

Dear	
Patient name	

Please evaluate our patient for any form of Sleep/Airway Disordered Breathing. Early intervention in treating these children with sleep/airway disturbance, can also prevent problems with attention, emotional control and other cognitive abilities.

## **Existing Findings**

Obstructed Nasal airway-deviated,
turbinates swollen, nasal valve stenosis,
narrow/retruded
Enlarged Tonsils
Pharyngeal Grade
Enlarged Uvula/long soft palate
High or Narrow Palate
Crossbite
Malocclusion

Short Lingual Frenum
Scalloped Tongue
Tongue Tie
Retrognatic Mandible (Class 2)
Retrognatic Maxilla (Class3)
Malampatti Score >3
Large Neck Size
BMI-obesity
Mouth Breather
Severe Teeth Wear

## **Existing Medical Findings**

ADHD
Multiple Ear infections
Allergies
Autism
Hearing Impairment
Asthma
Acid Reflux

## Other Attached Records

_	
	CBCT or Ceph
	Video of snoring
	Photographs
	Cardiopulmonary Coupling Readings
	High Resolution Pulse Ox
	HST
	Airway Questionnaire
	Office Medical History

## Please Return with Mark Recommended Evaluation

Sleep Evaluation by Pediatric Sleep Center
Adenotonsillectomy
Medical therapy (topical or systemic anti-inflammatory drugs)
Nasal CPAP or BiPAP (before or after surgery depending on residual disease)
Dental Evaluation and Orthodontic Treatment via Functional Oral Appliances/Rapid Palatal
Expansion/Surgery
Frenum Release (labial and/or lingual)
Myofunctional Therapy- Orapharyngeal exercises
Correction of Deviated Septum, Enlarge Turbinate, Collapsed Nasal Cartilage

Maria Pia Villa. Multi-therapeutic Stepwise approach to the phenotypes of pediatric Obstructive Sleep Apnea