NATIONAL ARCHIVES AND RECORDS ADMINISTRATION Request for Records Disposition Authority

Records Schedule: DAA-0015-2016-0002

| Records Schedule Number | DAA-0015-2016-0002 | | |
|--|-------------------------------|---|--|
| Schedule Status | Approved | | |
| Agency or Establishment | Department of Veterans Affair | S | |
| Record Group / Scheduling Group | Records of the Department of | Veterans Affairs | |
| Records Schedule applies to | Agency-wide | | |
| Schedule Subject | Sleep Study (Polysomnogram |) Records | |
| Internal agency concurrences will be provided | No . | 1 | |
| Background Information | | ns) generally take place in a sleep lab ping period. The study records brain | |

Request for Records Disposition Authority

purpose of diagnosing and treating various sleep disorders. The term "polysomnogram" indicates that there are multiple tests in a sleep study. Various body activities and indicators may be measured during a sleep study. A sleep study is generally performed on an outpatient basis at night.

waves, breathing and body activity that occur during sleep with the

Item Count

| Number of Total Disposition | Number of Permanent | Number of Temporary | Number of Withdrawn |
|-----------------------------|---------------------|---------------------|---------------------|
| Items | Disposition Items | Disposition Items | Disposition Items |
| 2 | 0 | 2 | 0 |

GAO Approval

Outline of Records Schedule Items for DAA-0015-2016-0002

| Sequence Number | | |
|-----------------|---|--|
| 1 | Polysomnography (PSG) tracing file Disposition Authority Number: DAA-0015-2016-0002-0001 | |
| 2 | Polysomnography (PSG) audio/video file Disposition Authority Number: DAA-0015-2016-0002-0002 | |

Records Schedule Items

| Sequence Number | | | | | |
|---------------------------|---|------------------------------|--|--|--|
| 1 | Polysomnography (PSG) tracing file | | | | |
| | Disposition Authority Number | DAA-0015-2 | 016-0002-0001 | | |
| · · · | Continuous record of the various parameters captured while the patient is sleeping. This record may be maintained electronically as a file on a hard drive, burned to a CD/DVD, or printed and maintained as a paper record. | | | | |
| | Final Disposition | Temporary | | | |
| | Item Status | Active | | | |
| | Is this item media neutral? | Yes | | | |
| | Do any of the records covered by this item currently exist in electronic format(s) other than e- mail and word processing? | Yes | · · · | | |
| | Do any of the records covered by this item exist as structured electronic data? | No | | | |
| , | Manual Citation | | Manual Títle | | |
| | New | | RCS10-1 | | |
| | Disposition Instruction Cutoff Instruction | Cutoff at the test is perfor | end of the calendar year in which the med. | | |
| 2 | Retention Period | • | ear(s) after after cutoff. | | |
| | Additional Information | · . | Ŧ | | |
| | GAO Approval | Not Require | d | | |
| 2 | Polysomnography (PSG) aud | •, | - | | |
| | Disposition Authority Number | | 016-0002-0002 | | |
| | Continuous audio/video recording of the patient asleep during a sleep study. This record may be maintained electronically in conjunction with the PSG tracing file or transferred to another media such as DVD. Note: Polysomnography (PSG) report this record consists of a summary and diagnosis based on the data from the PSG tracings file. It is reviewed by a medical provider and included in the patient's electronic health record. | | | | |
| | Final Disposition | Temporary | . (| | |
| Electronic Records Archiv | Pes P | age 3 of 6 | PDF Created on: 05/04/2018 | | |

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| Item Status | Active | |
|---|---------------------------------|---|
| Is this item media neutral? | Yes | |
| Do any of the records covered by this item currently exist in electronic format(s) other than e- mail and word processing? | Yes | · · · · · · |
| Do any of the records covered by this item exist as structured electronic data? | No | |
| Manual Citation | · · · · | Manual Title |
| New | | RCS 10-1 |
| | ~~ | |
| Disposition Instruction | | |
| | Cutoff at the test is performed | e end of the calendar year in which the |
| Disposition Instruction | test is perfor | e end of the calendar year in which the |
| Disposition Instruction | test is perfor | e end of the calendar year in which the rmed. |

Agency Certification

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposition of its records and that the records proposed for disposal in this schedule are not now needed for the business of the agency or will not be needed after the retention periods specified.

Signatory Information

| Date | Action | Ву | Title | Organization |
|------------|----------------------------|---------------------|--|---|
| 12/11/2015 | Certify | Martin Hill | Program Manageme nt Office | Office of Information and Technology - Enterprise Records Service |
| 04/11/2018 | Submit for Concur rence | David Weber | Senior Appraisal Arc hivisit | National Archives and Records Administration - Records Management Services |
| 05/02/2018 | Concur | Sebastian Welch | Supervisory Archive s Specialist | National Archives and Records Administration - ACR4 |
| 05/02/2018 | Concur | Margaret Hawkins | Director of Records Management Servic es | National Records Management Program - ACNR Records Management Services |
| 05/04/2018 | Approve | David Ferriero | Archivist of the Unite d States | Office of the Archivist - Office of the Archivist |