

Improving the Screening Process for Obstructive Sleep Apnea in the Primary Care Setting: A Quality Improvement Project

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Introduction

❖ Obstructive Sleep Apnea (OSA) is a sleep disorder characterized by brief periods of obstructive apnea and hypopnea, as evidenced by the passive collapse of the upper airways during sleep (Kline, 2020)

Background and Significance

- ❖ There is a high prevalence of obstructive sleep apnea (OSA) in 75%-80% of the population in primary care (Aurora & Quan, p. 1185, 2016)
- Untreated OSA has implications for longterm cardiovascular, cerebrovascular, and metabolic health detriments and an increase in cardiac mortality
- There are limitations in the evidence-based research resulting in a deficiency in clinical guidelines supporting OSA screenings among high-risk and asymptomatic populations

Methodology

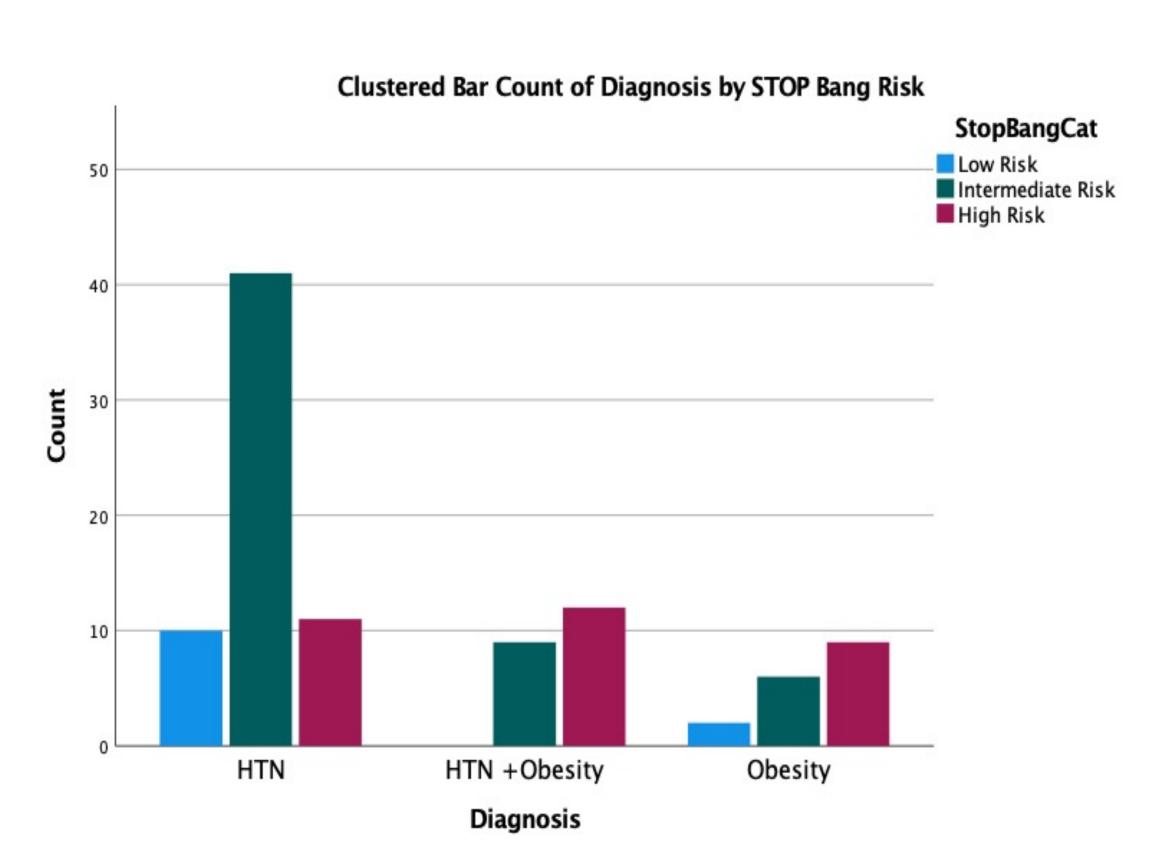
- Project Design: Quality Improvement Project
- **Sample:** Convenience Sample Method
- Setting: Primary Care Practice in Central New Jersey

❖ Measures:

