

This form is for informational purposes only. It does not need completed prior to your visit.

Background on Sleep Apnea

- A. It is an abnormal physiologic process during which a person stops breathing. It can cause:
- (1) Fatigue and many other symptoms, although many drivers with severe disease are unaware of symptoms;
 - (2) Irreversible heart and lung changes leading to PERMANENT medical issues.
- B. Public health and safety concerns include:
- (1) Sleep apnea can cause sudden incapacitation when drivers fall asleep at the wheel;
 - (2) Drivers with sleep apnea are at a higher risk of crash (*Treager et al. JCSM 2009*).

C. Per FMCSA, Certified Medical Examiners must screen drivers presenting for medical certification for OSA diagnostic testing in accordance with the below criteria from Section III.B of the MRB/MCSAC report to the FMCSA 11/21/16.

Based on you meeting criteria in either Column A or Column B below, it is my medical opinion as a medical examiner that you have risk factors suggesting you may have sleep apnea and need to be evaluated.

Column A	Column B		
<input type="checkbox"/> BMI \geq 40	<input type="checkbox"/> BMI \geq 33 but less than 40 AND 3+ of the following: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> (un)treated high blood pressure <input type="checkbox"/> (un)treated Type 2 diabetes <input type="checkbox"/> neck size \geq 17 inches (male) \geq 15.5 inches (female) <input type="checkbox"/> loud snoring <input type="checkbox"/> Mallampati Classification of Class III or IV <input type="checkbox"/> male or post-menopausal female </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> witnessed apneas <input type="checkbox"/> history of stroke/arrhythmia/coronary artery disease <input type="checkbox"/> micrognathia or retrognathia <input type="checkbox"/> hypothyroidism (untreated) <input type="checkbox"/> age 42 and above </td> </tr> </table>	<input type="checkbox"/> (un)treated high blood pressure <input type="checkbox"/> (un)treated Type 2 diabetes <input type="checkbox"/> neck size \geq 17 inches (male) \geq 15.5 inches (female) <input type="checkbox"/> loud snoring <input type="checkbox"/> Mallampati Classification of Class III or IV <input type="checkbox"/> male or post-menopausal female	<input type="checkbox"/> witnessed apneas <input type="checkbox"/> history of stroke/arrhythmia/coronary artery disease <input type="checkbox"/> micrognathia or retrognathia <input type="checkbox"/> hypothyroidism (untreated) <input type="checkbox"/> age 42 and above
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Next Steps:

You need to complete a sleep study, either at home or in the sleep lab, which will diagnose and determine severity of sleep apnea.

Options for getting the test ordered:

1. Your care provider can order the test directly or refer you to a sleep medicine specialist
2. A sleep medicine specialist
 Parkview Physicians Group Sleep Medicine is one such specialist that has experience with DOT drivers and a direct professional, not financial relationship with POHC. You can call them directly at 260-266-5260

Results and Treatment:

Drivers diagnosed with sleep apnea must follow their treating provider's treatment plan. Usual treatment options include a CPAP machine.

Conditional Certification Decision:

A driver identified as needing evaluation for sleep apnea will be certified for **up to 6 months** to allow for enough time to get to study approved, completed, treatment started if needed, and to show compliance with treatment.

Requirements for Initial Certification following a Sleep Apnea diagnosis:

1. The driver does not report excessive sleepiness during waking hours
2. The driver must provide:
 - a. **If driver is treated with CPAP:** documentation of CPAP use for a time period **no less than 30 consecutive days that demonstrates at least 4 hours per night use on 70% of nights** for the reporting period
 - b. A clearance letter from the driver's treating provider stating the condition is stable and the treatment plan is being followed

Requirements for Recertification following a Sleep Apnea diagnosis:

1. The driver does not report excessive sleepiness during waking hours.
2. The driver must provide:
 - a. **If driver is treated with CPAP** documentation of CPAP use demonstrating **at least 4 hours per night use on 70% of nights** for the reporting period. The reporting period must include the time between the driver's last exam and the current one.
 - b. A clearance letter from the driver's treating provider stating the condition is stable and the treatment plan is being followed

Please Note: if a driver is not in compliance with the above treatment requirements or with a POHC medical examiner's recommendation for sleep apnea testing, the driver will likely receive a shortened duration certificate, or potentially be disqualified.

Thank you for your consideration and patience with the sleep apnea evaluation process. We want to keep you safe, healthy, and ON THE ROAD earning a livelihood!

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