

# Otolaryngology

## Pediatric Telehealth Consultations

We offer telehealth consultations for a variety of otolaryngologic care, including ear, nose, and sinus problems, as well as sleep, tonsil, and voice concerns.

### Procedures Requiring Otoscopy\*

| Clinical Condition           | Test Needed Prior to Consult<br>(For Ages 6 and Older) |
|------------------------------|--|
| • Cholesteatoma              | • Audiogram  |
| • Hearing Loss               | • Audiogram  |
| • Perforation                | • Audiogram  |
| • Recurrent Otitis Media     | • Tympanogram  |
| • Otitis Media with Effusion | • Tympanogram  |
| • Foreign Body               |  |

**\*Please have the patient's ears cleaned up to 7 days prior to the consultation**

### Information Needed Prior to Scheduling an Appointment

- [Telehealth Referral Request Form](#)
- Recent history and physical, and all applicable clinical information from the patient's chart, including tests as outlined above
- [Patient Questionnaire](#) (must be received one working day before the scheduled consult)
- [Pediatric Sleep Questionnaire](#) if for a sleep-related concern

### Information Needed Before the Consultation Begins

- Signed [UC Davis Health Acknowledgement of Receipt: Notice of Privacy Practices](#) form (new patients only)
- Documented verbal consent from the patient's parent or legal guardian for participation in a telehealth consultation

### Appointment Scheduling

#### Otoscopy

New: 30 minutes

Follow-up: 20 minutes

#### Level of Presenter

#### Required at Consultation

Primary care provider

#### Required Equipment

- Videoconferencing Unit
- Tongue Blades



### Consultants

[Jamie Funamura, M.D., M.P.H.](#)

[Adebola Olarewaju, P.N.P., Ph.D](#)

[Travis Tollefson, M.D., M.P.H., F.A.C.S.](#)

### UC Davis Health Clinical Telehealth Program

Toll Free Phone:

877-430-5332

Referral Fax:

866-622-5944

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# Cleft and Craniofacial

## Pediatric Telehealth Consultations

We offer comprehensive facial plastic surgery and pediatric otolaryngology care of children with orofacial clefts and microtia. This includes: **1)** Prenatal maternal consultation after ultrasound diagnosis of orofacial clefts, **2)** Early management of breathing, oral feeding, and weight gain, and **3)** Potential pre- and post surgical counseling.

Coordination for comprehensive interdisciplinary management of orofacial clefts includes surgical repair, hearing and speech, dental, orthodontic, and other aspects for children with cleft lip and cleft palate. We also provide comprehensive care of patients with positional plagiocephaly or craniosynostosis.

### Clinical Conditions

- Cleft lip and cleft palate
- Craniofacial conditions
- Microtia or external ear deformity
- Infant oral feedings with clefts and craniofacial conditions
- Follow-up for poor weight gain with cleft patients
- Plagiocephaly
- Pediatric tracheostomy management

### Information Needed Prior to Scheduling an Appointment

- [Telehealth Referral Request Form](#)
- Recent history and physical, and all applicable clinical information from the patient's chart

### Information Required at Least One Working Day Prior to Consult

- [Patient Questionnaire](#)
- [Pediatric Sleep Questionnaire](#) if for a sleep-related concern
- The patient's parent or legal guardian may be asked to complete a Feeding Questionnaire for feeding consultations

### Information Needed Before the Consultation Begins

- Signed [UC Davis Health Acknowledgement of Receipt: Notice of Privacy Practices](#) form (new patients only)
- Documented verbal consent from the patient's parent or legal guardian for participation in a telehealth consultation

### Appointment Scheduling

#### Surgeon Consultation

New: 30 minutes

Follow-up: 20 minutes

#### Feeding Consultation

New: 30 minutes

Follow-up: 30 minutes

### Level of Presenter

#### Required at Consultation

Primary care provider

### Required Equipment

- Videoconferencing Unit
- Tongue blades

### Consultants

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