

REPORT AT YOUR SCHEDULED APPT TIME

We are not able to accommodate patients earlier than their scheduled appointment time.

THE DAY OF YOUR STUDY

- **Bring a warm blanket, socks, and something warm to sleep in because both labs (Tucson and Prescott) will get cold at night and we don't have extra warm blankets if you get cold!**
- Avoid caffeine, alcohol, and napping.
- Shower & wash your hair before your sleep study (don't use hair conditioner, hair spray, oils or skin lotions. The technician will place small sensors on your head/body with tape & cream, less interference from these products provides better readings from the sensors placed on your body).
- We recommend you bring scarf or hat to wear when leaving as you will have sticky paste in your hair.
- Eat dinner before you come in.
- Take any medicine as usual. If you take any medications at night, bring it with you. No medications will be provided by the staff.
- If you were given a sleep aid or plan to take one, please wait until you have arrived at the sleep lab. Inform your Technician upon arrival that you have a sleep aid, they will inform you when it is appropriate to take it.
- You may bring reading material or pre-downloaded movie(s), WiFi is not available at the sleep lab.
- Bring pajamas or something comfortable to sleep in. Sensors will be placed on your head and body.
- **Sleeping nude or in underwear is not acceptable.**
- You will be able to use the restroom during the night by informing your sleep tech.
- Your Sleep Technician cannot provide you with any information on your sleep study.

When you arrive for your sleep study, please ring the bell on the lobby counter to inform your sleep tech you have arrived. Then have a seat and someone will be with you shortly.

The phone for the Sleep Lab at NIGHT is 928-463-2227.

What You Can Expect:

When you arrive for your sleep study, please enter through the front entrance of the building, the technician will greet you and then take you to your room. You will be asked to change into your nightclothes and complete any necessary paperwork. You will have a chance to use the restroom & prepare for bed. Once you are ready for bed, the sleep tech will begin to place small sensors on your head/face/legs with tape and cream. The sensors are then plugged into a machine that will monitor your sleep. During the night if you need to use the restroom, you will call the sleep tech to assist in disconnecting you from the monitors. There will be a camera in your room to monitor your

body movements. The technician will be outside your room the entire night. You will leave at approximately between 5 am and 5:30 am the following morning. Please arrange for a pick-up at this time if you did not drive yourself.

What A Sleep Study Shows:

The Sleep study monitors Eye Movements, Heart Rate, brain waves and muscle activity, Level of oxygen, Breathing and snoring, and Sudden leg or body movements.

If you have breathing problems, a CPAP (Continuous Positive Airway Pressure) machine may be used. CPAP is a device that can help you breathe and improve your sleep. It may be used during the second half of your study or on another night.

Can my family member stay with me during my sleep study?

- NO. Only if a special need has been determined and requested by your physician may a family member

stay your during your sleep study. Or if prior approval was obtained through the sleep lab.

- Pediatric patients, under 18 years of age, must have a parent/caregiver present at all times.
- Having a guest in the room with you during your sleep study is disruptive and may result in faulty and/or incomplete data

Sleep Study Check List

- | | | |
|-------------------------------------------------|----------------------------------------------------------------|-------------------------------------------------|
| <input type="checkbox"/> Eat Dinner | <input type="checkbox"/> Medications Packed? | <input type="checkbox"/> Pajamas packed? |
| <input type="checkbox"/> Shower/Shave | <input type="checkbox"/> Pillow Packed? | <input type="checkbox"/> Toiletries |
| <input type="checkbox"/> Hair is Washed & Clean | <input type="checkbox"/> Snacks Packed? (if needed) | <input type="checkbox"/> Slippers or flip-flops |
| <input type="checkbox"/> Paperwork Completed? | <input type="checkbox"/> Dental Device Packed? (if applicable) | |
| <input type="checkbox"/> Scarf/Hat | <input type="checkbox"/> CPAP Mask Packed? (if applicable) | |

