



# Guide to Sleep Study Types and Codes

from Advanced Sleep Medicine Services, Inc.

Visit us online at [www.sleepdr.com](http://www.sleepdr.com)

Study Type	Also known as...	Not to be confused with...	Difference by age of patient	Most Common reasons for performing this test:	CPT Code
<b>HST</b> (Home Sleep Test)	In-home PSG or diagnostic study, out-of center (OOC) testing	in-lab overnight testing, overnight pulse oximetry (OPO), O2 saturation overnight monitoring	Adult (over 20 yo)	Suspected sleep disorder, rule out suspected sleep disorder, can only diagnose sleep apnea (cannot diagnose other sleep disorders) and may require follow-up in-lab study. HST does not monitor EEG (brain activity).	<b>95806, G0399 or G0398</b> (based on insurance and type of testing device used)
			Child (under 21 yo)	Cannot be performed on patients under 21 years old	<b>N/A</b>
<b>In-lab Polysomnography</b>	PSG, baseline, diagnostic study, attended PSG, fully attended overnight sleep study	Split, titration, HST  <b>NOTE:</b> All overnight sleep studies are polysomnography. At ASMS, we use PSG to mean baseline diagnostic; however, referral sources may use PSG to denote split or titration. (Clarification may be needed)	Adult or Child (6-adult)	Suspected sleep disorder, rule out suspected sleep disorder, rule out sleep disorder before performing MSLT (see below)	<b>95810</b>
			Child (1-5 yo)	Suspected sleep apnea due to enlarged tonsils or adenoids, an obese child may have OSA due to excess fat around the airway	<b>95782</b>
<b>Split night polysomnography</b>	Split night, 50/50, sleep study with titration, PSG with titration, sleep study in 50/50 fashion	PSG only, full night diagnostic sleep study, full night titration study	Adult or Child (6-adult)	Suspected sleep disorder, rule out suspected sleep disorder, rule out sleep disorder before performing MSLT diagnose sleep apnea and THEN titrate on PAP to find the correct pressure setting to treat OSA	<b>95811</b>
			Child (1-5 yo)	Highly unlikely, children this age are not usually treated with PAP (rare exception is an obese child)	<b>95783</b>

**Note about in-lab diagnostic sleep studies:** An in-lab sleep study, also known as a polysomnogram, records brain waves, heartbeat and breathing during sleep. It also charts eye movements, limb movements and oxygen in blood.

**CO2 Monitoring:** At ASMS, our studies do not include CO2 monitoring, unless specifically requested. Transcutaneous (TCO2) or End-Tidal (ETCO2) monitoring of CO2 can be recorded, if requested, at some facilities. This is sometimes used in the evaluation of sleep disorders in children.

**Oral Appliances:** An oral appliance is a device worn in the mouth during sleep to keep the tissue in the airway from collapsing. While typically not as effective as Positive Airway Pressure (PAP) therapy, an oral appliance is an excellent option for individuals who are unable to tolerate PAP. These patients may return to the sleep center for PSG with the oral appliance to test the effectiveness of the oral appliance in reducing or eliminate sleeping events. Additionally, some physicians may order split night polysomnography to evaluate the effectiveness of the oral appliance during the first half of the night and then remove the oral appliance and titrate on PAP for the remainder of the night.



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<b>Titration</b>	titration study, full night titration, pressure changing study, attended CPAP/BiPAP/Bi-level, sleep study with titration	PSG only, full night diagnostic sleep study, split, 50/50	Adult or Child (6-adult)	Patient was previously diagnosed with sleep apnea and is placed on PAP the entire night, pressure is titrated (moved up and down) to find optimal pressure that eliminates most events	<b>95811</b>
			Child (1-5 yo)	Highly unlikely, children this age are not usually treated with PAP (rare exception is an obese child)	<b>95783</b>
<b>Bi-level or BiPAP Titration</b>	Bi-level or BiPAP titration study	PSG only, full night diagnostic sleep study, split, 50/50, CPAP titration, BiPAP ASV titration	Adult or Child (6-adult)	Patient was previously diagnosed with OSA and has tried CPAP but was not comfortable with the high pressure or events were not eliminated. Patient is placed on bi-level PAP the entire night, pressure is titrated (moved up and down) to find optimal pressure that eliminates most events	<b>95811</b>
<b>ASV Titration</b>	Adaptive servo ventilation or auto servo ventilation study	PSG only, full night diagnostic sleep study, split, 50/50, BiPAP or Bi-level titration	Adult or Child (6-adult)	Patient was previously diagnosed with sleep apnea (usually central sleep apnea or Cheynes-Stokes respirations) and is placed on ASV the entire night, pressure is titrated (moved up and down) to find optimal pressure that eliminates most events	<b>95811</b>
<b>ST Titration</b>	NPPV	ASV titration NOTE: This is an older technology, and except by some payers most patients will require an ASV titration (see above)	Adult or Child (6-adult)	see ASV Titration (above)	<b>95811</b>
<b>AVAPS or IVAPS</b>	Average or Intelligent Volume Assured Pressure Support	ASV titration, APAP titration, APAP device	Adult or Child (6-adult)	Patient likely has ALS or Lou Gehrig's Disease or another form of muscular dystrophy. AVAPS is used to evaluate the use of this device to normalize shallow breathing	<b>95811</b>
			Child (1-5 years old)		<b>95783</b>



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<b>MSLT</b> (Multiple Sleep Latency Test)	nap test, narcolepsy test, daytime nap study	MWT (see below)	Teenager to Adult (not geriatric)	A series of daytime naps (performed after PSG the previous night) is the standard tool used to diagnose narcolepsy and idiopathic hypersomnia (excessive sleepiness). Patient may need to stop medications 2 weeks before the test. Measures the time elapsed from the start of a daytime nap period to the first signs of sleep, called sleep latency. The test is based on the idea that the sleepier people are, the faster they will fall asleep. Sleep apnea or excessive leg movements are much more likely to be the cause of excessive daytime sleepiness. Narcolepsy is rare. Achieving REM sleep in two or more naps could be consistent with a diagnosis of narcolepsy. 4 common symptoms of narcolepsy: hallucinations, sleep paralysis, excessive daytime sleepiness, cataplexy (loss of muscle control)	<b>95805</b>
<b>MWT</b> (Maintenance of Wakefulness Testing)		PSG, MSLT, Titration. PAP nap	Adult (primarily)	MWT is used to see if someone with a sleep disorder is responding well to treatment. Results of multiple tests may be compared over a period of time. This can show if treatment is helping a patient overcome sleepiness. The MWT may be used to evaluate how well a person with a sleep disorder is able to stay awake. This is critical when the person's job involves public transportation or safety. The results of the test will be only one factor used to assess the potential risk of a work-related accident.	<b>95805</b>
<b>PAP Nap</b>		Titration, MSLT, MWT	Adult (primarily)	The Pap-Nap is not a replacement for CPAP titration. It is designed to help patients who are currently on CPAP and are not adjusting well, or patients who have been diagnosed with OSA in the past and have not been using their device. Many of these patients have stopped therapy and now require a re-titration. Sometimes the pap-nap can precede the initial overnight titration study.	<b>95807</b>