

Initial Treatment with APAP/CPAP and Supplies Worksheet: Pediatric

Patient Name _____ DOB _____ Age _____

Health Plan _____ Member Number _____

Requesting Physician _____ Sleep Study Provider _____

Directions:

Collect patient information from the requesting physician. Submit online (www.ProviderPortal.com) for an instant response.

Order Type:

Initial Treatment: APAP/CPAP and Supplies

Primary Suspected Diagnosis _____

AHI/RDI Score

Enter AHI/RDI Score _____

Adenotonsillectomy History

(please check all that apply)

- Adenotonsillectomy has been unsuccessful in treating OSA
- Minimal Adenotonsillar tissue is present
- Adenotonsillectomy is not appropriate because OSA is attributable to another condition
- Adenotonsillectomy is contraindicated

Sleep Study History

A successful CPAP Titration has been performed for this patient Yes No Unknown

