POLYSOMNOGRAPHIC PROGRAM

Section 1 – Background and Description of Polysomnographic Program

History and Functions of the Polysomnographic Program

Polysomnography is the treatment, management, diagnostic testing, control, education, and care of patients with sleep and wake disorders. Polysomnography includes, but is not limited to, the process of analysis, monitoring, and recording of physiologic data during sleep and wakefulness to assist in the treatment of disorders, syndromes, and dysfunctions that are sleep-related, manifest during sleep, or disrupt normal sleep activities.

The Legislature enacted the regulation of the Polysomnographic Program under the jurisdiction of the Board in 2009. The Polysomnographic Program registers individuals as polysomnographic trainees, technicians, or technologists. Polysomnographic trainee registration is required for individuals under the direct supervision of a supervising physician, polysomnographic technologist, or other licensed health care professionals who provide basic supportive services as part of their education program, including, but not limited to, gathering and verifying of patient information, preparing for and monitoring testing, documenting routine observations, acquiring and scoring data, and assisting with appropriate interventions for patient safety in California. In order to qualify as a polysomnographic trainee, one must have either a high school diploma or GED and have completed at least six months of supervised direct polysomnographic patient care experience or be enrolled in a polysomnographic education program approved by the Board. Applicants must also possess, at the time of application, a current certificate in basic life support issued by the American Heart Association or the American Safety and Health Institute.

The polysomnographic technician registration is required for individuals who may perform the services equivalent to that of a polysomnographic trainee under general supervision and may implement appropriate interventions necessary for patient safety in California. In order to qualify for a polysomnographic technician registration, an individual must meet the initial requirements for a polysomnographic trainee, have at least six months experience at the level of polysomnographic trainee, and have completed an approved education program.

Polysomnographic technologist registration is required for individuals who, under the supervision of a physician, are responsible for the treatment, management, diagnostic testing, control, education, and care of patients with sleep and wake disorders in California. Registrants are required to have a valid, current credential as a

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polysomnographic technologist issued by the Board of Registered Polysomnographic Technologists (BRPT) and to have graduated from a polysomnographic educational program that has been approved by the Board.

Major Legislation/Regulations Since the Last Sunset Review

Refer to Full 2026 Medical Board Sunset Report

Section 2 – Fiscal Staff

Refer to Full 2026 Medical Board Sunset Report.

Section 3 – Licensing Program

Application Review

Current law does not define the required time to review an initial application for the Polysomnographic Program; however, the Board has set an internal expectation that all new applicants will be notified in writing within 30 days after the Board receives the application, whether the application is complete and accepted for filing or is deficient. If it is deficient, the Board's notice identifies the specific information required. This applies to all registration types under the Polysomnographic Program. The Board is currently meeting this expectation and is reviewing applications within 30 days.

The polysomnography application volume remained consistent with that of previous years. The average time to process a polysomnography application has remained constant and occurs within 30 days. The number of pending applications for the program is very small. The applications that remain pending have deficiencies outside of the Board's control.

The tables below show the Polysomnographic Program data.

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6. Licensee Population					
		FY 22/23	FY 23/24	FY 24/25	FY 25/26
Polysomnographic Trainee	Active	83	118	164	152
	Out of State	-	1	0	0
	Out of Country	-	0	0	0
	Delinquent/Expired	33	36	42	63
	Retired Status *if applicable*	-	0	0	0
	Inactive	-	0	0	0
	Other	-	0	0	0
Polysomnographic Technician	Active	158	151	166	175
	Out of State	-	1	1	1
	Out of Country	-	0	0	0
	Delinquent/Expired	60	69	59	56
	Retired Status *if applicable*	-	0	0	0
	Inactive	-	0	0	0
	Other	-	0	0	0
Polysomnographic Technologist	Active	611	631	615	647
	Out of State	-	72	66	68
	Out of Country	-	0	0	0
	Delinquent/Expired	230	199	217	183
	Retired Status *if applicable*	-	0	0	0
	Inactive	-	0	0	0
	Other	-	0	2	2

