Epworth Sleep Unit



Camberwell ph: 03 9805 4225 | Richmond ph: 03 9516 2797 | Geelong ph: 03 5271 8422

LISA KNIGHT Dr A Chazan Patient: Physician: Unit Record # 2942227 **Recording Site:** Camberwell Study Date: 23/08/2024 Gender: Female Date of Birth: 6/12/1977 Height: 158 cm Weight: BMI: 31.6 kg/m² 79 kg

MULTIPLE SLEEP LATENCY TEST

Protocol

This polysomnographic procedure is designed to evaluate (1) the complaint of excessive daytime sleepiness by quantifying the time required to fall asleep and (2) the possibility of narcolepsy by checking for abnormally short latencies to REM sleep. Electrographic variables include EEG, EMG, EOG and ECG. Patients are monitored in four or five 20-minute trials (naps) throughout the day. For each nap, the patient is allowed 20 minutes to fall asleep. Between naps, the patient is kept as alert as possible. A sleep latency of 20 minutes indicates that no sleep occurred.

Parametric Analysis

Total Number of Naps		4			
NAP#	Time of Nap	Sleep Latency (mins)	REM Latency (mins)	Sleep Time Percent	Awake Time Percent
1	07:57:34	5.0	-	78.8	21.2
2	09:43:34	14.0	-	55.6	44.4
3	11:36:04	15.5	-	50.8	49.2
4	13:25:34	5.0	-	76.2	23.8
5	-	-	-	-	-

Mean Values for all Naps	
Mean Sleep Latency	9.9
Mean REM Latency	-
Number of REM Episodes	0
Number of Naps with REM Episodes	0

Results from Preceding PSG Study							
Sleep Onset Time	22:36:35	Sleep Efficiency (%)	87.3				
Rise Time	06:41:04	Sleep Latency (min)	13.0				
Total Sleep Time	427.5	REM Latency (min)	204.0				

Robert Giles Sleep Scientist Analysis date: 23/08/2024

Conclusion:

The patient slept in all 4 nap sessions with mean sleep latency 9.9 mins. There were no sleep-onset REM periods.

This result indicates increased sleep propensity.

Dr Adrian Chazan Respiratory & Sleep Physician

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MSLT HYPNOGRAMS

