

# Home Diagnosis of Obstructive Sleep Apnea and Snoring



**Convenient**

**Comfortable**

**Comprehensive**

**Self-administered at home**



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## Do you suffer from any of these symptoms?

- Loud snoring
- Waking with a headache
- Restless nights
- Clenching of teeth
- Trouble concentrating
- Dry mouth
- Irritable
- Depression
- Rapid weight gain
- Heartburn
- Sexual dysfunction
- Hypertension

If so, it may indicate a sleep disorder

## Why should you take a Watch-PAT home sleep study?

**A** full and restful nights sleep is vital to one's individual health. If you have symptoms related to sleep disorders, it is important to find their causes and treat them as soon as possible. To fully understand many sleep related problems, an overnight sleep study is needed. Problems that can be diagnosed from an overnight sleep study include sleep apnea, snoring, REM related problems, bruxism and different behavioral changes.

Historically, an overnight sleep study has been performed in a hospital or sleep lab. You spend the night in the facility with up to dozen wired sensors attached to your body and a sleep tech watching you sleep on a closed circuit camera to determine if you have sleep problems. **The Watch-PAT is an easy home sleep test that allows you to sleep in your own bed and get results in just a few days.** If left untreated, sleep disorders can lead to heart attacks, strokes and even death. Other long term physical and psychological complications can include obesity, high blood pressure, diabetes, depression, poor work performance and strained personal relationships. A Watch-Pat home sleep study will determine if you have symptoms related to a sleep disorder so you can be treated.

## What will the Watch-PAT home sleep study tell you?



**T**he most important result the Watch-PAT measures is your sleep disturbance. The cause of most sleep disturbance is identified by measuring breathing, snoring, body position and REM sleep.

Sleep disturbances are reported as either the Apnea Hypopnea Index (AHI) or Respiratory Disturbance Index (RDI), which is the number of times you wake up per hour of sleep. Most of these awakenings are too short to remember as they last only for a number of seconds. It is considered normal to wake up 5 times per hour; waking 5-15 times per hour is considered mild sleep apnea; 15-30 times per hour is considered moderate sleep apnea and over 30 awakenings per hour is considered severe sleep apnea and indicates a sleeping problem that requires urgent intervening treatment.

The Watch-PAT sleep study also reports your snoring level, the amount of time that you slept, your heart rate, your desaturation levels, your REM Sleep (rapid eye movement) sleep stages and the overall quality of your night's sleep.

When your health care professionals receive the results from your Watch-PAT test, they will be able to determine the most appropriate treatment for you. Possible treatment methods may include oral appliances, CPAP, lifestyle changes and surgery. Generally, these treatments result in an improved quality of life.

## The steps for Watch-PAT testing:

- 1 Talk to your physician, who will perform a medical evaluation and likely prescribe a home sleep study.
- 2 **1st Line Medical** will contact your health insurance provider on your behalf to confirm coverage and benefits.
- 3 **1st Line Medical** will contact you to review the findings with you and arrange delivery via Priority Mail® of a Watch-PAT home sleep study kit.
- 4 You Watch-PAT home sleep test will arrive at your home with a 24/7 toll-free tech support hotline number and a patient orientation video. Unpack the box, follow the directions and wear the device for one night while you sleep. It is battery-operated and completely portable, so you are free to get up and move about during the study.
- 5 Return the Watch-PAT home sleep test to **1st Line Medical** via USPS by using the packing and prepaid return label provided for you.
- 6 The information from the Watch-PAT home sleep test will be interpreted and provided to your physician within 5 business days.
- 7 You will schedule a follow up appointment with your doctor to discuss the results and consider all treatment alternatives that are appropriate for you.
- 8 As with any medical condition, consult your physician for additional information and answers to your questions and concerns. More information about Watch-PAT home sleep test and a patient video are available at [www.1stlinemedical.com](http://www.1stlinemedical.com).



An Independent Diagnostic Testing Facility (IDTF).  
Providers of At-Home Sleep Study Services.

