

Dental Program Workflow:

1. Dentist recognizes or screens patient for symptoms consistent with obstructive sleep apnea. RSC will provide a customized screening questionnaire for the Dental community.
2. Dentist sends an order to Redwood Sleep Center (RSC) for an ambulatory sleep study or diagnostic sleep study—via FAX, Phone, or Portal. **Medical Director reviews order and notes and determines type of study.**
3. RSC requests progress notes from dentist's office, plus insurance info and demographics. This information is entered into the portal and the documents are scanned into the Portal. RSC staff creates a patient chart in the portal, and the Sleep Doctor interprets the study is assigned.
4. RSC staff sends Sleep Questionnaire to patient, with return envelope, FAX number, or email. Sleep Questionnaire is attached to the Portal. The Dentist can ALSO (strongly encouraged) to “interview” the patient and input the answers into the Questionnaire. The Sleep Lab manager may also “interview” the patient and enter the information into the Portal. The Questionnaire will appear in the Dentist and Sleep Lab Manager portal.
5. RSC arranges for the patient, the desired and most appropriate testing methodology, either with a facility pickup for an ambulatory study, a hotel for a formal sleep study, RSC for a formal study, or a drop-ship ambulatory study to patient's home.
6. Patient goes to the sleep facility or hotel to meet with the sleep technician or has the ambulatory device applied, depending on the study type ordered. Patient may receive ambulatory device at home if it was shipped to his/her home.
7. Patient fills out paperwork to guarantee safe keeping of the ambulatory device, if an ambulatory study is ordered.
8. Patient wears ambulatory device overnight and returns the device to the local facility the following day (FedEx return if device is drop-shipped to patient). Alternatively, if it is a formal study, the patient spends the night at the hotel or sleep center.
9. Sleep technologist or RSC staff downloads the raw data onto local computer, and then uploads the raw data to an FTP site.
10. Raw data are analyzed by ambulatory software, confirmed by technician, and a scored report is generated. If it is a formal sleep study, manually scores the study and attach the scored report to the Portal.
11. Once the technician attaches the scored report to the Portal, they update the interpreting doctor's queue for reading. The appropriate sleep study template is assigned to the study and patient.
12. Study is interpreted by Sleep Doctor, electronically signed, and assigned to RSC administrative staff for further processing. Recommendations possibilities-Auto-CPAP order (straightforward OSA, moderate to severe), CPAP titration sleep study in laboratory (very severe OSA, medical co- morbidities like heart disease, cerebrovascular disease, chronic pain syndromes, morbid obesity), or alternative treatments like oral appliances and surgery (mild to moderate OSA, plus primary snoring and upper airway resistance syndrome). Special consideration of patients

with mild and moderate sleep apnea to be exposed to dental appliances as a viable alternative or supplement to PAP therapy. It is fully understood that PAP therapy is STILL the GOLD standard for Sleep Breathing Disorder therapy.

13. Referring dentists are notified of the completed interpretation. An email is sent to the dentist advising the completion of the interpretation report. The study may be faxed or emailed to the dentist and the dentist may obtain results from the portal.
14. The referring Dentist is notified that study is completed and that he/she should call patient to discuss results.