



**Sleep Unit Request Form –
Supplemental Oxygen**

Summary of Prior History/Diagnostic studies:

Current Settings:

Supp O₂: Room Air ____ L/min via nasal prongs

Main Aim of this study: _____

Study Commencement Settings:

Same as Current settings Start in Room Air ____ L/min via nasal prongs

Study Titration:

Supp O₂:

- 1. If SpO₂ baseline drops to < 90 % for > 5 min
 Re-institute O₂ at 0.25 L/min via nasal prongs
 ↑ O₂ by 0.25 L/min via nasal prongs until resolved (Max Supp O₂ limit of 2 L/min reached)

- 2. If discrete SpO₂ desaturation consistently to < 85 % associated with respiratory events
 Re-institute O₂ at 0.25 L/min via nasal prongs
 ↑ O₂ by 0.25 L/min via nasal prongs until resolved (Max Supp O₂ limit of 2 L/min reached)

OR

- 1. If SpO₂ baseline drops to < ____ % for > ____ min
 Re-institute Supp O₂ at ____ L/min via _____
 ↑ Supp O₂ by ____ L/min via _____ until resolved (If Max Supp O₂ limit of ____ L/min reached)

- 2. If discrete SpO₂ desaturation consistently to < ____ % associated with respiratory events
 Re-institute Supp O₂ at ____ L/min via _____
 ↑ Supp O₂ by ____ L/min via _____ until resolved (If Max Supp O₂ limit of ____ L/min reached)

Other Instructions: _____

If anything else occurs during the night that is not listed above: Contact _____ for further instruction.