

PEDIATRIC SLEEP INSTITUTE

Pediatric Sleep Institute is a state-of-the-art facility that specializes in diagnosing sleep and neurological disorders in children. Our comprehensive evaluations help provide you with the information necessary to plan a successful course of treatment.

Unlike most clinics, Pediatric Sleep Institute is exclusively concerned with childhood disorders. Our training in childhood diagnoses gives us particular insight into the conditions and issues that are unique to pediatric patients.

We are also particularly attuned to the comfort and care of both parent and child. Our treatment suites are cozy, cheerful settings where the patient and caregiver can play games, watch television, read and relax.

INSURANCE

Once you have determined your patient's need for a sleep or neurological evaluation, have the patient or guardian fax or send us the referral.

Pediatric Sleep Institute handles the rest. We will contact the insurance carrier to verify benefits, initiate and follow the appropriate authorizations. We will work with your office to coordinate billing information.

We offer options for in- and out-of-network plans and self-paying patients. Our financial department is always available to answer billing and payment questions.

GET TO KNOW US

Would you like a tour of our facility?

Would you prefer a visit to your office?

Do you have further questions?

We are eager to answer all of your questions and would be happy to arrange a tour or visit for you.

To Tour Our Facility in Person

Please contact Lori Sands at (214) 778-3000 or lsands@pediatricsleepinstitute.com, or Racquel Edmiston at redmiston@pediatricsleepinstitute.com.

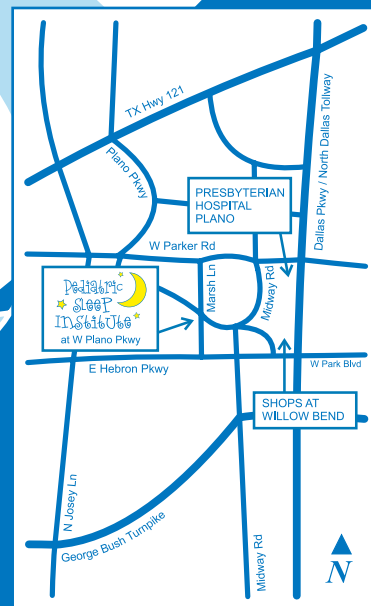
To Take a Virtual Tour

Go to our website at www.pediatricsleepinstitute.com and click on "Take a Tour!"

SHOULD YOU REFER A PATIENT?

A patient suffering from a sleep or neurological disorder may:

- Snore or make other noises during sleep
- Be sleepier than expected during the daytime
- Have trouble falling or staying asleep
- Have trouble falling asleep due to leg discomfort
- Wet the bed (past the age of 5 years)
- Sleepwalk excessively
- Have frequent sleep terrors or nightmares
- Exhibit sudden behavioral problems at school or at home
- Show signs of memory dysfunction or a lack of concentration
- Grind teeth during sleep
- Move excessively during sleep
- Have a craniofacial abnormality
- Have unexplained muscle spasms or jerks
- Have frequent or severe headaches
- Faint or have dizzy spells
- Lose consciousness
- Have seizures
- Stare blankly



Pediatric
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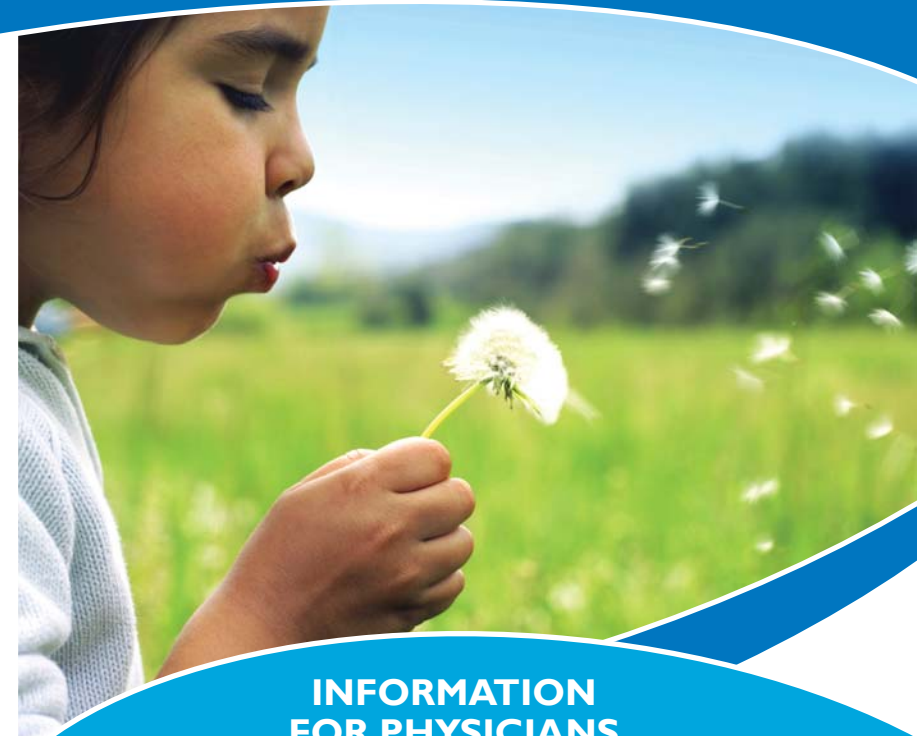
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INFORMATION
FOR PHYSICIANS

SLEEP

NEUROLOGY

Common Childhood Sleep Disorders

INSOMNIA - the inability to fall asleep and/or remain asleep for a reasonable amount of time.

