

F A X**The Law Firm of Puckett &
Faraj, PC****2181 JAMIESON AVENUE, SUITE 1505****ALEXANDRIA, VIRGINIA, 22314****W. 888.970.0005****F. 202.318.7652****WWW.PUCKETTFARAJ.COM****To: Eric S. Montalvo****Fax number: 202.318.7652****From: David Horan****Date: 08 MAY 2010****Regarding:****SLEEP APNEA INFORMATION****Phone number for follow-up:****202.210.7704****Comments:****SLEEP APNEA REFERRAL (Dr Garcia, Cardiologist)****STUDY (Florida Centers of Sleep Medicine)****DIAGNOSIS (Dr Heimer, Primary Care Physician)****MACHINE STASTICS (ResMed, Cumberland Medical)**

HEALTH RECORD**CHRONOLOGICAL RECORD OF MEDICAL CARE**

Patient: HORAN, DAVID JOSEPH
Treatment Facility: NH Jacksonville
Patient Status: Outpatient

Date: 23 Apr 2008 0800 EDT
Clinic: CARDIOLOGY

Appt Type: EST\$
Provider: GARCIA, RONNIE L

Reason for Appointment: F/U ECHO RESULT
Appointment Comments:
ACT

AutoCites Refreshed by GARCIA, RONNIE L @ 23 Apr 2008 1720 EDT

Problems

- red blood in bowel movement (hematochezia)
- palpitations
- ABNORMAL ELECTROCARDIOGRAM
- REFRACTIVE DISORDERS
- visit for: screening exam malignant neoplasm
- POST CARDIAC SURGERY
- Vaccines Prophylactic Need Against Influenza
- OTITIS MEDIA ACUTE
- Aftercare Following Surgery Of Sense Organs
- REFRACTIVE ERROR - MYOPIA
- ASTIGMATISM - REGULAR
- KERATITIS PUNCTATE
- abdominal pain feels crampy / colicky
- Patient Education - Pre-Procedure Teaching
- POST OPERATIVE AORTIC VALVE STATE

Allergies

- No Known Allergies

Active Medications

Active Medications	Status	Sig	Refills Left	Last Filled
Esomeprazole Magnesium Trihydrate 40mg, Capsule, Oral	Active	TI CAP PO QD #60 RF0	NR	18 Apr 2008
Sodium Carboxymethylcellulose 1%, (Refresh Liquigel), Solution, Ophthalmic	Active	INSTILL ONE DROP IN EACH EYE AS NEEDED FOR DRYNESS #1 RF3	1 of 1	05 Mar 2008
AZITHROMYCIN (AZITHROMYCIN), 250MG, TABLET, ORAL, SANDOZ, 6 ea. BLIST PACK	Active		NR	01 Feb 2008

Screening Written by EVERSON, NOVELLA @ 23 Apr 2008 0849 EDT

Allergen information verified by EVERSON, NOVELLA @ 23 Apr 2008 0828 EDT

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Vitals

Vitals Written by EVERSON, NOVELLA @ 23 Apr 2008 0828 EDT

BP: 141/88, HR: 69, RR: 16, T: 97.7 °F, HT: 76 in, WT: 285 lbs, BMI: 34.69, BSA: 2.575 square meters, Tobacco Use: No, Alcohol Use: No, Pain Scale: 0 Pain Free

SO Note Written by GARCIA, RONNIE L @ 23 Apr 2008 1720 EDT

History of present illness

The Patient is a 36 year old male.
Patient is a 36 year old white male here for routine follow. Patient is followed in the cardiology clinic secondary to history of aortic valve replacement. Today patient is here to discuss the results of recent echocardiogram. Again the patient reports exercising with no recurrent symptoms. He denies chest pain or dyspnea on exertion.

Past medical/surgical history

Name/SSN: HORAN, DAVID JOSEPH/528027945

Sex: M
FMP/SSN: 30/580176286
DOB: 07 Mar 1972
PCat: N41 USN FAM MBR AD
MC Status: TRICARE PRIME (ACTIVE DUTY)
Insurance: No

Sponsor/SSN: HORAN, MERLENE V/580176286
Rank:
Unit:
Outpt Rec. Rm: OUTPATIENT RECORDS
PCM: HEIMER, NEAL A
Tel. PCM: (912)573-4267

CHRONOLOGICAL RECORD OF MEDICAL CARE

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STANDARD FORM 600 (REV. 5)
Prescribed by GSA and ICMR
FIRM (41 CFR) 201-45.505

HEALTH RECORD**CHRONOLOGICAL RECORD OF MEDICAL CARE**

23 Apr 2008 0821

Facility: NH Jacksonville, FL Clinic: Cardiology Clinic

Provider: GARCIA, RONNIE L

Reported History:

Medical: Cardiac history.