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Table 7a. Licensing Data by Type - 8012 – Polysomnographic – Trainee										
					Pending Applications			Application Process Times		
		Received	Approved/ Issued	Closed	Total (Close of FY)	Complete (within Board control)*	Incomplete (outside Board control)*	Complete Apps	Incomplete Apps	Total (Close of FY)
FY 22/23	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	43	43	-	10	N/A	N/A	11	69	65
	(Renewal)	-	15	-	-	N/A	N/A	-	-	11
FY 23/24	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	58	54	-	11	N/A	N/A	9	45	43
	(Renewal)	-	13	-	-	N/A	N/A	-	-	10
FY 24/25	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	80	77	-	16	N/A	N/A	15	75	70
	(Renewal)	-	22	-	-	N/A	N/A	-	-	9
FY 25/26	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	37	40	-	12	N/A	N/A	10	86	57
	(Renewal)	-	26	-	-	N/A	N/A	-	-	3
* Optional. List if tracked by the Board.										

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Table 7a. Licensing Data by Type - 8012 – Polysomnographic – Technician

		Received	Approved/ Issued	Closed	Pending Applications			Application Process Times		
					Total (Close of FY)	Complete (within Board control)*	Incomplete (outside Board control)*	Complete Apps	Incomplete Apps	Total (Close of FY)
FY 22/23	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	21	21	--	12	N/A	N/A	16	60	58
	(Renewal)	-	63		-	N/A	N/A	-	-	11
FY 23/24	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	24	25	-	11	N/A	N/A	15	41	39
	(Renewal)	-	53	-	-	N/A	N/A	-	-	10
FY 24/25	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	24	20	-	18	N/A	N/A	15	77	64
	(Renewal)	-	64	-	-	N/A	N/A	-	-	9
FY 25/26	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	35	33	-	9	N/A	N/A	11	96	60
	(Renewal)	-	61	-	-	N/A	N/A	-	-	3

* Optional. List if tracked by the Board.

Table 7a. Licensing Data by Type – Polysomnographic Technologist

		Received	Approved/Issued	Closed	Pending Applications			Application Process Times		
					Total (Close of FY)	Complete (within Board control)	Incomplete (outside Board control)	Complete Apps	Incomplete Apps	Total (Close of FY))
FY 22/23	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	47	48	-	32	N/A	N/A	9	65	62
	(Renewal)	-	388	-	-	N/A	N/A	-	-	11
FY 23/24	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	40	37	-	32	N/A	N/A	10	78	71
	(Renewal)	-	173	-	-	N/A	N/A	-	-	10
FY 24/25	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	21	14	-	46	N/A	N/A	12	47	44
	(Renewal)	-	393	-	-	N/A	N/A	-	-	9
FY 25/26	(Exam)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	(License)	61	60	-	26	N/A	N/A	12	100	83
	(Renewal)	-	173	-	-	N/A	N/A	-	-	3

Table 7b. License Denial				
	FY 22/23	FY 23/24	FY 24/25	FY 25/26
License Applications Denied (no hearing requested)	0	0	0	0
SOIs Filed	0	0	1	0
Average Days to File SOI (from request for hearing to SOI filed)	0	0	55	0
SOIs Declined	0	0	0	0
SOIs Withdrawn	0	0	0	0
SOIs Dismissed (license granted)	0	0	0	0
License Issued with Probation / Probationary License Issued	0	0	0	0
Average Days to Complete (from SOI filing to outcome)	0	0	379	0

Verification of Application Information

Polysomnographic applicants are required by law to truthfully answer all questions asked on the application for registration. Out-of-state and out-of-country applicants must meet the same requirements as California applicants. The application forms and license verifications (LV) are valid for one year. After one year, they must be updated to ensure that correct and current information accurately reflects any change in an applicant's qualifications. The Board requires primary source verification for proof of enrollment, diplomas, and transcripts from Board-approved polysomnographic education programs, examination scores, LV, certification of Basic Life Support, and the Verification of Experience forms.

The applicant must disclose all current and/or previous licenses/registrations held, and the Board must receive an LV from each state or jurisdiction directly from the licensing agency verifying the applicant's licensure information and whether any action has been taken against their license.

