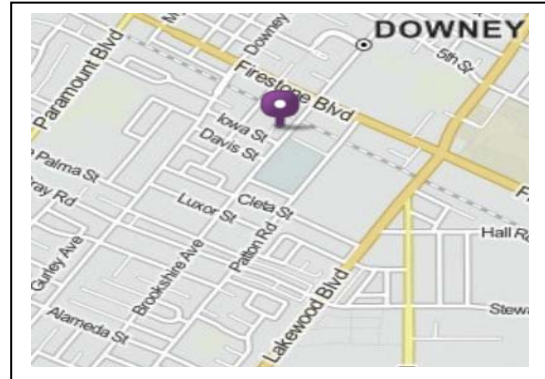


## Sleep Study Instructions

**SLEEP STUDY DATE:**  
**FEBRUARY 26, 2015 AT OUR DOWNEY CENTER**

**TIME:**  
**10PM, PLEASE ARRIVE ON TIME**

**ADDRESS:**  
**11411 BROOKSHIRE AVE**  
**SUITE 505**  
**DOWNEY, CA 90241**



Dear ,

Thank you for choosing us as your sleep study provider. Your study will be an overnight study, and we have reserved a private room for you, with our Sleep Number bed, and cozy home-like environment; our goal is to make your visit more like a mini-vacation while providing quality every step of the way. Please take the time to read this informative letter to better prepare for your sleep study.

You can bring anything you normally sleep with at home to make yourself feel comfortable, such as favorite pillow, bedding, reading book etc. if you so choose. **Otherwise please arrive to your appointment with your hair dry, washed, free of hair products (gel, mousse, hair spray, etc).** **Remember to bring comfortable loose clothing to sleep in, any medication taken at nights (take your medications like you normally do, unless otherwise directed by your doctor), along with your insurance card, and identification.** You may eat like you normally do with the only exceptions being no caffeine after twelve noon (Coffee, Tea, Soda, Chocolate, etc). Please reschedule/cancel your appointment 24 hours in advance; be aware that we reserve the right to charge a cancellation fee of \$100 for missed appointments, due to the fact that your bedroom is specifically reserved and prepared for you.

For your security, the front doors into the building will be locked after 7pm. Upon your arrival at our facility please call 562-622-1002 (Option 1 for Downey and Option 2 for Long Beach Office) to speak with your sleep technician, who will open the door, and escort you up to our suite. Thank you again and we look forward to your visit.

Respectfully,  
United Sleep Centers

## What is Obstructive Sleep Apnea (OSA)?

- Most common form of Sleep Disorder Breathing (SDB)
- A partial or complete collapse of the upper airway that causes muscles controlling the soft palate and tongue to relax
- Person experiences apneas, hypopneas and flow limitation
  - Apnea: a cessation of airflow for 10 seconds
  - Hypopnea: a decrease in airflow lasting 10 seconds with a 30% oxygen reduction in airflow and with at least a 4% oxygen desaturation from baseline
  - Flow limitation: narrowing of the upper airway and an indication of an impending upper airway closure



Partial Obstruction



Blocked Airway



## Prevalence of OSA

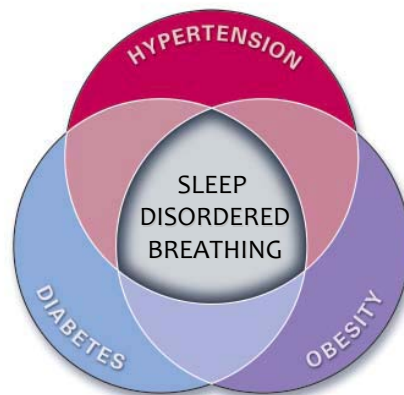
- Approximately 42 million American adults have SDB (Young 1993)
- 1 in 5 adults has mild Obstructive Sleep Apnea (OSA) (Young 2004)
  - 1 in 15 has moderate to severe OSA
- 9% of middle-aged women, 25% of men in middle-aged work force suffer from OSA (Marshall 2008)
- Prevalence similar to asthma (20 million) and diabetes (23 million) (Am Academy of Allergy, Asthma & Immunology 2005; Am Diabetes Assoc 2007)
- 75% of severe SDB cases remain undiagnosed (Young 2008)

## Increased Risk Factors for OSA

- Male gender
- Obesity (BMI > 30)
- Diagnosis of hypertension
- Family history of OSA
- Upper airway or facial abnormalities
- Large neck circumference (>17” men; >16” women)
- Excessive use of alcohol or sedatives
- Smoking
- Endocrine and metabolic disorders
- Increasing age

## Comorbid Associations with OSA

- Hypertension
- Cardiovascular diseases (arrhythmias, myocardial infarctions, heart failure)
- Stroke
- Type II diabetes
- Mood disorders (anxiety and/or depression)
- Increased morbidity and mortality
- Obesity





## Signs and Symptoms of OSA

- Lack of energy
- Morning headaches
- Hypertension
- Diabetes
- Frequent nocturnal urination
- Depression
- Obesity
- Large neck size
- Excessive daytime sleepiness (EDS)
- Nighttime gasping, choking or coughing
- Gastroesophageal reflux (GE reflux)
- Irregular breathing during sleep (snoring)

## Mortality Links

- SDB is associated with a 3-fold increase in mortality risk (Young 2008)
- There is an independent association of moderate to severe OSA with increased mortality risk (Marshall 2008)

## Traffic Accidents

- 15-fold increase of being involved in traffic accident (Horstmann 2000)
- People with sleep apnea are at twice the risk of having a traffic accident (Teran-Santos 1999)
- Treating all US drivers suffering from sleep apnea would save \$11.1 billion in collision costs and save 980 lives annually (Sassani 2004)