Family history

No heart disease

No ischemic heart disease.

Review of systems**Cardiovascular symptoms:** No chest pain or discomfort, palpitations without skipped beats, not fast, not irregular, palpitations do not decrease with straining, and not by deep breathing.**Physical findings****Vital signs:**

° Normal.

General appearance:

° Normal.

Lungs:

° Clear to auscultation.

Cardiovascular system:

Jugular Venous Pressure: ° JVP was normal.

Heart Rate And Rhythm: ° Normal.

Heart Sounds: ° Normal.

Murmurs: ° No murmurs were heard.

Edema: ° Not present.

Tests**Laboratory studies:**

Electrocardiogram:

An ECG was normal.

A/P Written by GARCIA, RONNIE L @ 23 Apr 2008 1729 EDT**1. POST OPERATIVE AORTIC VALVE STATE** 36 year-old white male status post aortic valve replacement with a bioprosthetic valve. Recent echocardiogram demonstrates normal prostatic valve function. Patient remains asymptomatic. Will schedule him for a sleep study secondary to positive symptoms. Otherwise will not change

Consult(s):

-Referred To: SLEEP STUDY NET NHJ (Routine) Specialty: Clinic: NEUROLOGY Primary Diagnosis: POST OPERATIVE AORTIC VALVE STATE

Disposition Written by GARCIA, RONNIE L @ 23 Apr 2008 1729 EDT**Released w/o Limitations****Follow up:** as needed with PCM.**Discussed:** Diagnosis, Medication(s)/Treatment(s), Alternatives, Potential Side Effects with Patient who indicated understanding.**Administrative Options:** Consultation requested

20 minutes face-to-face/floor time. >50% of appointment time spent counseling and/or coordinating care.

Signed By GARCIA, RONNIE L (Physician, NH Jacksonville, FL) @ 23 Apr 2008 1729**Name/SSN: HORAN, DAVID JOSEPH/528027945**

Sex: M

Sponsor/SSN: HORAN, MERLENE V/580176286

FMP/SSN: 30/580176286

Tel H: 912-729-7274

Rank:

DOB: 07 Mar 1972

Tel W:

Unit:

PCat: N41 USN FAM MBR AD

CS:

Outpt Rec. Rm: OUTPATIENT RECORDS

MC Status: TRICARE PRIME (ACTIVE DUTY)

Status:

PCM: HEIMER, NEAL A

Insurance: No

Tel. PCM: (912)573-4267

CHRONOLOGICAL RECORD OF MEDICAL CARE

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FIRM (41 CFR) 201-45.505

OUTPATIENT REPORT

Patient: HORAN, DAVID J
Facility: NH Jacksonville, FL

Date: 12 Aug 2008

Clinician: HEIMER, NEAL A



INTERPRETATION

PATIENT: HORAN, David ID# 083683 SSN: 000-00-7945

DATE OF STUDY: 7/31/08 DOB: 3/07/72

ORDERING PHYSICIAN: Ronnie Garcia, MD (fax: 542-9171)

PRIMARY CARE PHYSICIAN: Ronnie Garcia, MD (fax: 542-9171)

INTERPRETING PHYSICIAN: MS Rothstein, MD, FCCP, DABSM
Diplomat, American Board of Sleep Medicine

CORPORATE OFFICE

P.O. BOX 100

ORANGE PARK, FL 32067

LOCATIONS

JACKSONVILLE

7807 Baymeadows Rd E Ste 100

Jacksonville, FL 32216-9666

La Villa Plaza

425 North Lee Street, Suite 100

Jacksonville, FL 32204

Mandarin Medical Plaza

2700 San Juan Blvd Bldg 4, Ste 7

Jacksonville, FL 32207

ORANGE PARK

1400 Kingsley Avenue

Orlando, FL 32814

Orange Park, FL 32067

FLEMING ISLAND

1670 Eagle Harbor Pkwy E Ste A

Orange Park, FL 32067

BEACHES

The Links at Jax, Bch

1161 1st Avenue South Ste 101

Jacksonville Beach, FL 32250

Phone: 904-242-1111

Fax: 904-242-1111

LOCATION: The Florida Centers of Sleep Medicine

PROCEDURE: CPAP Titration

INDICATION FOR STUDY: Sleep apnea documented on a 6/12/08 study with an Apnea/Hypopnea Index of 12, supine 90, REM 18, arousal index 13, PLM index 20

