## Diagnostic Sleep Study Worksheet: Adult

(Initial testing)

Patient Name	_ DOB	_ Age
Health Plan_	Member Number	
Requesting Physician Slee	p Study Provider	
<b>Directions:</b> Collect patient information from the requesting physician. Submit or	nline ( <u>www.ProviderPortal.com</u>	) for an instant response.
Diagnostic Sleep Study Type (check one): _ Home Sleep Study _	_In-Lab Sleep Study (PSG)	
Has this patient previously has a full night PSG or HST? _Yes _X Primary Suspected Diagnosis_	No	
Apnea Events The patient has observed apnea during sleep _Yes _No _Unkr  Clinical History  (please check all that apply) _ Excessive daytime sleepiness (ESS) evidenced by:	nown	
Epworth Sleepiness Scale (ESS) >10, or Inappropriate daytime napping (during conversation, dr Sleepiness that interferes with daily activities Habitual snoring, or, gasping/choking episodes associated with a Treatment resistant hypertension	awakenings	
Soft tissue abnormalities or neuromuscular diseases involving th Obesity  BMI* > 30:		way
Comorbid Conditions  Stroke (CVA) within the last 30 days  Transient Ischemic Attack (TIA)  Coronary Artery Disease (CAD)  Sustained supraventricular tachycardic arrhythmias Sustained supraventricular bradycardic arrhythmias		



## Diagnostic Sleep Study Worksheet: Adult

(Initial testing) continued

Contrai	indicat	ions to	a Home	Study
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- \_\_ The patient is 18 years old or younger
- \_\_ Moderate or Severe Chronic Obstructive Pulmonary Disease (COPD) Forced expiratory volume in 1 second/Forced vital capacity (FEV1/FVC) less than or equal to 0.7 and FEV1 less than 80% predicted
- \_\_ Moderate or severe congestive heart failure (CHF) New York Heart Association (NYHA) class III or IV
- \_ CHF with a history of ventricular fibrillation or sustained ventricular tachycardia in a patient who does not have an implanted defibrillator
- \_Cognitive impairment (unable to follow simple instructions) resulting in inability to apply the home sleep testing equipment when another individual is not available to assist with the task
- \_ Physical impairment resulting in inability to apply the home sleep testing equipment when another individual is not available to assist with this task
- \_ Oxygen dependent for any reason
- \_ Stroke (CVA) within the last 30 days
- \_ Current use of opiate narcotics
- \_ Body Mass Index (BMI) >33 and elevated serum bicarbonate level (>28mmol/L)
- \_ Established diagnosis of obesity hypoventilation syndrome

## **Order Type**

If you are requesting an In-Lab Study (PSG) and Contraindications to a Home Sleep Study are not present, do you want to switch to a Home Sleep Study? Yes No

\*Carelon Medical Benefits Management's ProviderPortalsM will compute patient BMI based on height/weight entered

