

ANSWERS TO COMMON QUESTIONS ABOUT SLEEP STUDIES

You have been scheduled for a Polysomnogram (usually called a PSG). Here are answers to some commonly asked questions about PSG:

What are sleep studies?

There are four types of sleep studies performed at the Sleep Center:

1. **Polysomnogram (PSG)** – requires a night in a sleep lab to monitor numerous aspects of sleep. The study evaluates sleep stages, leg movements and provides a comprehensive evaluation of apnea. It also assists in the diagnosis of other disorders that may present with excessive sleepiness, such as narcolepsy or periodic leg movement disorder.
2. **Continuous Positive Airway Pressure (CPAP) Titration** is a nighttime study using a nasal CPAP. The diagnostic equipment used in this study is the same as the PSG with the addition of a nasal mask. This device blows air through a mask into the nasal passages and prevents upper airway closure during sleep. This test determines the correct air pressure needed to effectively maintain an open airway.
3. **Split Night study** is the same as a PSG for the first two hours. If in those two hours one meets the criteria for sleep apnea, then a CPAP device is applied and worn through the remainder of the night.
4. **Multiple Sleep Latency Test (MSLT)** - is a daytime study, which involves a series of naps. This study assesses daytime sleepiness. A physician may order a MSLT to follow a PSG nighttime study or the daytime study maybe ordered independently. The diagnostic equipment used for a MSLT is less extensive than the nighttime study.

What types of signals are usually recorded?

NO needles are used to collect any of these measures. Straps, tape or a water-based paste hold the various devices in place.

The signals recorded include:

1. Brain waves (EEG) - seven electrodes on the scalp
2. Heart rate (EKG) - two electrode patches on the chest.
3. Eye movement - an electrode next to each eye.
4. Muscle activity - electrodes on the muscles of the chin.
5. Leg movements - two electrodes on the lower part of each leg.
6. Airflow - sensor attached on the upper lip.
7. Breathing movements - belts around the chest and abdomen.
8. Oxygen level - a probe wrapped around a finger.

Why is it necessary to record all these things?

During sleep your body functions differently than when you are awake. The only way to determine just how well your body is functioning is with the sensors. They are all necessary in order to get a complete picture of what is happening.

How can I sleep with all these things attached to me?

You will find that it is not as bad as it may sound. In fact, most people sleep quite well. The electrodes and other devices are applied so that you can move fairly free in your sleep without disturbing them. None of the devices are painful and a technician is available to help make you as comfortable as possible.

Will I be given any drugs to make me sleep?

You will not be given any medications. If you normally take medications prescribed by your physician during the hours that you will be in the Sleep Center, please bring them with you and take them as usual. If you have any questions regarding the use of your medications the night of the study, please contact your ordering physician.

How are the electrodes applied?

The application is done in two stages. First, the area where the electrode is to be applied will be cleaned to remove normal body oils. Second, the electrodes on hairless areas will be taped securely so they will not come loose. On the head, the electrodes will be secured with paste and gauze.

What if I have to go to the bathroom / or get a drink during the night?

All you have to do is say you need to get up and a technician will come in to assist you. They can hear you through an audio system and can see you on their monitors. They do not have to remove any wires. They will disconnect the wiring box from your bedside equipment and you can carry that small box with you. When you return, the technician will reconnect the box to the bedside equipment.

Will anyone be in the Sleep Center while I am sleeping?

You will have your own room with a queen size bed. A trained technician will remain in the control room of the Sleep Center will use audio and visual monitoring continuously throughout your study. You can talk at any time and the technician will respond as soon as possible. The technician is responsible for making your stay in the Sleep Center comfortable, pleasant and safe.

Will my insurance pay for my sleep testing?

Yes, in most cases. Medicare and most other indemnity and managed care insurances are accepted and cover approximately 80 to 100 percent of the procedure. You will be responsible for your deductible and designated co-pay. If a referral is required, it is the responsibility of your ordering physician to submit one to the sleep lab. The sleep lab coordinator will then obtain an authorization from your insurance carrier if needed to have the sleep study performed. If you have any questions regarding your coverage please call the sleep coordinator, or your insurance carrier. It is important to resolve any billing questions before your test date.

Who is responsible for my care following the procedure and ordering my equipment and supplies, if needed?

The ordering physician is responsible for discussing the results and ordering any equipment, if needed, following the sleep study. The sleep lab is a diagnostic testing facility that performs the study and then a sleep specialist interprets the study for the ordering physician. Our sleep specialists are available to speak with referring physicians regarding any questions about the report.

What is the wait time for me to get scheduled?

Typically, a patient can be scheduled within 7 to 10 days.

When will a report be available to my ordering physician?

A preliminary report will be faxed to the referring physician's office within 24 to 48 hours after the test is completed. Then a finalized report will be mailed to the physician's office within 5 to 7 business days.