

Tools for Interpretation and Final Reports

AASM V 2.0* Compliant - Profusion Sleep4 meets the latest AASM scoring rules.

*AASM Manual for the Scoring of Sleep and Associated Events, Version 2.0.3 (at time of release)

Allows expanded reporting for hypopneas including:

- Hypopneas meeting the new AASM rule of a 3% desaturation or an arousal
- Hypopneas meeting the traditional Medicare rule of a 4% desaturation
- Hypopneas meeting your traditional lab rule
- New report codes allow reporting of AASM, Medicare, and/or traditional hypopneas for numeric or chronological bi-level pressure treatment.

Totally Redesigned Ribbon Bar User Interface

The software has been redesigned to use the popular intuitive ribbon bar menu user interface, replacing the traditional menu and toolbar.

Related functions are now organized in logical groups - making them easier to find.

My Workspaces

Each individual can customize up to four workspaces, which allow the user to maximize the screen layout for optimum viewing of essential data. Have waveform data, trends, hypnogram, digital video, and other data windows easily accessible.

Polysomnography Reports

Customize your reports using the many tools available in MS WORD, including logos, drop downs, and tables.

Polysomnography Report



Study Information

PT: Sample, Patient	Study Type: Treat PSG
Sex: Female	Study Date: 8/2/2013
DOB: 9/4/1960	Hospital #: 7654730
Age: 52	Refer. Phys: Paul Peters, M.D.
Height: 5'4"	Sleep Spec.: James Wilson, MD
Weight: 170	Recording Tech: D. Jones
B.M.I.: 29.2	Scoring Tech: M. Cummings

Methodology: The patient underwent a digital polysomnography study using the Compumedics Grael PSG system with Profusion scoring software. Electroencephalogram, electro-oculogram, electromyogram, electrocardiogram, respiratory effort, nasal and oral airflow, nasal pressure, leg movement, body position, pulse oximetry, sound and video were simultaneously recorded. The data was adequate for interpretation and the raw data was reviewed in its entirety. Scoring was based on the Recommended Standards and Specifications as outlined in the AASM Manual for the Scoring of Sleep and Associated Events, Version 2.0.

Staging Summary Information

Lights Out Time: 21:37:17	Lights On Time: 05:12:48
Total Recording Time (TRT): 397.0 min	Total Sleep Time: 322.0 min
Wake Time After Sleep Onset: 36.0 min	Sleep Efficiency: 81.1%
Sleep Onset Latency: 90.0 min	Stage REM Latency: 72.0 min

Staging Table

Sleep Stage	Duration (min)	% Sleep Time
Wake during sleep period	36.0	
Stage N1 Sleep	28.5	8.9
Stage N2 Sleep	204.5	63.5
Stage N3 Sleep	36.0	11.2
Stage REM	53.0	16.5

Treatment Statistics

CPAP/ BiLevel	IPAP Min	IPAP Max	EPAP Min	EPAP Max	Pres Sup	Other Param.	Total Sleep Time (min)	Total Time (min)	NREM Time (min)	REM Time (min)	# HYP	# CA	# OA	# MA	AHI	# RERA	RDI
0/0/0	0	5	8	16	0	Rise Time = 2, RR = 12	61.0	61.0	61.0	0.0	0	13	0	0	12.8	0	12.8
4/7/0	0	5	8	16	0	Rise Time = 2, RR = 12	98.0	100.0	72.0	26.0	0	14	0	0	8.6	0	6.7
3/8/1	0	5	8	16	0	Rise Time = 2, RR = 10	32.0	32.0	32.0	0.0	0	2	0	0	3.8	0	3.8
3/9/2	0	3	8	16	2		1.5	1.5	1.5	0.0	0	0	0	0	0.0	0	0.0
4/10/2	0	5	8	16	0		0.5	0.5	0.5	0.0	0	0	0	0	0.0	0	0.0

Respiratory Events Summary

Parameter	Obstructive	Mixed	Central	Hypopnea AASM ¹	Hypopnea CMS ²	RERA
Number in Sleep	13	5	38	56	27	0
Index (per hour)	2.4	0.9	7.1	10.4	5.0	0.0
Avg. Dur. (sec)	18	19	16	21.0	19.9	0
Number in NREM	10	5	37	44	20	0
Number in REM	3	0	1	12	7	0