- The STOP-Bang Questionnaire, a validated screening tool, will be used for measuring an individual's level of low, intermediate, or high risk for OSA
- The following measurements will be obtained from participants' including age, gender, body mass index, and neck circumference
- ❖ Data Analysis: Descriptive statistics, frequencies, and percentages with Microsoft Excel and SPSS Version 28

Findings

- ❖ Out of the 100 surveys, 12% (n=12) had STOP Bang scores of 0-2 suggesting a low risk, 56% (n=56) had STOP Bang scores of 3-4 suggesting an intermediate risk, and 32% (n=32) had STOP Bang scores of 5-8 suggesting a high risk for obstructive sleep apnea (OSA)
- ❖ Out of the 32 participants with high risk scores, all (n=32) were referred for a sleep study including 4 additional participants with intermediate scores. Total of 36% (n=36) of participants were referred for diagnostic sleep testing.



Discussion

- ❖ The use of the STOP-Bang Questionnaire among this patient population identified patients with a high level of risk for OSA more effectively and consistently in comparison to clinician judgement alone in this three month time period.
- ❖ 100% of the study population with low, intermediate, or high-risk for OSA after administration of the STOP-Bang Questionnaire was identified
- ❖ 100% of the study population which was identified with a high level of risk for OSA was referred for sleep apnea testing per the provider's discretion as a result of the recommendations from the STOP-Bang Questionnaire was identified

Implications

Implications for Clinical Practice

- Annual screening for OSA among asymptomatic and high-risk populations with hypertension and/or obesity with the STOP-Bang Questionnaire
- Increase the rate of diagnosis of OSA among obese or hypertensive populations

Implications for Healthcare Policy

Mandating annual screening practices for OSA among asymptomatic and high-risk populations with hypertension and/or obesity with the STOP-Bang Questionnaire in primary care practices

Implications for Quality and Safety

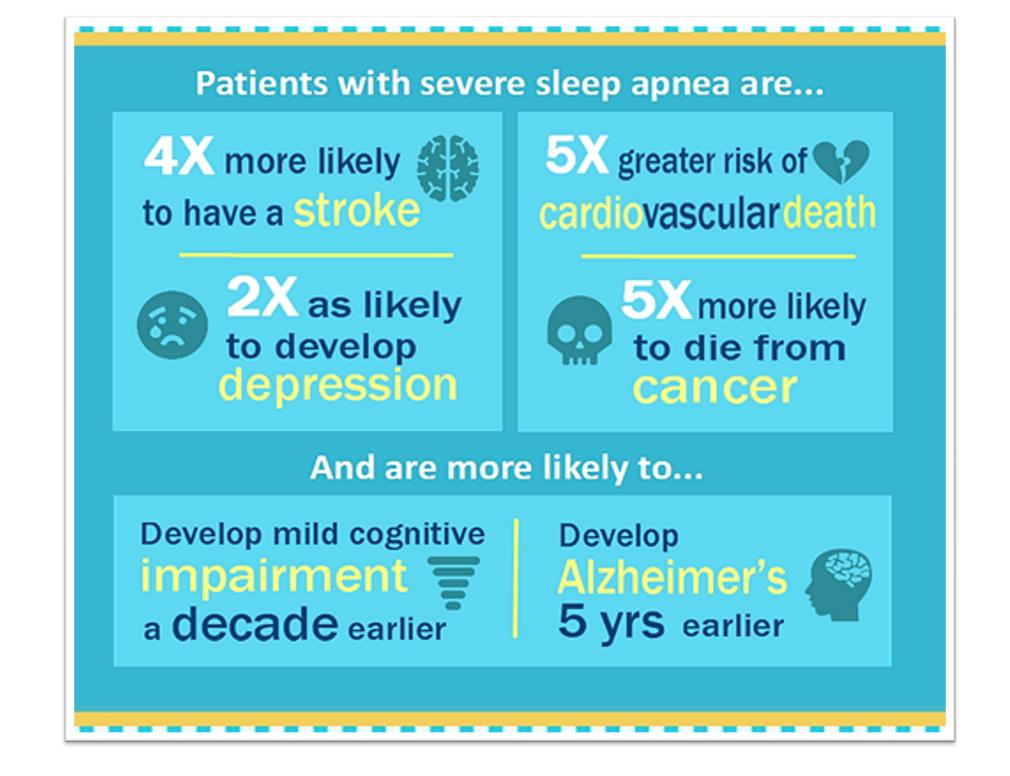
Produce outcomes warranting diagnostic testing for OSA to improve the quality and safety of patient care with minimal risks for patients

