

## CPAP Done Right Prescription Form for CPAP/Bi-PAP (BiLevel)

CPAP Done Right, 2317 W. University Drive, Ste. 101B, Denton, TX 76201

Voice: 940-808-1680 (local) or 855-369-2931 (toll free)

Fax: 940-484-0766

Email: [prescriptions@cpapdoneright.com](mailto:prescriptions@cpapdoneright.com)

### **CPAP or Bi-PAP (BiLevel) Unit and/or heated humidifier**

**and all necessary supplies, which may include one, some or all of the following:**

**Mask of choice, mask frame, mask interface, headgear, patient tubing, filters and chinstrap**

Alternate or additional orders/information: \_\_\_\_\_

\_\_\_\_\_ Pressure setting(s): \_\_\_\_\_

Prescriber's name printed: \_\_\_\_\_ Date: \_\_\_\_\_

Prescriber's signature: \_\_\_\_\_ NPI \_\_\_\_\_