ICD-9 CODE: 278.01

PATIENT INFORMATION:

36 year old, 76", 276 pound male, BMI 33.6, neck circumference 45 cm

PROCEDURE: The patient underwent a standard polysomnographic montage following the Florida Centers of Sleep Medicine protocol. The patient experienced a normal hook up. Ambien CR 12.5 mg self administered at 2130. He was fit with a medium Swift mask at 4 cm. Calibrations were completed, lights out occurred at 2314.

RESULTS:

Total recording time: 396 minutes. Sleep latency: 2 minutes. REM latency: 153 minutes. Sleep efficiency: 93%. Total sleep time: 6.1 hours.

Sleep distribution: 4% stage 1; 61% stage 2; 20% stage Delta; 16% stage REM.

CPAP was titrated in a stepwise fashion to a final pressure of 7 cm maintained for 266 minutes, associated with 246 minutes sleep, an Apnea/Hypopnea index of 5, an arousal index of 11 including supine REM. Snoring was eliminated and oxygenation was well maintained.

The overall arousal index was 13. PLM activity was elevated at 34. No dysrhythmias were noted. Review of the sleep hypnogram shows dense PLM activity during the first third of the study night with delayed but normal REM stage progression.

30/6/08
PCM
Heimer

Name: HORAN, DAVID J
FMP/SSN: 30/528-02-7945
DOB: 07 Mar 1972
PCat: N41 USN FAM MBR AD

Sex: M
Tel H: (912)-729-7274
Tel W:

Sponsor/SSN: HORAN, MERLENE V. V/580-17-6286
Rank: LIEUTENANT COMMANDER
Unit: 7300960

PCM: HEIMER, NEAL A
Tel. PCM: 479-2685

OUTPATIENT REPORT

Patient: HORAN, DAVID J
Facility: NH Jacksonville, FL

Date: 12 Aug 2008

Clinician: HEIMER, NEAL A

Page 2

RE: Horan, David

DOS: 7/31/08

On the morning questionnaire the patient felt his sleep was better than usual and rated himself a 2/7 on the Stanford Sleepiness Scale.

LABORATORY IMPRESSION:

1. Adequate study judged by a sleep efficiency of 93% aided by Ambien.
2. Short sleep and slightly prolonged REM latency.
3. Successful CPAP titration evidenced by elimination of snoring, normalization of respiratory and arousal indexes, maintenance of adequate oxygenation and subjective improvement of the sleep experience.

RECOMMENDATIONS:

The patient should undergo a trial of CPAP therapy at 7 cm with heated humidification and expiratory pressure release using a medium Swift mask. Clinical follow up in two to three weeks to judge efficacy and compliance is recommended.

This document has been electronically signed.

MS Rothstein, MD, FCCP, DABSM

Diplomat, American Board of Internal Medicine

Diplomat, American Board of Pulmonary Diseases

Diplomat, American Board of Sleep Medicine

MSR/H

Name:	HORAN, DAVID J	Sex:	M	Sponsor/SSN:	HORAN, MERLENE V, V/580-17-6286
FMP/SSN:	30/528-02-7945	Tel H:	(912)-729-7274	Rank:	LIEUTENANT COMMANDER
DOB:	07 Mar 1972	Tel W:		Unit:	7300960
PCat:	N41 USN FAM MBR AD			PCM:	HEIMER, NEAL A
				Tel. PCM:	479-2685

HEALTH RECORD**CHRONOLOGICAL RECORD OF MEDICAL CARE**

Patient: HORAN, DAVID JOSEPH
Treatment Facility: NBHC KINGS BAY
Patient Status: Outpatient

Date: 12 Aug 2008 0934 EDT
Clinic: KB FAMILY PRACTICE

Appt Type: T-CON*
Provider: HAWKINS, KATHRYN G (KB)

Reason for Telephone Consult: f/up on sleep study recd per dr heimer

Appointment Comments:

