



FAMILY SLEEP DIAGNOSTICS

SAVING LIVES AND MARRIAGES

Symptoms of Inadequate Sleep

- Excessive Daytime Sleepiness
- Memory Loss
- Frequent errors or mistakes
- Depression or negative moods
- Impatience or Irritability
- Loss of libido
- Short temper
- Falling asleep unintentionally
- fatigue/ malaise
- Restless Sleep

Health Complications

- High blood pressure
- Diabetes
- Stroke
- Heart Disease / Heart Attack
- Depression
- Weight Issues
- Congestive Heart Failure
- Chronic Obstructive Pulmonary Disease
- Seizures
- Reflux/ GERD

What are the treatment options for these disorders?

- * OSA can be treated by sleeping with Continuous Positive Airway Pressure (CPAP). CPAP is a machine that helps to keep the airway from collapsing. There are surgical procedures that may help to eliminate OSA in some individuals. In Mild cases of OSA, a dental appliance may be effective. Weight loss is recommended for those patients who are overweight or obese.
- * CSA can be treated with BPAP or ASV machines. These machines work with positive air pressure that varies depending on the individuals specific breathing requirements
- * RLS and PLMS can be improved with medication

What should bring with you?

- * Driver's license/ Photo ID and insurance card.
- * Pajamas (preferably cotton, two-piece outfit such as shorts and t-shirt)
- * Anything that would make you stay more comfortable such as robe, slippers, pillow, blanket, or snack.
- * Medications and/or Medication list
- * Any over the counter medications you may need to take during the night, such as Tylenol, heartburn medications, sleeping aids, etc...
- * Completed questionnaires or paper-work

Why have a Sleep Study?

- Your physician has referred you to Family Sleep Diagnostics for an overnight (sleep study). There are several different types of sleep studies and the type scheduled for you are usually dependent on physician preferences or insurance requirements.
- A diagnostics polysomnogram is used to diagnose numerous sleep disorders. Approximately 70 million people in the US are affected by a sleep problem. About 40 million Americans suffer from a chronic sleep disorder and an additional 20-30 million are affected by intermittent sleep-related problems. However, an overwhelming majority of sleep disorders remain undiagnosed and untreated (National Commission on Sleep Disorders Research, 1992).
- Upon diagnosis of OSA a PAP titration study is used to determine the efficacy of treatment of sleep disordered breathing as well as you ability to tolerate the PAP device. There are several different types of PAP therapies and the type most effective will depend on your sleep disordered breathing severity and type.
- Alternatively a split night polysomnogram begins with a diagnostics portion and potentially ends with a treatment portion (CPAP) dependent on the severity of your sleep disorder.

What is my Physician Looking for?

- Obstructive Sleep Apnea (OSA) is the most common sleep disorder seen in the sleep center. Sleep apnea, a breathing disorder characterized by brief interruptions of breathing during sleep, affect as many as 18 million people, according to the National Institute of Health (NIH) Estimates indicate that untreated sleep apnea may cause \$3.4 billion in additional medical cost (SLEEP, 1992). OSA is a serious condition, which can cause an increased risk of high blood pressure, heart attack, stroke or even death, unless treated. Patients with OSA have either a complete or partial obstruction of their airway during sleep causing loud snoring, drops in their blood oxygen levels, choking sensations and frequent arousals (brief awakenings).
- Central Sleep apnea (CSA) is a disorder in which an individuals breathing repeatedly stops and starts during sleep. Central sleep apnea occurs because the brain doesn't send proper signals to the muscles that control breathing.
- Periodic limb movements (PLMS) during sleep are repetitive leg movements that occur while the patient is asleep. These movements typically occur in the legs but may also be seen in the arms. When sever, these leg movements can significantly disrupt sleep causing excessive daytime sleepiness.
- Restless legs syndrome (RLS) is a movement disorder that keeps the patient from going to sleep. Approximately 12 million Americans have restless legs syndrome, a sleep and movement disorder characterized by unpleasant feelings in the legs (tingling, crawling, creeping, and/or pulling), which cause an urge to move in order to relieve the symptoms. Symptoms may be partially relieved by movement, such as walking or stretching.
- There are over 90 documented sleep disorders, though many are rare and may never be seen in most sleep centers. Because these disorders occur during sleep, most people are unaware that they even have a problem.

