



CLINICAL & PROFESSIONAL RESOURCES

Referral Pathway Guide

A provider-to-provider framework for directing a patient toward a qualified rehabilitation evaluation while preserving clinical scope, privacy, and secure handoff requirements.

Designed for

Physicians, advanced practice clinicians, dentists, surgeons, rehabilitation providers, care coordinators, and referral teams.

Regulatory status

FDA 510(k) pending. ISO Metrik has not received FDA clearance for the proposed clinical uses described in this resource. This document is for professional education and pathway planning; it is not authorization to market, ship, prescribe, bill, or use an investigational device.

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Start with the rehabilitation question

A referral should communicate why facial rehabilitation is being requested and which medical considerations matter. The treating PT or SLP evaluates candidacy, establishes baseline measures, and decides whether and how ISO Metrik fits within the overall plan of care.

Movement or symmetry Persistent weakness, reduced excursion, limited selective control, or asymmetry is affecting participation or a meaningful functional goal.	Lip and oral control Concerns may involve labial seal, saliva containment, articulation, oral transit, or related oral-motor function within the treating clinician's scope.
Care transition The patient is moving from acute, specialist, surgical, or inpatient care to a defined rehabilitation pathway.	Home-program structure The patient may benefit from supervised teaching and a repeatable provider-directed program between visits.
Clinical priority	When dysphagia is suspected, airway safety and the appropriate swallowing assessment come first. Urgent or unstable conditions, new neurologic findings, tissue compromise, dental concerns, post-procedural restrictions, or other red flags require the appropriate medical response before device planning.

Information for the secure referral

Use the referring organization and receiving provider's established HIPAA-compliant process. Do not put patient-specific data in a public website form, general email, or the ISO Metrik website AI assistant.

Diagnosis and timing Diagnosis, onset, relevant procedures, recovery stage, medical stability, and responsible specialists.	Functional concern The facial, speech, eating, oral-control, participation, or patient-priority concern prompting evaluation.
Precautions and restrictions Healing restrictions, tissue or dental issues, pain, neurologic changes, swallowing or airway concerns, and other red flags.	Rehabilitation request Reason for PT or SLP evaluation, relevant prior care, treatment history, and any known barriers.
Coordination expectations Preferred communication, documentation, follow-up timing, and which clinician owns medical questions.	Records Transmit only the minimum necessary relevant records through the approved secure clinical channel.
Public inquiry content	A general inquiry to ISO Metrik should include only the professional's name, title, organization, location, preferred contact method, and the type of pathway being explored. It is not a completed referral or prescription.

Coordinated care pathway

01	Medical provider identifies the need Establish diagnosis, address urgent issues, document medical context and precautions, and define the reason for rehabilitation.
02	Referral reaches a qualified PT or SLP Use an approved secure channel and direct the request to a provider whose licensure, competence, training, and facility pathway match the need.
03	Therapist evaluates Assess candidacy, baseline impairment, function, goals, movement quality, patient factors, contraindications, and the need for further medical or dental input.
04	Therapist plans care If appropriate and permitted, select fit, orientation, exercise mode, resistance, dosage, cueing, monitoring, and any approved home-practice parameters.
05	Care team reviews response Document tolerance, adherence, measured change, functional progress, concerns, modifications, and further recommendations.

What referral language should not imply

- That ISO Metrik is FDA cleared for the proposed clinical uses while the 510(k) is pending.
- That a referral guarantees candidacy, device access, payer coverage, reimbursement, or a clinical outcome.
- That product training expands a clinician's license or permits practice outside professional scope.
- That a general email or website form is an approved channel for protected health information.

Choose the correct next step

Referral-pathway question Contact the clinical team with professional contact details only to discuss roles, pathway readiness, and a secure handoff process.	Clinic readiness A PT or SLP clinic can discuss provider training, governance, screening, documentation, sanitation, inventory, and a controlled launch plan.
DME or coverage question Use the DME & Coverage pathway. Benefits verification is not a guarantee of payment, and no dedicated HCPCS code or Medicare DME status is established publicly.	Institutional research Use the Clinical Pilot pathway before any participant activity. The sponsor and institution must determine and satisfy applicable FDA, IRB, IDE, and informed-consent requirements.
Secure handoff	Begin with the live Refer or Prescribe page or call (678) 632-3735. ISO Metrik will identify an approved secure process when patient-specific information is necessary.

Connect with ISO Metrik

Use the public inquiry pathway for professional contact and program questions. Do not send patient names, dates of birth, records, images, or other protected health information through public forms, general email, or the website AI assistant.

Professional contact

ISO Metrik Solutions, Inc.
5505 Peachtree Dunwoody Road, Suite 640
Atlanta, GA 30342

Phone: (678) 632-3735
Email: info@isometrik.com
Web: isometriktherapy.com

Public pathway links

- [Clinical Evidence](#)
- [Training & Certification](#)
- [Refer or Prescribe](#)
- [DME & Coverage](#)
- [Clinical Pilot](#)
- [Provider & Clinic Sign In](#)

Use boundary

This resource does not replace current product labeling, instructions for use, professional training, licensure, medical judgment, payer policy, supplier requirements, institutional review, or applicable law. Individual clinical and reimbursement decisions belong to the responsible provider, institution, supplier, and payer.