

Sleep Study Instructions and Consent

A sleep study (polysomnogram) is a test that monitors your activities while in bed and while sleeping. Small sensors are attached to your skin and scalp with non-allergenic tape or paste. These sensors are connected to a small box that attaches to the bedside. A camera and microphone are also in the room, and you will be monitored by a specially trained technologist. (Unusual activities may be recorded for later review by a physician.) The box can instantly be disconnected by the technologist, and you can take it with you without disruption if you need to get up anytime during the test.

The study records what goes on in your body, both while you are awake and asleep. Do not worry if you have trouble falling asleep; this is not uncommon, and you will eventually drift off. No drugs will be given to you by the technologist to help you sleep, although you may continue to take your normal medications (including sleeping pills) unless your doctor has instructed you to withhold them.

Once the test begins, you may move about freely in the bed, but please notify the technologist if you need to get up. You can do this by calling or waving at the camera. Unless you call for assistance, the technologist will ordinarily not disturb you unless a critical sensor is dislodged or to provide therapy for your sleep problem.

Your bed is a Select Comfort Sleep Number® 5000; it can be adjusted to any firmness you wish. While lying on the bed, use the remote control by pressing the up arrow until **50 registers. Allow the bed to inflate or deflate until the arrow stops flashing. Increase or decrease the number (5 at a time) to your comfort level by using the arrows. Wait for the pressure to stabilize (arrow stops flashing) before adjusting again.**

To assure proper diagnoses and treatment, we would like to observe your sleep in all positions, and the technologist may request you to turn (particularly to your back) if this does not occur naturally. If you are unable to do so because of pain or immobility, please notify the technologist before the study begins. If you do not sleep on your back because of your breathing, we may request you to try this during the study in order to assess the severity of your condition.

If therapy is indicated for you, the technologist will apply it during the study as determined by our physician specialists. This may consist of supplemental oxygen, pressurized air through a nasal mask (CPAP), or other therapy as ordered. The therapy may be adjusted throughout the study, and this is usually done without further disturbing your sleep.

You should not feel any pain or major discomfort during the study or as a result after therapy. In rare cases, a mild skin irritation from the sensor application or nasal mask may persist for a short time after completion of the test, but should be gone within a few hours. If serious irritation lasts longer than this, please call (480) 917-1996 Monday through Friday 8:00 am until 4:30 pm, or (480) 962-1650 after hours.

By signing below, I agree that I have read and understand the instructions and notices on this form and consent to testing and therapy, if indicated, as described herein. A copy of this form will be provided to you at your request.

Signature: _____ Date: _____

Witness : _____ Date: _____