Obstructive Sleep Apnea
Supplemental Informed Consent

1. Snoring and Obstructive Sleep Apnea are breathing disorders that occur during sleep due to the narrowing or total closure of the airway. Snoring is a noise created by the partial closure of the airway and may be no more problematic than the noise itself. However, snoring may be indicative of a more serious disorder, Obstructive Sleep Apnea (OSA).

   OSA is a serious condition where the airway totally closes many times during the night and can significantly reduce oxygen levels in the body and disrupt sleep. In varying degrees, this can result in excessive daytime sleepiness, irregular high blood pressure, and increased risk of heart attack and stroke.

2. Because any sleep-disordered breathing may potentially represent a health risk, all individuals are advised to consult with their physician and/or sleep specialist for an accurate diagnosis of their condition.

3. Oral appliances may be helpful in the treatment of snoring and sleep apnea. Those diagnosed with mild or moderate sleep apnea are better candidates for improvement with this therapy than those severely affected. Oral appliances are designed to assist breathing by protruding the mandible, keeping the tongue forward, thereby opening the airway space in the throat.

   While clinical research exists that oral appliances have substantially reduced snoring and sleep apnea for many people, there are no guarantees that this therapy will be successful for every individual. Each person is different and presents with unique circumstances. Oral appliances will not reduce snoring and/or apnea for everyone. Furthermore, some patients may occasionally be unable to tolerate the appliance in their mouth. Also, some individuals may develop temporary adverse side effects such as excessive salivation, sore jaw joints, sore teeth, and a slight change in their bite. However, these usually diminish within an hour after appliance removal. On rare occasions, a permanent bite change may occur, possibly requiring specialized dental care.

4. It is advised that the oral appliance should be checked at least once a year to ensure proper fit and that the mouth and jaw joint be examined at that time to assure a healthy condition. If any unusual symptoms occur, it is recommended that the appliance not be worn until an office visit is scheduled to evaluate the situation. If this occurs, the patient should immediately contact the dentist.

5. Individuals diagnosed with sleep apnea may notice that after sleeping with an oral appliance, they feel more refreshed and alert during the day. This is only subjective evidence of improvement and may be misleading. The only way to accurately measure whether the appliance is keeping the oxygen level sufficiently high to prevent abnormal heart rhythms is to have a consultation with the sleep specialist and a follow-up sleep test while wearing the appliance.

6. In order to diagnose and treat this condition correctly, the doctor may obtain and correlate some "baseline" records, e.g., models of the teeth, photos, and x-rays, etc. *The doctor may also require the patient to consult with other specialists, e.g., Sleep Specialists, ENTs, Oral and Maxillofacial Surgeons, etc.*

By signing, I, the patient, indicate that I have read and understood this information concerning oral appliance therapy for the treatment and/or sleep apnea. I have had the opportunity to discuss the foregoing conditions and the information concerning the oral appliance and have questions answered by my orthodontist.

While the appliance may be covered by my medical insurance, I accept financial responsibility for this therapy and authorize treatment and confirm that I have received a copy of this consent form.

Date: _____

Patient Name: _____

Patient Signature: _____

Doctor Signature: _____