

Dear _____,

Your Sleep Study will begin the night of _____ **at 8:00 pm**, and will end the following day either:

Between 6:00 am and 7:00 am or

Between 3:00 pm and 5:00 pm.

Please, if you are unable to keep your scheduled appointment, we require 48-hour notice. For scheduling changes, please call Central Scheduling at 734-712-1313 Option 3.

If you do not notify us, you may be billed \$200.00.

If you have any questions or special needs that the Sleep Disorders Center staff should be aware of such as hospital bed, please notify us prior to your test by calling 734-712-2440.

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY

- 1. PATIENT REGISTRATION:** You must register for your outpatient sleep test by calling (800) 676-0437, Monday through Friday between the hours of 8:00 am and 5:00 pm prior to the date of your test.
- 2. LOCATING THE SLEEP CENTER:** The Sleep Disorders Center is located in Building 5305 on the third floor in the McAuley Inn. You may park in the patient parking spaces in front of Building 5305, parking lot P. Take the lobby elevator to the third floor; turn right through the glass door and right again to the Sleep Disorders Center. Check in at the small glass window.
- 3. THE QUESTIONNAIRE:** A questionnaire concerning your medical history and sleep habits are a part of this packet. Please fill it out as completely as possible and bring it with you the night of your test.
- 4. ALCOHOL:** Avoid drinking any alcoholic beverages on the day of your test, unless you have been told to do so by your physician.
- 5. SMOKING:** The Sleep Disorders Center (and all of St. Joseph Mercy Hospital) is a smoke-free environment. Smoking is not permitted on the premises.
- 6. CAFFEINE:** Do not drink any coffee, tea, or caffeinated beverages after 5:00 pm on the day of your test. You should not have any kind of caffeine (including chocolate) until your test is completed.

7. Do not drink large amounts of any fluids after 5 p.m. the day of your sleep test.
8. Do not take any naps the day of your test if you can possibly avoid it.
9. **MEDICATIONS:** Your sleep test is an outpatient procedure, so nursing services and medication will not be provided. If you take medication regularly, bring it with you and take it as usual.
10. **SLEEPWEAR:** Please wear comfortable sleep clothing such as pajamas, or shorts & T-shirt; please avoid fleece and silky material. If you have a favorite pillow or blanket, please bring it with you so you will feel more at home.
11. **MEALS:** Breakfast and lunch trays will be provided for patients who stay throughout the day following their overnight study. Please, notify your technician if you have a special diet. You will also be able to go to the hospital cafeteria. Snacks are available in a vending room in the McAuley Inn. You may also bring your own food or snacks from home. A refrigerator and microwave oven are available for your use.
12. **HYGIENE:** Please wash your hair prior to coming in for your sleep test. Do not use hairspray, mousse, or gel. Do not wear braids or hair extensions. Women should not wear nail polish, heavy makeup, or skin creams. **Men who do not have beards should shave.** This will help us to attain the highest quality of test results.
13. **WHAT TO EXPECT DURING THE STUDY:** The Sleep Disorders Center technician will apply electrode wires to your head, torso, and legs. There is little, if any, discomfort involved. Each patient will be sleeping approximately eight hours. Those patients scheduled to stay over the following day will be taking several scheduled naps. Between naps, you will not be monitored but you will still be wearing the electrode wires attached to your body. You will be able to move about freely and we encourage you to wear street clothes. Your room is a regular hotel room with a color television and a private bathroom. You may want to bring reading material, paperwork, or craft projects to pass the time between naps.
14. **REPORTING TIME:** If you are not able to arrive by 8:00 p.m. please call the lab and inform a member of our staff. Again, late cancellations or missed appointments may be subject to a \$200.00 fee.

**We would like to thank you for choosing St. Joseph Mercy Hospital for your Sleep Study!
Our Sleep Disorders Center is accredited through the American Academy of Sleep Medicine.**

Sleep Questionnaire

Name: _____ Date of Birth: _____

Sex: Male Female Height _____ Weight _____ Neck size _____

Check all that apply:

- I snore or have been told I snore
- I have been told I stop breathing during sleep
- I wake up choking, gasping, or short of breath
- I wake myself up with my snoring
- I am sleepy during the day
- I am fatigued throughout the day
- I fall asleep unintentionally during the day
- I have memory loss
- I have problems with concentration
- I am a restless sleeper
- I kick my legs at night
- I have restless legs syndrome
- I have insomnia

