



Education Bulletin

The ASAA is a non-profit organization dedicated to reducing injury, disability and death from sleep apnea and to enhancing the well-being of those affected by this common disease.

CPAP USE IN A HOSPITAL OR SURGICAL SETTING

This Patient Education Bulletin specifically addresses issues about CPAP while hospitalized for a medical condition or for a surgical procedure. Many of the items may also be applicable to any outpatient treatment that requires sedation.

*In this document all uses of the term **CPAP** apply to any type of Positive Airway Pressure device for the treatment of sleep apnea, including CPAP, bi-level PAP, and auto-titrating PAP devices.*

AN OBSTRUCTIVE SLEEP APNEA PATIENT'S RIGHTS AND RESPONSIBILITIES

Patient Rights:

- To be adequately treated for Obstructive Sleep Apnea (OSA) during all surgical procedures whether in a hospital or in an outpatient surgical center.
- To be adequately treated for OSA while you are hospitalized for surgery or other medical conditions or when having any same-day medical procedure that requires sedation or anesthesia, such as a colonoscopy or an angiogram.
- To contact your sleep physician to get his/her assistance in resolving any sleep apnea issues while hospitalized for any medical condition or surgery or having outpatient surgery.
- To use your own mask and headgear, and your own CPAP equipment set at your prescribed pressure, if the facility cannot provide an identical mask and CPAP equipment with similar or better functionality.
- To have humidification if required and there are no medical contraindications.

Patient Responsibilities:

- To notify your physicians and caregivers that you are an OSA patient and require CPAP therapy.
- To know your prescribed pressure and mode of therapy. If requested, to provide contact information for your sleep doctor or provide documentation confirming your OSA diagnosis and prescribed pressure.
- To provide your own mask and headgear and, if allowed, your own CPAP machine. Make sure these are up-to-date and clean.

American Sleep Apnea Association Education Bulletin

- To label your personal equipment with your name and other identifying information.
- To notify your surgeon and anesthesiologist you are an OSA patient and require CPAP therapy, if you are having surgery.
- To inform family and/or friends that you are an OSA patient and to demonstrate to them the purpose and parts of your equipment needed for your treatment.
- To provide medical emergency personnel with notification that you are an OSA patient, either orally or through written documentation such as a **wallet emergency information card or medical ID jewelry.

** The American Sleep Apnea Association offers such a card and a simple apnea bracelet or necklace as part of our membership package.

**Also, refer to the ASAA Patient Education Bulletin
[“HOSPITAL CHECKLIST FOR OBSTRUCTIVE SLEEP APNEA PATIENTS”](#).**

We suggest that you also read ***the ASAA Position Statement on “Sleep Apnea and Same Day Surgery”*** for additional information. In that document we recommend:

Given the nature of the disorder, it may be fitting to monitor sleep apnea patients for several hours after the last dose of anesthesia and opioids or other sedatives, longer than non-sleep apnea patients require and possibly through one full natural sleep period. Hence there is concern that same-day surgery (also known as out-patient or ambulatory surgery) may not be appropriate for some sleep apnea surgery patients.

You may wish to discuss this issue with your surgeon and anesthesiologist if you are scheduled for same day surgery or for the procedure to be done in an out-patient surgical center.

As a non-profit organization, the American Sleep Apnea Association does not endorse or recommend any company, products, or health care provider.
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