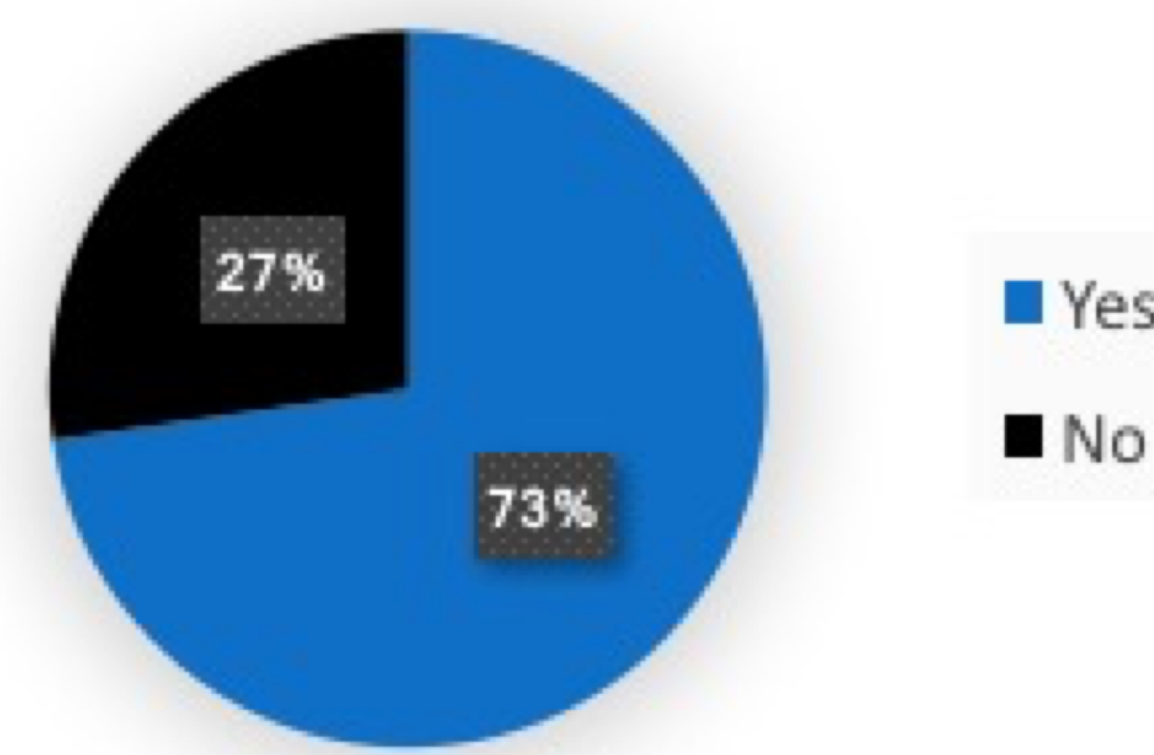


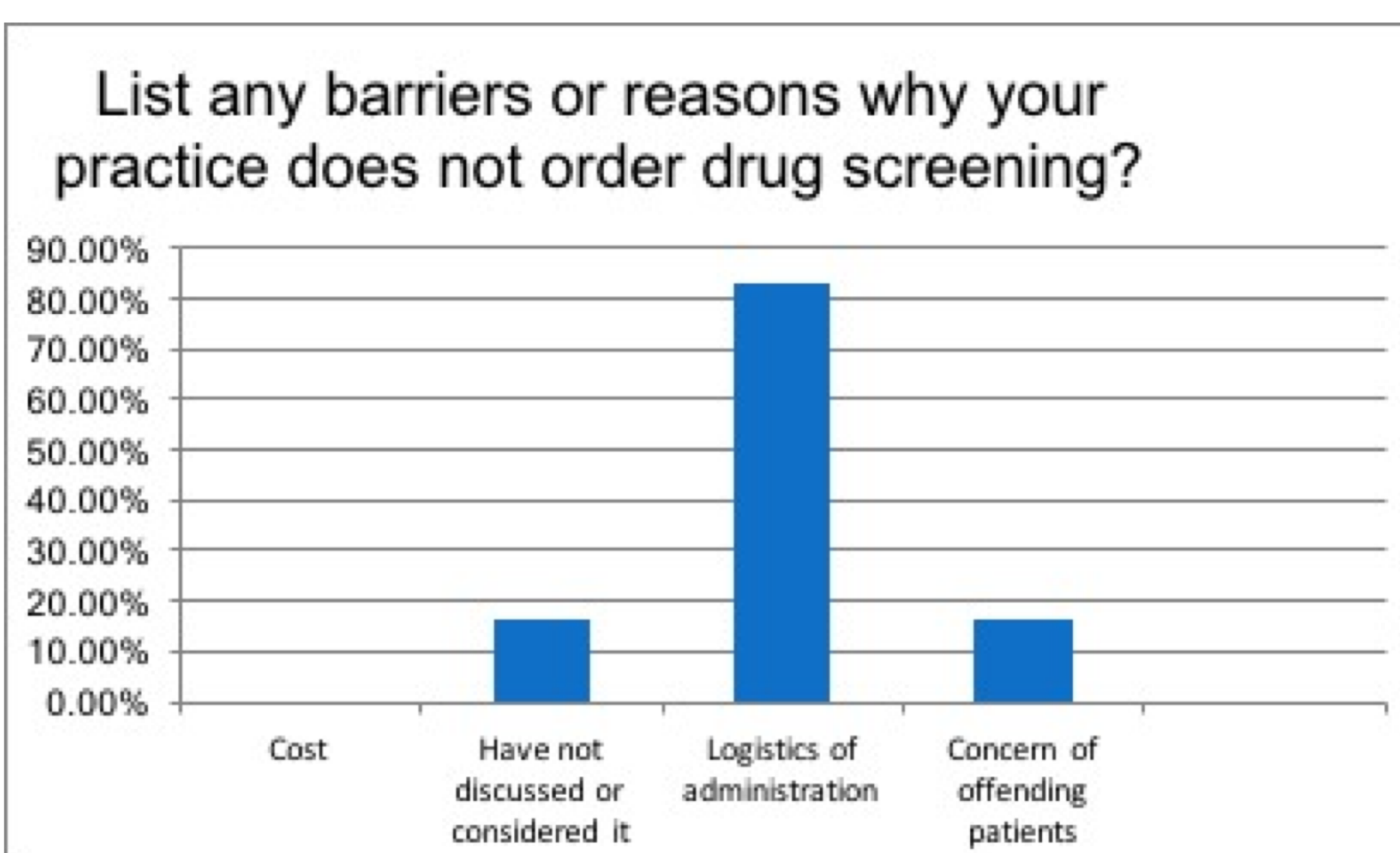
Problem Definition

American Academy of Sleep Medicine (AASM) recommends all sleep disorders centers (SDC) routinely perform urine drug screens (UDS) in patients undergoing a multiple sleep latency test (MSLT) or maintenance of wakefulness test (MWT) to identify substances that can alter results of testing. Many substances can affect the results of an MSLT or MST, which influences management of sleep disorders going forward. Our research has shown most academic SDC have implemented this; however, we have not.

