



The Sleep Center
515 SW Horne, Suite 200 Topeka, KS 66606
(785) 234-5480 Fax (785) 234-3124



Physician's Sleep Evaluation & Orders

Patient Name: _____ Date of Birth: _____
Address: _____ Home Phone: _____
Cell Phone: _____
Work Phone: _____

Referring Physician: _____ Office Phone: _____ Fax: _____

Indications for Sleep Study: (Please check all that apply)

___ Snoring ___ Excessive Daytime Sleepiness ___ Observed Apnea ___ Falling Asleep Driving
___ AM Headaches ___ Nocturnal Hypoxemia ___ Possible Nocturnal Seizure ___ Insomnia

Duration of above symptoms: _____ Epworth Sleepiness Scale (complete enclosed form): _____

History/Physical (Please check all that apply)

___ Diabetes ___ Fibromyalgia ___ Hypertension ___ Asthma ___ COPD ___ Panic Attacks
___ Depression ___ Stroke/TIA ___ Reflux ___ Coronary Artery Disease ___ Thyroid Disease
___ Alcoholism ___ Chronic Fatigue ___ Cardiac Arrhythmia ___ CHF

Other: _____

Neck Circumference: _____ BMI: _____

Special Needs (Please schedule at least 7 days in advance)

___ W/Chair Assistance ___ Incontinent ___ Vision / Hearing Impaired ___ Mentally Challenged
___ Other _____

(If patient has under gone sleep testing in the past, please include a copy of reports.)

Requested Services

___ Nocturnal / Daytime Polysomnogram (Split night protocol is performed on qualifying patients with an AHI >20 during the first 2 hours of recorded sleep time)

___ CPAP / Bi-Level PAP Titration (Per protocol approved by American Academy of Sleep Medicine)

___ Sleep Aid per Sleep Center Protocol (Mild hypnotic sedative available after one hour of sleeplessness post lights out)

___ Multiple Sleep Latency Test (MSLT) (Follows an over night Polysomnogram to assess hypersomnolence)

___ Maintenance of Wakefulness Test (MWT) (Follows an over night Polysomnogram to assess the ability to stay awake)

___ Sleep Consultation (To review results, address treatment options, concerns or other sleep issues)

Ordering Physician Signature _____

Date _____

* Please fax with copy of insurance cards and recent H&P documenting need for sleep study.