

MRN: [REDACTED]



NHS Trust

Department of ENT [REDACTED]

Ref: [REDACTED]

MRN:
NHS No:

Clinic date: 25-Oct-2022
Date: 25-Oct-2022

Dr [REDACTED]

Dear Doctor

Re: [REDACTED]

I saw this gentleman today at the [REDACTED] Hospital. I note that he was recently seen in sleep clinic and referred for CPAP. I note that his sleep study showed an AHI of 10.6 and ODI of 7.2. He continues with right nasal obstruction. He had a septoplasty in 2006. He has been wearing a mouth guard for around 17 years and feels that this has moved his teeth and jaws and affected his bite. I note that there has been some improvement in his sleep when sleeping on his side. I note that previous examination showed fullness of his tongue base and he is in fact aware of this during the day. I note that he is allergic to house dust mite and cats. He has a history of anxiety and depression.

Anterior rhinoscopy today again revealed a significantly deviated septum narrowing his right nasal airway.

I have taken the liberty of referring him to my maxillofacial colleagues concerning his teeth and bite. I have discussed the option of revision septoplasty and have listed him for the procedure. I have also referred him to my colleague [REDACTED] for an opinion concerning his tongue base. He has an interest in this area.

With regards your sincerely

Yours sincerely

Dictated and electronically approved by

[REDACTED]
Consultant ENT Surgeon