How long have you had symptoms that you know of: _____

How does this affect your life and daily activities? _____

What time do you typically go to bed and get up:

Weekdays BEDTIME _____ am/pm WAKE Time _____ am/pm

Weekends BEDTIME _____ am/pm WAKE Time _____ am/pm

On average, how long do you actually sleep at night? _____ hrs _____ mins

Medical History

- | | |
|---|--|
| <input type="checkbox"/> Hypertension | <input type="checkbox"/> Arthritis |
| <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Depression/anxiety |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Thyroid problems |
| <input type="checkbox"/> COPD | <input type="checkbox"/> Kidney problems |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Anemia |
| <input type="checkbox"/> Reflux | <input type="checkbox"/> Prostate problems |
| <input type="checkbox"/> Stroke/TIA's | <input type="checkbox"/> Seizures |
| <input type="checkbox"/> Migraine headaches | <input type="checkbox"/> Cancer |
| <input type="checkbox"/> Hepatitis B or C | <input type="checkbox"/> Other blood-borne disease |

Other (please describe: _____)

ALLERGIES (include latex or tape)

Please list your current medications

Restlessness

- I am a restless sleeper
- I kick or jerk my legs and/or arms during sleep
- I have restlessness, tingling or crawling sensation in my legs or arms
- I am unable to keep my legs still prior to falling to sleep
- I grind my teeth in my sleep

Other Complaints

- When falling asleep or waking up, I sometimes feel paralyzed (unable to move)
- At night my heart pounds, beats rapidly or beats irregularly
- I have a lot of nightmares
- I sleepwalk
- I have seen or heard things that weren't real when waking up or going to sleep
- I get sudden weakness or feel like I will fall when I laugh or get angry

Other questions

Do you have a regular bed partner? Yes No

On average, how long does it take you to fall asleep at night after you turn out your
bedroom lights/ _____ minutes

What do you usually do just before turning out the lights and trying to go to sleep
(read, watch TV, bath, etc) _____

On average, how often do you wake up during the night? _____

Do you wake up too early, unable to go back to sleep? Yes No

Do you usually awaken to an alarm or spontaneously on your own? _____

Do you nap or go back to bed after getting up? Yes No
If so, how many times per day? _____

Average length of nap? _____ Do you feel more refreshed after the nap?..... Yes No

Are you bothered by sleepiness during the day?..... Yes No

Do you feel that you get too much sleep at night?..... Yes No

Do you feel that you get too little sleep at night? Yes No

Do you usually feel tired during the day? Yes No

If so, why do you think this is so? _____

Social History

Do you smoke? _____ How much? _____ When did you quit? _____

Do you drink alcohol? _____ How often? _____

Do you drink caffeine? _____ How often? _____

Do you use marijuana or other non-prescription drugs? If so, what? _____

- I am a shift worker on rotating shifts
- I am a permanent or long term night shift worker

Family History

Is there any one in your family with a sleep problem? If so, please describe:

Epworth Sleepiness Scale

Use this 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

Sitting and reading _____

Watching TV _____

Sitting in a public place for example, a theatre or meeting _____

As a passenger in a car for an hour without a break _____

Lying down to rest in the afternoon _____

Sitting and talking to someone _____

Sitting quietly after lunch (when you have had no alcohol) _____

In a car, while stopped in traffic _____

Total: _____

Please check all that apply:

- I take daytime naps
- I have had auto accidents as a result of falling asleep while driving
- I fight to stay awake while driving
- I have had injuries as a result of falling asleep in the daytime
- Daytime sleepiness is affecting my job or quality of life

Please notify us of the best way we can reach you:

- Home Phone number: _____
- Work Phone Number: _____
- Cell Phone Number: _____
- Other Phone Number: _____
- Email Address: _____

I authorize the St. Joseph Sleep Disorders Lab and/or Pulmonary and Critical Care Associates' sleep coordinator to leave results via my phone or email address provided.

Signature _____ Date: _____

Saint Joseph Mercy Health System

St. Joseph Mercy Hospital Campus

Exterior Directions

To SJMH from the southeast (Detroit, Southfield Freeway, Airport)

Take I-94 West to Exit 181-B (Michigan Avenue). The right-curving exit will put you on Michigan Ave. Get into the left lane and turn LEFT (north) at the first traffic light at Hewitt. Stay on Hewitt for about 2.5 miles, crossing Ellsworth, Congress, Packard and then Washtenaw Ave. continue straight on Hewitt. After you pass the EMU Stadium on your right, you'll cross Huron River Drive, as you enter the St. Joseph Mercy Hospital campus.