PARASOMNIAS - sleep walking, teeth grinding and night terrors. These symptoms are sometimes associated with stress and depression.

NARCOLEPSY - a chronic neurological condition caused by the brain's inability to regulate the sleep-wake cycle normally. Narcoleptics have uncontrollable urges to sleep at inappropriate times during the day. They may also experience muscle weakness after laughing or crying outbursts.

SLEEP APNEA - the obstruction of the airway passage during sleep. This is usually characterized by pauses in breathing during sleep.

PERIODIC LEG MOVEMENT SYNDROME (PLMS) - sudden jerking or bending of the arms and legs during sleep. Symptoms can range from small shudders of the ankles and toes to kicking and flailing of the arms and legs. Patients who experience disruptive leg movements at night can suffer from daytime sleepiness due to fragmented overnight sleep.

Sleep Evaluations

Our sleep technicians are trained to help children feel safe and secure. A technician will help the child prepare for the evaluation, will answer any questions the patient or caregiver may have and will be available during the sleep period to monitor and make adjustments. During the sleep evaluation the technician will monitor the child's sleeping and waking patterns, breathing patterns, body movements and brain waves.

Types of Test and Therapies

POLYSOMNOGRAM - painless and non-invasive, the polysomnogram is designed to monitor a child's sleeping cycle from the brain, breathing patterns, heart activity and body movements during an all night sleep period.

CPAP/BIPAP THERAPY (Continuous Positive Air Pressure & Bi-Level Positive Airway Pressure) - a mask is placed over the nose and/or face which helps prevent snoring and apnea (interrupted breathing) during the normal sleep period. Different levels of air pressure are gradually delivered to the airway, helping open the airway passages during sleep. This test is used to determine the correct air pressure needed to keep the airways open. Consistent use of the CPAP or BiPAP machine is critical in the successful treatment of sleep apnea, and thus practice with the mask may be necessary prior to coming for this study.

MSLT (Multiple Sleep Latency Test) - Usually performed the day after the polysomnogram is administered, this assessment is useful in studying the intensity of daytime sleepiness and determines if narcolepsy is present.

Common Childhood Neurological Disorders

EPILEPSY - a nervous system disorder that causes recurring seizures. These seizures may or may not be associated with a loss of consciousness. Epileptic seizures may include involuntary muscle spasms and are produced by an abnormal electrical discharge in the brain sometimes caused by high fever (Febrile seizures), genetic diseases, head injuries or infections.

VERTIGO - the patient perceives every visible object to be spinning or moving. The patient may also experience dizziness, loss of balance and nausea.

FAINING - an attack resulting in a temporary loss of consciousness that is caused by a brief loss of blood supply to the brain.

HEADACHES - not a neurological disorder but headaches can accompany some neurological disorders. They can be caused by numerous factors. Vascular (migraine) headaches occur when pain nerves react to arterial spasms; muscular tension headaches result from excessive, continuous muscular contractions in the head and neck.

Neurological Evaluations

Electroencephalogram, more commonly known as EEG, is a painless neurological test that measures the electrical signals from the cortex of the brain. Data from the test is then recorded on a computer and is used to evaluate seizure and sleep disorders.

What Happens During an EEG?

Prior to the procedure the patient's scalp is measured and marked in order to localize placement of electrodes. The scalp area is cleaned with a special exfoliate cream. A technician will fill the cup electrodes with a special conductive paste that helps pick up electrical signals. The cup electrodes are then attached to the scalp and held in place with tape. This procedure takes between 1-2 hours and is painless.

During the test the patient lies down. He or she will be encouraged to hold still as long as possible. A strobe light will be used to stimulate brain wave function. The child will then be asked to hyperventilate. These stimulation techniques may induce certain types of seizure disorders.

Types of Seizures Common in Children

GENERALIZED (Involving Both Sides of the Brain):

GENERALIZED TONIC-CLONIC SEIZURES - a dramatic seizure in which the body may undergo rhythmic jerking and muscle stiffening. This kind of seizure may be accompanied by difficulty in breathing, foaming of the mouth and drooling. During these seizures eyes may roll back (Febrile seizures).

ABSENCE SEIZURES (PETIT MAL) - these seizures are characterized by a loss of awareness, staring and blinking.

MYOCLONIC SEIZURES - these seizures are characterized by sporadic muscle jerks that may be associated with loss of balance and head droops.

PARTIAL (Produced by Small Areas of the Brain):

SIMPLE PARTIAL SEIZURES - these seizures can take many forms, depending on the part of the brain that is affected. The affected child may be aware that a seizure is occurring. These seizures may begin with an "aura" or a warning sign that the seizure is beginning. This may be followed by uncontrolled movements, sudden emotions, memory distortions, nausea and sweating. The child may become pale.

The child may also experience unusual sensations: strange tastes or smells, odd sounds or voices and distortions in the way things look.

COMPLEX PARTIAL SEIZURES - these seizures may also be preceded by an "aura" although the child may be unaware of what is going on around them or what they are doing. During complex partial seizures a child may make repetitive motions such as smacking the lips, picking at their clothing and/or babbling. The child may appear to be in a dream-like or trance state which lasts from 30 seconds to three minutes.

RESULTS

Sleep evaluation results will be reviewed and interpreted by our board certified pediatric sleep physician.

Neurological evaluation results will be reviewed and interpreted by a pediatric neurologist.

The results will be sent to you within 72 hours after completion of the study.

Evaluation time may vary depending on the depth of the study requested.