



ACCOUNT#



**PLEASE SEND MORE INFORMATION ABOUT:**

- MAILING MATERIALS
- PRODUCTS & SUPPLIES
- DIAGNOSTIC SERVICES
- CONTINUING EDUCATION COURSES

PATIENT'S FIRST NAME

OFFICE EMAIL ADDRESS

PATIENT'S LAST NAME

AGE

OFFICE PHONE NUMBER

ACCOUNT#

**ADDITIONAL SERVICES\***

- RETURN DUPLICATE SET OF MODELS
- APPLIANCE INSURANCE

**DUE DATE** – MUST BE A MINIMUM OF ONE DAY PRIOR TO YOUR PATIENT'S APPOINTMENT

(LAB USE ONLY)

EMERGENCY SERVICE FOR APPLIANCES\*  
(24 to 48 Hrs. Processing)

PATIENT WILL BE APPOINTED AFTER APPLIANCE ARRIVES

S.I.

**DIAGNOSTIC SERVICES\***

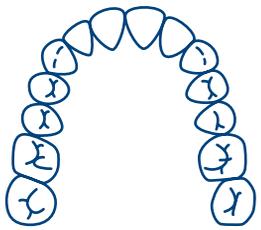
- Phone Consultation Service
- Digital Study Models
- Plaster Study Models
- Cephalometric Tracing Service
- Complete Orthodontic Records Package
  - Package #1 - Includes Digital Study Models
  - Package #2 - Includes Plaster Study Models
- Orthodontic Diagnostic Service
- Digital Study Models with IPR Analysis

\* FEES APPLY

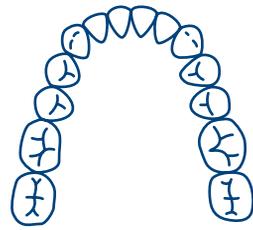
**OMEGA LOOP:**

An omega loop of stainless steel wire can be embedded into the upper orthotic, allowing it to be separated at the midline. During normal cranial flexion, the palate expands and contracts, creating movement at the intersection of the maxillae. The use of a midline anterior omega loop allows for the expression of this very subtle movement and can reduce headaches associated with oral appliance therapy.

Add Omega Loop to appliance.



RIGHT UPPER LEFT



LEFT LOWER RIGHT

**MODELS:**

Upper and lower models are needed by the laboratory to fabricate the appliance. Take full extension impressions into the maxillary vestibule and mandibular sublingual area. The extension should go to the height of contour of the gingival on all sides of the teeth. High quality impressions will be accepted, but models are preferred. (See "BEFORE SUBMITTING" below)

**CONSTRUCTION BITE:**

All cases require an accurate construction bite. Construction bite must provide specific AP and vertical position of the mandible as required for patient. See reverse side of this Rx for Construction Bite details.

**IMPORTANT: Construction bite should be checked (and setting verified) on working models before sending to lab.**

SPECIAL NOTES: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional Instructions On Reverse

SIGNATURE

LICENSE NUMBER

**GO GREEN! PLEASE SCAN OR MAKE A COPY OF THIS PRESCRIPTION FORM FOR YOUR RECORDS**

**BEFORE SUBMITTING TO LAB:**

- PRESCRIPTION** - Make sure all appropriate sections are completed.
- STONE MODELS** - Be sure to get doctor's final approval on models (to ensure accuracy and completeness). Trim models as small as possible.
- DIGITAL RECORDS** - If applicable, send digital patient files to [www.SMLglobal.com/digital](http://www.SMLglobal.com/digital)
- ACCURATE CONSTRUCTION BITE** - Include for all cases where acrylic occlusal coverage or mandibular repositioning is required.
- PACKAGING** - Sturdy cardboard box (provided upon request) is required. Fill box completely with packing material. Wrap models carefully and individually.

## **CONSTRUCTION BITE:**

Include a bite registration of 50-60% maximum protrusion (depending on the patient's range of movement). Be sure that the dental midlines are aligned when at the protruded position.

Bite registration is important in the construction of any dental appliance, but particularly with sleep appliances. When taking a patient's bite registration we recommend using the Andra Gauge™ to obtain the most accurate measurement of the Sagittal, Anterior/Posterior, and Vertical measurements. (Instructions and videos can be viewed at <http://www.andragauge.com/instructions.php>). Wax bites are acceptable means of assuring proper protrusive and vertical registration, making sure you maintain the dental midlines. (In order to customize the vertical see ordering specifications below.) Use of a George Gauge is also an adequate method, but the stock gauge is set at 5.0mm of vertical and should be customized. In order to customize the vertical, see ordering specifications below. If using the George Gauge, take the following steps to ensure accurate measurement.

Once the bite has been taken and is registered, insert the gauge in the patient's mouth and have the patient practice closing into the notches on the bite forks. Then remove the gauge from the mouth and place soften wax or elastomeric material on both sides of the bite fork component. Have the patient bite down into the material until it sets or hardens. (Again, make sure dental midlines are aligned when in the protruded position). Also, make sure that the models fit into the bite record without rocking.

It is generally assumed that the therapeutic advancement of the mandible by most appliances should be 70% of the total maximum protrusion; with the recommended comfortable protrusive starting point being between 50-60% of maximum protrusion. ZQuiet Pro-Plus design features allow the practitioner in most cases to achieve optimal therapeutic results more efficiently. Keep in mind that too much protrusion can cause painful TMJ problems that were not initially a patient concern and ultimately delay the treatment of the sleep apnea.

## **ORDERING SPECIFICATIONS:**

Vertical Opening - The vertical opening ensures enough room for the tongue. The larger the tongue, the more vertical is necessary. Every patient is different, but the tongue size and primary position when sleeping should be noted. The following is a suggested guideline that can be used to specify the vertical opening:

- Female patients that primarily sleep on their side and have no scalloping of the tongue, the vertical dimension increase should be 5.5mm.
- Female patients that primarily sleep on their back and/or have a scalloped tongue, the vertical dimension increase should be 6.5mm.
- Male patients with a normal tongue who sleep predominately on their side, the vertical dimension should be 6.5mm.
- Male patients that have a scalloped tongue and/or sleep predominately on their back, 8.0mm is recommended.

Humans are obligate nasal breathers and great care should be taken to ensure that the patient can maintain unstrained lip seal. Poor lip seal can lead to mouth breathing with uncomfortable drying of the oral mucosa.