Notes Entered by: HAWKINS, KATHRYN G 12 Aug 2008 0934

call to ensure patient has cpap (DME) as per sleep study rec

AutoCites Refreshed by HAWKINS, KATHRYN G @ 12 Aug 2008 0935 EDT**Problems**

- red blood in bowel movement (hematochezia)
- palpitations
- ABNORMAL ELECTROCARDIOGRAM
- REFRACTIVE DISORDERS
- visit for: screening exam malignant neoplasm
- POST CARDIAC SURGERY
- OTITIS MEDIA ACUTE
- REFRACTIVE ERROR - MYOPIA
- ASTIGMATISM - REGULAR
- KERATITIS PUNCTATE
- abdominal pain feels crampy / colicky
- POST OPERATIVE AORTIC VALVE STATE
- Overweight
- PREHYPERTENSION

Allergies

- No Known Allergies

Active Medications

Active Medications	Status	Sig	Refills Left	Last Filled
AMOXICILLIN TRIHYDRATE, 500MG, CAPSULE, ORAL	Active	4 PO 1 HOUR PRIOR TO PROCEDURE #4 RF2	2 of 2	15 May 2008
Sodium Carboxymethylcellulose 1%, (Refresh Liquefil), Solution, Ophthalmic	Active	INSTILL ONE DROP IN EACH EYE AS NEEDED FOR DRYNESS #1 RF3	1 of 1	05 Mar 2008
AZITHROMYCIN (AZITHROMYCIN), 250MG, TABLET, ORAL, SANDOZ, 6 ea. BLIST PACK	Active		NR	01 Feb 2008

Questionnaire AutoCites Refreshed by HAWKINS, KATHRYN G @ 12 Aug 2008 0935 EDT**Questionnaires**

No Questionnaires Found.

A/P Written by HAWKINS, KATHRYN G @ 13 Aug 2008 1200 EDT**1. visit for: refer patient without exam or treatment**

Consult(s): -Referred To: DURABLE MED EQUIPT NET KB (Routine) Specialty: Clinic: KB HMHS CONTRACTOR
Primary Diagnosis: sleepapnea Order Date: 08/13/2008 12:00 Ordered By: HAWKINS, KATHRYN G
Ordering Provider: HEIMER, NEAL A

Disposition Written by HAWKINS, KATHRYN G @ 13 Aug 2008 1203 EDT

Follow up: as needed with PCM.

Administrative Options: Consultation requested

Note (Draft) Written by HAWKINS, KATHRYN G @ 13 Aug 2008 1524 EDT

Name/SSN: HORAN, DAVID JOSEPH/528027945

FMP/SSN: 30/580176286
DOB: 07 Mar 1972
PCat: N41 USN FAM MBR AD
MC Status: TRICARE PRIME (ACTIVE DUTY)
Insurance: No

Sex: M
Tel H: 912-729-7274
Tel W:
CS:
Status:

Sponsor/SSN: HORAN, MERLENE V/580176286
Rank:
Unit:
Outpt Rec. Rm: OUTPATIENT RECORDS
PCM: HEIMER, NEAL A
Tel. PCM: (912)573-4267

CHRONOLOGICAL RECORD OF MEDICAL CARE
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FIRM (41 CFR) 201-45.505

HEALTH RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

12 Aug 2008 0934

Facility: NH Jacksonville, FL Clinic: Kings Bay Family Practice

Provider: HAWKINS, KATHRYN G

PHYSICIAN PRESCRIPTION FOR DURABLE MEDICAL EQUIPMENT

Original Prescription

Period of Medical Necessity: Indefinite or Months From: 8/14/08 Through: 2/14/08

Patient Information:

Name: HORAN, DAVID Sponsor SSN: 30/580-17-6286

Address: 104 BRYCE Ryan Cir

City: Kings Land State: GA Zip: 31548

Phone Number: 912 729-7274 DOB: 07 Mar 1972 Age: 36

Insurance: Tricare Prime or Non-Prime (check one)

Medical Information

Diagnosis: apnea (sleep)

Equipment Prescribed: Please specify the least expensive item that will meet the patient's medical needs.

