 1.3.1.1.1 Obstructive sleep apnoea
 - 1.3.1.1.2 Upper airways resistance syndrome
 - 1.3.1.1.3 Periodic limb movement disorder
 - 1.3.1.1.4 Shift work sleep disorder
 - 1.3.1.1.5 Delayed sleep phase syndrome
 - 1.3.1.1.6 Sleep disorder associated with a medical condition
 - 1.3.1.1.7 Sleep disorder associated with a neurological condition
 - 1.3.1.1.8 Chronic insomnia
 - 1.3.1.1.9 Parasomnia
 - 1.3.1.1.10 Sleep disorder associated with a psychiatric condition.
- 1.3.1.2 Training in the interpretation of polysomnograms must be obtained at a sleep laboratory recognised for training by the Head of the Department of Neurology under which the candidate is training.
- 1.3.2 Proof of the following training is also required. This must be recognised by the Head of the Department of Neurology under which the candidate is training. A minimum of 100 points is required for admission to the examination. Proof of training should be submitted electronically to the Head of Department of Neurology under which the candidate is training in the form of a logbook, which includes all the case studies in full.
- 1.3.2.1 Attendance at a sleep conference. (25 points per full day attended). This should make up no more than 50% of the point requirements.
- OR
- 1.3.2.2 Attendance at sleep medicine workshops. (25 points per full day attended). This should make up no more than 50% of the point requirements.
- 1.3.2.3 Sleep medicine tutorials, led by a neurologist. 10 points per tutorial. This may make up 100% of the point requirements.
- 1.3.2.4 Sleep medicine ward rounds, led by a neurologist. (10 points per ward round). This may make up 100% of the point requirements.
- 1.4 On completion of the above requirements, the candidate will be admitted to the examination.**
- 1.4.1 The examination shall consist of 2 parts, namely
- 1.4.1.1 A written examination. This may be in the form of long questions, short questions, multiple-choice questions, or any combination of the above.
 - 1.4.1.2 An oral/clinical examination. In this examination the candidate will be examined on at least 2 patients, and interpretation of various tests will be required. An “OSCE” may form part or the whole of the examination.
- 1.5 On satisfactory completion of all the requirements, and passing both parts of the examination, the candidate will be awarded the Diploma in Sleep Medicine of the College of Neurologists.**
- 1.6 Suggested literature:**
- 1.6.1 The International Classification of Sleep Disorders: Diagnostic and Coding Manual. American Academy of Sleep Medicine.
 - 1.6.2 Principles and Practice of Sleep Medicine. Kryger MH, Roth T, Dement WC. Elsevier.
 - 1.6.3 Atlas of Sleep Medicine. Chokroverty S, Thomas RJ, Bhatt M. Elsevier.

1.0 ADMISSION AS A DIPLOMATE

1.1 The candidate having passed the examination and having been admitted as a Diplomate of the College of Neurologists of South Africa, will be asked to sign a declaration, as under:

I, the undersigned,do solemnly and sincerely declare

That while a member of the CMSA I will at all times do all within my power to promote the objects of the CMSA and uphold the dignity of the CMSA and its members

That I will observe the provisions of the Memorandum and Articles of the Association, By-laws, Regulations and Code of Ethics of the CMSA as in force from time to time

That I will obey every lawful summons issued by order of the senate of the said CMSA, having no reasonable excuse to the contrary

And I make this solemn declaration faithfully promising to adhere to its terms

Signed at.....this..... day of

.....20

Signature.....

Witness.....

(who must be a founder, Associate Founder, Fellow, Member, Diplomate or Commissioner of Oaths).

1.2 A two-thirds majority of members of the CMSA Senate present at the relevant meeting shall be necessary for the award to any candidate of a Diploma

1.3 A Diplomate shall be entitled to the appropriate form of certificate under the seal of the CMSA

1.4 In the event of a candidate not being awarded the Diploma (after having passed the examination) the examination fee shall be refunded in full

1.5 The first annual subscription is due one year after registration (statements are rendered annually)

A P P E N D I X A**EXPANDED INFORMATION FOR CANDIDATES****1.0 Admission to the examination:**

A candidate may be admitted to the examination:

- 1.1 Having a qualification to practice medicine, which is registered or registrable with the Health Professions Council of South Africa (HPCSA)
- 1.2 Having approval of a logbook
- 1.3 The CMSA Senate, through its Examinations and Credentials Committee, will review every application for admission to the examination, and may also consider the professional standing of the candidate

A P P E N D I X B**SYLLABUS FOR THE EXAMINATION.****1.0 PHYSIOLOGY**

- The physiology of sleep and the reticular activating system
- Circadian cycles and their control
- The normal hypnogram
- Age related sleep changes in the sleep pattern

2.0 SLEEP MONITORING TECHNIQUES**2.1 The polysomnogram**

- Technical requirements for performing a polysomnogram
- Analysis of the polysomnogram including sleep-related encephalograms

