PCP Treatment & Referral Guidelines
Pediatric Sleep Studies
Developed February 17, 2004
Reviewed January 2011

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I. Indications for Sleep Studies in Children

A. Sleep apnea:
   1) Symptoms include:
      a) Snoring,
      b) Gasping,
      c) Observed apnea,
      d) Mouth breathing,
      e) Sweating,
      f) Tossing and turning,
      g) Frequent nocturnal awakenings,
      h) Difficult to awaken in the morning,
      i) Excessively sleepy during the day,
      j) Bedwetting.
   2) Index of suspicion should be high since parents often fail to closely observe children during sleep.
   3) Co-morbidities can include
      a) Learning problems
      b) Attention problems and
      c) Behavior problems.

B. Periodic Limb Movement Disorder of Sleep:
   1) Symptoms include:
      a) Excessive twitching, kicking, movements in sleep,
      b) Difficult to awaken in the morning
      c) Excessively sleepy or hyperactive during the day,
      d) Behavior, attention or learning problems in combination with nocturnal symptoms.

C. Follow up after tonsillectomy and adenoidectomy for known sleep related breathing disorder:
   1) Many children stop snoring following surgery but still have sleep related breathing disorder. They may need a follow up sleep study at least 6 weeks after tonsillectomy and adenoidectomy.

D. Narcolepsy:
   1) Narcolepsy with or without cataplexy consists of sleep disturbances at night and excessive sleepiness during the day besides other symptoms.
   2) Sleep study confirms that the cause of symptoms is not sleep related breathing disorder or periodic limb movement disorder.
   3) Further testing may be required to confirm the diagnosis of narcolepsy.

E. Parasomnias:
   1) Night terrors,
   2) Nightmares,
   3) Sleep walking and other parasomnias
   4) May require a sleep study to rule out sleep related breathing disorder and periodic limb movement disorder as triggers of the parasomnia.

F. High risk populations:
   1) Children with oxygen saturation less than 90% at rest while awake and restrictive lung diseases such as neuromuscular disorders.
2) Children with moderate to severe obesity
3) Children on home ventilators
4) Children on CPAP for known sleep apnea
5) Children with nocturnal symptoms in A or B above, and cerebral palsy, prematurity, chromosomal anomalies, cleft palate, mid facial hypoplasia and mandibular disorders

G. Tracheostomy status with a future attempt to decanulate

II. Indications for Sleep Study in Children with ADD
   A. Sleep abnormalities, i.e symptoms listed in A or B of Section I
   B. Children with nocturnal symptoms listed above and symptoms of attention deficit disorder with or without hyperactivity should be tested to evaluate for the possibility of a sleep related breathing disorder or periodic limb movement disorder triggering or worsening the symptoms of the attention disorder.

III. Conditions for which a sleep study is NOT indicated:
   A. Insomnia
   B. Restless leg syndrome
   C. Rhythmic movement disorder at the onset of sleep
   D. Circadian rhythm sleep disorder
   
   These disorders are diagnosed primarily by reviewing a detailed history.

APPROVAL:

[Signature]

SPA/SMF Medical Director

March 9, 2011

Date

Approval Summary:

SMF QM Committee Date: 03/09/2011
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