CPAP with Heated Humidification
Medium Swift mask / TUBING

Address:

Naval Branch Health Clinic
881 USR James Madison Rd, Kings Bay, GA 31547
Phone: (912)573-4215

P.O.C. Counsel Tracker Office

Phone: (912)573-3633

Fax: (912)573-2887

N.A. Heimer
CVR MC 3002558
AFS 140200044

Physician Signature

Date: 13 Aug 08

Sign & Stamp

Note Written by HAWKINS, KATHRYN G @ 13 Aug 2008 1202 EDT

spoke to patient, does not have any supplies nor cpap, will order cpap as per sleep study recd and per pcm rec

Note Written by HAWKINS, KATHRYN G @ 13 Aug 2008 1050 EDT

message left for patient to rtn call in regard to DME, awaiting rtn call

Note Written by HAWKINS, KATHRYN G @ 12 Aug 2008 0938 EDT

message left for patient to rtn call to clinic

Note Written by HAWKINS, KATHRYN G @ 12 Aug 2008 0935 EDT

see clinical notes for interpretation of sleep study results

Name/SSN: HORAN, DAVID JOSEPH/528027945

Sex: M

Sponsor/SSN: HORAN, MERLENE V/580176286

FMP/SSN: 30/580176286

Tel H: 912-729-7274

Rank:

DOB: 07 Mar 1972

Tel W:

Unit:

PCat: N41 USN FAM MBR AD

CS:

Outpt Rec. Rm: OUTPATIENT RECORDS

MC Status: TRICARE PRIME (ACTIVE DUTY)

Status:

PCM: HEIMER, NEAL A

Insurance: No

Tel. PCM: (912)573-4267

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HEALTH RECORD**CHRONOLOGICAL RECORD OF MEDICAL CARE**

12 Aug 2008 0934

Facility: NH Jacksonville, FL Clinic: Kings Bay Family Practice

Provider: HAWKINS, KATHRYN G

Signed By HAWKINS, KATHRYN G (NURSE, KINGS BAY FP) @ 13 Aug 2008 1525**Name/SSN: HORAN, DAVID JOSEPH/528027945**

FMP/SSN: **30/580176286** Sex: **M**
DOB: **07 Mar 1972** Tel H: **912-729-7274**
PCat: **N41 USN FAM MBR AD** Tel W:
MC Status: **TRICARE PRIME (ACTIVE DUTY)** CS:
Insurance: **No** Status:

Sponsor/SSN: **HORAN, MERLENE V/580176286**
Rank:
Unit:
Outpt Rec. Rm: **OUTPATIENT RECORDS**
PCM: **HEIMER, NEAL A**
Tel. PCM: **(912)573-4267**

CHRONOLOGICAL RECORD OF MEDICAL CARE

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FIRMR (41 CFR) 201-45.505

HEALTH RECORD**CHRONOLOGICAL RECORD OF MEDICAL CARE**

Patient: **HORAN, DAVID JOSEPH**
 Treatment Facility: **NBHC KINGS BAY**
 Patient Status: **Outpatient**

Date: **28 Aug 2008 1455 EDT**
 Clinic: **KB FAMILY PRACTICE**

Appt Type: **T-CON***
 Provider: **HAWKINS, KATHRYN G (KB)**

Reason for Telephone Consult: still needs cpap, referred to Cumberland Medical

AutoCites Refreshed by HAWKINS, KATHRYN G @ 28 Aug 2008 1457 EDT

Problems

- red blood in bowel movement (hematochezia)
- palpitations
- ABNORMAL ELECTROCARDIOGRAM
- REFRACTIVE DISORDERS
- visit for: screening exam malignant neoplasm
- POST CARDIAC SURGERY
- OTITIS MEDIA ACUTE
- REFRACTIVE ERROR - MYOPIA
- ASTIGMATISM - REGULAR
- KERATITIS PUNCTATE
- abdominal pain feels crampy / colicky
- POST OPERATIVE AORTIC VALVE STATE
- Overweight
- PREHYPERTENSION
- abdominal pain
- visit for: refer patient without exam or treatment
- visit for: administrative purpose

Allergies

- No Known Allergies

Active Medications

Active Medications	Status	Sig	Refills Left	Last Filled
AMOXICILLIN TRIHYDRATE, 500MG, CAPSULE, ORAL	Active	4 PO 1 HOUR PRIOR TO PROCEDURE #4 RF2	2 of 2	15 May 2008
Sodium Carboxymethylcellulose 1%, (Refresh Liquigel), Solution, Ophthalmic	Active	INSTILL ONE DROP IN EACH EYE AS NEEDED FOR DRYNESS #1 RF3	1 of 1	05 Mar 2008
AZITHROMYCIN (AZITHROMYCIN), 250MG, TABLET, ORAL, SANDOZ, 6 ea. BLIST PACK	Active		NR	01 Feb 2008

Questionnaire AutoCites Refreshed by HAWKINS, KATHRYN G @ 28 Aug 2008 1457 EDT

Questionnaires

No Questionnaires Found.

