

CHARLES A. DORING, D.D.S., F.A.G.D. Clementina Perez-West, D.D.S. Robert B. Tilkin, D.D.S., M.S., F.A.G.D.

## Dear Patient:

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Your sleep physician has referred you to our office. Your referring physician feels that you might benefit from an oral appliance designed to improve your breathing during sleep by either advancing your lower jaw or by holding your tongue forward. This movement helps to open the airway space, which can reduce snoring and sleep apnea in many cases. We cannot guarantee that this device will be successful for all patients because there are many factors involved in sleep apnea.

Patients who have been diagnosed as having sleep apnea should have routine visits to their physician or sleep disorders center, even after the oral appliance is made. Moderate or severe obstructive sleep apnea is a potentially life threatening disease. Periodic monitoring of this disease is important. The oral sleep apnea appliance does not cure shoring or sleep apnea but is designed to reduce snoring and apneic episodes while it is being worn. If your physician has suggested a change in sleeping position or weight loss then these actions are important, and are to be accomplished <u>in addition</u> to using the oral appliance. It is best to avoid alcohol and hypnotic or sedative drugs within 3-4 hours of going to bed.

Prior to fabrication of any oral appliance, you must have a consultation appointment to evaluate your oral condition as well as to discuss possible choices of treatment. If you require new fillings, crowns (caps), implant placement, root canal therapy, or periodontal (gum) therapy, these procedures should be completed <u>before</u> the appliance is made. Any change in your dentition may require construction of a new device.

The first step may require you to have panoramic and bitewing x-ray pictures taken to determine the size and condition of various oral structures. These films along with diagnostic photographs and a clinical examination will help determine if you can expect to be helped by an oral sleep apnea appliance. Several visits will be required to adjust and fit the appliance and to monitor the comfort and effectiveness of this treatment.

When you come to your initial evaluation appointment, please bring the following items:

- 1. Recent x-ray pictures from your dentist's office (for the previous 3 years or most recent, originals please).
- 2. A copy of your sleep study report and the doctor's referral letter or prescription.
- 3. Any authorization forms that your <u>medical</u> insurer may require for coverage.

If you normally premedicate for a dental appointment then please take your antibiotics as if this were a normal dental appointment. If you are unsure about premedication then



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please contact your primary care physician. If you wear a mouth piece of any sort (orthodontic retainer, night guard, etc.) then please bring it with you to your appointment.

Dental appliances for sleep disorders are not covered by dental insurance. Most medical insurance carriers will have partial coverage for oral appliances to treat obstructive sleep apnea. You may wish to check with your insurer prior to your appointment. Many insurers will use the code "E0486". Our office does not participate with medical insurance. As a matter of fact, dentists in general are not participating providers of medical insurance plans. You will therefore be responsible for the entire fee. We will assist you in completing your insurance forms so that you may obtain coverage directly from your medical insurance carrier. The fees for the clinical examination, diagnostic photographs, oral appliance and monitoring of the effectiveness of treatment range from \$2,375 to \$3,700. The fees will be discussed with you prior to fabricating the appliance.

Please read all enclosures, complete and sign the enclosed forms and bring them with you to your appointment. We will be happy to answer any questions that you may have during one of your appointments in our office.

Sincerely,

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Robert B. Tilkin, D.D.S., M.S., F.A.G.D.