Does your sleep medicine practice perform drug screening?

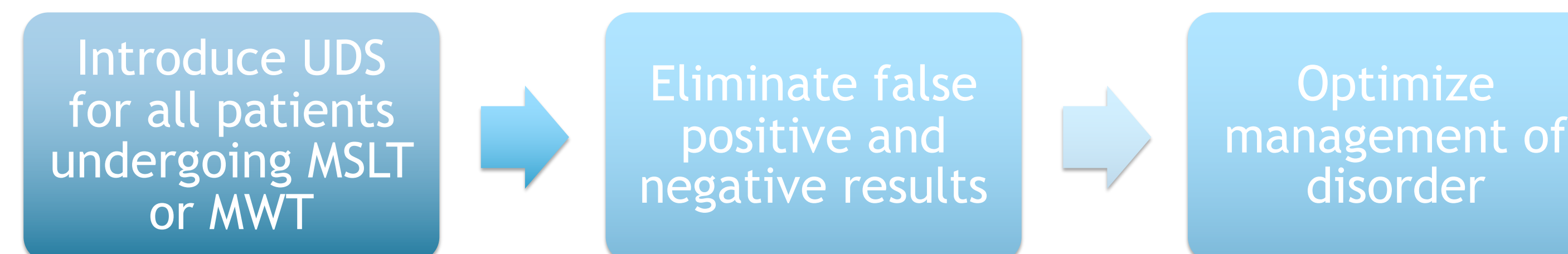


Similar to the SDC that do not check UDS, the logistics of administering the screening has been the biggest barrier to implementation at our center.



Aims For Improvement

Aim:



Goal: To have 100% of patients undergoing an MSLT or MWT to have a UDS

Intervention

Patients who are scheduled to undergo an MSLT or MWT will be informed of the UDS as routine protocol for these procedures at their office visit. They will be given written notice in the after visit summary.

