



## SLEEP STUDY QUESTIONNAIRE & INSTRUCTIONS

Appointment Location: \_\_\_\_\_ Appointment Date: \_\_\_\_\_ Appointment Time: \_\_\_\_\_

### INSTRUCTIONS:

**Please note that we have four sleep lab locations. Please refer to the directions below in how to enter our suite after hours. All offices are locked after hours, and you will need to refer to these instructions to gain entry.**

#### **9010 Lorton Station Blvd Suite 220, Lorton, VA 22079**

- Arrive promptly at your scheduled appointment time, 9:00 or 9:30 PM. Do not arrive earlier than scheduled. Park in the back of the building, the silver call box is located to the right of the back entrance. Please scroll to find and select the name Integrated Sleep Lab and hit the call button. This will call our suite and the tech on duty will buzz you into the building. Our office is on the second floor. If you do not use the call box, the sleep technologist on duty will not know you have arrived and the door to the suite will be locked. Please use the call box as instructed.

#### **7115 Leesburg Pike Suite 201, Falls Church, VA 22043**

- Arrive promptly at your scheduled appointment time, 9:00 or 9:30 PM. Do not arrive earlier than scheduled. Use the silver call box located to the right of the building entrance. Press # for directory, and locate "Sleep Lab", then you will be prompted to dial 02 to call our suite and the tech on duty will buzz you into the building. Our office is on the second floor. If you do not use the call box, the sleep technologist on duty will not know you have arrived and the door to the suite will be locked. Please use the call box as instructed.

#### **6355 Walker Lane, Suite 313, Alexandria VA, 22310**

- Arrive promptly at 8:45 PM, despite your scheduled appointment time. Elevators in this building lock at approximately 9:00 PM, therefore if you arrive later – you may need to use the staircase to access the suite. Enter through the emergency room entrance. Let the security guard at the front desk know that you are here for suite 313 if asked. Our office is on the third floor.

#### **12007 Sunrise Valley Drive, Suite 120, Reston VA 20191**

- Arrive promptly at your scheduled appointment time, 9:00PM. Do not arrive earlier than scheduled. Please call our office at 703-313-9111 when you arrive, and let the technologist know if you are in the front or back entrance. The technologist will come greet you and open the door for you.

- ✓ Please complete the sleep questionnaire prior to your appointment time and bring it with you to give to your technologist.
- ✓ 24 hour notice is required for cancellations or request to reschedule appointments, otherwise a \$200.00 will be charged for missed appointments. We allocate staff and resources to ensure your appointment goes smoothly. Additionally, please understand that the time has been reserved for you. Canceling/Rescheduling within a short amount of time limits other patients' ability to be seen sooner. Thank you for your understanding. Your insurance will not cover this charge.
- ✓ Please arrive to your designated sleep lab at your scheduled time on the night of your study. There may not be someone to let you into the building if you arrive very early for your appointment.
- ✓ Please arrive with clean, dry hair, and be certain your scalp is fully accessible (no wigs), and avoid hair products, makeup, and excessive cream or body lotions on the night of your study.
- ✓ Please take all of your regular medications, unless otherwise instructed by your physician. Please bring all medication that you may need during your stay.
- ✓ Please do not drink alcoholic beverages on the day of your study.
- ✓ Please do not consume caffeine after 12:00 PM on the day of your study.
- ✓ Please try to get a full night sleep prior to the night of your study, and please avoid taking any naps.
- ✓ Please bring comfortable night clothes for your sleep study. Loose fitting cotton pajamas are preferred.
- ✓ Bathrooms and shower stalls are available for your convenience. (EXCEPT: Alexandria) A special conductive paste will be used in your hair to monitor EEG activity. For this reason, you may want to wash your hair prior to leaving the sleep lab.
- ✓ Please feel free to bring any personal belongings to your study that may help you sleep more comfortably, for example a favorite pillow, book, tablet, etc.
- ✓ Your technologist will end the sleep study between 5:00 AM – 5:30 AM.

**SLEEP QUESTIONNAIRE:**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Referring Physician: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Address: \_\_\_\_\_

**\* This is required if you have not been seen in our office by one of our physicians prior to this sleep study appointment.**

Primary Insurance: \_\_\_\_\_

Insurance Address: \_\_\_\_\_

Policy # \_\_\_\_\_ Group # \_\_\_\_\_

Policy Holder Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex \_\_\_\_\_ Relationship to Policy Holder: \_\_\_\_\_

**MEDICAL HISTORY:**

Please indicate your Height: \_\_\_\_\_ ft \_\_\_\_\_ in Current Weight: \_\_\_\_\_ lbs Weight 1 Year Ago: \_\_\_\_\_ lbs

Has your weight changed significantly within the last 5 years?  YES  NO

If yes, how so? \_\_\_\_\_

Have you ever had your tonsils removed?  YES  NO

Have you ever had your adenoids removed?  YES  NO

Have you had any other surgeries?  YES  NO

If yes, please list surgery and date (mm/yy): \_\_\_\_\_

**REASON FOR THIS VISIT:**

Why are you seeking treatment at this time?

Snoring  Excessive daytime sleepiness  Leg movement during sleep

Difficulty falling asleep  Difficulty staying asleep  Poor sleep-wake schedule

Disruptive behaviors during sleep  Awaken too early

Other: \_\_\_\_\_

When did your sleep problems start? \_\_\_\_\_

- Have you ever had a sleep evaluation or overnight sleep study (polysomnography)?

**(If available, please supply a copy of your previous sleep study report)**

YES  NO

- Were you ever diagnosed with apnea?