Information about your overnight study

What to do on the day of your study?

- Avoid napping, if at all possible
- Wash your hair on the day of your study
- Avoid using oils, gels, hairspray, and skin lotions.
- Eat dinner before coming to the Sleep Center
- Avoid drinking alcoholic beverages and caffeine after 12:00pm
- Take medications as normal, unless otherwise instructed by you physician.
- On the 3 days/ nights prior to your sleep study, follow your normal routine.
- Weaves or removable hair pieces should be removed prior to your sleep study

What to expect

- * Upon arrival, you will be asked to complete consent forms and a brief questionnaire about your day
- * This procedure will not hurt (no needles are involved)
 - * A private room with cable TV
- * You can get up to use the restroom at any time by contacting your tech
- * Lights out is approximately 10:30p.m.
- * Testing ends at approximately 5:00a.m.
 - * A highly qualified sleep tech will be monitoring you throughout the night. Should you need anything the tech is there to assist you.

What if I have to cancel or re-schedule my test?

- * If you need to reschedule your appointment, please call our office at 972-714-0011 as soon as possible. There is a **\$50 rescheduling fee** assessed each time we have to reschedule your appointment.
- * Except in instances of extreme emergency, cancellations must be made no later than 2 business days prior to testing. Based on your scheduling call, we have blocked a bedroom for your occupancy and scheduled a sleep technician to perform your testing. A late cancellation and/or No Show, leaves us with an unoccupied bed and staff members that end up being sent home without their shift pay for the night.

Please know you will be charged a \$200 late cancellation or no-show fee, if you do not call at least 2 business days prior to your



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Monitoring Your Sleep

- A qualified tech will measure your scalp and then, using conductive paste, place on small wires (electrodes) to record your brain activity (EEG).
 - This will allow you physician to determine the quality of your sleep.
- Electrodes will be placed near your eyes to monitor eye movements (EOG)
 - This indicates sleep staging especially dream sleep (REM).
- Two electrodes will be placed on the chin to measure muscle tension (EMG).
- Two sticky electrodes will be placed on your chest to monitor heart (ECG)
- A small sensor will be placed in front of your nose to measure your breathing throughout the night (diagnostics) or a PAP mask placed on your face to test treatment efficacy/tolerance.
 - This will let us know if you have any nightly breathing issues
- A soft band will be placed around your chest and abdomen to measure your effort to breathe.
- A small sensor will be placed on one of your fingers to measure your blood oxygen level.
- Electrodes will be placed on each leg to monitor leg movements that may disrupt your sleep (EMG)
 - This may sound like a lot but the monitors are lightweight and still allow you to shift positions while you sleep. Virtually all patients are able to sleep with the monitors in place.

IMPORTANT FINANCIAL CONSIDERATIONS

How much is this going to cost me?

- During your scheduling call, our representative will have discussed with you the dollars you will be personally responsible for paying for your testing services. If you have health insurance coverage, our representative will have reviewed with you your financial responsibility for each test as it relates to:

- Unmet deductible
- Co-Insurance
- Co-pay

- The evening you arrive at the lab for testing, your sleep technician will have paperwork for you to complete and sign. Included in the packet is a Billing Consent form which will clearly detail exactly what you are responsible for paying out-of-pocket. This form is a legal and binding agreement – you will never be asked for any dollars in excess of what is detailed on this form.

You are expected to pay your personal out-of-pocket expenses prior to or at the time of your testing.

- Unless you have pre-paid or have a pre-approved payment plan, please be sure to bring an acceptable form of payment with you on the night of your testing. We accept all major credit cards, personal checks & cash (please bring exact amounts when paying cash).