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The application asks about discipline by any other licensing/registering jurisdiction for the practice of polysomnography or any other healing arts license type. If an affirmative response to either of these questions is provided, the applicant and the involved regulatory agency must provide a detailed narrative of the events and circumstances leading to the action(s).

All applicants must obtain fingerprint criminal record checks from both the DOJ and the FBI prior to the issuance of a registration. If the applicant is residing outside of California, then they must submit fingerprint cards. If the applicant is residing in California, then they must visit a Live Scan service provider. The DOJ processes fingerprint submissions to establish the applicant's identity and provide the Board with the applicant's criminal conviction and arrest records from California and other jurisdictions within the United States.

If the Board is provided criminal history information by the DOJ, the Board will request information from the applicant on a voluntary basis. The Board will also request documentation from the appropriate criminal justice agency regarding the arrest and conviction. The applicant may also voluntarily provide evidence of rehabilitation.

All reports of criminal history, prior disciplinary actions, or other unlawful acts of the applicant are reviewed on a case-by-case basis to determine whether a registration should be issued, and, if so, whether it should be issued on probation with terms and conditions to protect the public.

The Board receives subsequent arrest reports from the DOJ following the initial submittal of fingerprints. These supplemental reports are reviewed by the Board's Enforcement Program to determine if any action should be taken against the registrant.

An examination is not required for the trainee or technician registration types; however, the polysomnographic technologist registration requires an applicant to take and pass a national examination (Registered Polysomnographic Technologist Exam) administered by the BRPT. This is the only examination accepted by the Board for purposes of qualifying for registration pursuant to Chapter 7.8 of Division 2 of the BPC. This is a computer-based test that requires a minimum passing score of 350.

Section 4 – Enforcement Program

The Board's performance targets and expectations for resolving complaints against polysomnographic trainees, technicians, and technologists remain aligned with its mission to protect consumers. During FYs 2022/23 through 2025/26, complaints and

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subsequent conviction/arrest notifications fluctuated from year to year. The Board works with the Department of Consumer Affairs (DCA), Division of Investigation, Health Quality Investigation Unit (HQIU), and the Attorney General's Office (AGO) to complete investigations and move administrative actions through the disciplinary process as expeditiously as possible. Its goal is to complete quality investigations in a timely manner. The Board encountered no barriers to carrying out its mission during this reporting period.

During FYs 2022/23 through 2025/26, the Board received seven complaints against polysomnographic trainees, technicians, or technologists: two in FY 2022/23,three in FY 2023/24, one in FY 2024/25, and one in FY 2025/26. The Board also received 21 subsequent conviction/arrest notifications concerning these registrants: five in FY 2022/23, six in FY 2023/24, four in FY 2024/25, and six in FY 2025/26, respectively.

During the same period, the Board filed 11 accusations: two in FY 2022/23, three in FY 2023/24, one in FY 2024/25, and five in FY 2025/26. The complaint prioritization policy for handling complaints filed against polysomnographic trainees, technicians, or technologists is consistent with DCA's guidelines.

Currently, there are no mandatory reporting requirements for registered polysomnographic trainees, technicians, or technologists.

The Polysomnographic Program does not have a statute of limitations established in law. The Board recognizes public protection as its highest priority and therefore strives to investigate each complaint as quickly as possible.

Citation and Fine

The Polysomnographic Program issued four citations during FYs 2022/23 through 2025/26: three in FY 2022/23 and one in FY 2023/24. It issued none in FY 2024/25 or FY 2025/26. The Board issues citations and fines for minor violations. Fine assessments were $700 in FY 2022/23 and $1,400 in FY 2023/24. No fines were assessed in FY 2024/25 or FY 2025/26.

