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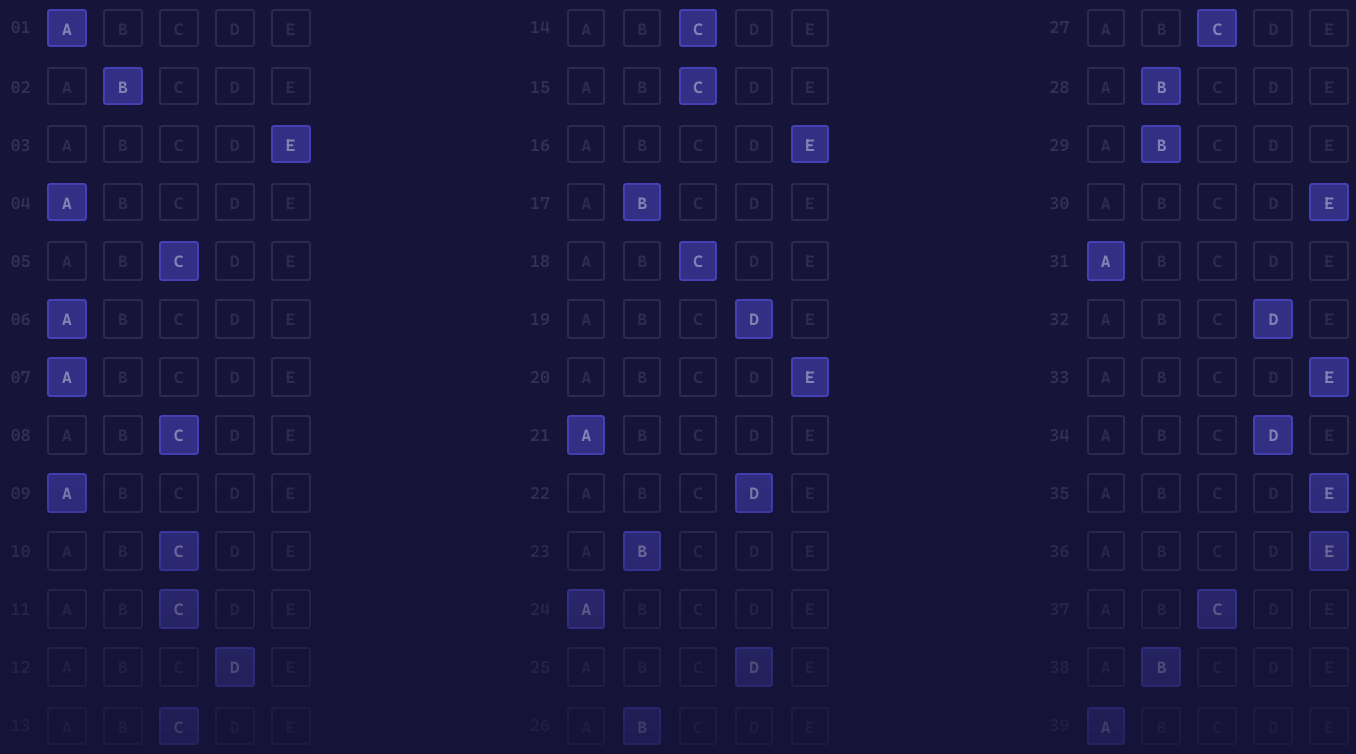

PRACTICE QUESTIONS

Board of Behavioral Sleep Medicine (BBSM)

DBSM

Behavioral Sleep Medicine Certification Examination

EDITION	QUESTIONS	FORMAT
Demo	9	Limited Edition PDF

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Before you begin

What this is

9 practice questions for Board of Behavioral Sleep Medicine (BBSM) `DBSM`, each with its answer key and an explanation. Answer a question before you read its key — the explanation is worth more once you have committed.

If something looks wrong

Send us three things and we will check it:

- the exam code, `DBSM`
- the question number
- the email address on your order

Write to **support@mometrix.net**. We reply within one business day.

QUESTION 1 MULTIPLE CHOICE

A patient reports difficulty falling asleep, frequent nighttime awakenings, and daytime impairment. Which two components are essential when obtaining a clinical sleep history? (Choose two.)

