

**Standard operating procedures  
for Post-CoVid-19 Re-opening of Sleep Disorders Clinic,  
Department of Neurology, Medical University of Innsbruck**

**In summary**, we have switched our CPAP titration procedure fully to disposable material. For the re-opening of the sleep lab for patients coming with their own CPAP devices, we discourage the use of air humidifiers while the sleep lab, in order to avoid aerosol development and dispersion.

Meanwhile the Department of Neurology has moved to do rapid PCR testing for all patients who are admitted to the Department of Neurology (including sleep lab). As all patients will now undergo testing, this may not be further needed.

**Details (Translated from German)**

In order to effectively reduce the overlong waiting list, in the following four months, exclusively single-night PSG will be performed (if needed with MSLT and MWT).

Because we do not perform split-night examinations, this implies that patients for CPAP adaptation may need to be admitted for a second time.

For the first week of opening, beginning May 4<sup>th</sup>, only patients without any PAP therapy will be admitted.

From May 18<sup>th</sup> onwards, also patients on PAP therapy or for titration can be admitted.

**Polysomnography**

**General Remarks SOP for all patients in the Sleep Lab**

- All patients admitted to the hospital have to fill in a questionnaire and undergo temperature screening before entering the building.
- **All patients admitted for polysomnography are in-patients. All in-patients of the Department of Neurology currently undergo PCR testing for COVID-19. The testing result is available approx.. two hours after sampling.**

**SOP for sleep laboratory patients who are admitted for PAP control with their own PAP device.**

The polysomnography will be performed with the patient's own device, but without using the air humidifier

**SOP for patients who will undergo PAP titration:**

- In patients admission will be performed according to standard regulation of the Medical University Hospital for COVID-19 disease.
- the CPAP titration will be performed with disposable material and without air humidification.
  - Disposable CPAP nasal or facial masks without exhalation Valve
  - Separate exhalation valve (can be re-used after disinfection/ (sterilisation)
  - Disposable virus filter for the CPAP device
  - Disposable PAP hose system

**This makes an additional cost of approx. 50 – 60 Euro per patient and has been approved by the medical direction of the hospital.**

- *Staff in the sleep lab (night and day) will be protected with regular surgical masks, FFP2 are not needed.*

**Further comment:**

After formal approval of these SOP by the medical direction of the hospital and of April, the sleep laboratory and sleep disorder outpatient clinic was visited by representants of the Department of Hygiene and Clinical Microbiology.

According to their recommendations, we would not need to continue with the disposable CPAP masks and hose system in the future, but as it has already been ordered and was approved by the medical direction of the hospital we are now using it.

**Specific cases:**

- In special cases, several sizes of CPAP masks need to be tried on a patient's face before finding the PAP mask, which will be used for CPAP titration: in this case, a regular wipe-disinfection will be acceptable (Department of Hygiene).
- For the situation, when other than disposable masks have been used in a patient for several hours (e.g. mouth breathing, or if patient still complain of discomfort, or is non-compliant) the CPAP provider is willing to process the mask professionally for virus elimination at their production installations.

In addition, the patient's rooms will be regularly disinfected before and after each patient and each polysomnography room is only used by them.

The preparatory interviews before polysomnography will be performed in patient's rooms. Patient's rooms will be cleaned according to amplified to update standard cleaning rules.

**For outpatient clinics:**

Outpatients have been drastically reduced in order to avoid grouping of people in the waiting rooms.

Outpatients can only enter the hospital complex from specific entrances. They have to fill in a questionnaire for COVID symptoms and undergo temperature screening if needed. Any suspected patients will not be allowed to proceed to the outpatient sleep lab. Entrance to the sleep clinic is only possible with the completed questionnaire and temperature measurement. Doors to sleep lab are continuously closed until they are asked to enter by the assistant.

A telemedicine solution was requested by our physicians to offer to patients, but at present this has not been yet solved and executed due to data privacy and software licence issues (there is some telemedicine available, but only for limited for specific diseases, such as suspected strokes and remote but affiliated hospitals).

Phone calls were offered to patients whom we already know.