



**ADULT & PEDIATRIC ORDER FORM**

Patient Name \_\_\_\_\_ DOB \_\_\_\_\_ SSN \_\_\_\_\_  
 Address \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_  
 Best Phone # \_\_\_\_\_ Alternate Phone # \_\_\_\_\_ Contact Person \_\_\_\_\_  
 Email \_\_\_\_\_

**PLEASE FORWARD**

- Patient Demographics
- Office Notes
- Medications
- Previous Sleep Studies
- Labs

**DESIRED SERVICE**

- Consultation / Office Visit
- Home Sleep Apnea Test (CPT 95806 / G0399)
- In Lab Sleep Study (CPT 95810 - Baseline/Diagnostic)
- In Lab Sleep Study (CPT 95811 - PAP Titration)
- In Lab Sleep Study (CPT 95811 - Split Night)
- Pediatric In Lab Study < 6 y/o (CPT 95782 – Baseline)
- Pediatric In Lab Study < 6 y/o (CPT 95783 – PAP Titration)
- Capnography (CPT 94770)
- Actigraphy (CPT 95803)

**DIAGNOSIS**

- Obstructive Sleep Apnea (G47.33)
- Insomnia – Unspecified (G47.00)
- Narcolepsy w/ cataplexy (G47.411)
- Narcolepsy w/o cataplexy (G47.419)
- Parasomnia Unspecified (G47.50)
- Circadian Rhythm Disorder (G47.20)

**SYMPTOMS**

- Snoring / Gasping during Sleep
- Daytime Sleepiness
- Witnessed Apnea Events
- Nocturia > 1 X / night
- Morning Headaches
- Night Sweats
- Difficulty Initiating Sleep
- Difficulty Maintaining Sleep
- Unrefreshed Sleep
- Early Morning Awakening
- Profound Daytime Sleepiness
- Cataplexy
- Hypnagogic Hallucinations
- Hypnopompic Hallucinations
- Sleep Associated Paralysis
- Frequent Arousals / Awakenings
- Previous Head Trauma (w/ LOC)
- Confusional Arousal (Sleep Drunkenness)
- Sleep Walking
- Night Terrors
- Sleep Related Eating / Drinking
- Dream Enactment (Act out Dreams)
- Nightmares
- Advanced Sleep Phase (Asleep by 6–8 pm)
- Delayed Sleep Phase (Asleep by 2-4 am)
- Irregular Sleep Pattern

**LOCATION**

- Medical Center**
- Stone Oak**
- Southwest**

Does the patient have uncontrolled  Hypertension?  
 Diabetes?  
 Communicable Disease (HIV, COVID, Hep C)  
 Any Special Needs?  Wheelchair / Walker / Incontinence / Super Obese

<b>Additional Comments</b>	
Provider's Printed Name:	
Provider Phone #:	Provider Fax #:
<b>PROVIDER SIGNATURE</b>	<b>DATE</b>