**Please read before using this book.**

Helpful Tips when using this preparation book:

*Parent/caregiver help in calming/distracting their child is welcome and important during the sleep study hook-up process.

*Occasionally a blood draw may be needed to verify carbon dioxide levels. This is more common with patients who have chronic respiratory issues.

*If the patient has a severely abnormal sleep study, an extended stay may be necessary.

*The sleep study procedure may vary. Not all steps may apply.
Kids of all ages have sleep studies.
There is a special chair in the room that pulls out into a bed for someone in your family to use.

When you come to the hospital for your sleep study you will have your own room.
A nurse may come to your room and ask you and your family some questions.
A nurse or patient care assistant, called a PCA, may check your vital signs, which means they will listen to your heart and check your temperature and blood pressure.

They may also see how much you weigh and how tall you are.
You may see a special sleep study nurse who will ask you and your family some questions about why you are having a sleep study.

This nurse will also look inside your ears, nose and throat; and listen to your heart and lungs.
When it is almost time for bed, the respiratory therapist will come to your room to get you ready for your sleep study. The respiratory therapist may measure your head with a paper tape measure.

The respiratory therapist will use a Q-tip and some special liquid soap to clean some places on your head, face, legs, chest and belly.
The respiratory therapist will put some special glue on small circles, called electrodes. You may notice that the glue has a strong smell. The respiratory therapist will put the electrodes on your head with the smelly glue.

Your job is to hold still while the respiratory therapist does their job.

You can watch a movie, play a game, sing songs, or do something else that you enjoy while the respiratory therapist gets you ready for your sleep study.
The respiratory therapist will use a small dryer to help the electrodes stay on your head for your sleep study.

The dryer is noisy and will blow air that feels cool.
The respiratory therapist will put five electrodes on your face. There will be one electrode by each eye and three electrodes on your chin. These electrodes will look the same as the electrodes on your head. Special glue and tape will help the electrodes stay in place.
The respiratory therapist will put two electrodes on each of your legs. These electrodes will look the same as the electrodes on your head. Special glue and tape will help the electrodes stay in place.

The wires from the electrodes will go up your pants leg and come out the top of your pants. You can help the respiratory therapist pull the wires through your pants. Your pants will cover the electrodes and wires.
The respiratory therapist will put electrodes on your chest and belly. These electrodes will be put on with special glue and tape to keep them in place.

You will have two stretchy belts, one on your chest and one on your belly. These belts have wires that attach with snaps.

These belts will measure how much your chest and belly move when you breathe.
A pulse oximeter will be placed on your finger or toe. It is like a band-aid with a red light. It will show the amount of oxygen in your blood while you are sleeping.
The respiratory therapist will put small, clear plastic tubes under your nose to measure the air going in and out when you breathe. The plastic tubes will be tucked behind your ears and taped to your face so that they stay in place.
The respiratory therapist will put a small circle on your chest or arm with tape. The circle will monitor air, called carbon dioxide, through your skin. The circle has a red light, just like the pulse ox. You may feel the circle get warm on your skin.
All of the wires are connected to a box that is placed on your bed.

This box connects to computers in another room.
This is one of the computers that will show your breathing while you sleep.
Now that you have all of your electrodes and wires in place, you are ready for bed.
Now your job is to sleep.
Early in the morning, the respiratory therapist will use a special liquid to help take all of the electrodes and tape off of your body.
After the respiratory therapist takes off all of your electrodes, it will be time for you to go home.