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SLEEP DIAGNOSTICS

750 84 AVE N, SUITE #201 SAINT PETERSBURG, FL 33702 - 11200 SEMINOLE BLVD, SUITE #103 LARGO, FL 33778

PHYSICIAN'S ORDER FOR CPAP/BIPAP THERAPY

PATIENT NAME: Thomas Robinson
 DATE OF BIRTH: 7/14/90 LENGTH OF NEED: 32 MONTHS
 DIAGNOSIS: G47.33

PAP ORDER

☒ CPAP (E0601)

AUTO CPAP (E0601)

BIPAP (E0470)

AUTO BIPAP (E0470)

AUTO SV (E0471)

PRESSURE: 7cmH2OCPLEX/EPR LEVEL: +3RAMP TIME: 10 min

MASK: FIT MASK OF PATIENT PREFERENCE

☒ Nasal Pillows Mask (A7034) - 1/3 Months ☒ Nasal Pillows (A7033) - 2 Per Month
☒ Nasal Mask (A7034) - 1/3 Months ☒ Nasal Mask Cushion (A7032) - 1/3 Months
☒ Full Face Mask (A7030) - 1/3 Months ☒ Full Face Mask Cushions (A7031) - 1/3 Months

ASSOCIATED SUPPLIES (DISPENSE ALL)

☒ HEATED HUMIDIFIER (E0562)
☒ HEADGEAR (A7033) - 1/6 Months
☒ TUBING - NON HEATED (A7037) - 1/3 Months
☒ TUBING - HEATED (A4604) - 1/3 Months
☒ DISPOSABLE FILTERS (A7038) - 2 Per Month
☒ NON-DISPOSABLE FILTERS (A7039) - 1/6 Months
☒ WATER CHAMBER REPLACEMENT (A7046) - 1/6 Months
☒ CHINSTRAP (A7036) - 1/6 Months
☒ MONITORING FEATURE DEVICE (A9279)

SPECIAL INSTRUCTIONS: Dreamwear med. nasal pillows /med hg.
 PROVIDER'S SIGNATURE: Dr. Clark DATE SIGNED: 1/9/2020
 DR. Fred Clark III, MD NPI # 1607023086