2.2 The multiple sleep latency test:**2.3 Other sleep monitoring techniques:****3.0 SLEEP DISORDERS**

The pathophysiology, pathology, clinical picture, diagnosis and treatment of the various sleep disorders, including;

3.1 Dyssomnias:

- Intrinsic sleep disorders
- Extrinsic sleep disorders
- Circadian rhythm sleep disorders

3.2 Parasomnias:

- Arousal disorders
- Sleep-wake transition disorders
- Parasomnias usually associated with REM sleep
- Other parasomnias

3.3 Other medical/psychiatric sleep disorders:

- Associated with mental disorders
- Associated with neurological disorders
- Associated with other medical disorders

3.4 Other sleep disorders:

A P P E N D I X C**1.0 FORMAT OF THE EXAMINATION**

- 1.1 One written paper of 3 hours to cover the basic sciences of sleep medicine and the principles and practice of sleep medicine, including investigation, diagnosis and treatment
- 1.2 A clinical examination. Candidates will be tested on clinical aspects of sleep medicine, relevant investigations and management, and will be observed during the examination to assess their clinical skills and attitudes towards patients:
 - 2 short cases to be studied at the bedside for one hour
- 1.3 An oral examination: this will include the interpretation of sleep encephalogram (EEG) recordings
- 1.4 Candidates who obtain less than 50% will fail the examination

A P P E N D I X D

GUIDELINES FOR EXAMINERS AND CANDIDATES

1.0 Candidates:

- 1.1 Recognised training centres should have a supervisor for candidates in training. The supervisor should be on the panel of examiners and be familiar with the examination and the CMSA regulations
- 1.2 The role of the supervisor should include discussion of the regulations for the Diploma in Sleep Medicine with prospective candidates; indication of the breadth and depth required for different aspects of the examination; discussion of the methods of assessments used in the examination, informing the candidate of the limitations of his or her hospital as a training institution
- 1.3 On written request written reports on their performance will be made available to unsuccessful candidates after the examinations from the CMSA convenor. These must be such as to allow unsuccessful candidates to learn where they have made mistakes and correct their deficiencies in specific areas

2.0 Examiners:

- 2.1 Question papers will be carefully reviewed by the convenor and other examiners before the examination, and all care will be taken to ensure that the questions are appropriate and free from ambiguities, grammatical errors, errors of vocabulary and spelling errors
- 2.2 Standards used in the oral examination will be the same for each candidate
- 2.3 At least two examiners will examine each candidate in the clinical and oral part of the examination. Examiners should play a minor role in the examination of candidates with whom they have worked closely in the recent past
- 2.4 In the oral and clinical parts of the examination, each examiner should submit his or her own independent assessment of each candidate. Discrepancies between the assessments will be discussed at the examiners meeting. The consistency of the examination as a whole will be assessed
- 2.5 Examiners should familiarise themselves with the basic theoretical considerations involved in examinations, in medical examinations in particular
- 2.6 All new examiners should undergo a period of familiarisation during which they act as observers of the clinical and oral parts of the examination. During this period they will not submit assessments of candidates

3.0 RECOMMENDED READING

- 3.1 The International Classification of Sleep Disorders
 - A standard textbook on sleep medicine

APPENDIX E

THE CLINICAL EXAMINATION

2.0 The Short Case:

2.1 Candidates:

You will be asked to examine 2 short cases. If there are related problems in other systems you will be expected to identify and examine these systems if necessary. You have 20 to 30 minutes for the brief history and physical examination of each patient and after this will be expected to present your findings to two examiners (an observer may be present). You will be assessed on the accuracy of your elicitation of the symptoms and signs and your final diagnosis. You may be asked to discuss your interpretation of the severity of the problem and a plan for cost-effective and safe management

2.2 Examiners:

The standard is that which is expected of a competent practitioner in sleep medicine

Marks should be allocated as follows:

- | | |
|-------------------|---|
| 50 – 59% | The candidate describes a relevant history and accurate physical examination which allows for the formulation of a diagnosis and differential diagnosis. The candidate does not miss any major feature on history or physical examination |
| >45% | The candidate fails to elicit important aspects of the history or misses important physical signs
OR
The candidate reached his/her conclusions by fraudulence or dishonesty in the examiners opinion
OR
The candidate displayed serious disrespect towards the patient |
| >45–49% | The candidate failed to elicit aspects of the history or physical examination which a competent clinician should have elicited
OR
The candidate “manufactured” or found features on history or physical examination which are, in fact, not present (Examiners should ideally satisfy themselves by their own independent evaluation that this is correct) |
| 60 – 74% | The candidate elicits all relevant aspects in the history and demonstrates and describes all relevant physical signs fluently |
| >75% | The candidate achieved an S+ on the initial presentation. In discussion and on questioning the candidate demonstrates an exceptionally good grasp of sleep medicine and an outstanding knowledge of the basic sciences relevant to the investigation and management of his/her patient |

NOTES FOR THE EXAMINER:

- The purpose of the short cases is to evaluate the candidates' skills and emphasis should be placed on accuracy of description and interpretation of clinical features