You may use <u>Acrobat Reader</u> to fill out these **Anesthesia/Hospitalization & IH FAQ Cards**. You can click each line to type in your information or Tab to cycle through each form field.

Print multiple copies on bright paper, such as a fluorescent yellow. Take these with you to your procedure/ hospitalization, along with tape, so that you can easily display copies where needed (such as your chart, your bed rail, your hospital room door and/or white board, etc.). It is also a good ideal to share these cards along with the **Guide and your personalized Care Plan**, to provide a very quick overview.

PATIENT NAME:	®
DATE OF BIRTH:	hypersomnia foundation.org

# I have been diagnosed with idiopathic hypersomnia (IH).

## What is idiopathic hypersomnia?

A chronic neurologic disorder that causes excessive, debilitating daytime sleepiness with cognitive dysfunction.

### Why is this important to know?

- Sedating medications can worsen IH symptoms. Alternatives should be considered, whenever possible.
- I may be slower to awaken from anesthesia—"delayed emergence". Alternative approaches to anesthesia may lessen the risk.
- The medications used to treat IH may *significantly* interact with anesthetics or other medications used.
- I may require a specific sleep and medication schedule, with as few interruptions to sleep as possible, to avoid severe sleepiness/cognitive dysfunction that could mimic delirium.
- It may be very difficult to awaken me from sleep, and I may experience severe, prolonged sleep inertia.

Please take these factors into consideration, and carefully review the Guide and personalized Anesthesia/Hospital Care Plan I provided, which details further important information.

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