Table 9a. Enforcement Statistics

	FY 22/23	FY 23/24	FY 24/25	FY 25/26
COMPLAINTS				
Intake				
Received	2	3	1	1

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Closed without Referral for Investigation	0	0	0	0
Referred to INV	7	9	5	7
Pending (close of FY)	0	0	0	0
Conviction / Arrest				
CONV Received	5	6	4	6
CONV Closed Without Referral for Investigation	0	0	0	0
CONV Referred to INV	5	6	4	6
CONV Pending (close of FY)	0	0	0	0

Source of Complaint				
	FY 22/23	FY 23/24	FY 24/25	FY 25/26
Public	1	1	0	1
Licensee/Professional Groups	0	0	0	2
Governmental Agencies	5	6	4	4
Internal	1	2	0	0
Other	0	0	0	0
Anonymous	0	0	1	0
Average Time to Refer for Investigation (from receipt of complaint / conviction to referral for investigation)	7 Days	5 Days	9 Days	15 Days
Average Time to Closure (from receipt of complaint / conviction to closure at intake)	0 Days	0 Days	0 Days	0 Days
Average Time at Intake (from receipt of complaint / conviction to closure or referral for investigation)	7 Days	5 Days	9 Days	15 Days
INVESTIGATION				
Desk Investigations				
Opened	7	9	7	7
Closed	7	9	5	3

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Average days to close (from assignment to investigation closure)	343 Days	273 Days	72 Days	66 Days
Pending (close of FY)	0	0	0	3
Non-Sworn Investigation				
Opened	7	6	3	3
Closed	4	0	2	10
Average days to close (from assignment to investigation closure)	359 Days	0 Days	186 Days	549 Days
Pending (close of FY)	6	8	9	3
Sworn Investigation				
Opened	0	0	0	1
Closed	1	0	1	0
Average days to close (from assignment to investigation closure)	210 Days	0 Days	720 Days	0 Days
Pending (close of FY)	0	1	0	1
All investigations				
Opened	7	9	5	7
Closed	7	8	5	10
Average days for all investigation outcomes (from start investigation to investigation closure or referral for prosecution)	340 Days	256 Days	296 Days	473 Days
Average days for investigation closures (from start investigation to investigation closure)	327 Days	256 Days	64 Days	66 Days
Average days for investigation when referring for prosecution (from start investigation to referral for prosecution)	356 Days	0 Days	645 Days	647 Days
Average days from receipt of complaint to investigation closure	343 Days	273 Days	72 Days	80 Days
Pending (close of FY)	8	9	7	6
DIVISION OF INVESTIGATION				
Average Days to Refer to Division of	56	0	9	21

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Investigation (from complaint receipt to referral for investigation)				
Average Days for Division of Investigation to Complete (from DOI receipt to return to program of referral)	204	0	720	0
Average Days from Return to Referral to AG (from DOI investigation to AG referral)	7	0	1	0
CITATION AND FINE				
Citations Issued	3	1	0	0
Average Days to Complete (from complaint receipt / inspection conducted to citation issued)	359 Days	22 Days	0 Days	0 Days
Amount of Fines Assessed	$700	$1,400	$0	$0
Amount of Fines Reduced, Withdrawn, Dismissed	$0	$0	$0	$0
Amount Collected	$700	$0	$0	$0
CRIMINAL ACTION				
Referred for Criminal Prosecution	0	0	0	0
ACCUSATION				
Accusations Filed	2	3	1	5
Accusations Declined	0	0	2	0
Accusations Withdrawn	0	0	0	0
Accusations Dismissed	0	0	0	0
Average Days from Referral to Accusations Filed* (from AG referral to Accusation filed)	170 Days	102 Days	47 Days	107 Days
INTERIM ACTION				
ISO & TRO Issued	0	0	0	0
PC 23 Orders Issued	0	0	0	0
Other Suspension/Restriction Orders Issued	0	0	1	0
Referred for Diversion	0	0	0	0

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Petition to Compel Examination Ordered	0	0	2	0
DISCIPLINE				
AG Cases Initiated (cases referred to the AG in that year)	2	3	2	7
AG Cases Pending Pre- Accusation (close of FY)	1	3	1	5
AG Cases Pending Post-Accusation (close of FY)	2	2	1	0
DISCIPLINARY OUTCOMES				
Revocation	1	1	2	1
Surrender	0	2	0	1
Suspension only	0	0	0	0
Probation with Suspension	0	0	0	0
Probation only	1	1	0	0
Public Reprimand / Public Reproval / Public Letter of Reprimand	0	0	0	0
Other	0	0	0	0
DISCIPLINARY ACTIONS				
Proposed Decision	3	0	0	0
Default Decision	0	1	2	1
Stipulations	1	3	0	0
Average Days to Complete After Accusation (from Accusation filed to imposing formal discipline)	571	317	148	164
Average Days from Closure of Investigation to Imposing Formal Discipline	599	471	635	227
Average Days to Impose Discipline (from complaint receipt to imposing formal discipline)	906	831	890	1,218
PROBATION				

