

Home Sleep Test Level III was utilized. Measurements obtained are A) Airflow obtained by nasal pressure transducer, B) Oxygen saturation and pulse measured by pulse oximeter, C) Respiratory Effort with Chest Belt

Patient: Test, PATRICIA

DOB: 09/13/1967

Date of Study: 02/12/2013

Duration of Recording: 9 hours 8 min 54 sec

Indications for study:

Excessive Daytime sleepiness

BMI: 48.90

Respiratory Events:

(Pt qualifies for PAP with an RDI / AHI of 5 or greater)

Total Respiratory Disturbance Index: 10
 Total Obstructive Apneas: 19
 Total Hypopneas: 71
 Total Central Apneas: 0

Oximetry:

Oxygen Desaturation Index: 13

Oximetry Less than <89%:

fDhei UjYg Zf C&k Jh 'Ub'GUC&'®, -i 'Zf' 'a jbi Hg'cf' [fYUHF

Lowest Desaturation: 78

T ā ~ c•Ā Āc*^} Āac' iaeā} ĀrĀ JĀ 21 min

Heart Rate:

Minimum-Maximum 69 - 111

Impression / Diagnosis:

Findings are consistent with Mild Obstructive Sleep Apnea (327.23)

Recommendations:

- Consider Auto PAP with pressure ranges 5-20 cmH2O with download, or facility based PAP Titration
- Consider PAP interface mask fitted for patient comfort, Heated Humidification & PAP compliance monitoring (1 month, 3 months & 12 months after PAP initiation)
- Consider treatment with mandibular advancement splint (MAS) or referral to an ENT surgeon for modification to the upper airway if the patient prefers an alternate therapy or the PAP trial is unsuccessful
- Consider sleep hygiene measures
- Consider behavioral therapy such as weight reduction or smoking cessation as appropriate for this patient
- Consider advising patient against the use of alcohol or sedatives in so much as these substances can worsen excessive daytime sleepiness and respiratory disturbances of sleep
- Consider advising patient against participating in potentially dangerous activities while drowsy such as operating a motor vehicle, heavy equipment or power tools as it can put them and others in danger
- Consider advising patient of the long term consequences of OSA if left untreated, need for treatment and close follow up
- Clinical follow up as deemed necessary

***HST cannot diagnose all sleep disturbances, therefore if this test is negative for Sleep Apnea and your clinical evaluation suggests otherwise please refer to facility study. ***

Digitally Signed February 22, 2013 by: Chandra Matadeen-Ali NPI: 1811197619



