HACKETTSTOWN REGIONAL MEDICAL CENTER CENTER FOR SLEEP RELATED DISORDERS HISTORY AND PHYSICAL PROCESS

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Cross Referenced:

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Origin: Center for Sleep Disorders

Authority: Cardio/Pulmonary Manager

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PURPOSE: A consistent procedure for obtaining H&Ps or a sleep database on all patients assures that charts are complete and appropriate information is available for review and approval of sleep studies by a Board Certified Sleep Physician or Medical Director.

POLICY: All sleep patients will have a sleep history and physical in their chart prior to study. This information will be obtained or reviewed by Medical Director/Board Certified Sleep Physician. All sleep studies require a physician order and approval by a sleep physician or medical director.

PROCEDURE:

- 1. All instructions are communicated to the technical staff using the Sleep Study Prescription Form. This form indicates the procedures to be performed during the night and/or day. Any additional instructions to the technical staff will be communicated using this form. All request forms must indicate name of physician ordering procedure and be filled out completely.
- **2.** The ordering physician must be contacted to complete the Sleep Study Prescription if information is incomplete, or unclear.
- **3.** Patients directly referred to the Sleep Laboratory by non-sleep medicine physicians, the Medical Director will review directly referred cases to insure proposed evaluation meets the minimum indications prior to Polysomnographic testing as specified in the AASM Clinical Practice Parameters for Polysomnography and Related Procedures. Sleep study requests will be co-signed by the Medical Director.
- **4.** Relevant clinical information regarding patient's medical history, including medications and allergies, must be present in the laboratory at the time of testing should an emergency arise. H & P information is sent directly to the Sleep Center as part of the request on the Sleep Study Intake Form. The referring physician can complete the brief H & P directly on the form, or submit via fax the patient's most recent H & P or office consultation notes.
- **5.** Any specific variation in montage setup or procedure changes will be noted on the Sleep Study Prescription Form.