



## Guidelines for scheduling outpatient/inpatient sleep testing during mild to moderate community spread of COVID-19

**Purpose:** To provide the best possible care to patients undergoing outpatient sleep procedures in addition to maintaining the safety of sleep staff during the performance of those procedures.

1. **Outpatient** Polysomnography (PSG) and Home Sleep Testing (HST)
  - a. Scheduling
    - i. All patients who wish to delay testing due to COVID-19 will be allowed to do so without being subject to cancelation policies.
    - ii. Patients in a self-endorsed “at risk” category or over the age of 65 will be asked to consider rescheduling to a later date designated by Sleep Lab leadership.
    - iii. Patient’s in a self-endorsed “at risk” category who wish to keep their current appointment time, may do so at the discretion of the medical director.
    - iv. All patients who are rescheduled due to COVID-19 will have the reason for cancelation/reschedule listed as COVID-19.
  - b. Testing will be performed with the modifications listed in the policies below for [PSG](#) and [HST](#).
2. **Outpatient** Continuous Positive Airway Pressure (CPAP) Titrations
  - a. Scheduling
    - i. Due to the risk of aerosolization from the CPAP systems, all CPAP titrations will be rescheduled to a later date designated by Sleep Lab leadership.
    - ii. All patients who are rescheduled due to COVID-19 will have the reason for cancelation/reschedule listed as COVID-19.
3. **Inpatient** Polysomnography (PSG) and Home Sleep Testing (HST)
  - a. Staff will review the patient’s isolation/contact status.
    - i. If the patient is **not** a person under investigation (**PUI**) or **positive for COVID** the PSG testing guidelines for outpatient studies should be used.
    - ii. If the patient is **positive for COVID-19**: the sleep fellow will screen the case and discuss the necessity of doing the PSG with the ordering team and sleep attending physician. If both confirm medical necessity, the requested PSG will be performed.



- iii. **For PUI:** ask the ordering physician if the PSG can wait until the COVID-19 test results are available (engage Sleep fellow as needed).
  1. If negative PSG will be performed using the PSG testing guidelines for outpatient studies.
  2. If the ordering team feels that the PSG cannot wait for COVID-19 test results or if the patient tests positive the sleep fellow will screen the case and discuss the necessity of doing the PSG with the ordering team and sleep attending physician. If both confirm medical necessity, the requested PSG will be performed.

**References:**

1. "COVID-19 Mitigation Strategies for Sleep Clinics and Labs: AASM." American Academy of Sleep Medicine – Association for Sleep Clinicians and Researchers, 24 Mar. 2020, [aasm.org/covid-19-resources/covid-19-mitigation-strategies-sleep-clinics-labs](https://aasm.org/covid-19-resources/covid-19-mitigation-strategies-sleep-clinics-labs).



## Guidelines for performing outpatient polysomnography (PSG) testing during mild to moderate community spread of COVID-19

**Purpose:** To address management of patient care, patient education, patient supplies and infection prevention during mild to moderate community spread of COVID-19 while maintaining the safety of Duke Health sleep staff

The following amendments will be made to patient care practices in the delivery of Polysomnography (PSG) testing at Duke Health during mild to moderate community spread of COVID-19 in accordance with [recommendations from the American Academy of Sleep Medicine<sup>1</sup>](#).

1. Reminder calls will continue for PSG patients. The screening questions should be used for the reminder call and we should ask if anyone in the home has symptoms/contact with a COVID pt. Screening should be repeated the day of the appointment.
2. Patients will be kept a minimum of 6feet apart during setup and removal of sleep recording system.
3. Staff should wear gloves and a surgical mask while performing patient care. Unless otherwise indicated by Duke Health PPE policy. Gloves should be discarded between patients and before returning to non-patient care spaces (I.e. control room or staff breakroom).
4. Thermisters will NOT be used in either location due to the close contact with the airway.
5. All PSG equipment will be cleaned TWICE. Clean once, allow cleaning agents to fully dry
6. Use hospital approved cleaning wipes for disinfection. Ensure that as each wipe becomes less moist, please get a new wipe and continue in this fashion until the entire belt has been cleaned
7. Patients will be asked to remove and dispose of nasal cannula in a waste bin provided by staff.
8. Initially, patients will receive the following link for the Nomad HST video set up. I will be working with Erica and Megan to film a rough draft of the Duke branded HST video was have been working on. This will likely take place Friday or Monday. We will use the rough draft video going forward.

