OLD BETSY DENTAL
SLEEP
DENTAL SLEEP MEDICINE

Oral Appliance Therapy for Your CPAP-Intolerant Patients

A physician-coordinated partner for patients who can't tolerate PAP — so their OSA doesn't go untreated.

A substantial share of the patients you diagnose and prescribe PAP can't tolerate it (non-adherence runs as high as ~50%), and many fall out of treatment entirely — leaving their OSA, and its cardiovascular and metabolic risk, unmanaged. They need a comfortable, evidence-based alternative, and a dental partner you can trust to deliver it *without taking the patient out of your care.*

WHAT WE PROVIDE

Custom mandibular advancement (oral appliance) therapy for adults with a confirmed OSA diagnosis, delivered in coordination with you. OAT is a guideline-recommended option for adults with OSA who are intolerant of PAP or who decline it — a recommendation that (per the AASM/AADSM clinical practice guideline) carries **no upper severity limit.**

PAP remains first-line and lowers the AHI more per night, but head-to-head trials show comparable effects on blood pressure, sleepiness, and quality of life — because appliances are typically worn more consistently. For CPAP-intolerant patients, including those with severe OSA, the practical alternative is oral appliance therapy rather than no treatment.

Our scope is intentionally clear:

- We **do not** diagnose OSA, and we **do not** perform or interpret sleep studies. That stays with you.
- We provide the appliance, titration, and ongoing management — and keep you informed at every step.
- We treat patients on **your** diagnosis and in coordination with your plan of care.

IDEAL PATIENTS TO REFER

- Diagnosed OSA — **any severity** — who are **PAP-intolerant** or have **declined PAP.**
- Patients seeking an alternative to PAP, or a **travel/backup** option alongside it.
- **Severe-OSA** patients who can't tolerate PAP — guideline-supported for OAT rather than no treatment.
- Candidates for **combination therapy** (appliance + positional or weight management), coordinated with you; or diagnosed patients with significant **snoring**.

For undiagnosed patients with suspected OSA, we coordinate the referral back to you or a sleep lab for diagnosis first.

THE REFERRAL PROCESS

1. **You refer** — by fax, phone, or our referral form. Send the diagnosis/sleep study and PAP history if available.
2. **We evaluate and fit** — examine candidacy, take a digital scan, deliver a custom appliance.
3. **We manage and titrate** — adjusting for comfort and effectiveness.
4. **We report back to you** — objective adherence and follow-up data; we coordinate any recommended post-treatment efficacy testing through you.
5. **The patient stays in your care** — we're the downstream therapy partner, not a replacement for your management.

WHAT YOU GET BACK

- A treated patient instead of a lost one.
- Clear, timely communication and objective follow-up data.
- A reliable local destination for the PAP-intolerant patients you currently have nowhere to send.
- Clean lanes: you diagnose and direct; we deliver oral appliance therapy and report.

THE PATIENT EXPERIENCE

A calm, comfort-focused practice known for putting anxious patients at ease. As an out-of-network provider we supply a detailed superbill and help patients pursue medical reimbursement honestly — with same-week scheduling for your referrals whenever possible.

A clinical evidence summary — *"Oral Appliance Therapy Across All Severity Levels"* — is included with this packet for physicians who'd like the citations, especially on severe OSA.

Refer a Patient · Connect With Us

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We'd welcome the chance to introduce our team — including a brief lunch-and-learn for your staff on when oral appliance therapy is appropriate and how the referral process works. | Our providers are general dentists offering oral appliance therapy in coordination with the patient's physician; we do not diagnose OSA or perform or interpret sleep studies.