EZ Sleep Club
SLEEP DIAGNOSTIC CENTER

5039 Pentecost Drive, Suite D, Modesto, CA 95356
(888) 588-0202 – Telephone • (888) 599-0202 – Toll Free Fax

SLEEP STUDY PHYSICIAN ORDER FORM

☐ New referral ☐ 5-year sleep study renewal

PATIENT INFORMATION

Name:			Address:		
City:	State:		Zip:	DOB:	
Phone number:	Alt phone #:		SSN:		
Primary insurance:			Subscriber:		
ID number:	Group number:			DOB:	
Secondary insurance:			ID number:		

PLEASE FAX COPY OF INSURANCE CARD(S)

PATIENT MEDICAL HISTORY

- ☐ Snoring – R06.83
- ☐ Daytime Sleepiness/Somnolence – R40.0
- ☐ Obesity – E66.01
- ☐ Hypersomnia Unspec. (excessive sleepiness) – G47.13
- ☐ Insomnia w/Sleep Apnea Unspecified – G47.10
- ☐ Periodic Limb Movement – G47.61
- ☐ Persistent disorder of Maintaining sleep – F51.01
- ☐ Obstructive Sleep Apnea – G47.33
- ☐ Primary Central Sleep Apnea – G47.37
- ☐ Respiratory Abnormality – R06.0
- ☐ Sleep Disturbance, Unspec. – F51.3
- ☐ Narcolepsy or Cataplexy – G47.419
- ☐ Diabetes – E08.9
- ☐ Hypertension – I10
- ☐ Heart Condition – I51.9
- ☐ COPD – J44.9
- ☐ Oxygen dependent? ☐ Yes ☐ No
  Liters: ___________ ☐ Noc ☐ Cont
- ☐ Other: ____

CONTRA-INDICATIONS FOR UNATTENDED STUDY (PER AMERICAN ACADEMY OF SLEEP MEDICINE)

- ☐ Congestive Heart Failure
- ☐ Coronary Artery Disease
- ☐ Prior CVA, TIA, Seizure
- ☐ Intractable Hypertension
- ☐ Neuromuscular disorder
- ☐ Obesity-Hypoventilation Syndrome
- ☐ Low daytime SaO2
- ☐ Patient on high dose narcotics
- ☐ Patient on 24-hr supplemental oxygen
- ☐ Severe Pulmonary disease (COPD)
- ☐ Suspect Nacolepsy, Central SA, PLMD, Circadian disorder, Parasomnia
- ☐ Pt unable to follow instructions (cognitive impairment)
- ☐ Previous HST which did not diagnose OSA in pt with ongoing clinical suspicion for OSA
- ☐ Patient under age 18 years
- ☐ Physical or psychological disability

TESTING

- ☐ PSG Sleep Study – 95810
  (test for sleep apnea)
- ☐ CPAP Titration – 95811
  (determine pressure needed for CPAP/BiPAP)
- ☐ Home Sleep Test – 95800
  (test for sleep apnea while at home)
- ☐ Overnight Pulse Oximetry –94621/94762
  (oxygen saturation test)
- ☐ MSLT Test – 95805
  (test for Narcolepsy)
- ☐ 6-min Walk Test (Daytime) – 94618
- ☐ Other: ____

INTERPRETING PHYSICIAN

☐ Dr. Michael Davis ☐ Dr. Ajitpal S. Sethi ☐ No preference

ORDERING PHYSICIAN

Physician Name:	Physician Signature:	Date:
Address:	Phone number:	NPI:
	Fax number:	