A patient’s guide to understanding Diagnostic Testing for Obstructive Sleep Apnea in Adults

This patient guide outlines the AASM's recommendations for testing for obstructive sleep apnea (OSA). This guide will help you know what to expect when talking with your medical provider. If you want more information you can read the full clinical practice guideline.

HOW DO YOU FIND OUT IF YOU HAVE OSA?

A diagnosis must include an in-center sleep apnea test or a home sleep apnea test. Your medical provider should not diagnose OSA based only on a survey.

Testing for OSA should be done as part of a complete sleep assessment and follow-up visits with your medical provider. The chances of having OSA can sometimes be determined using surveys, but some symptoms of OSA can be caused by other sleep disorders.

WHEN CAN TESTING FOR OSA BE DONE AT HOME?

Your medical provider can use a home sleep apnea test if:

- Your symptoms suggest you are at a higher risk for moderate-to-severe OSA,
  - You are at a higher risk for moderate-to-severe OSA if you feel very sleepy or tired during the day and have at least two of these symptoms: routine loud snoring, witnessed gasping while asleep, choking or holding your breath while asleep, or high blood pressure.
  - AND
  - You do not have certain health conditions and are not at risk for other sleep-related breathing disorders.
    - These health conditions include: significant heart and lung disease, neuromuscular conditions, history of stroke and chronic opioid use, or significant sleep disorders. Talk with your medical provider for more information.

WHEN IS IT IMPORTANT TO GET TESTED FOR OSA IN A CENTER?

Your medical provider should use an in-center sleep apnea test, instead of a home sleep apnea test, if:

- You have certain health conditions or are at risk for other sleep-related breathing disorders,
  - OR
  - Your medical provider thinks you are more likely to have mild OSA based on your symptoms.
    - Mild OSA is diagnosed most accurately using an in-center sleep apnea test.

For more information on how these recommendations were developed, visit: aasm.org/clinical-resources/practice-standards/practice-guidelines/
WHEN SHOULD DIAGNOSTIC TESTING BE REPEATED?

If diagnostic testing needs to be repeated, your medical provider should use an in-center sleep apnea test. Some reasons your medical provider may repeat an in-center sleep apnea test:

- When the results of a home sleep apnea test are negative or unclear
- OR
- When the results of the first in-center sleep apnea test are negative and your medical provider still thinks that you have OSA.

COMPARING AN IN-CENTER SLEEP APNEA TEST WITH A HOME SLEEP APNEA TEST

<table>
<thead>
<tr>
<th>ADVANTAGES</th>
<th>IN-CENTER SLEEP APNEA TEST</th>
<th>HOME SLEEP APNEA TEST</th>
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<tbody>
<tr>
<td></td>
<td>» More accurate diagnosis</td>
<td>» Less expensive</td>
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<td></td>
<td>» Can detect other sleep disorders</td>
<td>» More convenient; is performed at home</td>
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<td>» Patient is observed by medical staff during the test</td>
<td>» Less intrusive and more comfortable</td>
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<tr>
<th>DISADVANTAGES</th>
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<tr>
<td></td>
<td>» More expensive</td>
<td>» Does not measure everything that an in-center sleep apnea test can.</td>
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<td></td>
<td>» Limited access in some areas</td>
<td>» More likely to give inaccurate results because of incorrect setup of equipment</td>
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<td></td>
<td>» May disrupt your normal sleep schedule</td>
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NEXT STEPS
You should always talk with your medical provider if you think you have OSA. For more information about sleep apnea or to find an accredited sleep center near you, please visit sleepeducation.com.