## Using the Watch-PAT is as easy as 1 ~ 2 ~ 3 ~ 4



**1** Put the device on your wrist.



**2** Put on the 2 finger sensors.



**3** Put on the snoring and body position sensor.



**4** Push the button.

## NOTICE OF HEALTH INFORMATION & FINANCIAL POLICIES

*This notice describes how information about you may be used and disclosed and how you can get access to this information. Please review it carefully.*

### COMMITMENT TO PRIVACY:

1st Line Medical, Inc. is dedicated to maintaining the privacy of your healthcare information and we are required by law to maintain the confidentiality of information that identifies you. Any use of healthcare information beyond the uses described below requires your individual written authorization. The Health Insurance Portability and Accountability Act (HIPAA) obligates us to provide you with a copy of our Privacy Notice, outlining our privacy practices and how we safeguard your health information. We abide by the terms of the Privacy Notice currently in effect, and reserve the right to revise or amend the notice, as needed.

### YOUR HEALTH INFORMATION RIGHTS:

Although your health record is the physical property of the healthcare facility that compiled it, the information belongs to you. You have the right to:

- Request a restriction on certain uses and disclosures of your information;
- Obtain a paper copy of the notice of privacy practices;
- Inspect and copy your health care record;
- Obtain an accounting of disclosures of your health information;
- Request confidential communication;
- Amend your healthcare record;
- Revoke your authorization to use or disclose health information except to the extent that action has already been taken.

### We will use your health information for payment.

In order to determine your eligibility for services, we will contact your insurance company and disclose healthcare related information. Also, we may bill you or a third-party payer for services that you receive from our company. The health information that identifies you, your diagnosis, equipment, and supplies may be included on this bill.

Product: Watch-PAT200 Home Sleep Test Kit  
Part Number: WP200HST  
Price (USD): \$385.00  
Price is subject to change.

### Responsibility for Payment:

1st Line Medical, Inc. will make every effort to bill your insurance company directly. You are responsible for full payment for services rendered by us. Any charges not covered by your insurance company, includ-

ing co-payments, deductibles, non-covered services, and out-of-network services will be your responsibility. It is your responsibility to know the requirements of your health plan. In the event of a denial of any insurance billed, you will be responsible for all fees charged.

### To our Managed Care Patients:

If you receive any services at 1st Line Medical, Inc. and the fees are denied because you did not obtain prior authorization from your primary care physician, you will be personally responsible for those fees.

We will use your health information for healthcare operations.

We may use your health information to evaluate the quality of care you receive from us, to conduct cost management assessments, and to plan business activities. This information is used in an effort to continually improve the quality and effectiveness of the healthcare services we provide.

**Business Associates:** There are some individuals who are under contract with us and, from time to time, are engaged in the improvement or financial enhancement of our business. So that your health information is protected, however, we require any business associate to appropriately safeguard your information.

**Public Health:** As required by law, we may disclose your health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability.

**Law Enforcement:** We may disclose health information for law enforcement purposes as required by law, or in response to a valid subpoena.

**Health Oversight Activities:** We may disclose health information to health oversight agencies for activities authorized by law, including surveys, audits, and compliance inspections.

**Worker's Compensation:** We may release your health information to the extent necessary to comply with laws relating to workers compensation or other similar programs established by law.

### OUR RESPONSIBILITIES:

We are required to:

- Maintain the privacy of your health information;
- Provide you with a notice as to our legal duties and privacy practices with respect to information we collect and maintain about you;
- Abide by the terms of this notice;
- Notify you if we are unable to agree to a requested restriction;
- Accommodate reasonable requests you may have to communicate health information by alternative means

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We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. Should our information practices change, we will mail a revised notice to your address on file. We will not use or disclose your health information without your authorization, except for treatment, payment, and healthcare operations.

**We will use your health information for treatment.**

Information obtained by our company will be documented in your healthcare record and will be used to provide you with healthcare related services. The prescription that your physician has ordered will be part of the record and will determine the equipment and supplies that you receive.

**FOR MORE INFORMATION:**

Please contact 1st Line Medical, Inc.'s Privacy Officer, at 866-720-8080, if you require additional information and/or want to pursue your rights, including:

- Requesting restrictions;
- Inspecting and copying your record;
- Securing an accounting of disclosures;
- Requesting additional disclosures;
- Revoking authorizations at any time;
- Filing a complaint

If you believe your privacy rights have been violated, you may contact our company's General Manager. You may also file a complaint with the Secretary of Health and Human Services (Office of Civil Rights) to: DHHS, Office of Civil Rights, 200 Independence Avenue, S.W., Room 509F HHH Building, Washington, DC 20201. There will be no retaliation for filing a complaint.

[www.1stlinemedical.com](http://www.1stlinemedical.com)

**Your Prescribing Health Care Professional:**