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MEDIA REVIEW: *Clinical Atlas of Polysomnography*

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Clinical Atlas of Polysomnography by Ravi Gupta, S.R. Pandi-Perumal, and Ahmed BaHammam and published by Apple Academic Press in 2018 is an illustrative book geared toward sleep technologists but can be used as an introduction to polysomnography for students and physicians interested in sleep disorders and management of a sleep laboratory.

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Clinical Atlas of Polysomnography by Ravi Gupta, S.R. Pandi-Perumal, and Ahmed BaHammam is an illustrative book geared toward sleep technologists, but can be used as an introduction to polysomnography for students and physicians interested in sleep disorders and management of a sleep laboratory. The text is divided into concise chapters that begin with a basic overview of normal sleep, sleep disorders, and types of overnight sleep studies, and progress to the technical breakdown for lead placements during polysomnography.

Basic definitions and terms are clearly explained, such as the components for narcolepsy, and this could be helpful to those who are new to the sleep field. However, experienced clinicians will find this information too basic to be of much use. There are brief review questions with answers at the end of the chapters to reiterate the main concepts. Recent clinical practice guidelines are also referenced following some chapters, which helps keep the atlas more current.

A key strength of the book is its numerous color illustrations of polysomnographic data that resemble polysomnography output seen in sleep laboratories. The illustrations allow for variety among the numerous chapters and keep the reader engaged. Another strength is that this atlas offers practical protocols for various sleep studies (chapter 17, Test Protocols) for those interested in starting a sleep laboratory but do not have extensive resources. This may be redundant for locations that already have established sleep centers.

The main weakness of this atlas is a lack of universality for some chapters. Some readers will find that they can skip entire chapters. For example, chapter 7 may be skipped if one does not have polysomnography units from either Philips Respironics, Somnomedics or Cadwell, as the illustrations would not be relevant. Similarly, some may skip the discussion of financial viability (chapter 25) as it applies to an Indian audience only.

Although it is not a standalone reference, the information provided in this book can be useful for technicians who are starting to practice sleep medicine. While *Clinical Atlas of Polysomnography* is not a substitute for The AASM Manual for the Scoring of Sleep and Associated Events: Rules, Terminology and Technical Specifications, it is an excellent supplement that provides numerous illustrations to reinforce common findings (artifact, montages, bruxism, etc.). This is particularly useful for the untrained eye of new technicians, trainees and non-sleep clinicians.

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