

ARIZONA PEDIATRIC & YOUNG ADULT SLEEP CENTER

Transition Care Sleep Medicine
3300 N. Campbell Ave, Tucson, AZ 85719
Phone: (520) 555-7823 | Fax: (520) 555-7824

Patient: Mitchell, Tyler Ryan
DOB: 04/15/2002 (22 years)

MRN: PED-445821

Insurance: Parent's Medicare (Disability)
Policy: 6LM-02-445821-D
Sex: Male **Visit Date:** 12/02/2024
Provider: Sofia Ramirez, MD

⚠️ AGE CONSIDERATION
Patient recently turned 22 years old (4/15/2024). Just meets age criteria for HNS (≥22 years). Transitioned from pediatric to adult sleep care.

PRE-AUTHORIZATION REQUEST

Procedure: Hypoglossal Nerve Stimulation
CPT Code: 64568
ICD-10: G47.33, Q90.9 (Down syndrome)
NPI: 7382910456

CLINICAL BACKGROUND

22-year-old male with Down syndrome and severe OSA since age 14. Transitioned from pediatric sleep clinic at age 21. Lives with parents who report severe snoring, witnessed apneas "constantly through the night." Daytime somnolence impacts participation in day program activities.

Developmental considerations: Mild intellectual disability, generally cooperative with medical care. Parents are primary caregivers and very involved.

POLYSOMNOGRAPHY (11/25/2024)

Parameter	Value	Interpretation
AHI	58.3 events/hour	Severe
RDI	64.7 events/hour	Severe
Lowest SpO2	73%	Severe desaturation
ODI 4%	52.1 events/hour	Severe
Central Apnea Index	3.2 (5.5%)	Minimal
Non-supine AHI	41.7 events/hour	Meets criteria

CPAP HISTORY - EXTENSIVE TRIALS

Pediatric Attempts (2016-2022):

- Age 14-20: Multiple trials with behavioral support
- Total 48 months attempted in pediatric setting
- Never achieved >30 minutes/night average

Adult Sleep Clinic (2022-2024):

- Trial 1: 12 months with desensitization protocol
- Trial 2: 8 months with family involvement
- Average use: <1 hour/night
- Significant distress with mask

Total documented: 68 months over 8 years

DISE (11/28/2024)

Performed under general anesthesia by Dr. Mark Stevens, ENT

Findings:

- Typical Down syndrome upper airway anatomy
- Macroglossia (large tongue)
- Narrow pharynx
- No complete retropalatal collapse
- Moderate-severe multilevel collapse
- Small tonsils (Grade 1)

Conclusion: Anatomy acceptable for HNS despite Down syndrome features

PHYSICAL EXAMINATION

Height: 5'4" (163 cm) - typical for Down syndrome

Weight: 176 lbs (79.8 kg)

BMI: 30.2 kg/m²

Neck circumference: 16 inches

Down syndrome facial features present

Macroglossia noted

Cooperative with exam

MEDICAL HISTORY

- Down syndrome (Trisomy 21)
- Congenital heart disease (repaired in infancy)
- Hypothyroidism
- GERD
- Mild intellectual disability
- No seizure disorder

PLAN**Plan:**

1. Extensive counseling with family about device
2. Ensure patient/family can manage device
3. May need additional post-op support
4. Consider neuropsych evaluation for compliance ability
5. Schedule follow-up

Sofia Ramirez, MD

Pediatric & Adult Sleep Medicine
12/02/2024