To SJMH from the southwest (Jackson)

Take I-94 East to Exit 180-B and get on US 23 North (toward Flint). Take this to Exit 39 (Geddes Road). Turn RIGHT (east) onto Geddes at the traffic light. Stay in the right lane on Geddes and turn RIGHT (south) onto Dixboro Road, at the traffic light. Cross the railroad tracks and turn LEFT (east) onto Huron River Drive at the traffic light. You'll pass Washtenaw community College on the right. Get into the left lane, and turn LEFT into the St. Joseph Mercy Hospital Campus.

To SJMH from the northeast (Plymouth, Northville, Livonia)

Take I-275 South, to M-14 West toward Ann Arbor, Take M-14 West (14.4 miles) to US 23 south. Stay on US 23 south for about 3 miles and get off at Exit 39 (Geddes Road). Turn LEFT (east) onto Geddes at the traffic light. Stay in the right lane on Geddes and turn RIGHT (south) onto Dixboro Road, at the traffic light. Cross the railroad tracks and turn LEFT (east) onto Huron River Drive and the traffic light. You'll pass Washtenaw community College on the right. Get into the left lane, and turn LEFT into the St. Joseph Mercy Hospital campus.

To SJMH from the northwest (Brighton, Flint, Pinckney)

Take US 23 South to Exit 39 (Geddes Road). Turn LEFT (east) onto Geddes at the traffic light. Stay in the right lane on Geddes and turn RIGHT (south) onto Dixboro Road, at the traffic light. Cross the railroad tracks and turn LEFT (east) onto Huron River Drive and the traffic light. You'll pass Washtenaw community College on the right. Get into the left lane, and turn LEFT into the St. Joseph Mercy Hospital campus.

To SJMH from the south (Saline, Toledo)

Take US 23 North to Exit 39 (Geddes Road). Turn RIGHT (east) onto Dixboro Road, at the traffic light. Cross the railroad tracks and turn LEFT (east) onto Huron River Drive and the traffic light. You'll pass Washtenaw community College on the right. Get into the left lane, and turn LEFT into the St. Joseph Mercy Hospital campus.

Saint Joseph Mercy Health System St. Joseph Mercy Hospital Campus

Back to US 23 North from SJMH

Follow the SJMH exit signs. Go west on Huron River Drive, passing Washtenaw Community College on your left. Turn RIGHT (north) onto Dixboro Road at the first traffic light. Go about half a mile, crossing the railroad tracks, and get into the left lane. Turn LEFT (west) onto Geddes Road. Get into the right lane, and prepare to make a quick RIGHT onto US 23 North.

Back to US 23 South from SJMH

Follow the SJMH exit signs. Go west on Huron River Drive, passing Washtenaw Community College on your left. Turn RIGHT (north) onto Dixboro Road at the first traffic light. Go about half a mile, crossing the railroad tracks, and get into the left lane. Turn LEFT (west) onto Geddes Road. Stay in the left lane, cross the overpass, and turn LEFT onto US 23 South.

Back to I-94 West from SJMH

Follow the SJMH exit signs. Go west on Huron River Drive, passing Washtenaw Community College on your left. Turn RIGHT (north) onto Dixboro Road at the first traffic light. Go about half a mile, crossing the railroad tracks, and get into the left lane. Turn LEFT (west) onto Geddes Road. Stay in the left lane, cross the overpass, and turn LEFT onto US 23 south. Stay on US 23 South for about 2.5 miles. You'll see signs for I-94 West. Get in the right lane and look for Exit 35. When you exit, stay in the RIGHT lane for I-94 West (toward Chicago).

Back to I-94 East from SJMH

Exit the SJMH campus on McAuley Drive. McAuley Drive becomes Hewitt and crosses Huron River Drive. You'll pass the EMU Stadium on your Left. Continue straight on Hewitt, for about 2.5 miles. You'll cross Washtenaw, then packard, congress, and Ellsworth. After you cross Ellsworth, get into the right lane, and turn RIGHT (southwest) onto Michigan Ave. follow the signs to I-94 East (toward Detroit).