FAQ: Sleep Studies at Jones Memorial

- Why should I consider a sleep study? Better sleep, especially if you have diabetes, high blood pressure, heart disease, A-Fib
- Who are sleep studies for? Those with problems sleeping, a BMI >35, neck circumference >16” or a 10+ score on the ESS (https://epworthsleepnessscale.com/about-the-ess/).
- What causes sleep disorders? Heredity, health issues, diet, work history, medications.
- Are sleep studies safe? Yes. A tech is available throughout the study.
- What should I bring to my sleep study? Pajamas, water, a favorite blanket or pillow, and your medication list and any medications needed.
- How should I prepare ahead of my sleep study? Cut back or eliminate caffeine, clean shaven or full beard – no stubble, shower before coming in for your study.
- What if I can’t sleep during the sleep study? A quiet atmosphere will be provided. If no sleep is seen by the end of the study, a repeat study might be recommended with physician-ordered sleep aid.
- I work nights, can I have a sleep study during the day? We accommodate patient needs but day studies are limited to certain days.
- What does the sleep lab look like? The rooms have a full-size bed, beside tables and lamps, a recliner, television, and private bathroom with shower.
- Is there a television? Yes, but once the study begins all media is turned off: tv, phone, and books.
- What should I expect between when I arrive until I leave in the morning? You will enter the hospital through the emergency department and register at the switchboard, where the sleep tech will meet you. When you get to your room in the sleep lab, the tech will explain the procedure and answer questions. Once you change into your pajamas, the tech will hook up the leads which transmit your brain waves, blood oxygen level, heart rate and breathing, as well as eye and leg movements to the control room. You can sit up and read or watch TV until 10:45 pm, when you will get into bed and start the study. You will not be woken during the test unless one of the sensors comes off. Between 5:30 and 6 am, you will be woken and can leave.
- What problems are diagnosed during a sleep study? The most commonly diagnosed sleep disorder is sleep apnea. (https://www.webmd.com/sleep-disorders/sleep-apnea/sleep-apnea)
- If I have a sleep disorder, does that mean I will need a CPAP? Most likely a CPAP will be recommended. While a CPAP may take some getting used to initially, the masks are getting lighter and more comfortable. The CPAP machine is not loud, although it can seem loud if there is leak or the hose isn’t connected properly. Most CPAPs are rent to own and the equipment provider inserts a SIM card to check usage. In order for insurance to cover the expense, the CPAP must be used a required number of hours. Most CPAPs come in a carrying case for travel so they do not take up much room.
- Are there other options besides a CPAP machine? Other options may include removal of tonsils and adenoids, oral appliance, weight loss, surgery. Inspire for qualified candidates.
- How often should the sleep study be repeated? Sleep studies are recommended to be repeated every five years to make sure your CPAP settings are correct. Other reasons for follow-up include weight loss or gain and other health concerns or if the patient feels they are not getting the benefits they were getting from the treatment.
- Do I need a referral from my PCP? A provider referral is required.
- Will my insurance cover a sleep study? Most insurances cover sleep studies. If a prior authorization is required, your PCP will obtain it. Self-pay is an option.

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