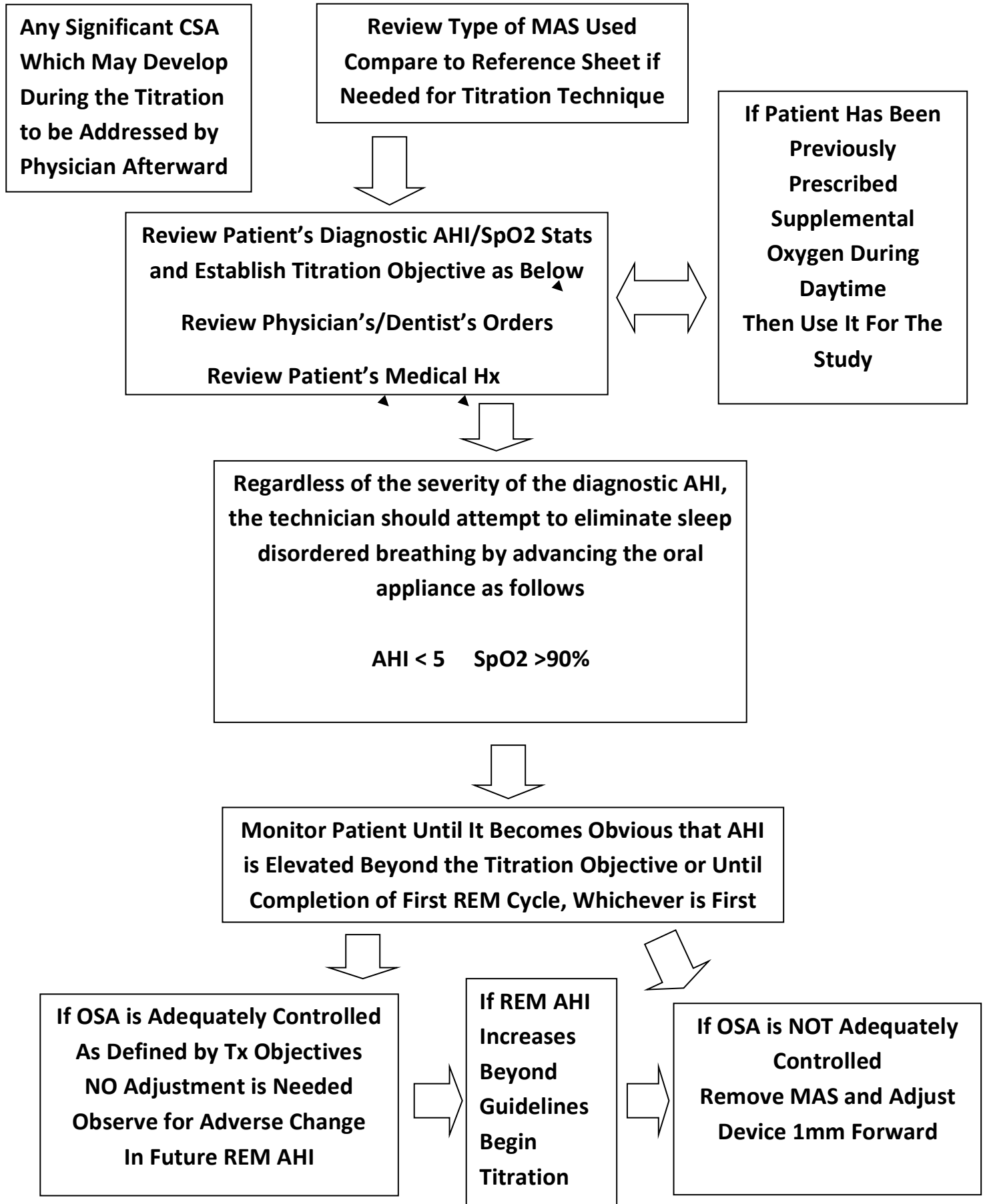
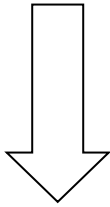
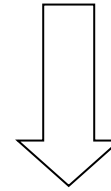


Titration Protocol to Adjust Oral Appliance to Manage Previously Diagnosed OSA



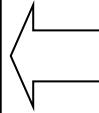


If Loud Snoring is Observed for > 3 Min, Technician May Do Additional Adj Cycle Not to Exceed Three Cycles Total



If OSA is Well Managed BUT SpO2 Falls Below 88% for 5 Min, Technician Should Note This Finding in the Summary Report to be Reviewed by the Physician Who May Request Further Evaluation

Continue MAS Adjustments @ 60-90 Minute Intervals As Needed Until Tx Objective Is Reached OR Until Maximum of Three Adjustment Cycles Are Completed DO NOT WAKE PATIENT IN REM

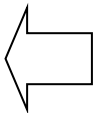
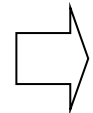
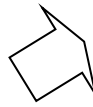
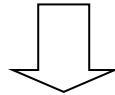


Return to Referring Dentist for Assessment and Possible Additional Titration of the MAS May Require Additional PSG or HST and Repeat Titration Protocol

If OSA is NOT Adequately Controlled Patient Will be Given the Following Options by Dentist or Physician

Positional Therapy as Adjunct to OAT

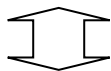
Encourage Patient to Reconsider or Reattempt CPAP if OSA Remains Severe



Sleep Tech Shall Adjust the Oral Appliance Back to Original Position at End of Titration PSG

Attempt Combination Therapy Using MAS in Addition to CPAP in Attempt to Lower Pressure Will Require Additional PSG to Titrate CPAP Pressure

Attempt Hybrid Therapy Using Nasal Pillows With CPAP Attached to Oral Appliance Will Require Additional Fabrication by Dentist Will Require Additional PSG to Titrate CPAP Pressure



Send Summary Report to Dentist Including Statistics from EACH Titration Position All Oral Appliance Patients Remain Patients of Record with Attending Physicians Who Are Responsible for Final Decisions Regarding Efficacy and Need for Adjunctive Therapy Including Oxygen Supplementation, CSA Management, etc.