



Michigan Heart Sleep Center

MICHIGAN HEART SLEEP CENTER

760 W. Eisenhower Pkwy
Ann Arbor, MI 48103
Phone: (734) 622-8460
Toll Free: 866-363-7535
Fax: 734-622-8497

DISCHARGE INSTRUCTIONS

Date: _____

Patient Name: _____ Date: _____ Time: _____

- Last night you had a sleep study to determine if you have sleep apnea. Your study will be processed and interpreted by our Board certified sleep specialist physician. This typically takes 6-8 business days from today to complete. After your study has been interpreted you will be contacted to discuss the next steps. Your cardiologist and/or primary care physician will be sent a copy of your sleep study results. MI Heart Cardiology patients: you will receive a phone call from your Cardiologist office with the results of your first sleep study (734-712-8000).
- Your next appointment for a CPAP trial study is on _____. If the results from your initial sleep study determine that CPAP is not indicated, we will call you to cancel the appointment. If you do not have a second appointment scheduled and it is indicated, then we will contact you to schedule it at a later date.
- Last night you had a sleep study with CPAP to determine a pressure that is best for you to eliminate or reduce your sleep apnea. Your study will be processed and interpreted by our Board certified sleep specialist physician. This typically takes 6-8 business days from today to complete. After your study has been interpreted you will be contacted by the medical equipment company to set-up and instruct you on the equipment.
- If you had a CPAP study and results indicate that you need CPAP CardioSom or a medical equipment company of your choice will receive the Physician's order for CPAP within 6-8 business days. If you do not hear from the medical equipment company within 8 business days, feel free to contact the Sleep Center at (734) 622-8460. CardioSom's telephone number is: (734) 622-8470.

- You may resume all meds and activities as directed by your physician
- Your physician can expect the results of your test within 8-10 business days.

Please feel free to contact the Clinic Coordinator any time you have questions.

Patient Signature: _____

Date _____

Technician: _____

Date _____