A/P Written by HAWKINS, KATHRYN G @ 28 Aug 2008 1519 EDT

1. visit for: administrative purpose: faxed copy of dme rx and sleep study to cumberland med

Disposition Written by HAWKINS, KATHRYN G @ 28 Aug 2008 1519 EDT

Follow up: as needed with PCM.

Signed By HAWKINS, KATHRYN G (NURSE, KINGS BAY FP) @ 28 Aug 2008 1520

Name/SSN: HORAN, DAVID JOSEPH/528027945

FMP/SSN: **30/580176286**
 DOB: **07 Mar 1972**
 PCat: **N41 USN FAM MBR AD**
 MC Status: **TRICARE PRIME (ACTIVE DUTY)**
 Insurance: **No**

Sex: **M**
 Tel H: **912-729-7274**
 Tel W:
 CS:
 Status:

Sponsor/SSN: **HORAN, MERLENE V/580176286**
 Rank:
 Unit:
 Outpt Rec. Rm: **OUTPATIENT RECORDS**
 PCM: **HEIMER, NEAL A**
 Tel. PCM: **(912)573-4267**

CHRONOLOGICAL RECORD OF MEDICAL CARE

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*Accredited by
The American Academy
of Sleep Medicine*

Phone:
1-904-215-7556
1-877-757-9355
Fax:
1-904-215-7557

ADMIN. OFFICES

Park Professional Complex
1409 Kingsley Avenue
Bldgs 2 & 4
Orange Park, FL 32073

Mailing Address:
P O Box 2183
Orange Park, FL 32067

FACILITIES:

ORANGE PARK:

**Fleming Island
Medical Plaza II**
1679 Eagle Harbor Pkwy E
Suite A
Orange Park, FL 32003

JACKSONVILLE:

Hampton Professional Park
7807 Baymeadows Rd E
Suite 202
Jacksonville, FL 32256-9666

La Villa Plaza
425 North Lee Street
Suite 204
Jacksonville, FL 32204

Mandarin Medical Plaza
9759 San Jose Blvd
Bldg 2, Suite 7
Jacksonville, FL 32257

BEACHES:

The Links at Jax Beach
1361 13th Avenue South
Suite 115
Jacksonville Beach, FL 32250

THE FLORIDA CENTER OF SLEEP MEDICINE

FAX TRANSMITTAL COVER SHEET

TO: _____

ATTN: _____

FAX NUMBER: _____

FROM: _____

DATE: _____

RE: *Sleep Study Report*

PAGES (INCLUDING COVER): _____

COMMENTS: _____

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CORPORATE OFFICE

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ORANGE PARK, FL 32067

LOCATIONS

JACKSONVILLE:

7807 Baymeadows Rd E Ste 202

Jacksonville, FL 32256-9666

La Villa Plaza

425 North Lee Street Suite 20A

Jacksonville, FL 32204

Mandarin Medical Plaza

9759 San Jose Blvd Bldg 2, Ste 7

Jacksonville, FL 32257

ORANGE PARK

1409 Kingsley Avenue

Bldgs 1 & 4

Orange Park, FL 32073

FLEMING ISLAND

1679 Eagle Harbor Pkwy E Ste A

Orange Park, FL 32003

BEACHES

The Links at Jax Bch

1362 53rd Avenue South Ste 215

Jacksonville Beach, FL 32250

Phone: 1-904-216-7558

Or: 1-877-757-9366

Fax: 1-904-216-7557

INTERPRETATION

PATIENT: HORAN, David **ID#:** 083683 **SSN:** 000-00-7945

DATE OF STUDY: 7/31/08

DOB: 3/07/72

ORDERING PHYSICIAN: Ronnie Garcia, MD (fax: 542-9171)

PRIMARY CARE PHYSICIAN: Ronnie Garcia, MD (fax: 542-9171)

INTERPRETING PHYSICIAN: MS Rothstein, MD, FCCP, DABSM
Diplomat, American Board of Sleep

