

NORTHERN ARIZONA SLEEP INSTITUTE

Comprehensive Sleep Medicine Center
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Patient:	Susan K. Miller	Insurance:	Medicare
DOB:	12/30/1964	Policy:	3FG-64-892734
Age/Sex:	59 yrs / Female	Visit Date:	12/01/2024
MRN:	NAF-892734	Provider:	Elizabeth Thompson, MD

AUTHORIZATION REQUEST

Procedure Requested: Hypoglossal Nerve Stimulation (HNS)
CPT Code: 64568
Primary Diagnosis: G47.33 - Obstructive sleep apnea, severe
NPI: 5647382910

CLINICAL HISTORY

59-year-old female with severe OSA diagnosed 2017. Significant daytime hypersomnolence affecting quality of life. Motor vehicle accident in 2023 attributed to drowsy driving. Epworth Sleepiness Scale: 18/24 (severe range). Patient works as school teacher and has had multiple incidents of falling asleep during parent conferences.

Patient has exhausted conservative treatments including weight loss attempts, positional therapy, and oral appliance (could not tolerate due to TMJ pain).

POLYSOMNOGRAPHY (11/18/2024)

Parameter	Result	Reference
AHI	44.6 events/hour	<5 normal
RDI	51.2 events/hour	<5 normal
Lowest SpO2	79%	>90% normal
ODI 4%	41.3 events/hour	<5 normal
Central Apnea Index	2.7 (6.1%)	<5 events/hour

Non-supine AHI	27.8 events/hour	-
Sleep Efficiency	68%	>85% normal

CPAP INTOLERANCE DOCUMENTATION

Trial 1 (2017-2019): 26 months

- Multiple masks attempted (nasal, full face, nasal pillows)
- Average use: <2 hrs/night
- Discontinued: Claustrophobia, panic attacks

Trial 2 (2020-2021): 16 months

- BiPAP therapy with pressure support
- Average use: 1.5 hrs/night
- Discontinued: Aerophagia, mask leak

Trial 3 (2023-2024): 11 months

- APAP with desensitization protocol
- Average use: <1 hr/night
- Discontinued: Persistent intolerance

Total CPAP trial duration: 53 months

DRUG-INDUCED SLEEP ENDOSCOPY (11/24/2024)

Performed by: Dr. James Wilson, Otolaryngology

Findings:

- Velum: Moderate anteroposterior and lateral collapse
- Oropharyngeal lateral walls: Mild-moderate collapse
- Tongue base: Moderate collapse
- Retropalatal airway: Patent, no complete concentric collapse
- Tonsils: Grade 1 (minimal)
- Epiglottis: No collapse

Conclusion: Favorable anatomy for hypoglossal nerve stimulation

PHYSICAL EXAMINATION

Height:	5'6" (168 cm)	Weight:	184 lbs (83.5 kg)
BMI:	29.8 kg/m ²	Neck:	15.5 inches
BP:	128/76	Mallampati:	Class III

COMORBIDITIES

- Hypertension (controlled on amlodipine)
- Hypothyroidism (on levothyroxine)
- GERD (on PPI therapy)
- No neuromuscular disease
- No prior airway surgery

PHYSICIAN ASSESSMENT AND PLAN

Ms. Miller has severe OSA with significant symptoms despite extended CPAP trials totaling over 4 years. DISE demonstrates favorable anatomy for HNS. Given MVA history and occupational impact, treatment is urgent.

Plan:

1. Recommend approval for HNS implantation
2. Pre-operative clearance with cardiology
3. Schedule surgery with ENT within 4 weeks
4. Post-operative device activation at 4 weeks
5. Sleep study for titration at 3 months
6. Long-term follow-up every 6 months

Elizabeth Thompson, MD
Board Certified Sleep Medicine
12/01/2024