

Out of Center Sleep Testing Accreditation

Participation Attestation

The attestation clause is a personal guarantee of the truthfulness of the information provided. These clauses generally are used to prompt the responsible individual on the nature of the information attested to and that the information provided is accurate and true. It typically provides a mechanism to alert the responsible individual that failure to adhere to the undertaken responsibilities will have repercussions. If the AASM determines that an accredited sleep care facility is not compliant with the AASM standards for Out-of-Center Sleep Center Testing, full accreditation may be revoked.

As the medical director of (Facility Name) _____ located at (Address) _____, I hereby certify that the personnel affiliated with the facility understand their responsibilities associated with the January 2011 AASM Out-of-Center Sleep Center Testing Standards and that this facility is compliant with these standards. Further, I understand and agree that if the AASM, in its sole judgment, determines (Facility Name) _____ is found to be not in compliance with these standards that center accreditation may be suspended or revoked in its entirety.

Accepted

First Name	Middle Initial	Last Name	Medical Degree (MD, DO)
Signature (First, Middle, Last Name, Jr., Sr., M.D., D.O., etc.)			Date Signed (mm/dd/yyyy)

Will Not Conduct Out of Center Sleep Testing

First Name	Middle Initial	Last Name	Medical Degree (MD, DO)
Signature (First, Middle, Last Name, Jr., Sr., M.D., D.O., etc.)			Date Signed (mm/dd/yyyy)