Medicine

LOCATION: The Florida Centers of Sleep Medicine

PROCEDURE: CPAP Titration

INDICATION FOR STUDY: Sleep apnea documented on a 6/12/08 study with an Apnea/Hypopnea Index of 12, supine 90, REM 18, arousal index 13, PLM index 20

ICD-9 CODE: 278.01

PATIENT INFORMATION:

36 year old, 76", 276 pound male, BMI 33.6, neck circumference 45 cm

PROCEDURE: The patient underwent a standard polysomnographic montage following the Florida Centers of Sleep Medicine protocol. The patient experienced a normal hook up. Ambien CR 12.5 mg self administered at 2130. He was fit with a medium Swift mask at 4 cm. Calibrations were completed, lights out occurred at 2314.

RESULTS:

Total recording time: 396 minutes. Sleep latency: 2 minutes. REM latency: 153 minutes. Sleep efficiency: 93%. Total sleep time: 6.1 hours.

Sleep distribution: 4% stage 1; 61% stage 2; 20% stage Delta; 16% stage REM.

CPAP was titrated in a stepwise fashion to a final pressure of 7 cm maintained for 266 minutes, associated with 246 minutes sleep, an Apnea/Hypopnea Index of 5, an arousal index of 11 including supine REM. Snoring was eliminated and oxygenation was well maintained.

The overall arousal index was 13. PLM activity was elevated at 34. No

Page 2

RE: Horan, David

DOS: 7/31/08

On the morning questionnaire the patient felt his sleep was better than usual and rated himself a 2/7 on the Stanford Sleepiness Scale.

LABORATORY IMPRESSION:

1. Adequate study judged by a sleep efficiency of 93% aided by Ambien.
2. Short sleep and slightly prolonged REM latency.
3. Successful CPAP titration evidenced by elimination of snoring, normalization of respiratory and arousal indexes, maintenance of adequate oxygenation and subjective improvement of the sleep experience.

RECOMMENDATIONS:

The patient should undergo a trial of CPAP therapy at 7 cm with heated humidification and expiratory pressure release using a medium Swift mask. Clinical follow up in two to three weeks to judge efficacy and compliance is recommended.

This document has been electronically signed.

MS Rothstein, MD, FCCP, DABSM

Diplomat, American Board of Internal Medicine
Diplomat, American Board of Pulmonary Diseases
Diplomat, American Board of Sleep Medicine
MSR/jj

D: 08/05/08 T: 08/05/08

Copy: Ronnie Garcia, MD (fax: 542-9171)

Statistics

9/4/2008 - 5/4/2010**Device Settings**

Therapy Mode: CPAP

Set Pressure: 7.4 cmH2O

EPR Mode: FULLTIME

EPR Level: 2.0 cmH2O

Pressure - cmH2O

Median: 6.0

Maximum: 7.4

Leak - L/min

Median: 12.0

95th Percentile: 25.2

Maximum: 54.0

AHI & AI - Events/hr

Apnea index: 0.1

AHI: 3.3

% Time in Apnea: 0.0

Hypopnea index: 3.2

UsageUsed Days \geq 4 hrs : 204

Used Days < 4 hrs : 1

% Used Days \geq 4 hrs : 33

Days not used: 403

Total days: 608

Median daily usage: 7:42

Total hours used: 1613:37

Average daily usage: 2:39

ResScan
SOFTWAREPatient ID:
Date of Birth: 7 March 1972
Report prepared by: CME on 5/4/2010 at 4:28 PM

Patient Profile

Patient Information

Patient Name: Mr David Horan
Patient ID:
Date of Birth: 7 March 1972 Age: 38
Gender: Male

Contact Details

Address: 104 BRYCE RYAN CIR., KINGSLAND, GA
Telephone Numbers: 202-210-7704
E-Mail:

Insurance

Insurance Carrier: TRICARE Membership Number: Member Since: 10/3/2008

Doctor

Treating Doctor: DR. NEAL HEIMER Clinic: NAVAL BRANCH CLINIC KINGSBAY
Referring Doctor: DR. NEAL HEIMER Clinic:

Equipment Information

Flow Generator: RESMED ELITE II	Flow Generator Serial Number:	Owner: Yes
	Flow Generator Software Version:	
Humidifier: 3I	Humidifier Serial Number:	Owner: Yes
Data Module:	Data Module Serial Number:	Owner: Yes
	Data Module Software Version:	
Mask: SWIFT		
Data Card: Yes		