<https://www.youtube.com/watch?v=FHvydhYu85o>

### References:

2. "COVID-19 Mitigation Strategies for Sleep Clinics and Labs: AASM." American Academy of Sleep Medicine – Association for Sleep Clinicians and Researchers, 24 Mar. 2020, [aasm.org/covid-19-resources/covid-19-mitigation-strategies-sleep-clinics-labs](https://aasm.org/covid-19-resources/covid-19-mitigation-strategies-sleep-clinics-labs).



## Guidelines for performing outpatient home sleep (HST) during mild to moderate community spread of COVID-19

**Purpose:** To address management of patient care, patient education, patient supplies and infection prevention during mild to moderate community spread of COVID-19 while maintaining the safety of Duke Health sleep staff

The following amendments will be made to patient care practices in the delivery of Home Sleep Testing (HST) at Duke Health during mild to moderate community spread of COVID-19 in accordance with [recommendations from the American Academy of Sleep Medicine<sup>1</sup>](#).

1. Reminder calls will continue for HST patients. The screening questions should be used for the reminder call and we should ask if anyone in the home has symptoms/contact with a COVID pt. Screening should be repeated the day of the appointment.
2. Patients will NOT come inside either sleep lab. Instead, patients will be instructed to call the lab upon arrival. Techs will provide curbside pickup during which the patient will not exit the vehicle.
3. Please ensure you are able to confirm 2 TJC compliant patient identifiers when you greet the patient for curbside pick-up.
4. Patients will be provided with the testing unit, all needed supplies, and instructions in a disposable plastic bag.
5. Staff should wear gloves and a surgical mask while performing patient care. Unless otherwise indicated by Duke Health PPE policy. Gloves should be discarded between patients and before returning to non-patient care spaces (i.e. control room or staff breakroom).
6. Hand sanitizer and additional plastic bags (in case a patient returns a unit with no bag) will be with the tech at the curbside location for drop off and pick up
7. Sleep technologists will use an extra HST unit to demonstrate the HST setup process on him/herself for the patient to observe
8. Patients will be given a pen to sign the acknowledgement of patient education that he/she will keep. The clip board with documents will be held up for the patient to sign without touching the documents.
9. Thermisters will NOT be used in either location due to the close contact with the airway.
10. Two belts will be used in both the DUH and DRaH outpatient sleep labs. Per infection prevention, enzymatic cleaning is not needed. Please use hospital approved cleaning wipes for disinfection. Ensure that as each wipe becomes less moist, please get a new wipe and continue in this fashion until the entire belt has been cleaned. All belts should be cleaned TWICE. Clean once, allow to dry and clean again.
11. All returned HST recording units will be cleaned TWICE. Clean once, allow cleaning agents to fully dry (excluding belts for this part), and cleaned again.
12. Patients will continue to be instructed to dispose of all non-reusable parts before returning the unit.
13. Patients will receive the following link for the Nomad HST video set up <https://www.youtube.com/watch?v=FHvydhYu85o>



**References:**

3. "COVID-19 Mitigation Strategies for Sleep Clinics and Labs: AASM." American Academy of Sleep Medicine – Association for Sleep Clinicians and Researchers, 24 Mar. 2020, [aasm.org/covid-19-resources/covid-19-mitigation-strategies-sleep-clinics-labs](https://aasm.org/covid-19-resources/covid-19-mitigation-strategies-sleep-clinics-labs).



## **Guidelines for performing inpatient/outpatient sleep testing during substantial\* community spread of COVID-19**

**Purpose:** To provide the best possible care to patients undergoing outpatient sleep procedures in addition to maintaining the safety of sleep staff during the performance of those procedures.

1. **Outpatient** Polysomnography (PSG) and Home Sleep Testing (HST)
  - a. Scheduling
    - i. Due to the risk of COVID-19 spread all sleep studies will be rescheduled to a later date designated by Sleep Lab leadership.
    - ii. All patients who are rescheduled due to COVID-19 will have the reason for cancelation/reschedule listed as COVID-19.

*\*Substantial community spread is defined by the CDC as large-scale community transmission, health care staffing significantly impacted, multiple cases within communal settings. (Updated March 23)*