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Probations Completed	1	0	2	0
Probationers Pending (close of FY)	2	3	1	0
Probationers Tolled *	0	0	0	0
Petitions to Revoke Probation / Accusation and Petition to Revoke Probation Filed	0	0	0	0
SUBSEQUENT DISCIPLINE				
Probations Revoked	0	0	0	0
Probationer's License Surrendered	1	0	1	0
Additional Probation Only	0	0	0	0
Suspension Only Added	0	0	0	0
Other Conditions Added Only	0	0	0	0
Other Probation Outcome	0	0	0	0
SUBSTANCE ABUSING LICENSEES				
Probationers Subject to Drug Testing	no sub abusing licensees	no sub abusing licensees	no sub abusing licensees	no sub abusing licensees
Drug Tests Ordered	0	0	0	0
Positive Drug Tests	0	0	0	0
PETITIONS				
Petition for Termination or Modification Granted	0	0	0	0
Petition for Termination or Modification Denied	0	1	0	0
Petition for Reinstatement Granted	0	0	0	0
Petition for Reinstatement Denied	0	0	0	0
DIVERSION				
New Participants	no diversion	no diversion	no diversion	no diversion
Successful Completions				

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Participants (close of FY)				
Terminations				
Terminations for Public Threat				
Drug Tests Ordered				
Positive Drug Tests				

Table 10. Enforcement Aging

	FY 22/23	FY 23/24	FY 24/25	FY 25/26	Cases Closed	Average %
Investigations (Average %)						
Closed Within:						
90 Days	1	1	2	2	6	26%
91 - 180 Days	0	2	1	1	4	17%
181 - 1 Year	4	2	1	1	8	35%
1 - 2 Years	2	0	0	0	2	9%
2 - 3 Years	0	0	1	2	3	13%
Over 3 Years	0	0	0	0	0	0%
Total Investigation Cases Closed	7	5	5	6	23	100%
Attorney General Cases (Average %)						
Closed Within:						
0 - 1 Year	1	1	4	3	9	69%
1 - 2 Years	0	2	0	0	2	15%
2 - 3 Years	2	0	0	0	2	15%
3 - 4 Years	0	0	0	0	0	0%
Over 4 Years	0	0	0	0	0	0%
Total Attorney General Cases Closed	3	3	4	3	13	100%

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Cost Recovery and Restitution

Table 11. Cost Recovery

	FY 22/23	FY 23/24	FY 24/25	FY 25/26
Total Enforcement Expenditures*	$15,203	$19,287	$12,439	$7,590 ***
Potential Cases for Recovery **	2	4	2	1
Cases Recovery Ordered	2	3	2	1
Amount of Cost Recovery Ordered	$32,623.75	$24,256.35	$20,404.25	$16,617.00
Amount Collected	$-	$-	$390	$400

* Includes Health Quality Investigations and internal Board Shred Services Expenditure.
** "Potential Cases for Recovery" are those cases in which disciplinary action has been taken based on violation of the applicable license practice act.
***Total year-end enforcement expenditures not available at the time of this report for FY 2025/26. The enforcement expenditure of $7,590 dollars is an estimate.

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The Board does not order restitution in its disciplinary cases.

Table 12. Restitution

	FY 22/23	FY 23/24	FY 24/25	FY 25/26
Amount Ordered	0	0	0	0
Amount Collected	0	0	0	0

Section 5 – Public Information Policies

Refer to Full 2026 Medical Board Sunset Report.

Section 6 – Online Practice Issues

Refer to Full 2026 Medical Board Sunset Report.

Section 7 – Workforce Development and Job Creation

Refer to Full 2026 Medical Board Sunset Report.

Section 8 – Current Issues

Refer to Full 2026 Medical Board Sunset Report.

Section 9 – Board Action and Response to Prior Sunset Issues

None.

Section 10 – New Issues

None.

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