

Dental Center for Snoring and Sleep Apnea

INFORMED CONSENT FOR THE TREATMENT OF SLEEP DISORDERED BREATHING WITH ORAL APPLIANCES

GENERAL BACKGROUND: SNORING AND OBSTRUCTIVE SLEEP APNEA ARE BREATHING DISORDERS WHICH OCCUR DURING SLEEP. The cause is the narrowing or total closure of the airway and may often be no more problematic than the noise itself. However, consistent, loud, heaving snoring has been linked to medical disorders such as high blood pressure. Obstructive sleep apnea 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 heartbeat, high blood pressure and, in the extreme, heart attack and / or stroke.

Because any sleep-disordered breathing may potentially represent a health risk, all individuals will be tested for reduced oxygen levels utilizing a pulse oximeter. If this test shows oxygen levels below normal while asleep, then the patient will be referred to a sleep specialist (M.D.) for further evaluation.

Oral appliances may be helpful in the treatment of snoring, upper airway resistance syndrome (UARS), and sleep apnea. Those individuals diagnosed with mild to moderate sleep apnea are better candidates for improvement with this therapy than those severely affected. Oral appliances are designed to assist breathing by keeping the jaw and tongue forward, thereby opening the airway space in the throat. While documented evidence exist that oral appliances have substantially reduced snoring and sleep apnea for many people, there are no guarantees this therapy will be successful for every individual. Several factors contribute to the snoring/apnea condition including nasal obstruction, narrow airway space in the throat, and excessive weight. Since each person is different and present with unique circumstances, oral appliances will not reduce snoring and/or apnea for everyone.

DIAGNOSIS: Unless the patient has been referred to Dr. Baker by a medical Doctor with the diagnosis of sleep apnea, upper airway resistance syndrome or other breathing disorders and a prescription for the oral appliance, the undersigned **PATIENT UNDERSTANDS THAT DR. BAKER IS NOT MAKING A MEDICAL DIAGNOSIS OF SLEEP APNEA, UPPER AIRWAY RESISTANCE SYNDROMDE, OR OTHER BREATHING DISORDER. THE PATIENT ALSO UNDERSTANDS THAT THE**

ORAL APPLIANCE MAY NOT BE HELPFUL IN CORRECTING THESE BREATHING PROBLEMS.

POSSIBLE COMPLICATIONS: Some people may not be able to tolerate the appliance in their mouth. Also, many individuals will develop temporary adverse side effects such as excessive salivation, sore jaw joints, sore teeth and a slight change in the “bite”. However, these usually diminish within an hour after appliance removal in the morning. Some patients may experience a permanent “bite” change that could require restorative therapy. Oral appliances can cause a shift in position of a patient’s teeth. This could require orthodontic treatment to reposition the teeth. Oral appliances can wear and break. There is a possibility that broken fragments may be swallowed or inhaled. Swallowed appliances may have to be surgically removed. Inhaled appliances can lead to respiratory arrest and death. Teeth and existing dental work such as fillings, crowns, and fixed partial dentures could become damaged or become loose because of wearing the oral appliance. This could result in restorative dental work needing to be done. Dental work that is done after oral appliance is delivered may result in the oral appliance no longer fitting. If this happens, the oral appliance may have to be modified or remade.

LENGTH OF TREATMENT: The oral appliance is strictly a mechanical device to maintain and open airway during the sleep. While it may be helpful, it does not cure snoring or sleep apnea. Therefore, the device must be worn nightly for a lifetime to be effective. Over time, simple snoring may develop into sleep apnea. Sleep apnea also may become worse. Therefore, the appliance may not maintain its effectiveness

Over time. The oral appliance needs to be checked at least yearly to ensure proper fit. The mouth needs to be examined at that time to assure a healthy condition. If any unusual symptoms occur, you are advised to schedule an office visit to evaluate the situation.

Individuals who have been diagnosed as having 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 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 be retested with a pulse oximeter. IF this test shows oxygen levels below normal, then the patient will be referred to a sleep specialist for a follow-up sleep test while wearing the appliance.

UNUSUAL OCCURENCES: As with any form of medical or dental treatment, unusual occurrences can and do happen. Broken or loosened teeth, dislodge dental restorations, mouth sores, periodontal problems, root resorption, non-vital teeth, muscle spasms, ear and back problems, and limb numbness are all possible occurrences.

Most of these complications and unusual occurrences are infrequent. Additional medical and dental risks have not been mentioned may occur. Good communication is essential for the best treatment results. Please call or come to the office if you have any questions or problems regarding treatment.

DOCTOR'S OFFICE PHONE (713) 682-4406

I consent to the taking of photographs and x-rays before, during and after treatment, and their use in scientific papers and demonstrations.

I certify that I have read, or had read to me, and specifically understand the contents of this form. I realize and accept any risks and limitations involved, and do consent to treatment.

Date: _____

Patient: _____

Witness: _____

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