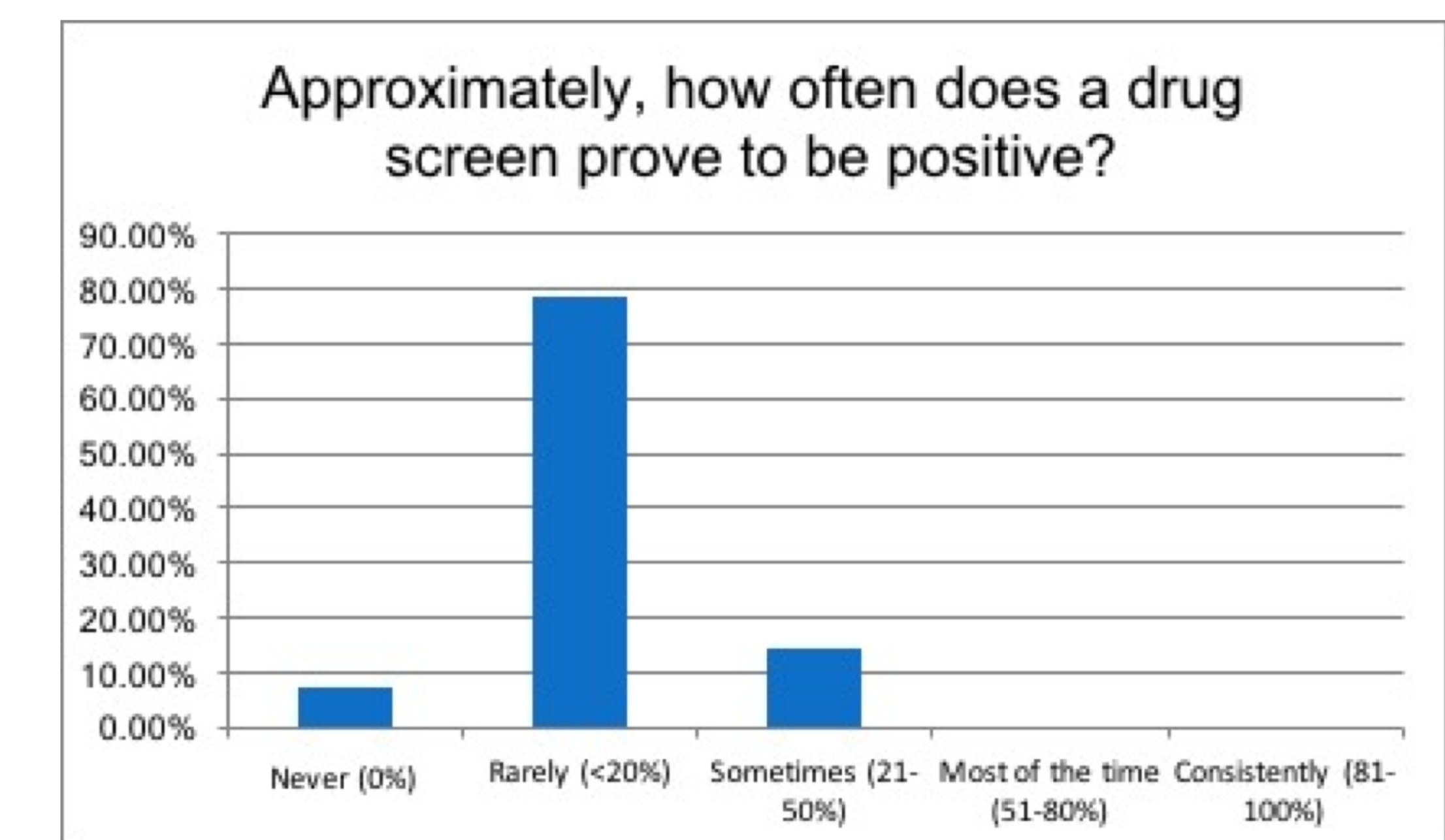
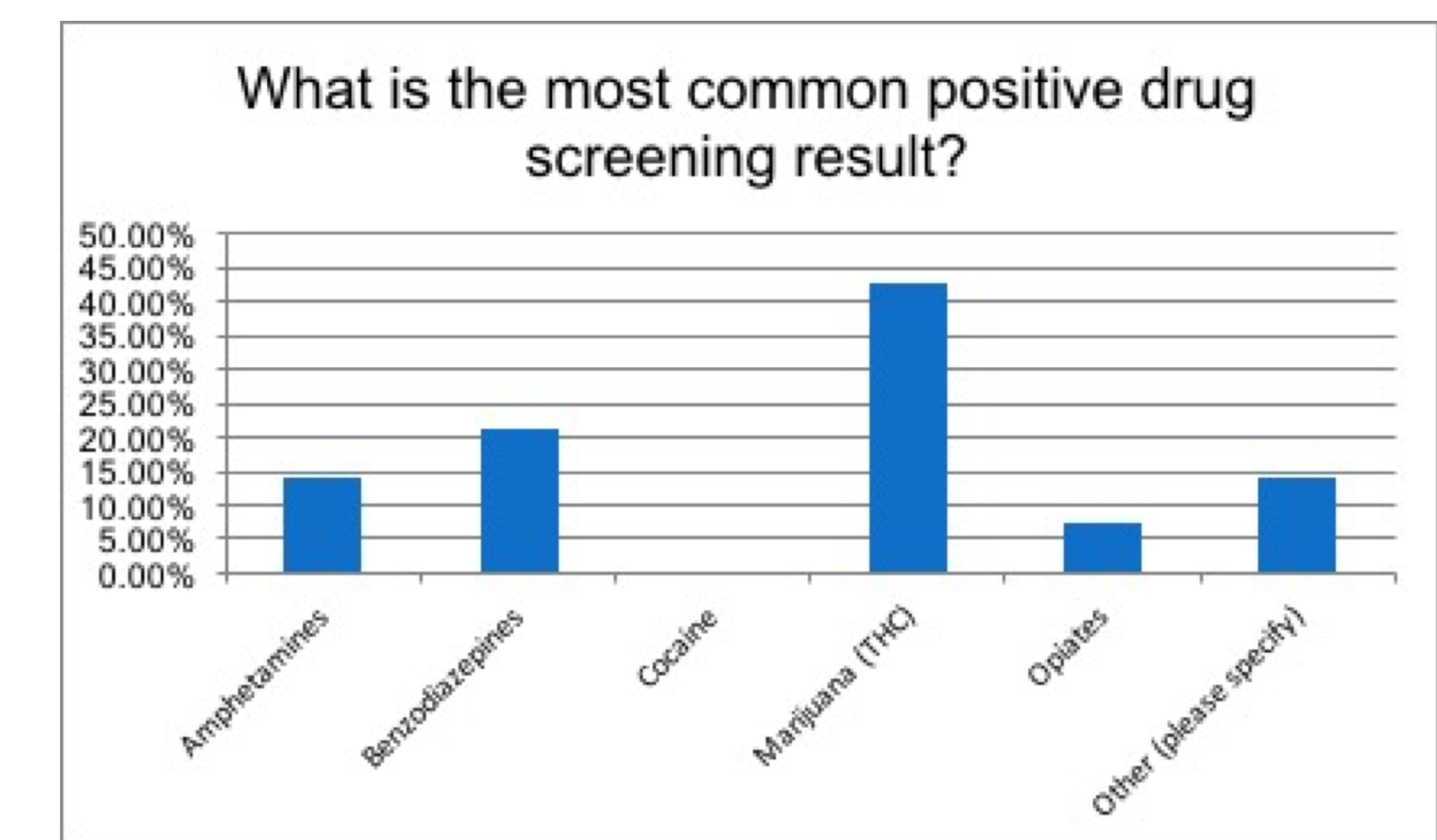
Prior to the start of their sleep study procedure, a urine specimen will be collected by our lab staff and run by the hospital lab as a 7 panel test. Regardless of the outcome of screening, the sleep study will proceed. If screening returns positive, this will be factored into the interpretation of the study.

Measurement and Results

The primary goal of this intervention is to establish a protocol that meets the standard of care recommended by the AASM. An additional outcomes will be to evaluate the frequency of positive drug tests compared to what patients declare they are taking.

Due to COVID-19 the implementation of UDS at our SDC has been postponed until the lab returns to its normal operations.

Based on data we collected from surveying academic SDC, we predict that once implemented, the most common positive result will be for marijuana (THC) followed by benzodiazepines. We also hypothesize about 15-20% of tests will be positive based on the our survey and the current literature.



Next Steps and Lessons Learned

Once it is safe to resume in lab sleep studies we will begin routine UDS for MSLT and MWT. Input from providers, lab personal, and patients will be considered when we determine if this intervention is a success.