



IRISH THORACIC SOCIETY GUIDANCE ON SLEEP SERVICES and CPAP use in OSAS or OHS : SARS COVID-19 INFECTION

V2. 30/03/2020

As community transmission of COVID-19 in Ireland has increased there will be a significant impact on the provision of sleep medicine services. The goal of this guideline is to protect the health and safety of patients and staff by reducing transmission through promotion of physical distancing and other infection prevention and control measures.

Sleep Outpatients:

- Only emergency visits should occur
- Substitute by remote monitoring and Virtual Clinics /Telephone consultation

Infection Control:

- All clinics should follow HSE guidance on hand hygiene and physical distancing as per [HPSC Guidance](#).
- Hand sanitizer to be available to patients in waiting areas. Maintain at 2 metres of distancing between patients where possible.
- Patients and staff to use hand gel before entering and leaving clinic rooms.

PPE use by staff as per local hospital guidance

Communications:

- When clinic visits are postponed ensure that patients can receive help during emergencies
- When sleep studies or clinic visits are postponed/cancelled ensure that continuity of care can be restored once COVID -19 precautions are lifted

Sleep Studies:

- Postpone PSG and limited studies for all patients.
- Postpone Home testing unless using only disposable devices.
- Keep the sleep clinic open for phone calls, telemedicine visits, and emergency in-person visits only.

**Reference: [AASM "COVID -19 Mitigation Strategies for Sleep Clinics and Labs"](#)
Updated March 19, 2020 accessed 28/03/2020**

All Practitioners should remember that where a patient has a history of "sleep driving" the driver must be advised of his/her responsibility to cease driving until satisfactory control of symptoms has been obtained. RSA Medical Fitness to Drive Guidelines Chapter 9.

Link: [Sláinte agus Tiomáint Medical Fitness to Drive ... - RSA.ie](#)



Advice for patients using CPAP/BIPAP for OSAS or OHS:

Patients should follow general advice on [HSE website](#)

Continue to use CPAP/ BIPAP at home as normal. To date there is no evidence that CPAP increases risk of COVID-19 or makes the illness worse if you do catch it

Remember however that CPAP/NIV is considered an AGP as per [HPSC guidance](#)

If patient unwell with symptoms suggestive of COVID-19 follow [HSE guidance](#) on household isolation and contact GP with view to swab testing

Theoretically as CPAP may increase viral spread the patient should consider distancing themselves from other vulnerable household contacts

If patient on CPAP is admitted to hospital with confirmed or suspected COVID-19:

Bring your CPAP with you

Do not use CPAP unless in isolation room and hospital staff instructs you to do so

You will need a non-vented mask with a filtered exhalation port in the tubing

Do not use the humidifier (increased droplet spread)