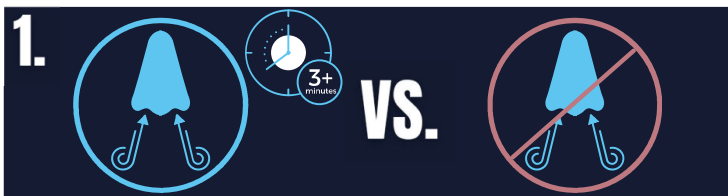
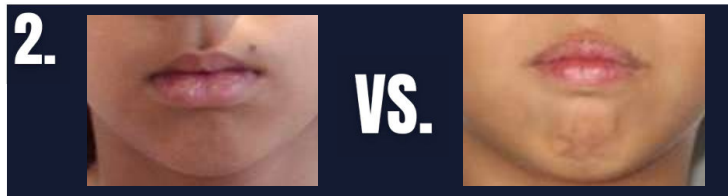


Each of these six (6) factors is an independent "red flag" for sleep-disordered breathing.

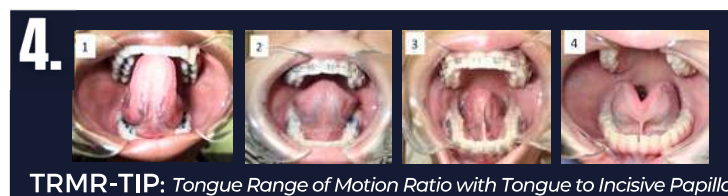
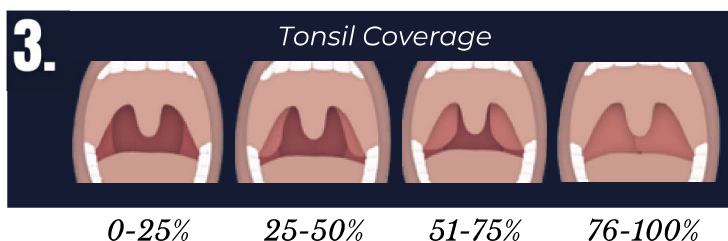


Difficulty with exclusive nasal-breathing for 3+ minutes?



No Mentalis-Strain

Mentalis-Strain

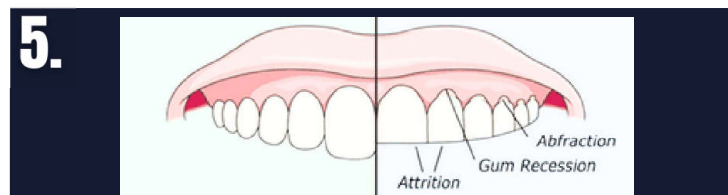


Grade 1
>80%

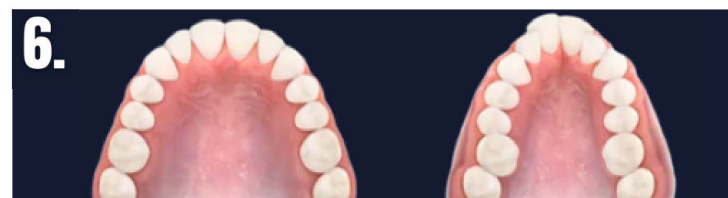
Grade 2
50-80%

Grade 3
<50%

Grade 4
<25%



Are there visible signs of dental wear?



Signs of dental crowding, high arch, and/or narrow palate?

MOUTH BREATHING

☐ NO

☐ YES

MENTALIS STRAIN

☐ NO

☐ YES

TONSIL HYPERTROPHY

☐ <50%

☐ >50%

ANKYLOGLOSSIA

☐ NOT RESTRICTED

☐ RESTRICTED (GRADE 3-4)

DENTAL WEAR

☐ NO

☐ YES

NARROW PALATE

☐ NO

☐ YES

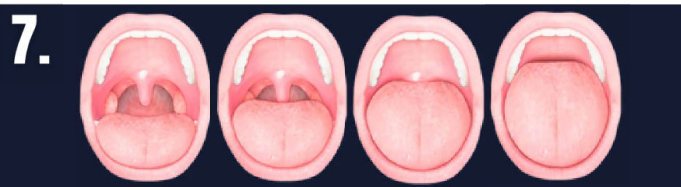
GRADING SCALE

The score on the FAIREST-6 is equal to the sum of the number of exam findings present. Scores may range from 0 (none of the items are present) to 6 (all six of the concerning exam findings are present). A score of two corresponds to mildly increased risk of sleep-disturbance; four indicates moderately increased risk; six indicates severely increased risk.

