

FOREWORD

BY DR. DOUGLAS LIEPERT, MD

I believe a primary weakness in patient care revolves around each specialty focusing on what they can deliver with no collaboration. We have to understand each other's role and treatment options, or the patient will be doomed to hear only what we offer individually. I want to work with colleagues who focus on the diagnosis first and then figure out how to best treat the patient. This is what I receive from Dr. Klauer. I had met many dentists before I was introduced to Dr Klauer, but it was immediately clear he would be a great colleague. His dad is an MD, so he understood diagnosis, and his interest lay in treating the patient, not in delivery of an appliance or doing a procedure.

I was introduced to Dr. Klauer by chance after he started his journey in dental sleep medicine and TMD treatment. He had asked my facial plastics partner if he knew any ENTs interested in sleep. My partner's reply was that it just so happens we just hired a partner board-certified in sleep. I have always focused on a comprehensive and multidisciplinary path towards caring for patients with sleep disorders. I preached the philosophy that sleep was as diverse as cancer and required a multi-specialist approach. Dr. Klauer is a key member of my circle of

care because he shares this philosophy, and this sets him apart from the weekend warriors who have just enough knowledge to focus on the oral appliance. His evaluations are comprehensive and focused on identifying all of his patients' diagnosis. He is also very skilled with the treatment of craniofacial pain. This often needs no MD collaboration, but when he also identifies a sleep component, he does not hesitate to consult. It is not that he does not understand sleep. With all his training and four years of our collaboration, he just understands the power of the team. I have not once seen him deliver a sleep appliance until we had completed this process. We work as colleagues in the same manner as I do with my neurology and pulmonologist sleep physicians. He is truly a doctor of dental sleep medicine.

I have watched his practice grow as he incorporated new treatments and diagnostic tools, recognizing his patients' needs. It was an honor to be his sponsor as he moved through the process of the dental sleep boards. We had many fun nights looking at polysomnograms and meeting together to develop individual care plans for patients. Rarely did patients have only a single sleep or pain problem. Over the last four years, it has become clear that it does not really matter who the patient sees first. We would help the patient get what they needed. It did not matter whether it was surgery, an OA, myofunctional therapy, or CPAP. We have taught each other how to be a unique team which we hope will change the paradigm from the silo of the sleep lab to a multispecialty team helping people with sleep and pain disorders.

Douglas R. Liepert, MD

Board-Certified in ENT & Sleep Medicine

Michiana Sleep Solutions

Allied ENT Specialty Center

Research Professor University of Notre Dame