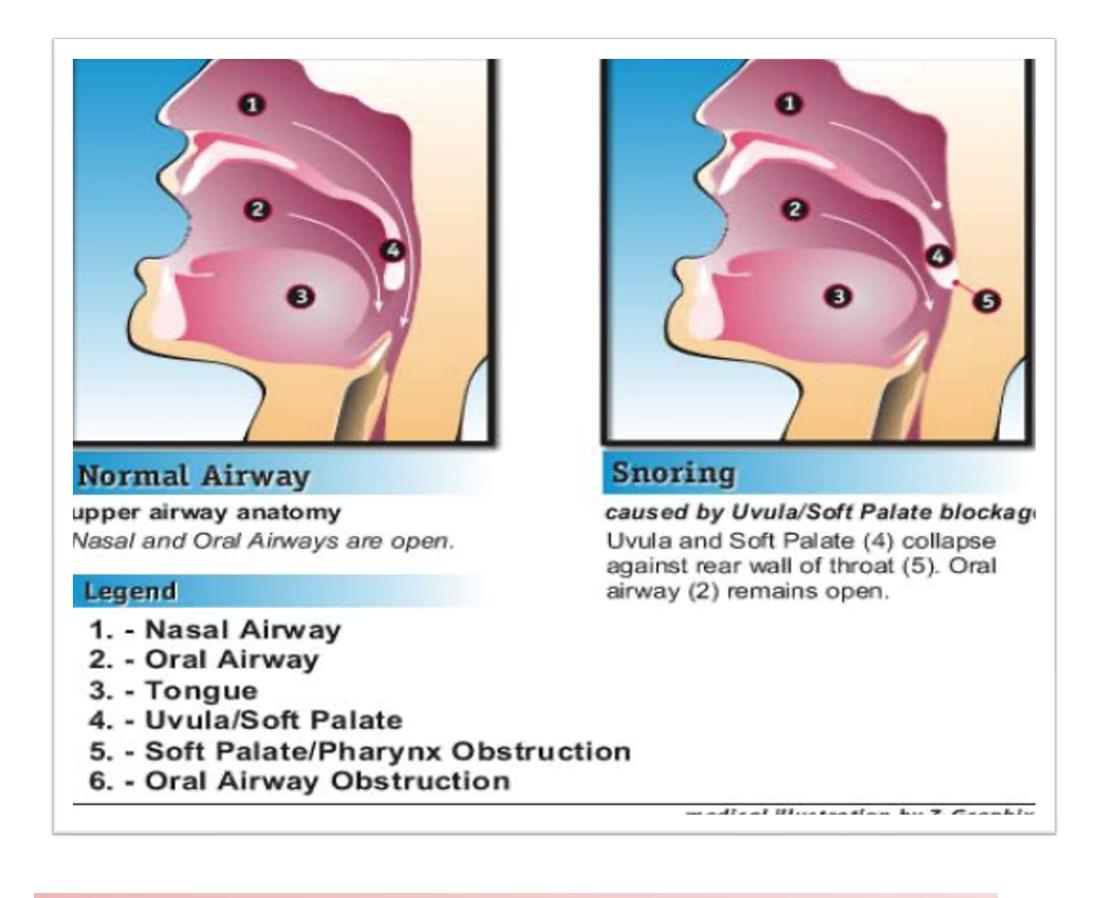
Implications for Education

Education of the high rate of undiagnosed OSA may prompt provider to facilitate screenings for OSA among hypertensive or obese populations without overt symptoms of disease in primary care

Implications for Economics/Cost Benefits

- The STOP-Bang Questionnaire is a convenient and inexpensive screening tool for routine use and access upon integration into a primary care practice's electronic health record
- Patients may may incur costs associated with treatment for OSA





Conclusion

- Evidence-based research suggests an increase in detecting disease, confirmatory testing, treatment plans, and the prevention of cardiovascular mortality with annual screening protocols for all high-risk and asymptomatic patient populations
- ❖ This quality improvement project aimed to facilitate a change in the primary care setting by establishing the feasibility to implement a practice change with an OSA screening protocol for high-risk patients without signs of disease
- This project's outcomes were achieved by improving identification of the level of risk for OSA with an effortless and efficient screening tool and emphasized the repercussions of untreated OSA

References

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