Number of Red Flags
Risk of Sleep-Disturbance

Scoring Table for FAiREST 6

	0	1	2	3	4	5	6
	Normal		Mild		Moderate		Severe



FTP 1 FTP 2 FTP 3 FTP 4

FRIEDMAN TONGUE POSITION (FTP)



FTP 1 FTP 2 FTP 3 FTP 4

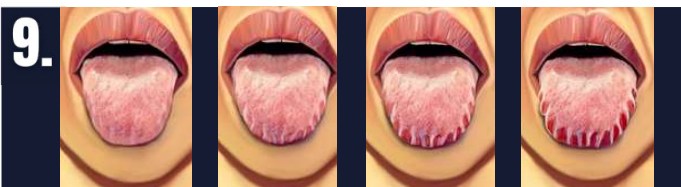


Assess for tongue space limitations: Look for tongue overflow while the tongue is held in Lingual palatal suction (LPS).

TONGUE OVERFLOW



NORMAL MILD MODERATE SEVERE



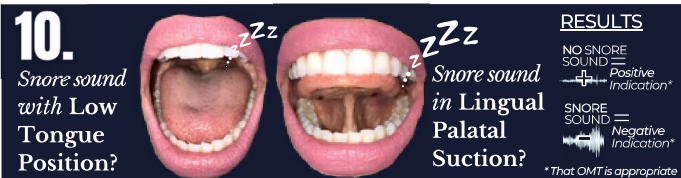
NORMAL MILD MODERATE SEVERE

Swallow, then stick out your tongue without pain or discomfort.

TONGUE SCALLOPING



NORMAL MILD MODERATE SEVERE



Snore sound with Low Tongue Position?

Snore sound in Lingual Palatal Suction?

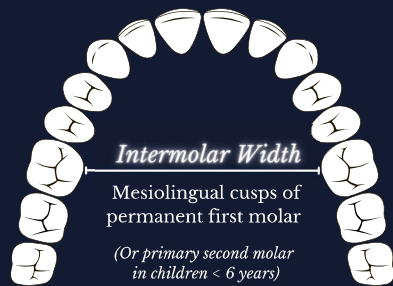
RESULTS
NO SNORE SOUND = Positive Indication*
SNORE SOUND = Negative Indication*
*That OMT is appropriate

PALATAL FLUTTER



Have the patient attempt to make a snoring sound with their mouth open, then have them perform suction (LPS), and attempt to make the snoring sound again with their tongue held against the palate.

Supplementary Guides, Classifications, and References



Intermolar Width

Mesiolingual cusps of permanent first molar

(Or primary second molar in children < 6 years)

MEASURING MAXILLARY INTERMOLAR DISTANCE

Adult Measurements

< 32mm Severe 32-34mm Moderate 34-36mm Mild 36-38mm Average 38-42mm Above Average

Pediatric Measurements

Age + 24 mm

LECTURE FILES
by Dr. Soroush Zaghi +
The Breathe Institute



Multimedia lecture files are made available for general educational purposes, face-to-face instruction, and directed self-study.

FUNCTIONAL CLASSIFICATION OF ANKYLOGLOSSIA BASED ON (TRMR) TONGUE RANGE OF MOTION RATIO

TRMR-TIP

Assessment of Anterior Tongue Mobility Tongue to Incisive Papilla (TIP)



Grade 1: TRMR-TIP > 80% Significantly Above Average

Grade 2: TRMR-TIP 50-80% Average



Grade 3: TRMR-TIP < 50% Below Average

Grade 4: TRMR-TIP < 25% Significantly Below Average

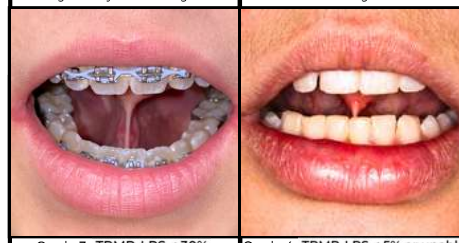
TRMR-LPS

Assessment of Posterior Tongue Mobility Lingual Palatal Suction (LPS)



Grade 1: TRMR-LPS > 60% Significantly Above Average

Grade 2: TRMR-LPS 30-60% Average



Grade 3: TRMR-LPS < 30% Below Average

Grade 4: TRMR-LPS < 5% or unable Significantly Below Average