A **A 2-week sleep diary**

B **The patient's complete psychiatric and medical history**

C A polysomnography report from every night of the prior month

D The patient's preferred brand of sleep medication

ANSWER **A** · **B**

WHY A sleep diary provides prospective information about sleep timing, duration, and variability, while psychiatric and medical history helps identify contributing conditions, medications, and comorbid disorders. Polysomnography is not routinely required every night, and medication brand preference is not an essential diagnostic component.

QUESTION 2 MULTIPLE CHOICE

Which two techniques are core components of cognitive behavioral therapy for insomnia (CBT-I)? (Choose two.)

A **Stimulus control**

B **Sleep restriction therapy**

C Continuous positive airway pressure titration

D Overnight polysomnography

ANSWER **A** · **B**

WHY Stimulus control strengthens the association between bed and sleep, while sleep restriction therapy reduces excessive time in bed and consolidates sleep. CPAP titration and polysomnography are not core CBT-I techniques.

QUESTION 3 SINGLE CHOICE

Which structure is primarily responsible for regulating circadian timing in humans?

A **The suprachiasmatic nucleus**

B The cerebellum

C The medulla oblongata

D The hippocampus

ANSWER **A**

WHY The suprachiasmatic nucleus of the hypothalamus functions as the primary circadian pacemaker and coordinates timing of sleep and other daily physiological rhythms.

QUESTION 4 SINGLE CHOICE

Which tool is most appropriate for documenting a patient's bedtime, estimated sleep onset latency, nighttime awakenings, final awakening, and naps over one to two weeks?

A **Sleep diary**

B Electrocardiogram

C Actigraphy calibration report

D Pulmonary function test

ANSWER **A**

WHY A sleep diary systematically records sleep-related times and behaviors, including bedtime, awakenings, wake time, and naps. The other tools do not provide this longitudinal self-reported sleep-pattern information.

QUESTION 5 SINGLE CHOICE

What is the primary purpose of the stimulus-control instructions used in CBT-I?

A **To strengthen the bed as a cue for sleep rather than wakeful activity**

B To eliminate all daytime naps regardless of sleep pressure

C To increase total time spent in bed each night

D To replace prescribed medication with a fixed morning schedule

ANSWER **A**

WHY Stimulus control is designed to re-establish the association between the bed and sleep by limiting wakeful activities in bed. It does not simply require eliminating every nap, increasing time in bed, or substituting a schedule for medication.

QUESTION 6 SINGLE CHOICE

Which instrument is specifically designed to measure a person's subjective tendency to doze in common daytime situations?

A **Epworth Sleepiness Scale**

B Mini-Mental State Examination

C Beck Depression Inventory

D Hamilton Anxiety Rating Scale

ANSWER **A**

WHY The Epworth Sleepiness Scale asks respondents to rate their likelihood of dozing in eight common situations and is used to assess subjective daytime sleepiness. The other instruments measure cognition, depression, or anxiety rather than sleep propensity.

QUESTION 7 SINGLE CHOICE

Which condition is characterized by repeated upper-airway obstruction during sleep with continued respiratory effort and is commonly associated with loud snoring and daytime sleepiness?

A **Obstructive sleep apnea**

B Restless legs syndrome

C Narcolepsy type 1

D REM sleep behavior disorder

ANSWER **A**

WHY Obstructive sleep apnea involves recurrent partial or complete upper-airway obstruction during sleep despite ongoing respiratory effort. The other conditions primarily involve leg discomfort, hypocretin-related excessive sleepiness, or abnormal dream enactment.

QUESTION 8 SINGLE CHOICE

A CBT-I patient spends excessive time awake in bed and has fragmented sleep. Which treatment directly reduces time in bed to improve sleep consolidation?

A **Sleep restriction therapy**

B Light therapy delivered at midnight

C Progressive muscle relaxation used only during naps

D Unrestricted time in bed

ANSWER **A**

WHY Sleep restriction therapy temporarily limits time in bed to approximate actual sleep time, strengthening sleep drive and improving sleep consolidation. Midnight light therapy is not a standard substitute, relaxation during naps is not the specified technique, and unrestricted time in bed can perpetuate sleep fragmentation.

QUESTION 9 SINGLE CHOICE

Which sleep stage is generally associated with the highest proportion of vivid dreaming and skeletal muscle atonia?

A **REM sleep**

B N1 sleep

C N2 sleep

D N3 sleep

ANSWER **A**

WHY REM sleep is characterized by vivid dream activity and profound skeletal muscle inhibition, or atonia, with rapid eye movements. N1, N2, and N3 are stages of non-REM sleep.