



SLEEP IMPLANT (HGNS) – CANDIDATE GUIDE

Hypoglossal Nerve Stimulation — Quick Guide

ARE YOU A CANDIDATE?

- Obstructive sleep apnea confirmed by sleep study
- Tried CPAP but not tolerated or not helpful
- Age 18+; BMI within program criteria (surgeon will advise)
- Anatomy suitable on exam/DISE (no complete concentric collapse)
- Able to have outpatient surgery and use a handheld remote

May not be a candidate if:

- Central sleep apnea or hypoventilation is predominant
- Serious, unstable heart/lung disease or bleeding risk
- Pregnancy or planning near-term pregnancy
- MRI needs not compatible with your device model

ABOUT THE PROCEDURE

- Outpatient surgery (small incisions under the jaw and chest)
- A stimulator is placed in the chest with a lead to the tongue nerve
- Most people go home the same day

FOLLOW-UP & SUCCESS

- Device activation ~4–6 weeks after surgery
- Titration and adjustments over 2–3 months (may include an overnight study)
- Ongoing visits every 6–12 months to track results and battery
- Many patients report less snoring and better sleep when used nightly

RISKS & SIDE EFFECTS

- Pain, swelling, bruising; temporary tongue weakness
- Speech or swallow changes; infection or bleeding; scar
- Lead/device problems; may need adjustment or replacement
- MRI & device-interaction limits vary by model — ask your team

NEXT STEPS

- Request a consult / Book Online: <https://med.tc/vw/?r=ujQcJ3>
- Patient Portal: messages, forms, and results
- Questions: (480) 835-7111
- Emergency? Call 911.

Before you decide — evaluation steps

- Visits with sleep physician and ENT surgeon
- Review of sleep study; drug-induced sleep endoscopy (DISE)
- Imaging and pre-op testing as needed
- Insurance preauthorization required by most plans

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