



Dynaris Apogee® Prescription – Chronic Conditions

To order the Apogee® Dynamic Oxygen Delivery System for chronic health conditions requiring oxygen therapy, please complete the form below and fax to: **(636) 778-1050**

Patient Information

Patient's Name: _____ **Phone #:** _____

Date of Birth: _____ **Address:** _____

Diagnosis: (check one)

COPD

Pulmonary Fibrosis

Cystic Fibrosis

CHF

Heart Disease

Long COVID

Stroke

Cancer

Other: _____

Prescription Information

Substitutions, including concentrators, are not permitted.

Concentrator gas may contain nitrogen and argon, resulting in lower and variable delivered oxygen concentrations compared to compressed medical oxygen. These gas composition differences may impair effective oxygen delivery at the alveolar level.

Apogee® Dynamic Delivery Setting:

Titrate to optimal SpO₂ Setting 1 (10 mL/breath) Setting 1.5 (15 mL/breath)

The physician should titrate the patient and periodically reassess settings to ensure effectiveness. Setting 2 (20 mL/breath) Setting 2.5 (25 mL/breath)

Setting 3 (30 mL/breath) Setting 4 (40 mL/breath)

Setting 5 (50 mL/breath) Setting 6 (60 mL/breath)

Portable Oxygen Cylinder Size: M-6 (B) M-24 (E) Other: _____

Prescribe Dynaris Rx Pulse Oximeter (Patient Cost: \$16.50): Yes No

Physician Information

I certify that this system is prescribed as medically necessary for my patient's care.

Physician's Name: _____ **Signature:** _____

Date: _____ **NPI #:** _____

Office #: _____ **Fax #:** _____



Office: (636) 778-1926
Fax: (636) 778-1050



info@dynaris.com
www.dynaris.com



743 Spirit 40 Park Drive, Suite 108
Chesterfield, MO 63005