- In the case of out-of-network or self-pay services, you may have a special, negotiated discounted rate. Please note that this discounted rate only applies when paid prior to the night of your testing, or (with prior special arrangement) at time-of service. If you do not pay your negotiated rate prior to testing, and ask to be billed, you will lose the discount and all fees will revert to the standard rate.

Are there any other charges I may be responsible for?

- **Yes, there could be additional charges associated with the testing.**
- Family Sleep Diagnostics (FSD) bills for the sleep testing service only. Either your referring physician or his/her designee will interpret your sleep study results and will bill your insurance carrier for these services. This may leave you responsible for any unpaid portion. This is very similar to when you have an X-Ray. The X-Ray lab charges to take the X-Ray and then the radiologist (a physician) charges to read/interpret the X-Ray.
 - Due to each physician having their own specific billing rates, FSD cannot quote you an exact amount of what you may owe for interpretation services. These services are usually covered by your insurance but are also subject to deductibles, coinsurance and/or co-pay.



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WHAT HAPPENS AFTER THE SLEEP STUDY?

Based on your results and the physicians' recommendations, we will contact you to discuss further treatment options. **Please allow 10 business days after your study for us to contact you.**

Your physician may not have the chance to review your results with you prior to scheduling your second night's study. This is a normal process created to expedite your treatment as well as decrease the number of time you have to visit the physician.

There are some instances where a CPAP will not be effective and you may be recommended to return for a Bi-Level or Auto Bi-Level Titration. These are also Positive Airway Pressure devices that are recommended for the treatment of sleep apnea.

DME

If an optimal pressure is found the night of your Titration, we will work with your physician to obtain a prescription for that pressure. A CPAP/Bi-Level/Auto Bi-Level machine is classified as Durable Medical Equipment (DME) and a prescription is required in order to dispense. Some physicians will provide the DME equipment themselves, in which case they will contact you to discuss.

If your physician has indicated to us that they would like Family Sleep Diagnostics to organize the set-up of your equipment, a representative of a DME company will phone you to set up an appointment within one week. If you have not heard from us, please call our office at **972-714-0011**.

On the day you receive your equipment, the respiratory technician will help you to find a mask that is comfortable for you and a machine that meets your needs. They will also discuss cleaning, storage and insurance compliance requirements at that time. This appointment is usually 45-60 minutes.

- After the study, your results will be compiled, scored and sent to your physician to interpret within 3 business days. There are some instances where another physician will be interpreting your study. In that instance, a copy of those results will also be sent to your referring physician at that time. Your referring physician will also receive the signed interpretation once that is available.

- If you have sleep apnea, you will be contacted to schedule treatment of sleep apnea, this is called a Titration. You will be asked to return for a second sleep study with a CPAP machine. CPAP (Continuous Positive Airways Pressure) is the "gold standard" of treatment for sleep apnea and is a safe and effective treatment for sleep apnea. It is the treatment of choice for sleep apnea particularly when oxygen desaturations during sleep are present (low oxygen). During this treatment, the technologist is observing you at different CPAP pressure levels to see which level controls your breathing and increases your oxygen levels. This is considered an "optimal pressure".

- The goal of any Titration study is to find an optimal pressure to alleviate your sleep apnea.

- After your Titration study, your results will be compiled, scored and sent your physician to interpret within 3 business days. There are some instances where another physician will be interpreting your study. In that instance, a copy of those results will also be sent to your referring physician at that time. Your referring physician will also receive the signed interpretation once that is available.

- Many patients who have apnea prefer to attempt a trial of treatment before seeing the physician for follow up after the sleep study. We recommend you see your doctor within 6-8 weeks for a follow up after your Titration study to assess your response to the equipment. This is so that you and the doctor can make an informed decision together about your treatment having tried DME for a period of time at home. Your physician may want you to come in sooner. If, during the trial of treatment you find that the equipment is not effective, other forms of treatment may be recommended by your physician.

If you have any other identifiable sleep disorder other than apnea you will be contacted and recommended to consult with your physician.

If at any time you'd like to make an appointment with a Sleep Boarded physician, please contact our office and we can recommend physicians in your area.