Respiratory Events - REM/NREM

Parameter	REM	NREM	Sleep
Apneas	4	52	56
Hypopneas-AASM ¹	12	44	56
Hypopneas-CMS ²	7	20	27
Apneas + Hypopneas-AASM ¹	16	96	112
Apneas + Hypopneas-CMS ²	11	72	83
RERA's	0	0	0
AHI-AASM (1/hr) ³	18.1	21.4	20.9
AHI-CMS (1/hr) ⁴	12.5	16.1	15.5
RDI (1/hr) (includes all apneas, hypopneas and RERA's)	23.8	28.6	27.8

Respiratory Events Index (1/hr) by Position (sleep time)

	Obstructive	Mixed	Central	Hypop. AASM	Hypop. CMS	RERA
Index Supine	2.2	2.7	20.0	20.5	9.2	0.0
Index Non-Supine	2.6	0.0	0.3	5.1	2.8	0.0

¹ Hypopneas with ≥ 3% desaturation or an arousal.

² Hypopneas with ≥ 4% desaturation.

³ Includes apneas plus hypopneas with ≥ 3% desaturation or an arousal.

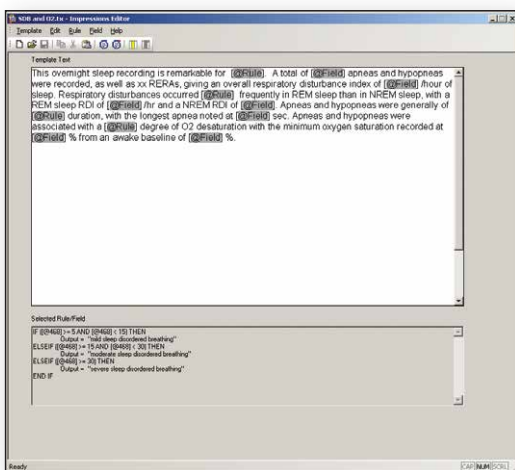
⁴ Includes apneas plus hypopneas with ≥ 4% desaturation.

New Reporting Features Include:

- Expanded reporting for Hypopneas
- Report expanded parameters for ASV
- Added analysis and reporting support for Esophageal Pressure Monitoring (Pes)
- Cyclic Alternating Pattern (CAP) scoring and reporting
- Split-night reports

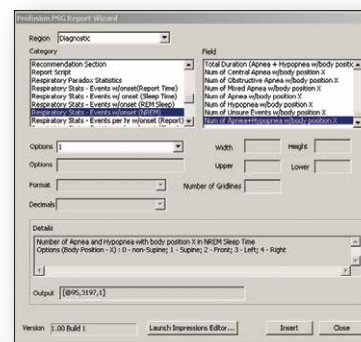
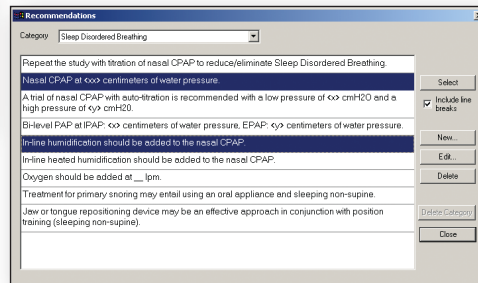
Create Reports exactly as you want them,
incredibly quickly and easily.

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Automatic Narrative Interpretations

(optional) - A significant time-saving for interpreting physicians. The Impressions Editor applies user-defined rules to automatically generate the desired interpretation of the numbers, e.g. severity of OSA dependent on the AHI or RDI.



Report Template Wizard -

It's never been so easy to have report templates customized to your exact requirements. The Report Template Wizard is an MS Word plug-in that allows searches for the description of any one of literally thousands of possible statistics - to be used any way you wish.

Quick Insertion Of Recommendations -

More time saved for the physician. Simply select one or more user-defined statements from a pre-configured drop-down list. For neXus users there is a two-way dialogue between neXus Service details and the report in Profusion Sleep. Physicians can make interpretations and recommendations in either application with each being automatically updated.

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