YES  NO

- If yes, what treatment did you receive? \_\_\_\_\_

- Are you still utilizing the treatment?

YES  NO

- If not, why not?

\_\_\_\_\_  
\_\_\_\_\_

## EPWORTH SLEEPINESS QUESTIONNAIRE:

How likely are you to doze off or fall asleep in the 8 situations described below, in contrast to just feeling tired? This refers to your usual way of life in recent times. Even if you haven't done some of these things recently, try to work out how they would have affected you.

Use the following scale to choose the most appropriate number for each situation:

- 0 = would never doze
- 1 = slight chance of dozing
- 2 = moderate chance of dozing
- 3 = high chance of dozing

SITUATION	CHANCE OF DOZING			
Sitting and reading	0	1	2	3
Watching TV	0	1	2	3
Sitting, inactive in a public place (eg, a theater or a meeting)	0	1	2	3
As a passenger in a car for an hour without a break	0	1	2	3
Lying down to rest in the afternoon when circumstances permit	0	1	2	3
Sitting and talking to someone	0	1	2	3
Sitting quietly after a lunch without alcohol	0	1	2	3
In a car, while stopped for a few minutes in traffic	0	1	2	3

## SUSPECTED SLEEP APNEA QUESTIONNAIRE:

Are you snoring loudly?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Experiencing excessive daytime sleepiness?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have witnessed Apneas?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have high blood pressure?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have a BMI greater than 35?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Are of an age greater than 50?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Neck Circumference greater than 40?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

## ALLERGIES:

Are you allergic to any medications?  YES  NO  
If yes, please list all the medications: \_\_\_\_\_

Do you have any other allergies?  YES  NO  
If yes, please list all allergies: \_\_\_\_\_



## Integrated Sleep Services - FAQs

**Q: My physician has ordered an overnight sleep study with an MSLT to follow. What does this mean?**

**A:** Your doctor may be looking for reasons that may cause excessive daytime sleepiness (EDS), such as narcolepsy or other conditions that can affect how tired or sleep you feel during the daytime.

**\*You will come into the sleep lab around 9pm and leave the next day around 5pm. Please note that these times are approximate and may change, depending on the information that is gathered during your stay at the sleep lab.**

**Q: What can I expect during my visit to the sleep lab for my overnight sleep study?**

**A:** For your appointment, please bring comfortable clothing, preferably what you would normally sleep in. Pajama pants, t-shirt or gowns are appropriate attire. Please do not wear anything that is silk or satin. Cotton pajamas and gowns are the preference for bedtime attire. Please note that we will be using a paste in order to apply the electrodes to your scalp. Patients with complex hairstyles, wigs or extensions may wish to remove these prior to coming in for the scheduled appointment. If you are on medications, take them as you usually do. Do not drink or eat anything that contains caffeine after 12:00 noon. You may be more comfortable bringing and using your own pillow. If you think you may have trouble sleeping in a different environment, ask your physician for a prescription sleep aid. Bring this aid with you to the sleep lab.

**Q: What can I expect during my visit to the sleep lab for my MSLT (multiple sleep latency test)?**

**A:** The Multiple Sleep Latency Test (MSLT) is a sleep disorder diagnostic tool. The test is based on the idea that the sleepier people are, the faster they will fall asleep. It can be used to test for narcolepsy, to distinguish between physical tiredness and true excessive daytime sleepiness, or to see if breathing disorder treatments are working. Its main purpose is to serve as an objective measure of sleepiness. The test consists of four or five timed naps that are scheduled two hours apart. The test is often done following an overnight sleep study. During the test things such as the patient's brain waves, EEG, muscle activity and eye movements are monitored and recorded.

**\*The entire test normally takes about 8-10 hours after your overnight sleep study is finished. The test will begin approximately 2 hours after you are awakened from your overnight sleep study and you can expect to leave around 4pm in the afternoon.**

**Q: What is narcolepsy and what are some of the symptoms and causes?**

**A:** Narcolepsy is a chronic neurological disorder caused by the brain's inability to regulate sleep-wake cycles normally. At various times throughout the day, people with narcolepsy experience fleeting urges to sleep. If the urge becomes overwhelming, individuals will fall asleep for periods lasting a few seconds to several minutes. In rare cases, some people may remain asleep for an hour or longer. In addition to excessive daytime sleepiness (EDS), three other major symptoms frequently characterize narcolepsy: cataplexy or the sudden loss of voluntary muscle tone; vivid hallucinations during sleep onset or upon awakening; and brief episodes of total paralysis at the beginning or end of sleep. Narcolepsy is not definitively diagnosed in most patients until 10-15 years after the first symptoms appear. The cause of

narcolepsy remains unknown. It is likely that narcolepsy involves multiple factors interacting to cause neurological dysfunction and sleep disturbances.

**\*Please note that if you are coming into the sleep lab for an overnight study with an MSLT the next day, you will need to bring something to eat for breakfast and lunch.**

The sleep lab has a refrigerator to keep your items stored overnight and during the day. Arrangements can be made for ordering food for delivery at your expense, but neither you nor the technologist can leave the facility during the testing procedures. Water is provided at the sleep lab and there is a microwave at the facility to heat your food. You may also want to bring snacks and something to read. Electronic devices such as cell phones, tablets and laptops are able to be used between nap times and outlets are available to charge your devices. You are not allowed to have caffeine during the testing procedure, so if you bring drinks from home, make sure that they are caffeine-free. Smoking is not allowed during the testing procedure.