

You have been recommended for treatment by your dentist, physician, or therapist for Myofunctional therapy.

Myofunctional therapy is the neuromuscular re-educating or re-patterning of the oral and facial muscles. It might include muscle exercises that create a normal freeway space dimension. Myofunctional therapists are trained to eliminate negative oral habits through behavior modification techniques and the promotion of positive growth patterns. Myofunctional therapists re-train patients who have acquired oral breathing habits to breathe properly through their noses (given that patients' airways are not compromised). Myofunctional therapy further focuses on proper resting tongue position, correct chewing and swallowing behavior, and emphasizes the importance of proper head and neck posture patterns.

Myofunctional Therapy consists of the following phases:

→ **Pre-Treatment Phase**

- Duration up to 30 days.
- This phase focuses on the elimination of noxious oral habits.
- Functional Frenuloplasty (tongue or lip tie release) would be suggested in this phase if indicated.

→ **Intensive Phase**

- Duration approx. 6-10 week; weekly appointments.
- The therapist and patient work on muscle activation, proper chewing/ swallowing of foods/liquids, proper function of orofacial muscles through coordination and patterning, and the reinforcement of habit elimination.

→ **Generalization Phase /Habituation Phase**

- Duration approx. 2-6 months; appointments every 2-6 weeks.
- Exercises are tailored to maintain a new pattern of swallowing. Integration of awareness into activities day and night regarding oral rest posture, and habits are observed.
- This phase of treatment will continue until the treatment program is complete, approximately 1 year from the beginning of therapy.
- The therapist monitors the patient's habits and exercises; making adjustments as necessary.

Myofunctional therapy has been shown to result in effective breathing patterns; however, due to the many factors that influence upper airway breathing during sleep and differences in facial patterning, outcomes are not guaranteed. It is important to recognize that even when therapy outcome is positive, there may be a period of time before OMT is effective. Effectiveness further depends on the patients' maintenance of habits and exercise program developed during therapy.

**Medical Records**

The therapy might require patients to provide medical records. These may include x-rays, photographs and videos, in addition to written records. These records will be used by Sandraluz Gonzalez to analyze the condition of patients’ airways, jaw joints, body posture, body symmetry, and range of motion.

I hereby acknowledge that I have read and understand the details of therapy as described above, and I agree to participate at my own risk. I hereby consent that my name, my dependents name and/or pictures, videos may be used by Sandraluz Gonzalez for such purposes, as she may desire in connection with her research / writing / and professional activities, and may be used, exhibited, and published through any medium whatsoever, even though such use may be for advertising purposes or purposes of trade. I acknowledge that information about my medical appointments may be communicated to me via email (encrypted / unencrypted) and phone. I acknowledge that I have read and fully understand the above and agree to be bound thereby. I hereby release any and all claims against any person or organization utilizing this material for educational purposes.

I have received a copy of the “Notice of Privacy Practices” in compliance with HIPAA Guidelines (Health Insurance Portability and Accountability Act)

***\* I acknowledge, a \$95.00 fee will be charged for any missed visits-to include video conferencing visits- unless a 48-hour business day cancellation notice is observed.\****

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PATIENT OR GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

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NAME OF PATIENT