## OLIVE VIEW-UCLA MEDICAL CENTER RESPIRATORY CARE SERVICES – SLEEP MEDICINE POLICY & PROCEDURE

NUMBER: 6179 VERSION: 1

SUBJECT/TITLE: CPAP TREATMENT

**POLICY:** Prescription of long-term CPAP therapy will be based on: 1) documentation of

need by PSG or portable sleep monitoring; and 2) titration of optimal pressure during polysomnography, auto-CPAP titration or serial monitoring at fixed

pressure settings. After an acclimation period of 30 - 90 days, patients who exhibit

benefit and adherence to CPAP will be provided continued CPAP treatment.

**PURPOSE:** Explicit criteria to ensure that all patients prescribed CPAP follow a standard

protocol regarding initiation, monitoring and continuing therapy.

**DEPARTMENTS: RESPIRATORY CARE SERVICES** 

**DEFINITIONS:** 

**PROCEDURE:** All patients prescribed CPAP will have: 1) documentation of need by PSG or

portable sleep monitoring; and 2) titration of optimal pressure during

polysomnography, auto-CPAP titration or serial monitoring at fixed pressure settings. Long-term adherent CPAP users who have had need documented at another facility may have a replacement prescription based on a CPAP titration

study alone.

During CPAP set-up patients will be informed that in order to keep the device more than 90 days, they must demonstrate benefit and adherence at a clinic appointment 30 – 90 days after issuance, and the follow-up clinic appointment will be set. After CPAP is initiated, patients will be monitored as needed by face-to-face encounters and machine download data to optimize adherence and subjective benefit. Patients will continue to be followed in sleep clinic at up to yearly intervals. Those that do not meet the benefit and adherence requirements during the 90 day trial period will relinquish their CPAP units, but will continue to be followed in sleep clinic.

SUBJECT/TITLE: CPAP TREATMENT

Policy Number: 6179
Page Number: 2

References:	
Approved by: Jeanne Wallace (Division Chief)	Date: 07/02/2018
Review Date: 07/02/2018	Revision Date:
Next Review Date: 07/02/2021	
Distribution: Respiratory Care	
Original Date: 03/06/2014	

SUBJECT/TITLE: CPAP TREATMENT

Policy Number: 6179
Page Number: 3